Rural Family Caregivers

Challenges and Opportunities

By Davin Robertson

For over a decade, the Alberta Caregivers Association (ACGA) has been "caring for caregivers," providing them with the services and support needed for them to continue in their roles. They have been successful so far, with help from funding from the ARDN and donations from private and business interests.

There is still a long way to go, however, as Wendy Duggleby and Giri Puligandla pointed out. The ACGA conducted a qualitative survey in 2010 of caregivers in Alberta, and the results highlighted some problem areas.

One of the challenges facing rural caregivers is that rural concerns need to be recognized as different from those in urban centres. Caregivers are crucial to sustaining health care in smaller rural towns. Throughout Canada, 18 million dollars in healthcare costs are provided by family caregivers. This is no small amount, and it needs to be recognized for its own unique needs.

A lack of access to services is also a major concern for rural caregivers. In smaller communities, often the distance to health care services is quite substantial, often completely unmanageable. Also, some who are willing to travel for the services are not able to use them because they are not from the area.

High turnover rates and difficulties recruiting health care professional to rural areas is also a problem. Often, those professionals have no personal connection to the community, and are less inclined to stay for long periods, let alone their entire career.

Viewing isolation as another problem, the ACGA held two separate conventions in both Edmonton and Calgary. Both were attended by numerous caregivers, who finally had that crucial contact with others who were able to share experiences.

The lack of recognition of the role caregivers play is also a problem. Most convention attendees had never talked to anyone about their experiences, and felt that their achievements had gone unacknowledged. As Duggleby pointed out, most caregivers, when asked about how they are doing, respond with something about how their patient is doing. This is clearly indicative of how self-sacrificing caregivers are.

It was not all problems, though. Duggleby and Puligandla also highlighted some opportunities that have presented themselves.

The conventions, for instance, left many caregivers feeling like someone cares, while providing them with important information and contacts. There is also a plan to bring

more resources to rural communities, such as the Rural Remote Memory Clinics that were such a success in Saskatchewan.

There is a need to build rural communities' capacities for health care. This can be provided through skills training programs.

Financial assistance, as Duggleby mentioned, is almost a taboo subject. Whether people want to admit it or not, it is crucial to the continued perseverance and success of caregivers. Vouchers and assistance could be provided upfront, rather than waiting for tax breaks.

As Duggleby and Puligandla stated, there are some great ideas, but they still only solve small parts of the problems. There needs to be a connection to provincial strategy, and insurance of consistent and equitable services for all Albertans.

As mentioned, caregivers need to be recognized for what they are: an integral part of patient care. When constantly worrying about someone else's wellbeing, they can often forget that there are others going through the same experiences. And, most importantly, someone else cares.