

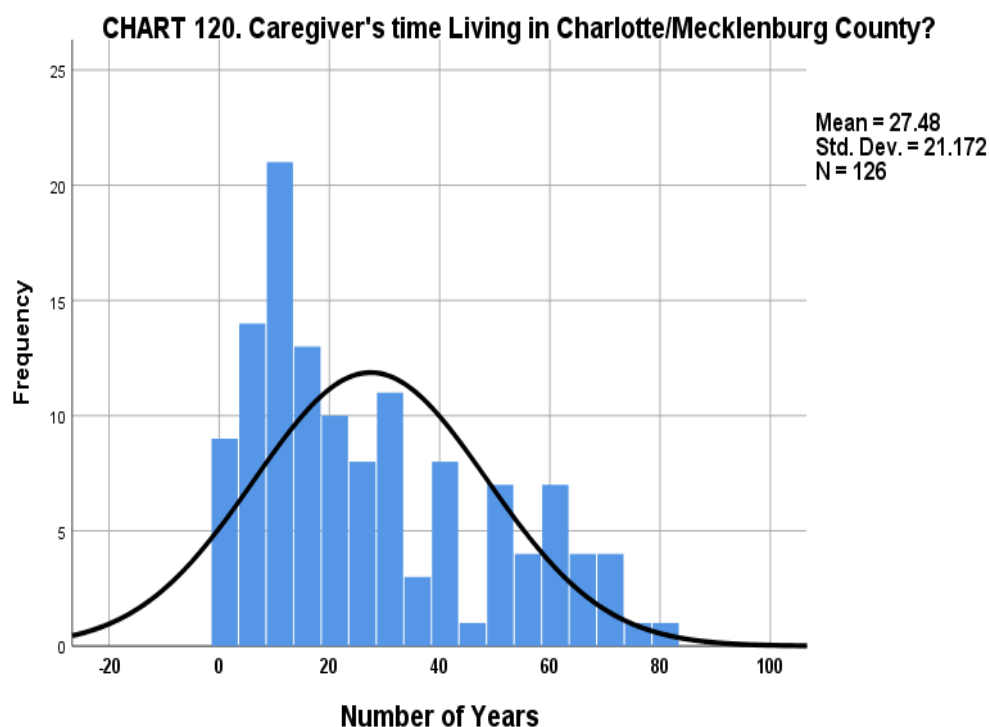
PROFILE OF PEOPLE 60 AND OLDER IN CHARLOTTE AND MECKLENBURG COUNTY

Section 3: Family Caregiving Information

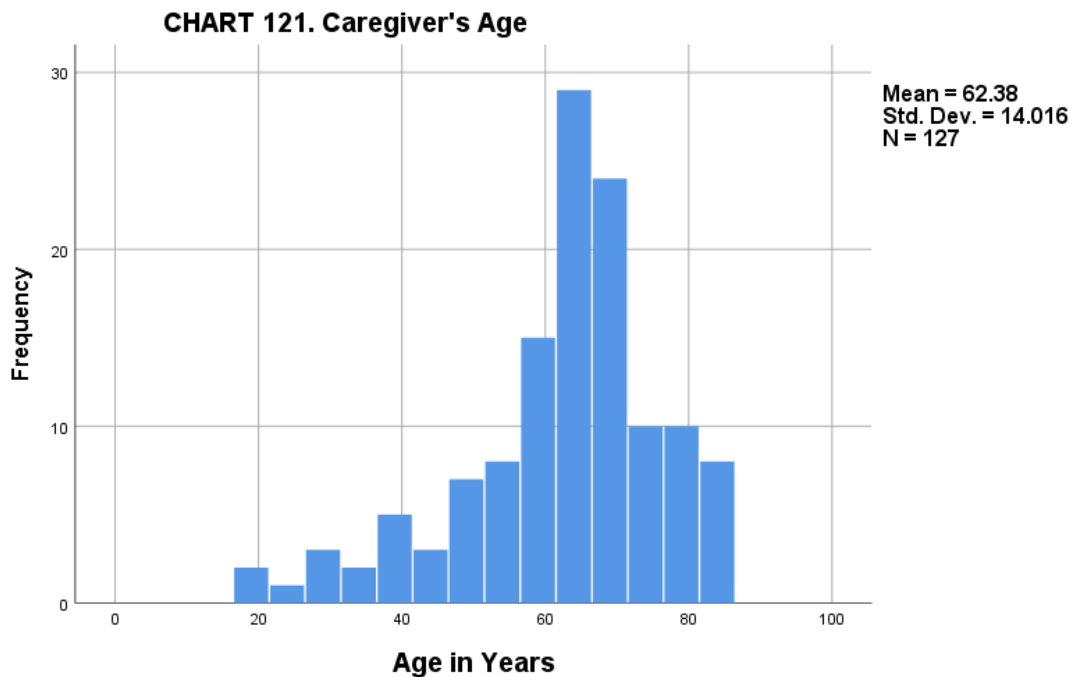
In this section, we provide information about the family caregiving profile and outcomes for participants in a sample of 127 family caregivers collected for the Meck60+ needs assessment study in Charlotte/Mecklenburg County. We examine social determinants of family caregiving, including social, psychological and health related impacts, as well as caregiving outcomes such as depression, stress, and burden. We present a variety of graphs, charts and statistical procedures to illustrate the data.

FAMILY CAREGIVING PROFILE

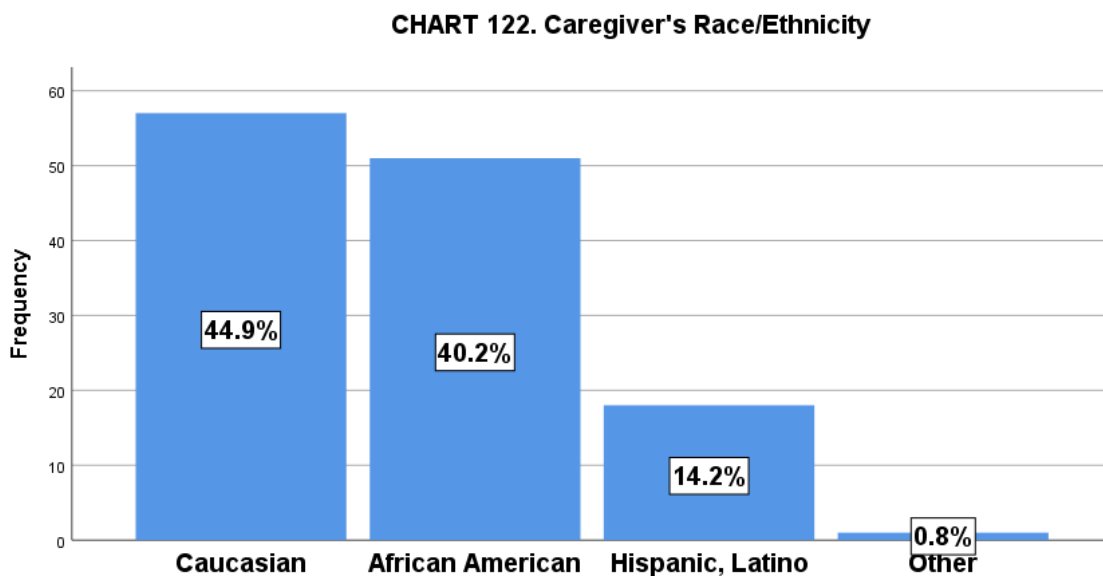
- 1. *Sample:*** Based on a sample of 127 family caregivers in Charlotte/Mecklenburg County we examine the conditions under which caregivers provide care to loved ones, and assess how caregiving affects their lives. We used two types of methods to interview caregivers: a) a Random Digit Dialing (SDD) sample (N= 81, 63.8%) and b) a face-to-face personal interviews (N=46, 36.2%).
- 2. *Time in Charlotte/Mecklenburg County:*** Caregivers in the sample reported on average living in Charlotte/Mecklenburg County for about 27 years (mean= 27.4 years) with a range between 1 and 83 years, [\(Chart 120\)](#).



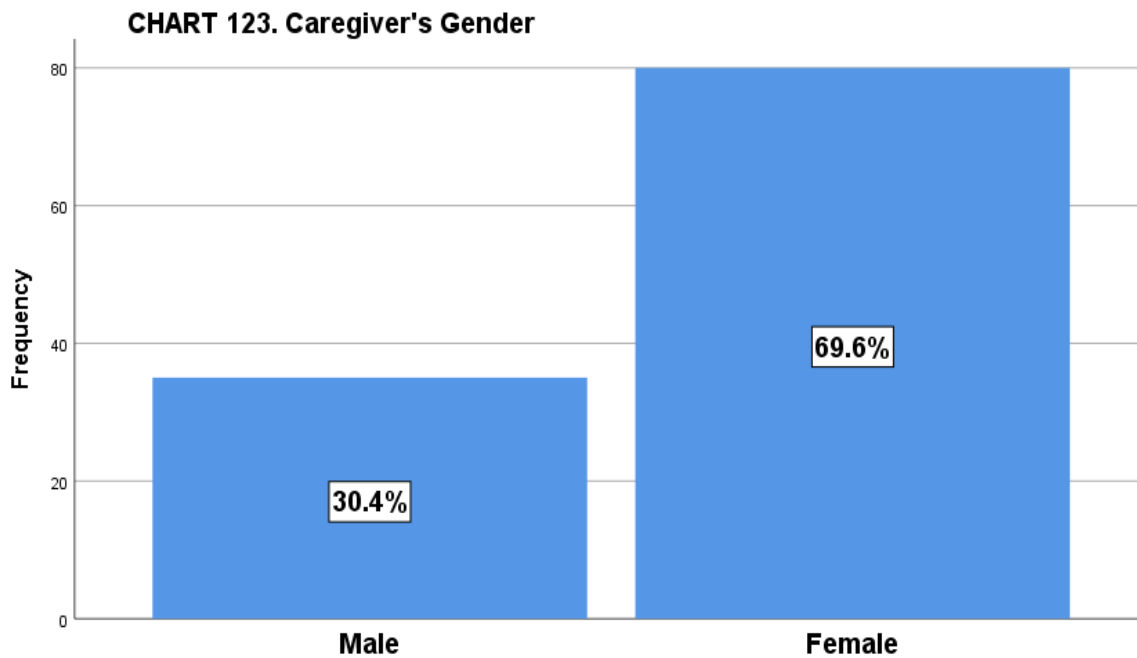
3. **Age:** The sample of caregivers reported an average age of 62.3 years, ranging from 19 to 86, (Chart 121). There are 38 caregivers (30%) that are younger than 60 in the sample.



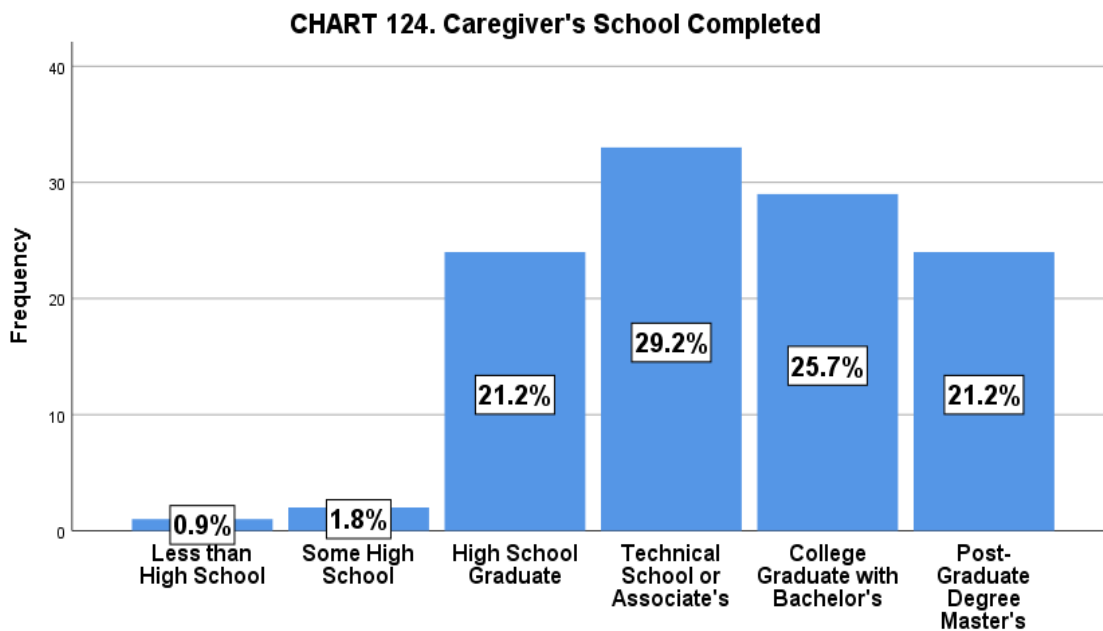
4. **Race/Ethnicity:** The sample of caregivers includes 57 (44.9%) of Caucasians, 51 (40.2%) African Americans, 18 (14.2%) Latinos and one caregiver from other race. If we consider the number of Caucasians to both minority groups, there would be 57 (44.9%) Caucasians and 70 (55.1%) minority caregivers, African Americans and Hispanic/Latinos, (Chart 122).



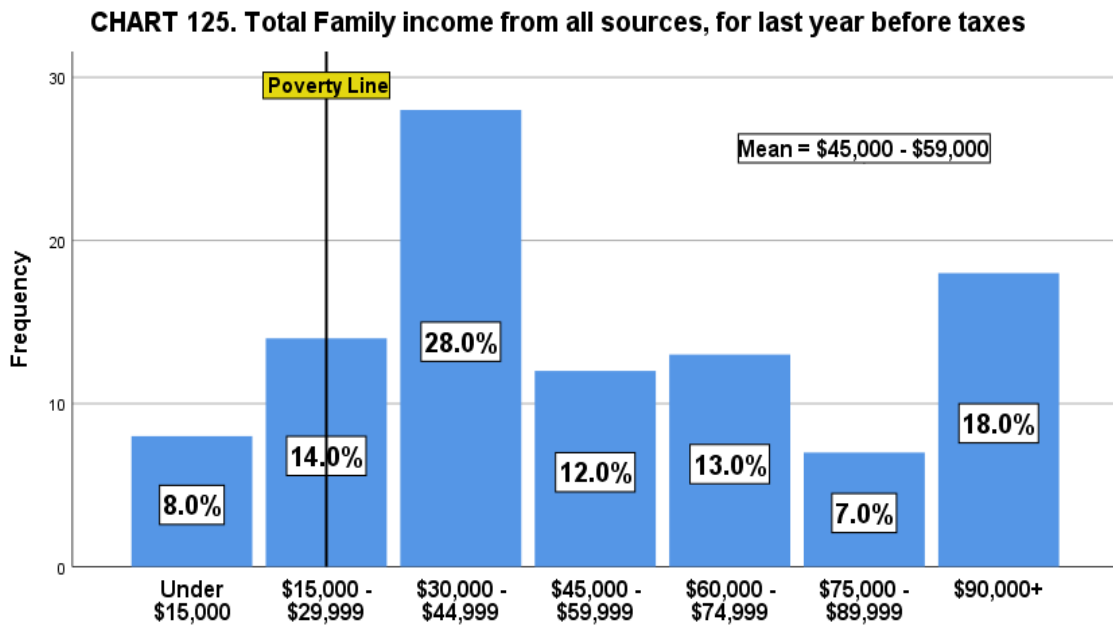
5. **Gender:** As expected most of the participants were women (N=80, 69.6%) as compared to men (N=35, 30.4%), ([Chart 123](#)).



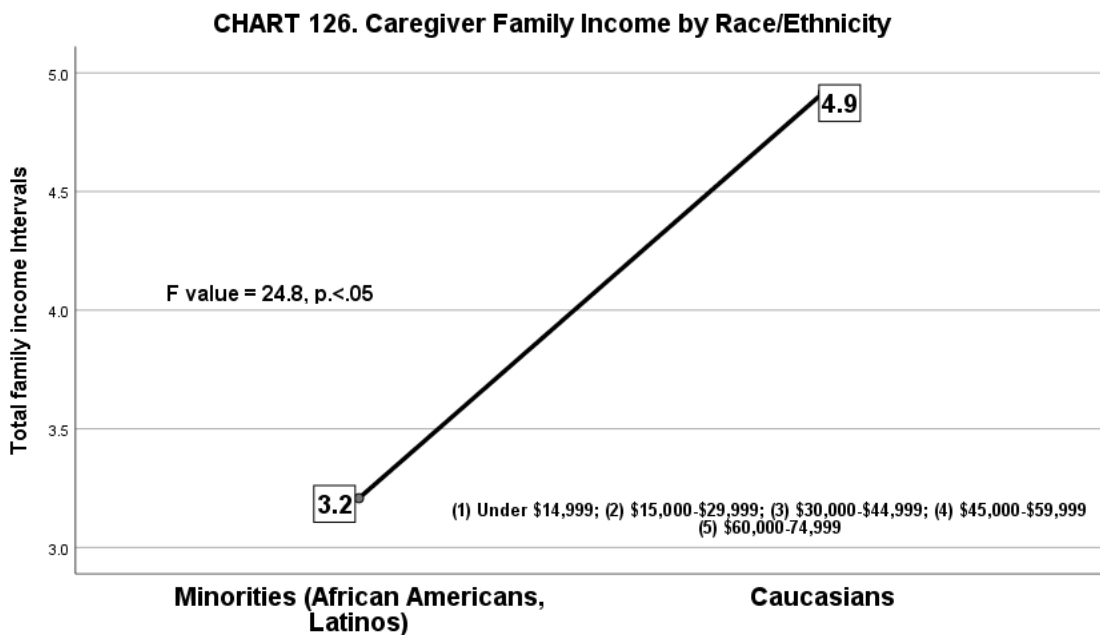
6. **Education:** Less than one quarter of caregivers completed only up to High School (24%) and about half of the sample (46.8%) completed a bachelor or graduate degree ([Chart 124](#)).



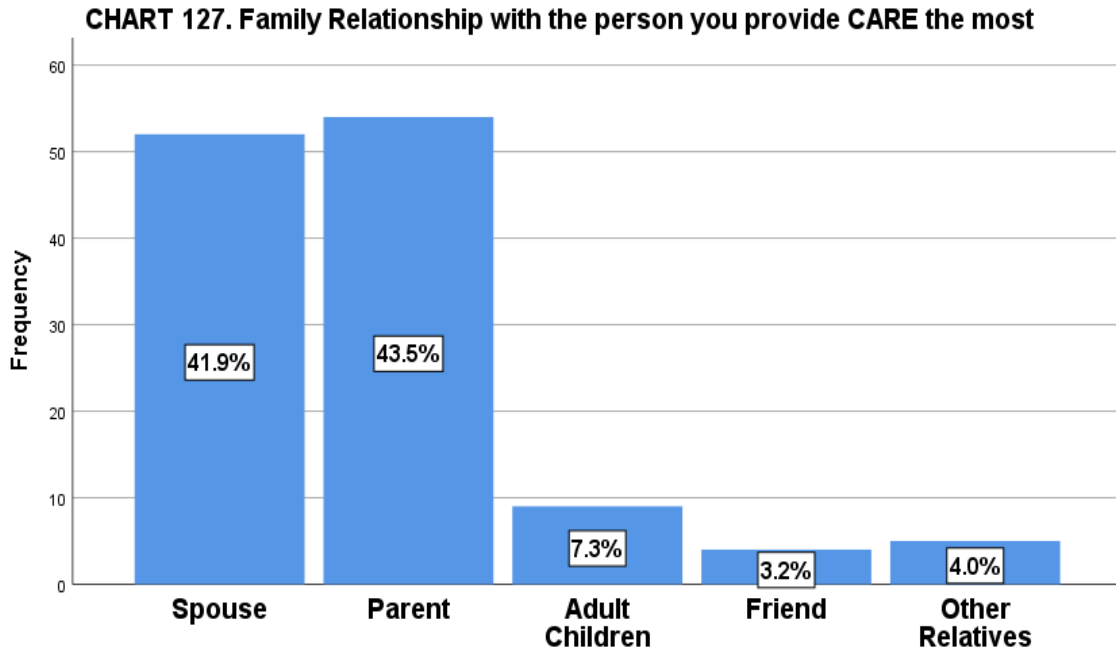
7. Income: The average family annual income reported by caregivers in the sample is in the range of \$45,000 to \$59,000, [\(Chart 125\)](#).



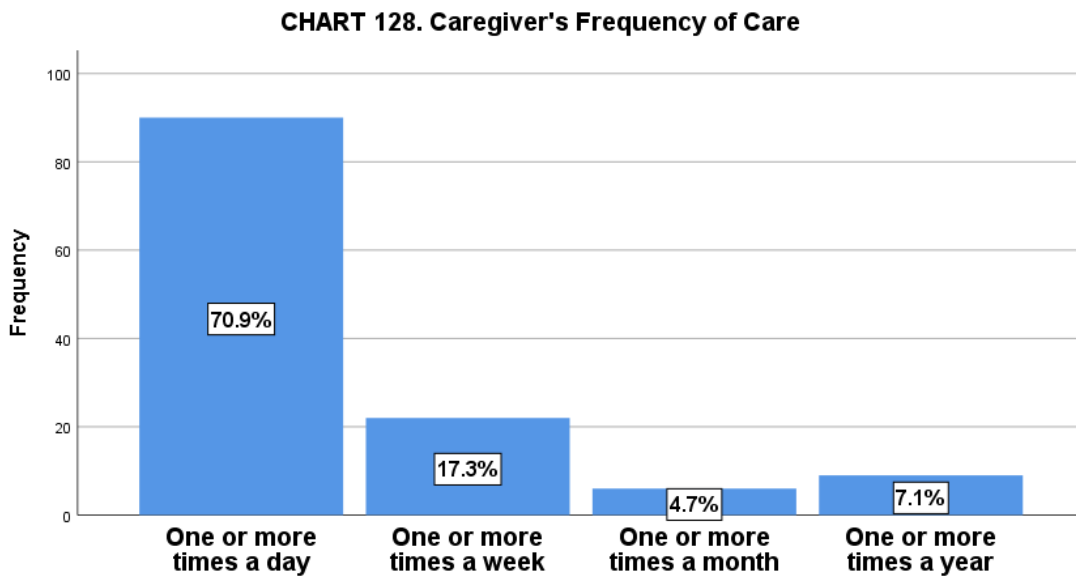
There are significant family income differences across racial/ethnic groups. Caucasian caregivers report an average annual income level around \$60,000 to \$74,999, while minorities African Americans and Latinos together report on average in the interval of \$30,000 to \$44,999, [\(Chart 126\)](#).



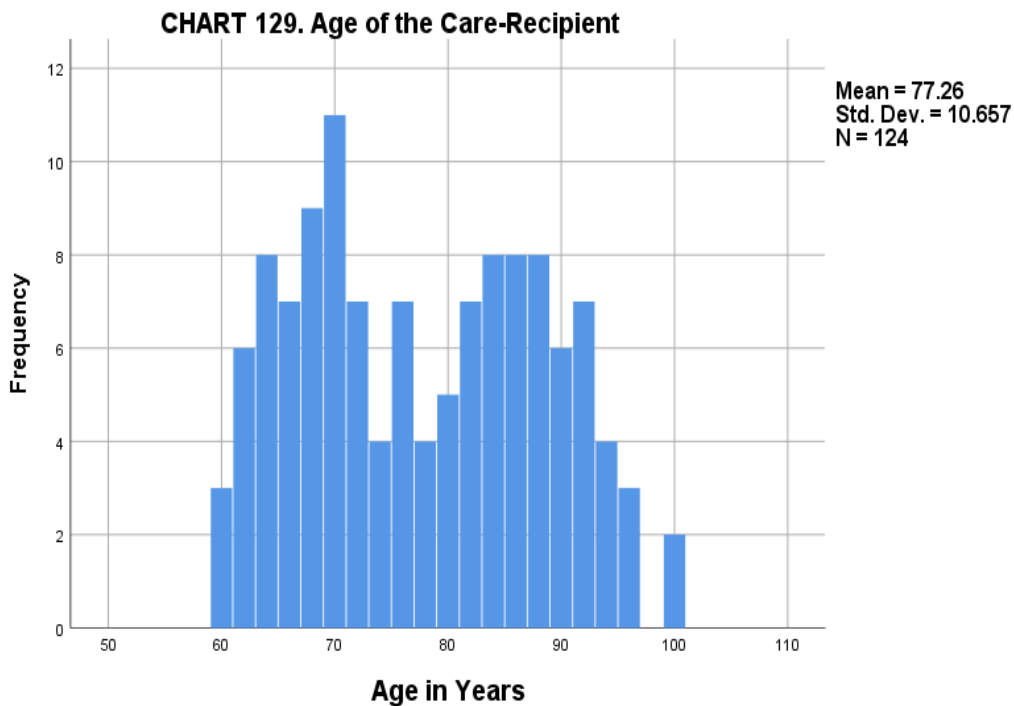
8. **Caregiver Family Relationship:** Most of the caregivers in the sample provide care to parents ((N=54, 43.5%), and spouses ((N=52, 42%), followed by adult children and others (N=18, 14%), ([Chart 127](#)).



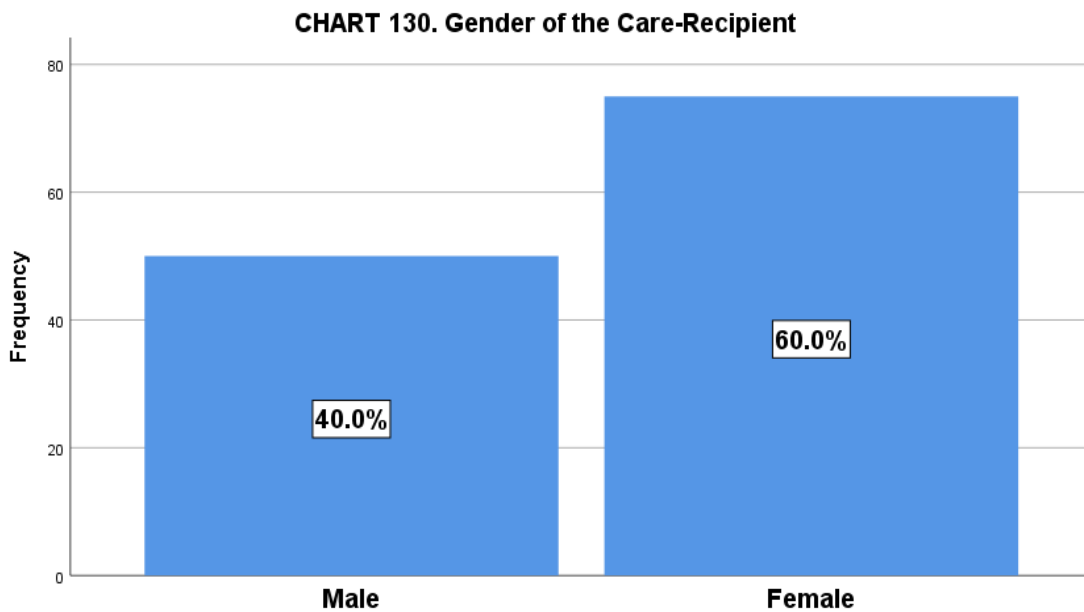
9. **Caregiver Frequency of Care:** Most caregivers provide care daily (70.9%) or weekly (17.3%), and very few monthly (4.7%), ([Chart 128](#)).



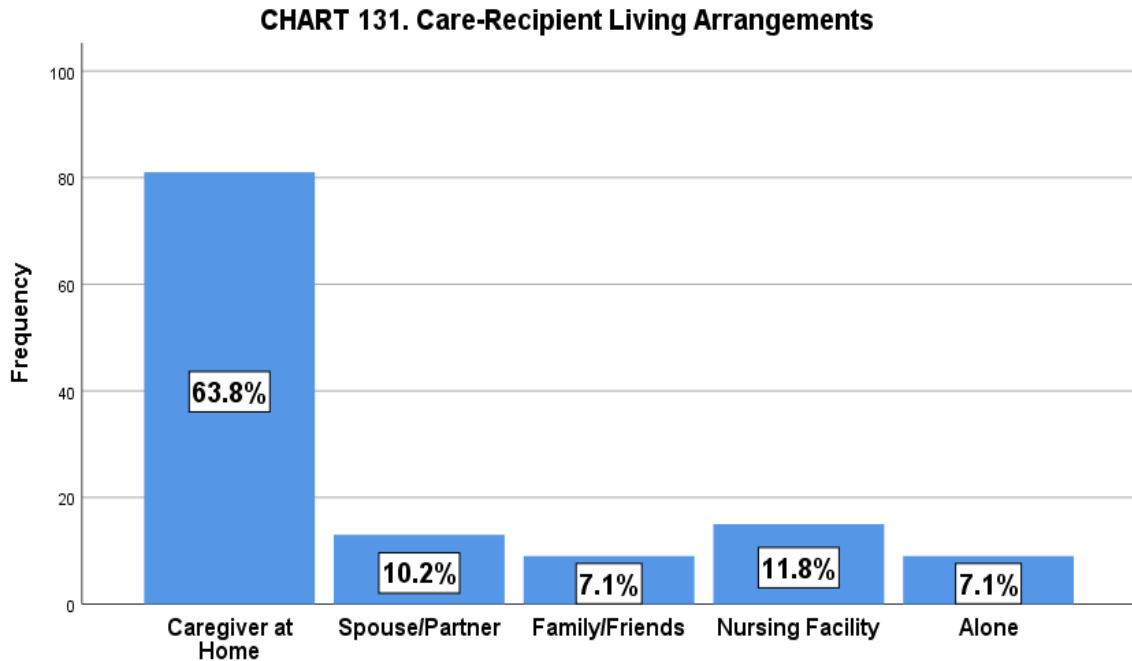
10. Age of Care-Recipient: On average, the age of the care-recipients as reported by their caregivers was 77.2 years, ranging from 60 to 100, [\(Chart 129\)](#).



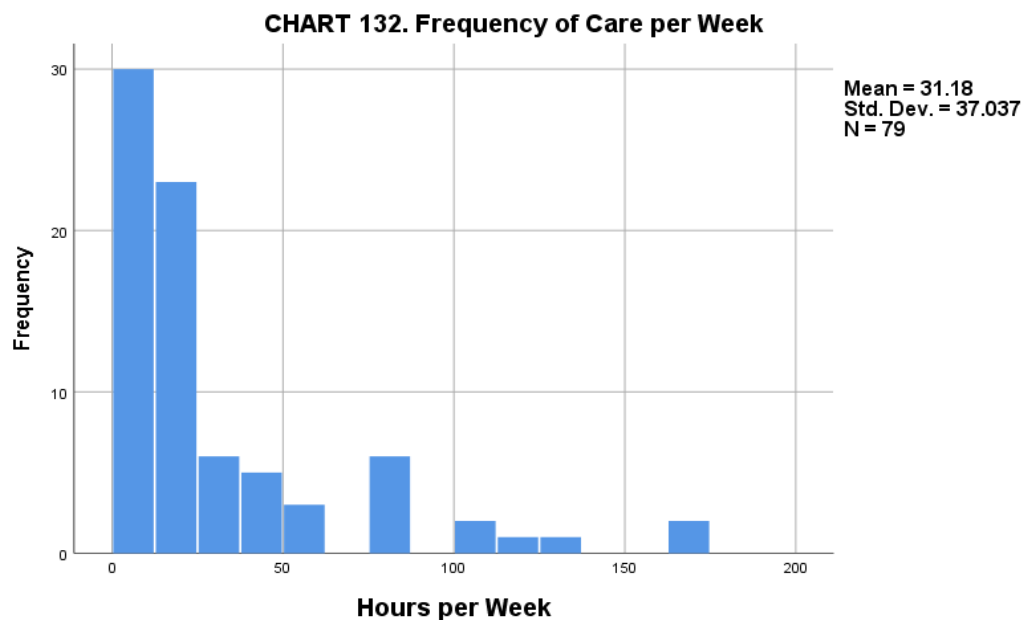
11. Gender of Care-Recipient: Most of the care-recipients were women (N=50, 60%) as compared to men (N=75, 40%), [\(Chart 130\)](#).



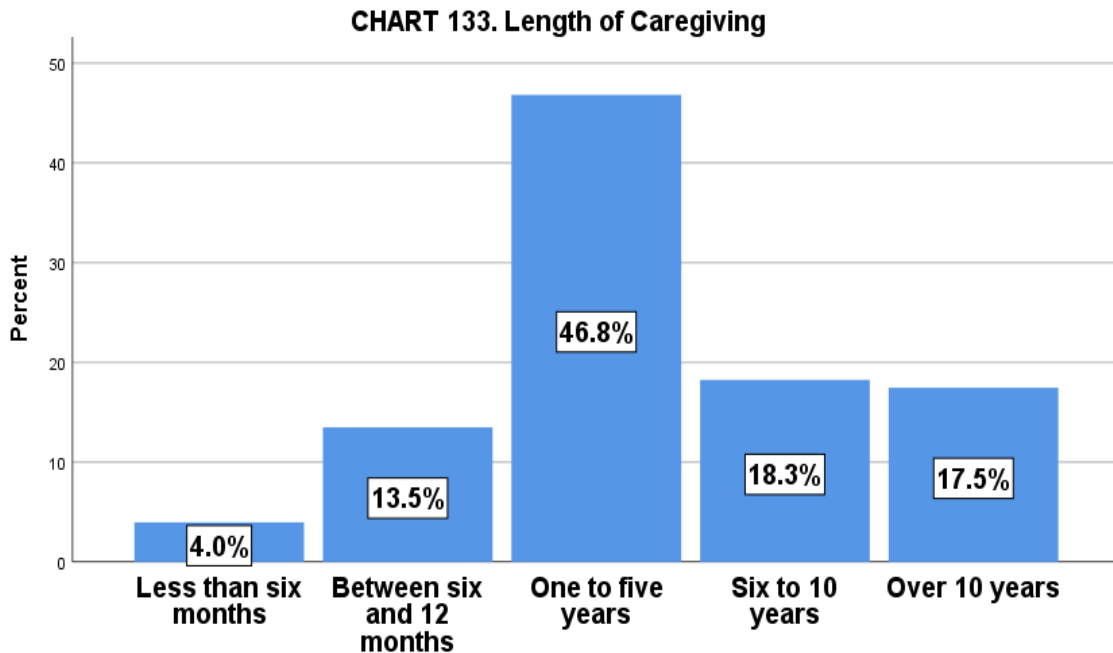
12. Living Arrangements of Care-Recipient: More than two thirds of care-recipients live with their caregivers (N =81, 63.8%). Others are with family members (N= 22, 17.3%), or in a nursing facility (N= 15, 11.8%). Few care-recipients live by themselves (N= 9, 7.1%), ([Chart 131](#)).



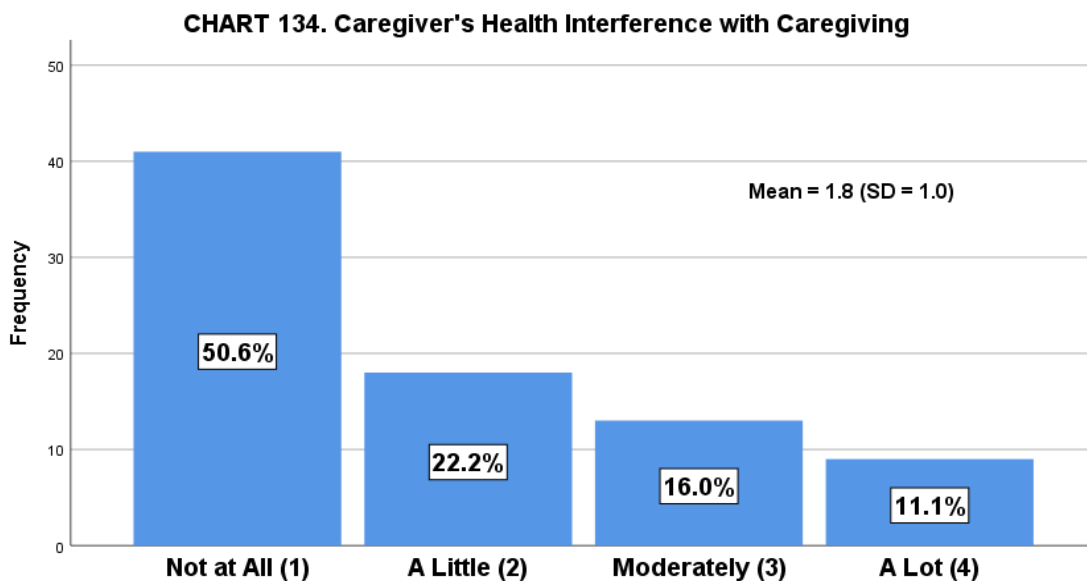
13. Amount of Care provided by Caregiver: Caregivers provide on average 31 hours of care a week for their care-recipients, ([Chart 132](#)).



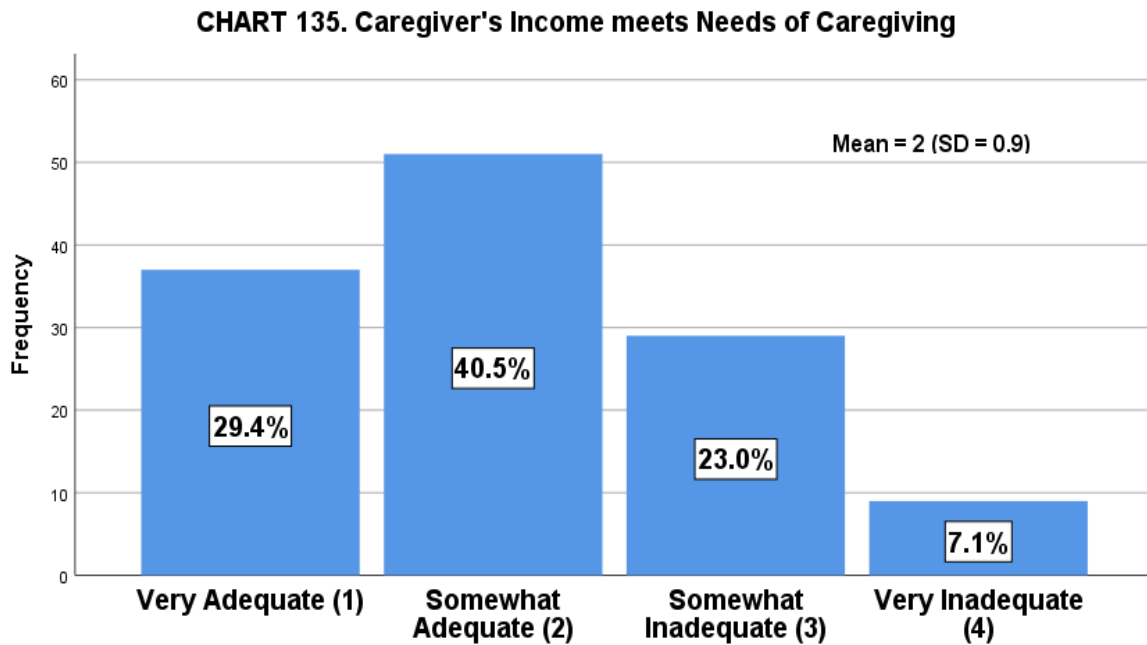
14. Length of Caregiving: Caregivers in the sample have been providing care on average between one and five years (N= 59, 46.8%). More than one third of caregivers reported providing six or more years (N= 45, 35.8%), and only a few have provide care for one year or less (N= 22, 17.5%), ([Chart 133](#)).



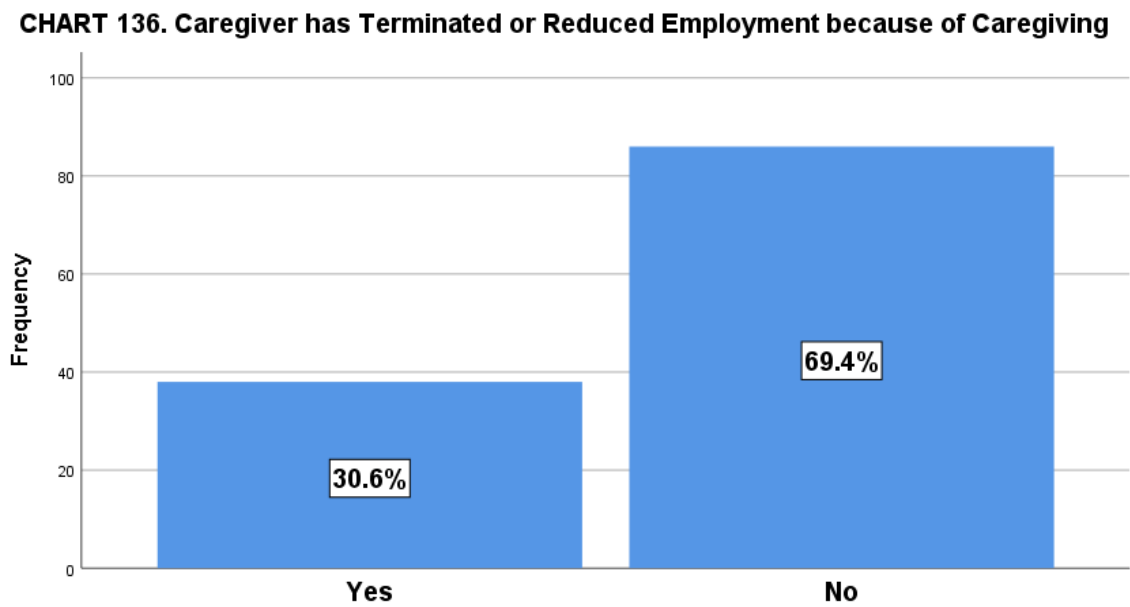
15. Health Interference with Caregiving: Most caregivers reported that their health does not interfere with their ability to provide care (N= 59, 72.8%). However, about one third indicated that their health interferes moderately or a lot (N= 22, 27.1%) with their ability to provide care, ([Chart 134](#)).



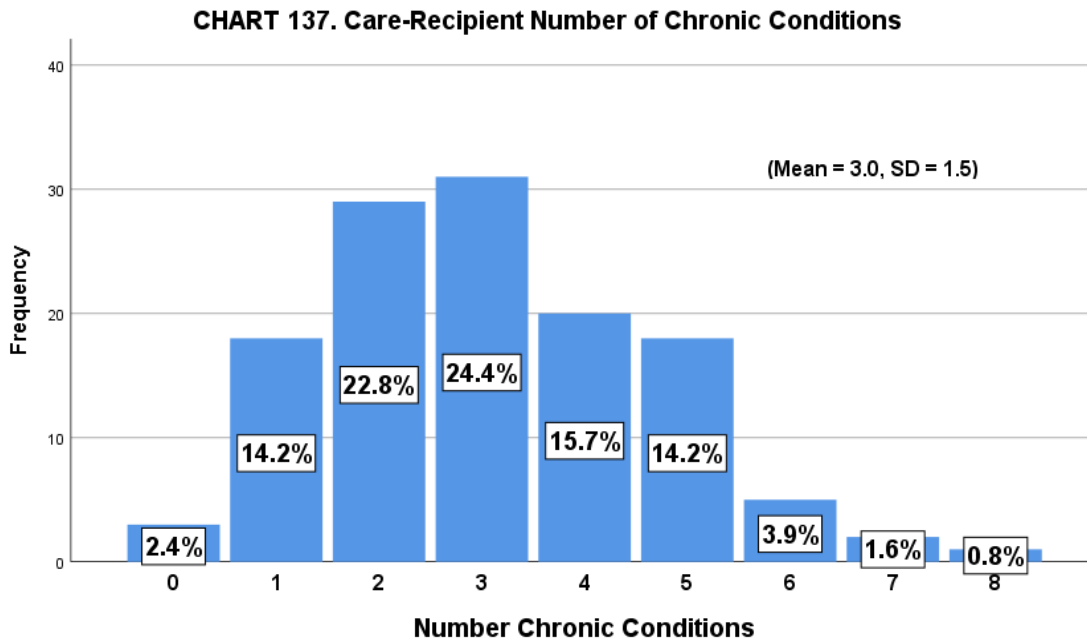
16. Income meets Need of Caregiving: Most caregivers reported that their income is adequate (N= 88, 69.5%) to meet the needs of caregiving with one third of caregivers indicating that their income is not adequate (N= 38, 30.1%), ([Chart 135](#))



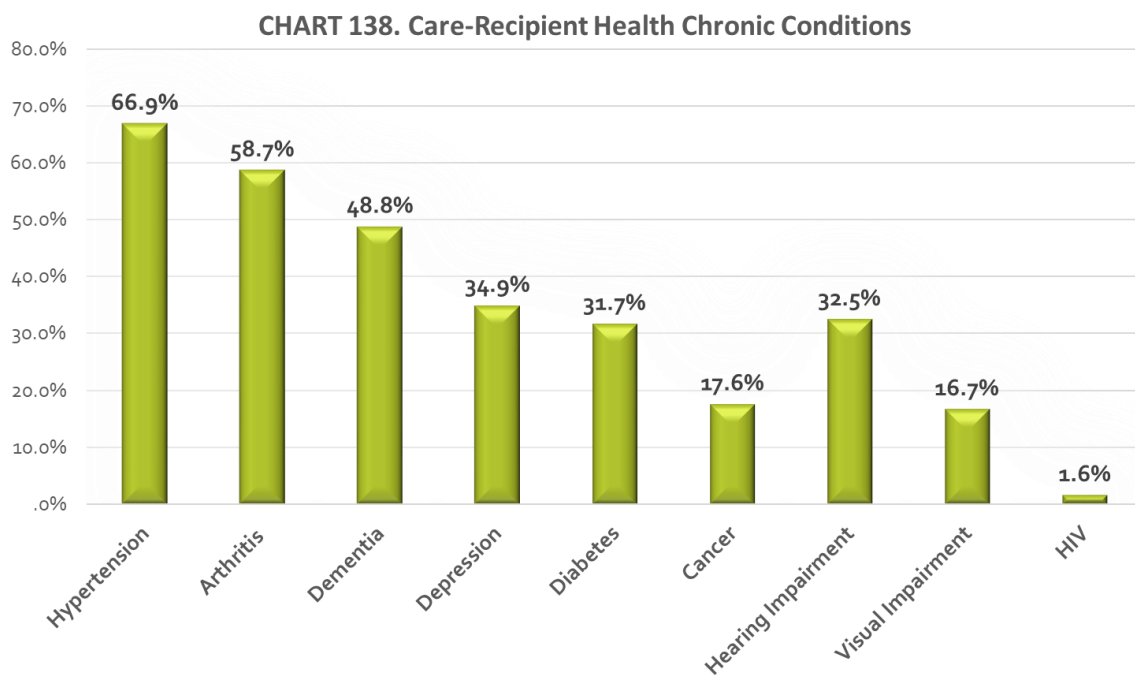
17. Caregiver Reduce or Terminated Work: Most caregivers did not make changes at work because of their caregiving activities (N= 86, 70%). About one third did report a reduction or termination of work because of their caregiving duties (N= 38, 30.8%), ([Chart 136](#)).



18.Care-Recipient Chronic Conditions: Family caregivers report that their care-recipient has on average three chronic health conditions (Mean = 3, SD = 1.5), with a range from 0 to 8, (Chart 137). More than one-third (36.2) report that their love one has four to eight health chronic conditions.



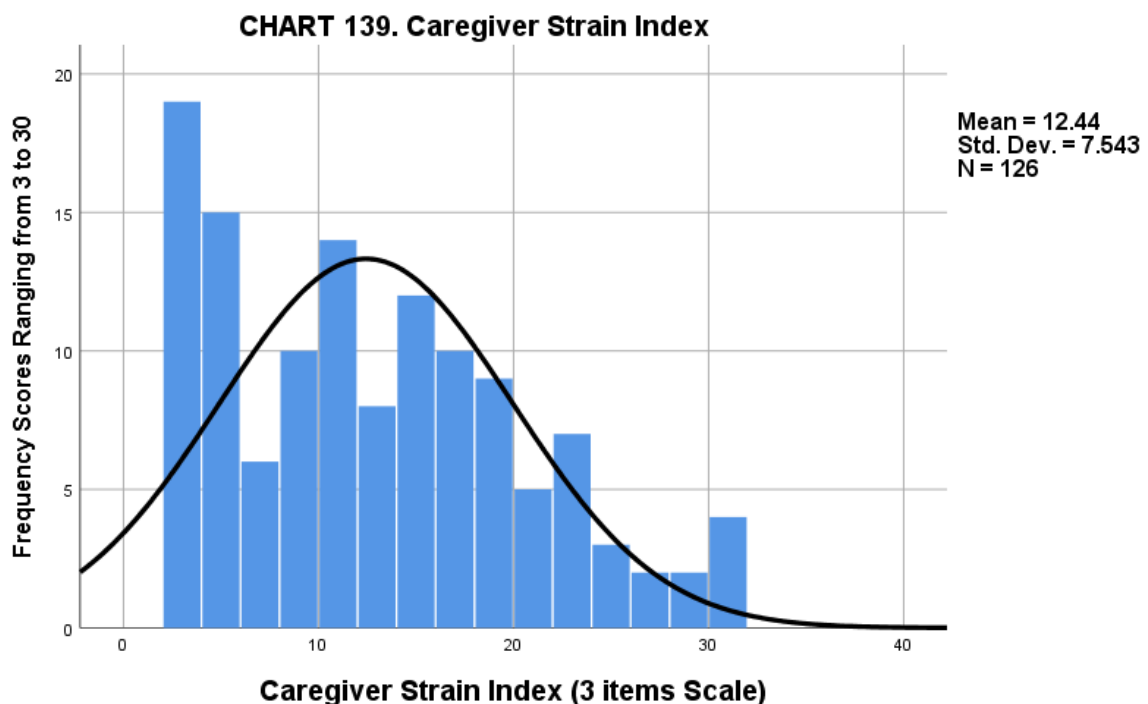
19.Care-Recipient Prevalence of Health Conditions: Most caregivers provide care to care-recipients diagnosed with Hypertension (66.9%) and Arthritis (58.7%), (Chart 138).



About half of caregivers provide care to Dementia relatives (48.8%) followed by Depression (34.9%), diabetes (37.7%) and Cancer (17.6%). Care-recipients limitations include Hearing impairments (32.5%), and visual impairment (16.7%). Very few reported providing care for care-recipients with HIV (1.6%), ([Chart 138](#)).

20. Health Outcomes: Caregiver Strain: Caregivers reported on three measures of hardship/strain because of caring for their loved one using a scale from “1” (not at all) to “10” (A great deal). Their average level of financial hardship (mean = 3.4), physical strain (mean = 3.98), and emotional stress (mean = 5.0) were used to create an overall index of Caregiving Strain ([Chart 139](#)). Overall family caregivers reported moderate level of strain (mean = 12, SD = 7.5).

FINANTIAL HARDSHIP - Caregivers Subjective Rate on a scale from 1 to 10	Mean = 3.47 (SD = 2.9) Range 1 to 10
PHYSICAL STRAIN - Caregivers Subjective Rate on a scale from 1 to 10	Mean = 3.98 (SD = 3.0) Range 1 to 10
EMOTIONAL STRESS - Caregivers Subjective Rate on a scale from 1 to 10	Mean = 5.06 (SD = 3.2) Range 1 to 10
INDEX CAREGIVER STRAIN	Mean = 12.4 (SD = 7.5) Range 3 to 30

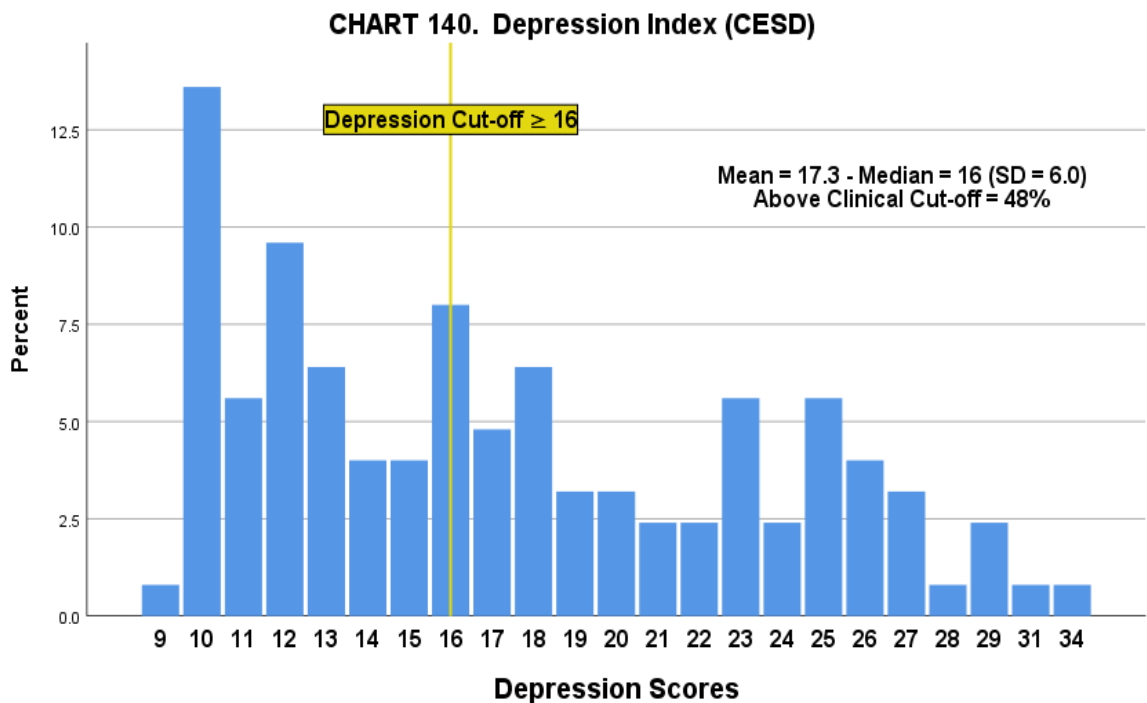


21. Health Outcomes: Depression: The average score of depressive symptoms among caregivers measured by the CESD depression scale was 17.3 (SD = 6) with actual scores ranging from 9 to 34, ([Chart 140](#)). We used the ten-item CESD measure with a 4-point scale for each item where “1” was rarely and “4” “most of the time (total scores ranged from 4 to 40).

About half of the caregivers scored right at the clinical cut-off score (median = 16). The other family caregivers (48%) scored above the clinical cut-off score ([Chart 140](#)).

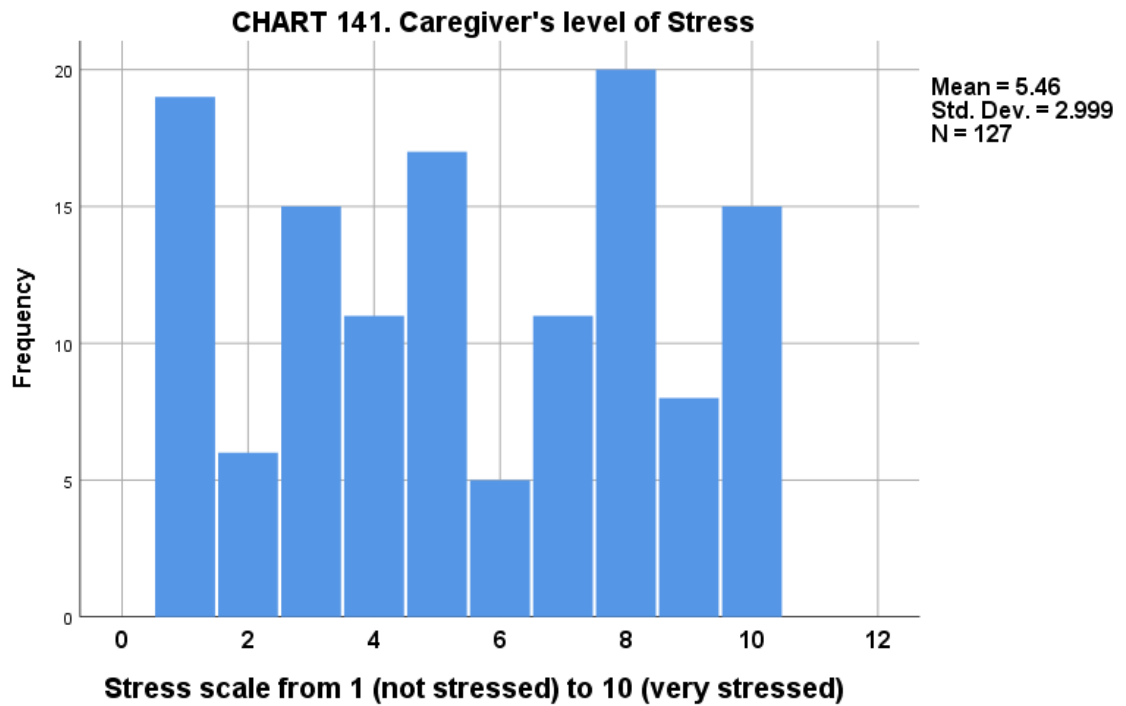
DEPRESSION - Caregivers
CESD – Caregiver Depression Index

Mean = 17.3 (SD = 6.0)
Range 9 to 34



22. Health Outcomes: Stress: Caregivers reported a moderate level of perceived stress because of their caregiving (mean = 5.4, SD = 2.9), ([Chart 141](#)).

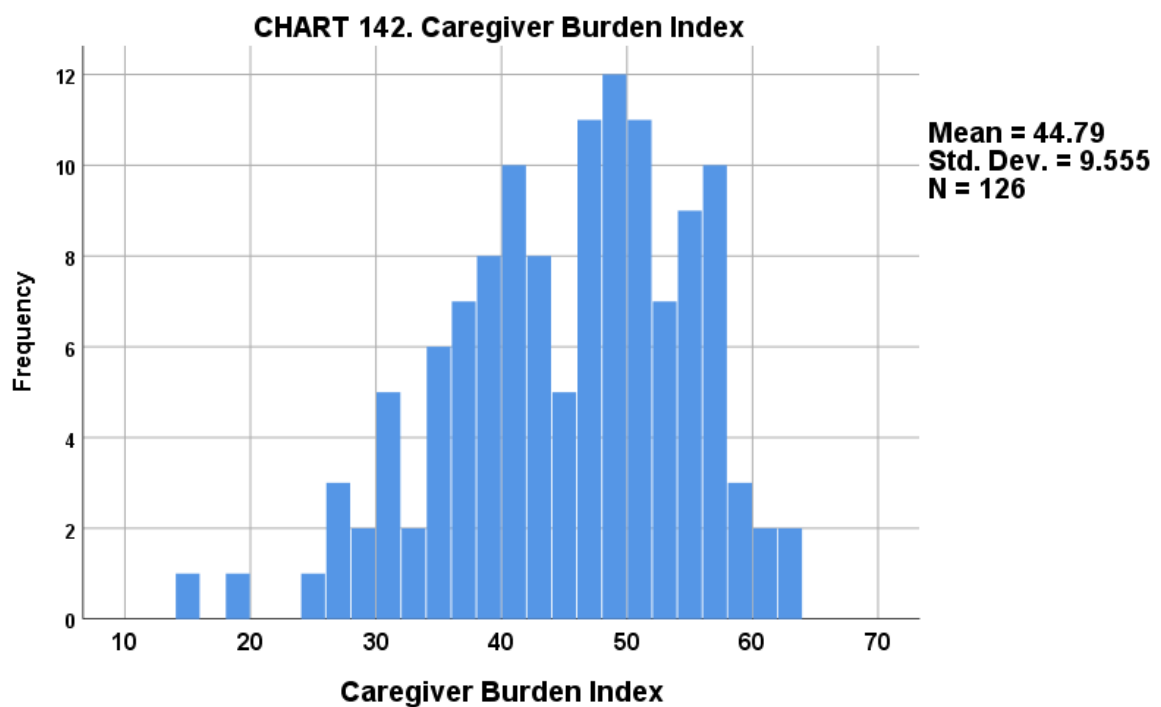
STRESS - Caregivers Subjective Rate on a scale from 1 to 10	Mean = 5.4 (SD = 2.9) Range 1 to 10
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23. Health Outcomes: Caregiver Burden: Caregivers reported on fourteen items related to three dimensions of caregiver burden. Items asked caregivers about changes on the amount of time for themselves, level of tension and perceived caregiving demands. These items use a five-point scale from “1” (not at all) to “5” (A great deal).

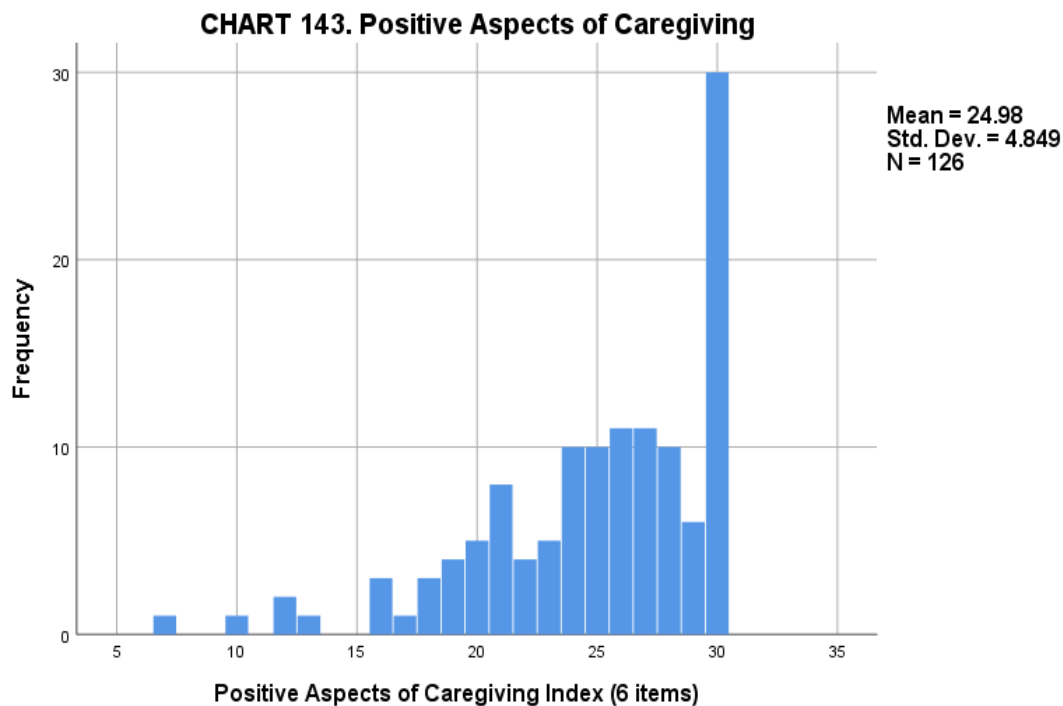
BURDEN - Caregivers Less Time for yourself Index	Mean = 19.7 (SD = 4.0) Range 7 to 25
BURDEN - Caregivers Subjective Tension/Stress Index	Mean = 12.6 (SD = 4.1) Range 2 to 20
BURDEN - Caregivers Demands on Caregiving Index	Mean = 10.3 (SD = 4.1) Range 3 to 20
INDEX CAREGIVER BURDEN	Mean = 44.79 (SD = 9.5) Range 15 to 63

Caregivers reported a high level of caregiving burden across the health outcomes. The overall burden index was (mean = 44.7, SD = 9.5), [\(Chart 142\)](#).



24. Health Outcomes: Positive Aspects of Caregiving: Caregivers reported their level of positive aspects of caring for their love ones using six items measuring how they feel about helping and taking care of their love ones. Caregivers exhibited high levels of positive feelings about their experience as caregivers. More than fifty percent of the caregivers score 26 or higher on the overall index of positive aspects of caregiving (median = 26), [\(Figure 143\)](#).

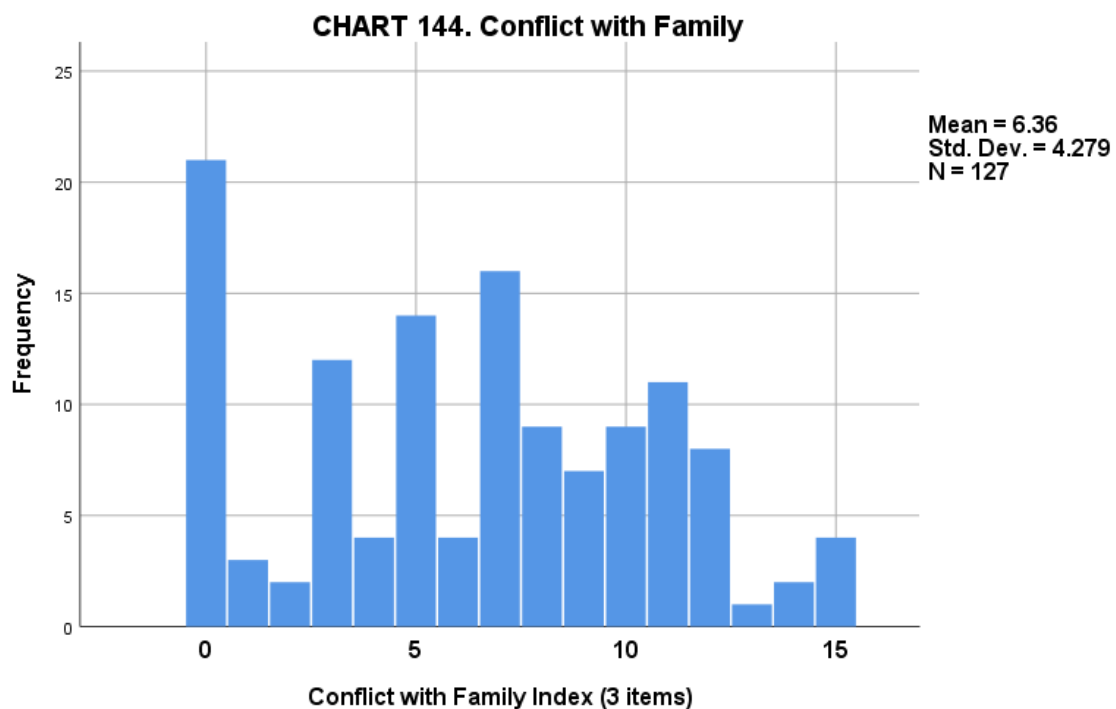
POSITIVE ASPECTS OF CAREGIVING Subjective Rate on a scale from 1 to 5	Mean = 24.9 (SD = 4.8) Range 7 to 30
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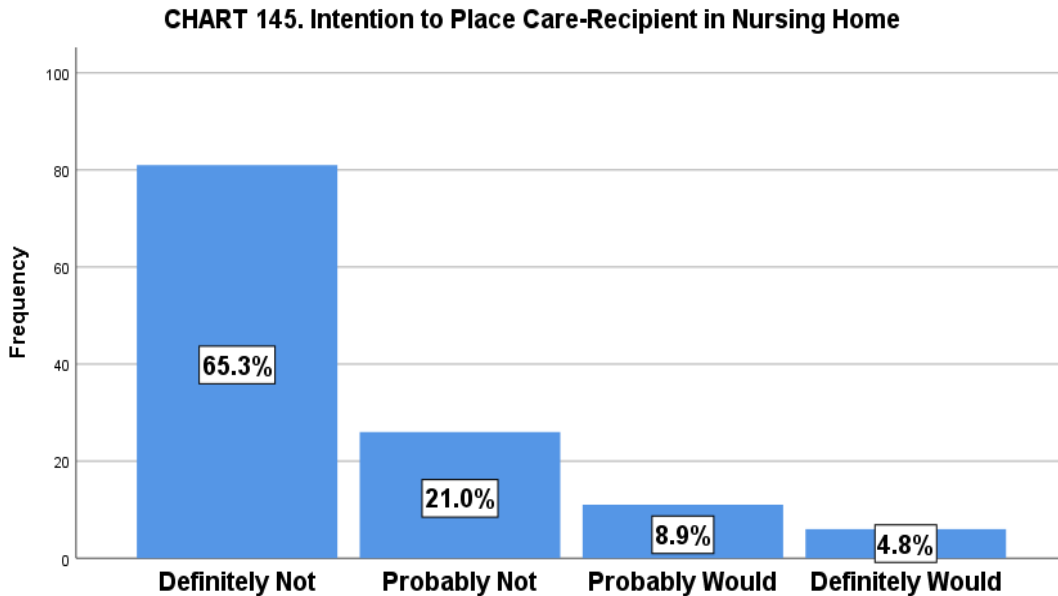
25. Health Outcomes: Family Conflict: Caregivers indicated how often they felt that they did not get along with other family members, were resentful of other relatives, or relatives who did not recognize their caregiving efforts.

Caregivers exhibited moderate levels of family conflict. More than fifty percent of the caregivers score 7 or higher on the overall index of family conflict, (median = 7), ([Figure 144](#)).

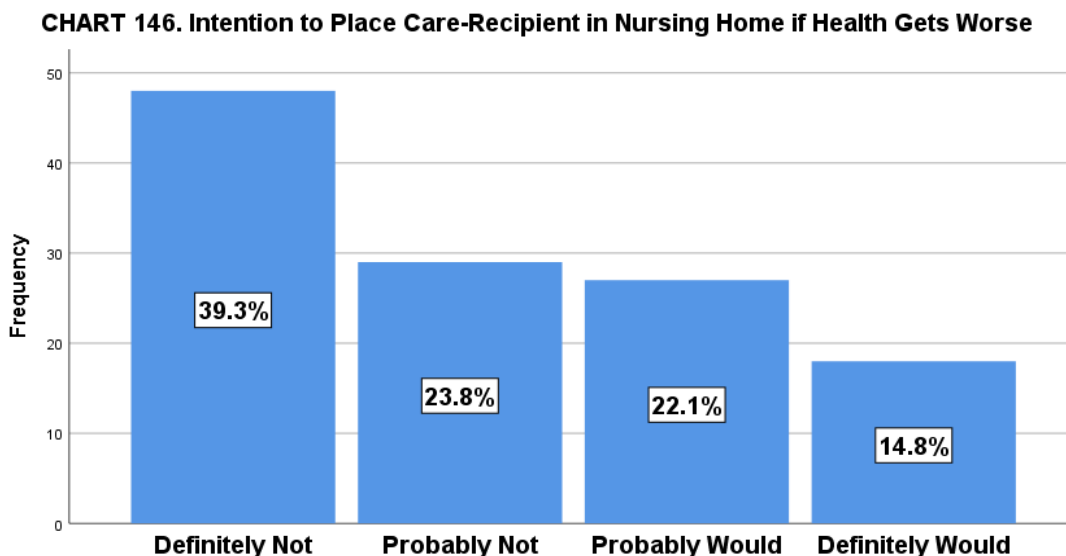
CAREGIVER FAMILY CONFLICT Subjective Rate on a scale from 1 to 5	Mean = 6.3 (SD = 4.2) Range 0 to 15
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26. Health Outcomes: Intention to Place Care-recipient in Nursing Care: Most caregivers (65.3%) indicated that they would not move the person they are caring for into a nursing facility given his/her current health. Only about 14% of caregivers indicated that they probably or definitely would move their care-recipients into a long-term placement ([Chart 145](#)).

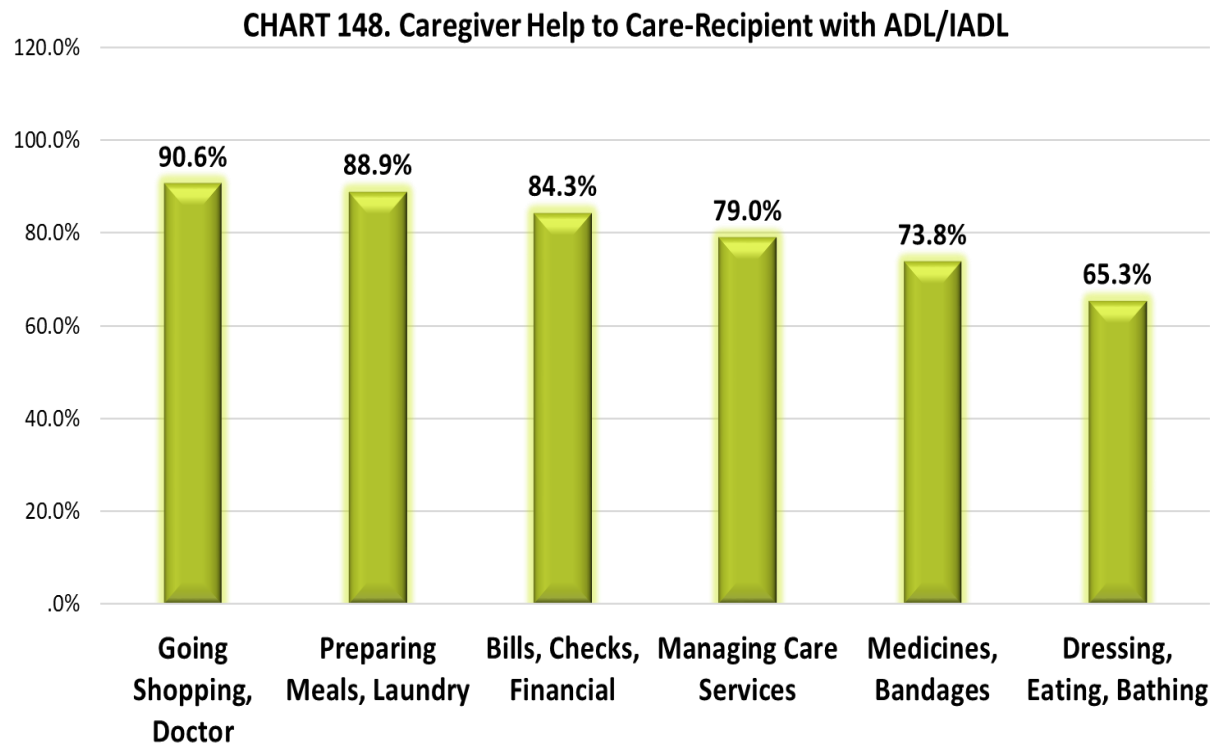


However, the number of caregivers who would probably or definitely consider moving their love ones into a nursing facility increases if their current health and mobility got worse (39.3%), ([Chart 146](#)). About a quarter of caregivers (26.2%) have sought information about Nursing Home placement in the previous few months, ([Chart 147](#)).



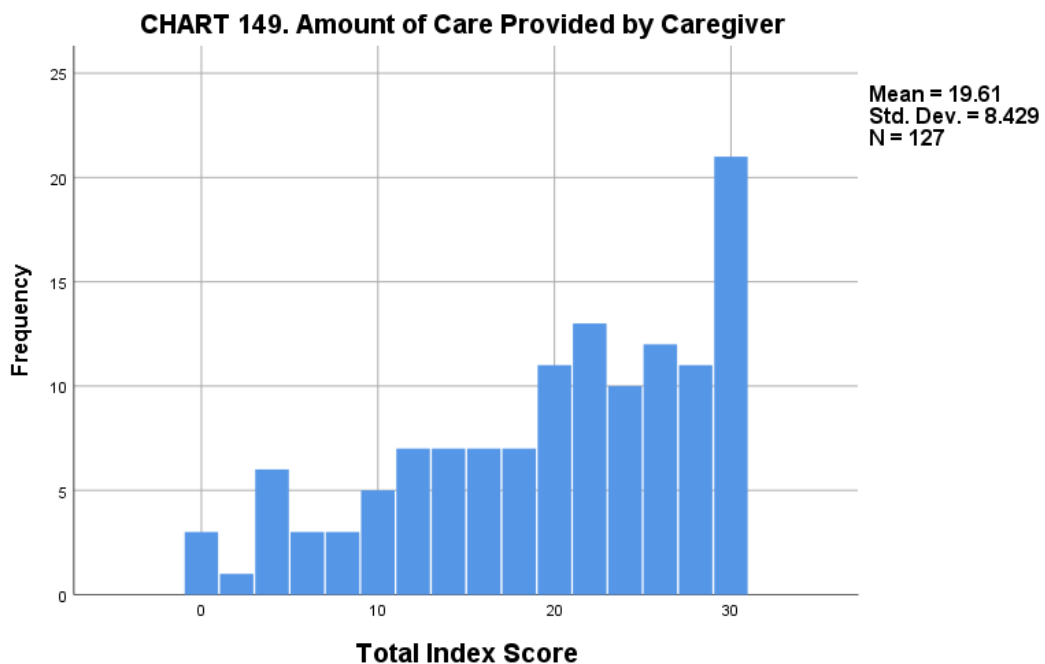
27. Care-recipient ADL/IADL Needs: Caregivers reported the type of assistance they provide as caregivers using six items with a five-point scale (from no help to most help).

Caregivers indicated assisting their loved ones primarily on instrumental activities such as going shopping or visiting the doctor (90.6%), preparing meals and laundry (88.9%); followed by cognitive tasks such as financial matters (84.3%), managing care services (79%); clinical care (73.8%) and personal activities of daily living such as dressing, eating, bathing (65.3%), ([Chart 148](#)).



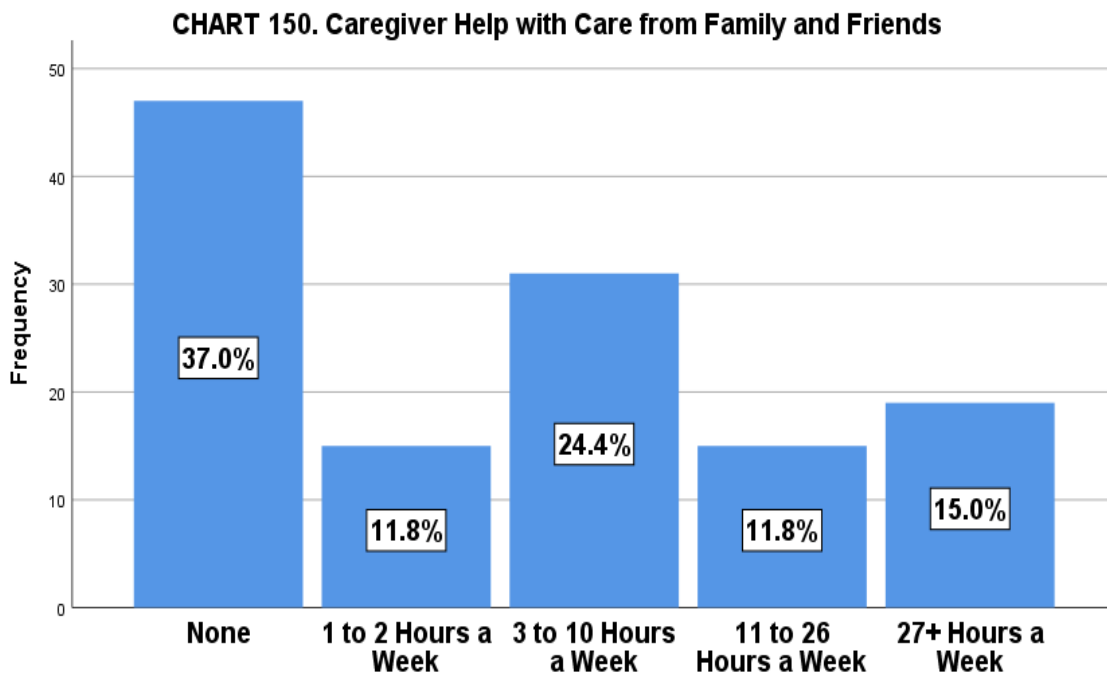
28. Amount of Care provided to Care-recipient: Amount of care provided by the caregiver was measure with six IADL/ADL items in a scale from “0” (no help) to “5” (most help). Caregivers indicated that they provide moderate to high levels of care to their loved ones (median = 21), ([Chart 149](#)).

AMOUNT CARE PROVIDED TO CARE-RECIPIENT - Caregivers Subjective Rate on 6-Items Scale from 0 to 5	Mean = 19.6 (SD = 8.4) Range 0 to 30
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29. Caregiver Network of Support: Help from Family and Friends: Caregivers were asked how much time each week family members and friends spend assisting with caregiving on personal care, household chores, transportation, shopping, managing finances or arranging for care.

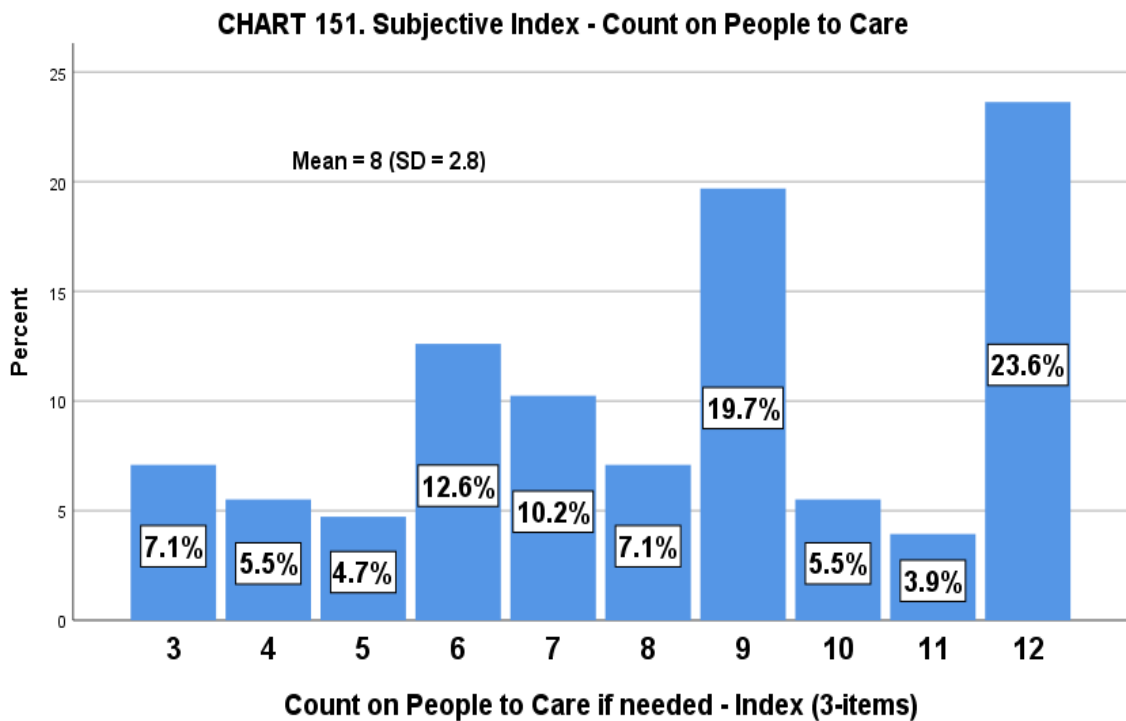
More than one-third of caregivers indicated that they do not receive any help (37%) and on average family and friends provide between one and two hours of help a week with the care-recipient, ([Chart 150](#)).



30. Caregiver Network of Support: Count on People: Caregivers support from others to assist with care, emotional support or willingness to help with caregiving appears to be moderately high among caregivers in the sample.

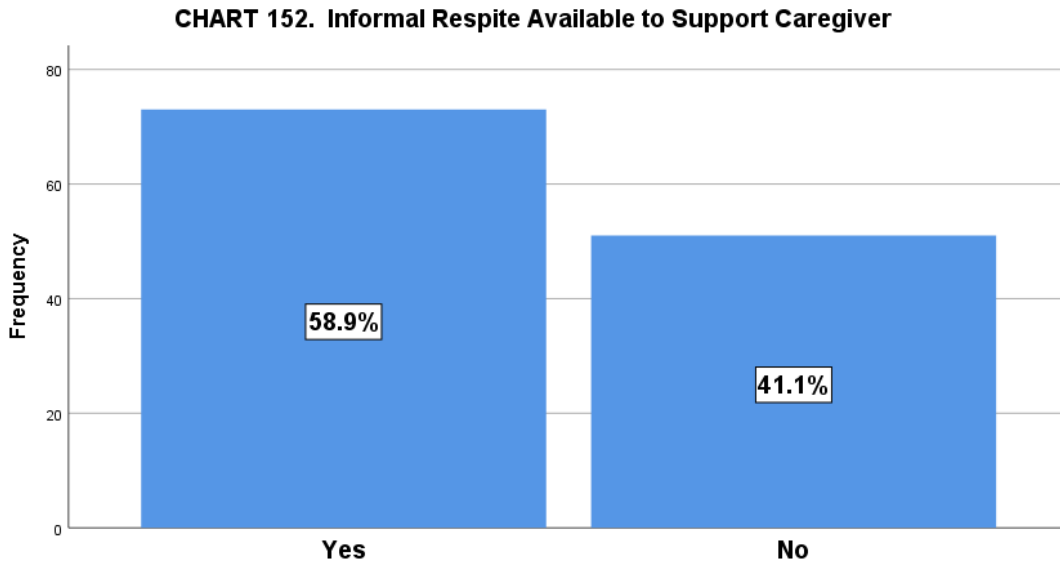
Half of caregivers in the sample indicated to have a score of “9” or higher (the index range is from “3 to 12”) suggesting they have people to count on for care if needed, ([Chart 151](#)).

Caregiver Count on People to Provide Care Subjective Index (3-items, scale from 1 to 4)	Mean = 8.3 (SD = 2.8) Range 3 to 12
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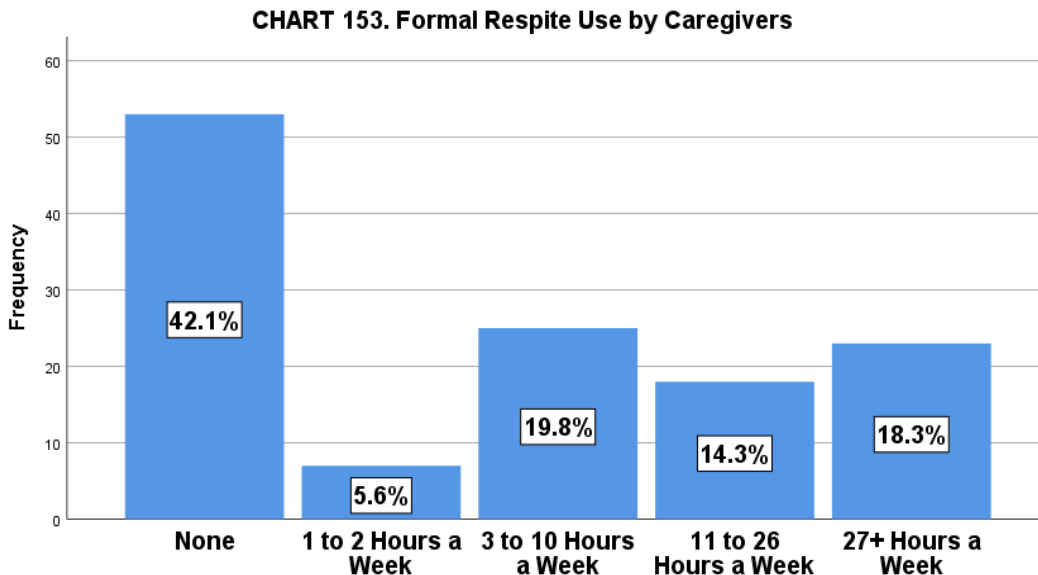
31. Caregiver Network of Support: Informal Respite Available to Caregiver:

About sixty percent of caregivers indicated that they have someone else able to provide care to the care-recipient if needed (58.9%), ([Chart 152](#)).

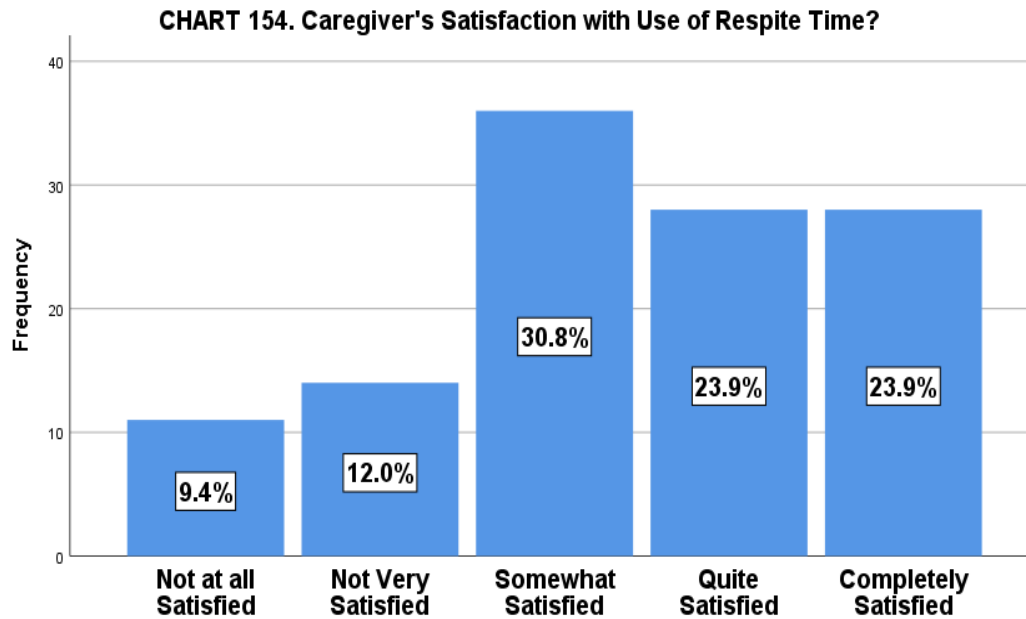


32. Caregiver Network of Support: Formal Respite Use:

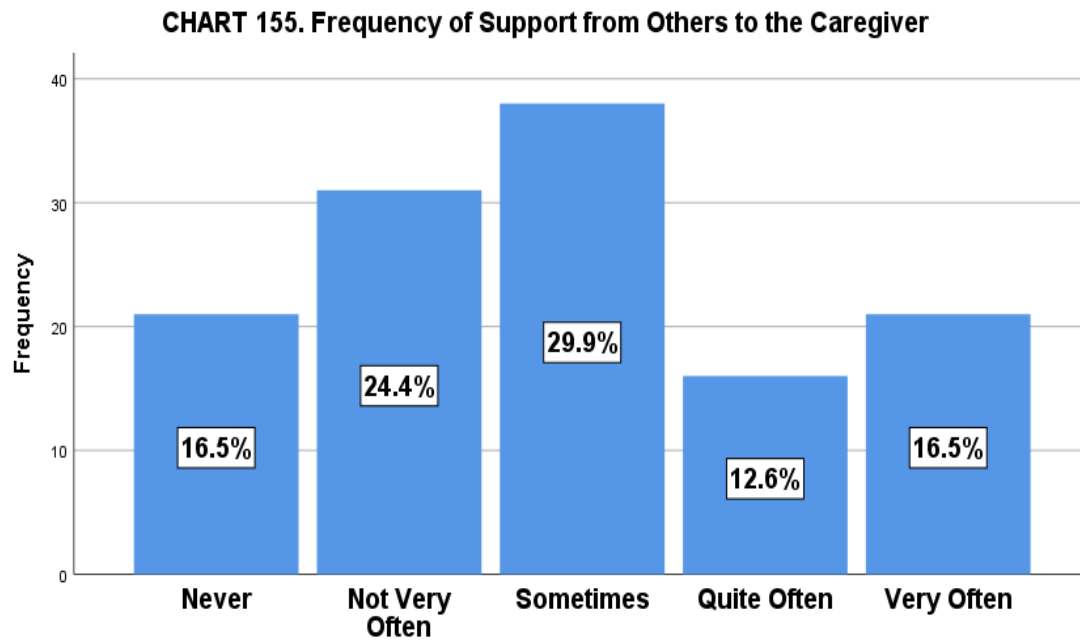
More than half of the caregivers reported using formal respite during a week (57.9%), ([Chart 153](#)).



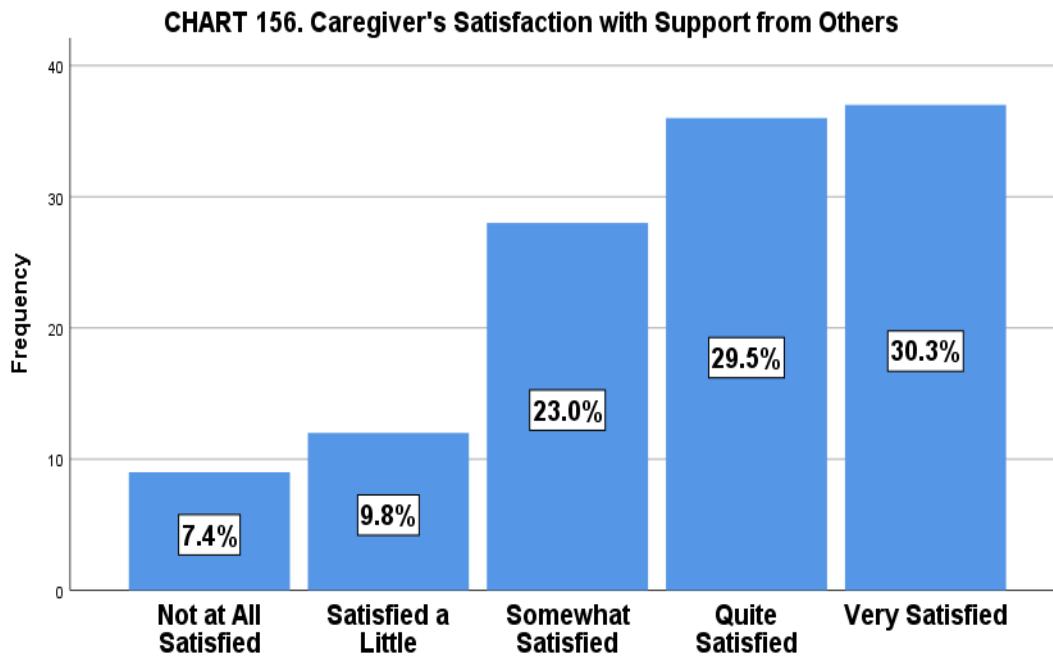
Most caregivers are **satisfied with the use of their respite time** (78.6%), ([Chart 154](#)).



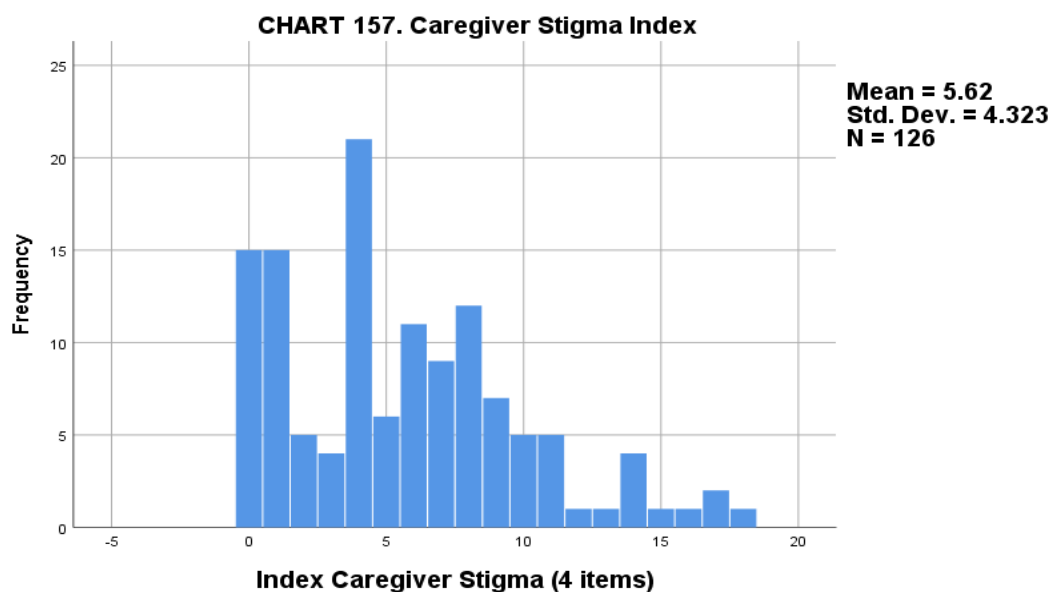
Most caregivers also indicated that they get help or support from others in caring for their loved ones (60%). ([Chart 155](#)).



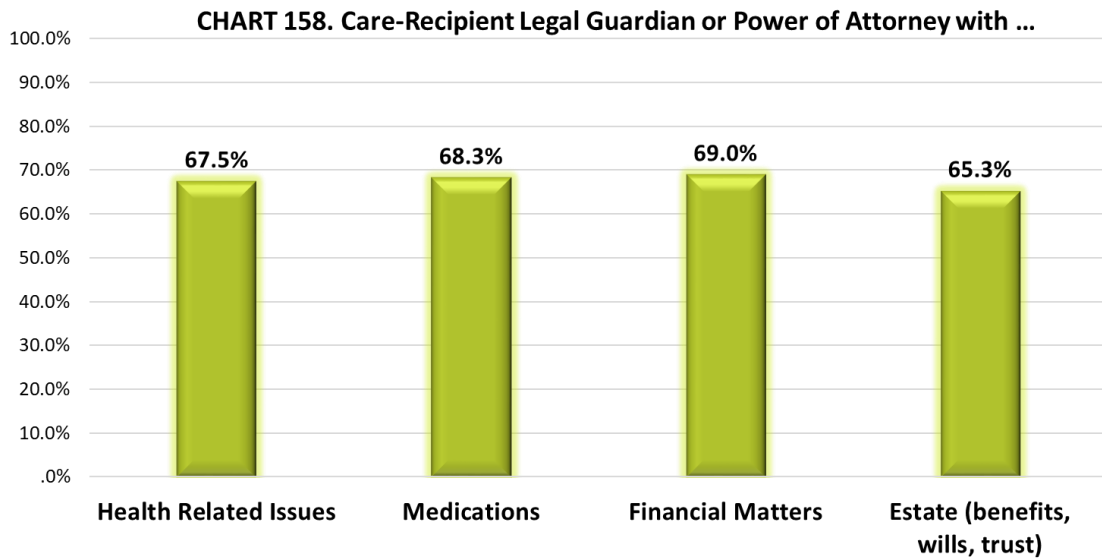
Likewise, most caregivers report that they are somewhat, quite or very satisfied with the support they get from others (82.8%), ([Chart 156](#)).



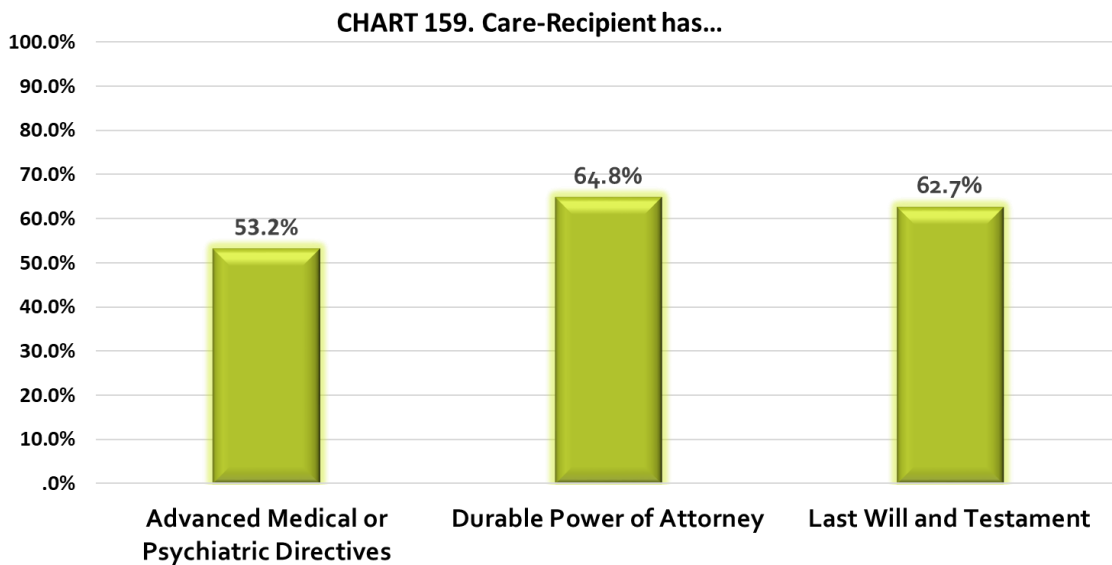
33. Caregiver Perceived Stigma: Caregivers were asked if they were embarrassed over behaviors of the care-recipient; if they were uncomfortable having friends at home with the loved one; if they were anxious about taking the care-recipient to public places, or if they were not willing to let others know about the care-recipient. The overall “stigma” index indicates a low to moderate level of stigma among caregivers (mean = 5.6), ([Chart 157](#)).



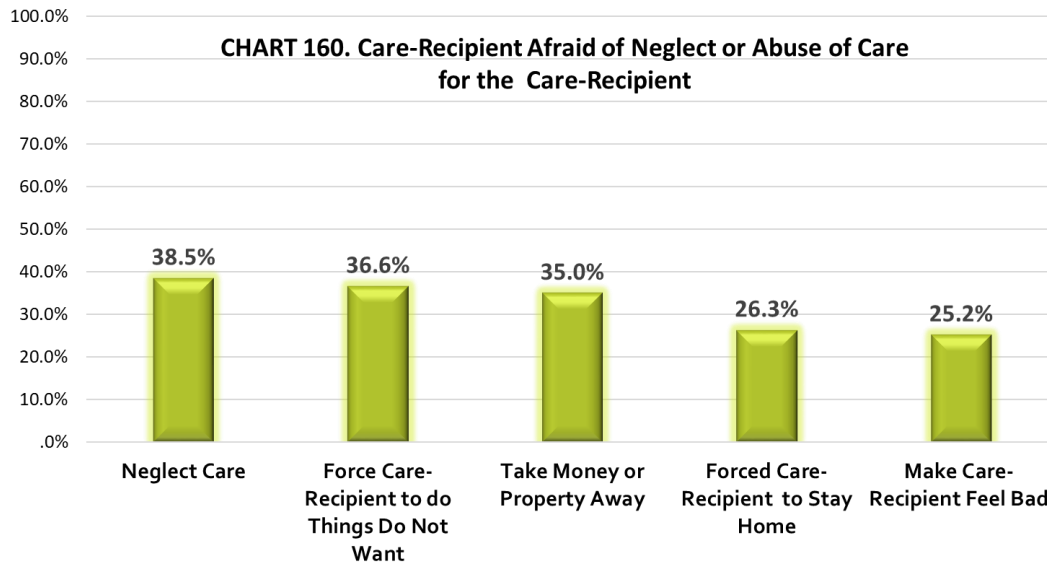
34. Care Planning: Caregivers reported on medical and financial advance planning tools for their care-recipients. Most caregivers indicated that their loved one has a legal guardian or power of appointment for health related issues (67.5%), medications (68.3%), financial issues (69%), and to manage their estate (65.3%), ([Chart 158](#)).



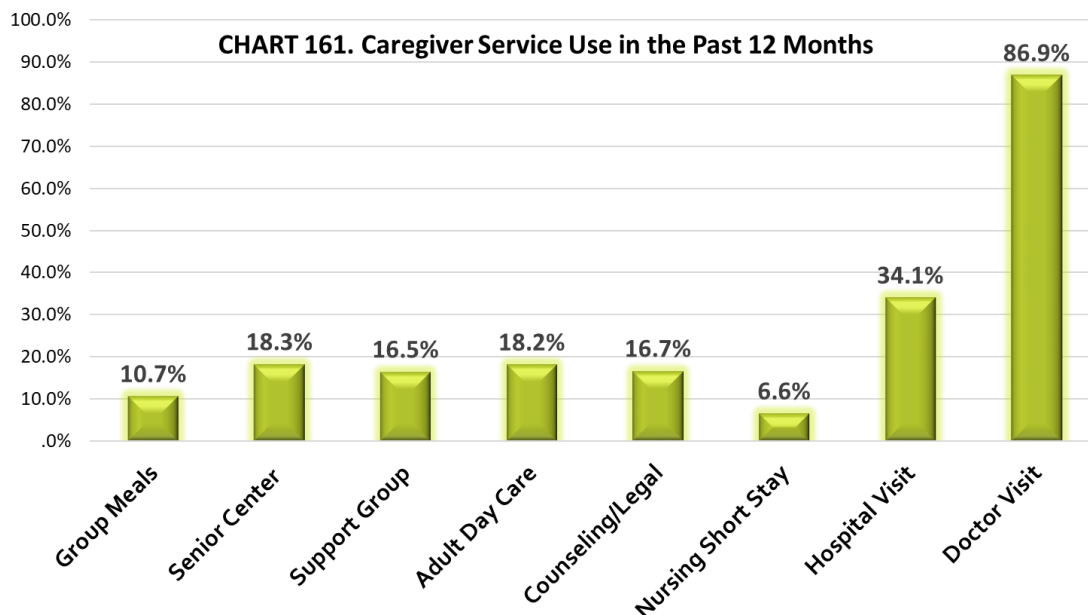
Additionally, caregivers also indicated if the person they care for has an Advance Medical or Psychiatric Directive (53.2%), Durable Power of Attorney (64.8%), and a Last Will and Testament (62.7%), ([Chart 159](#)).



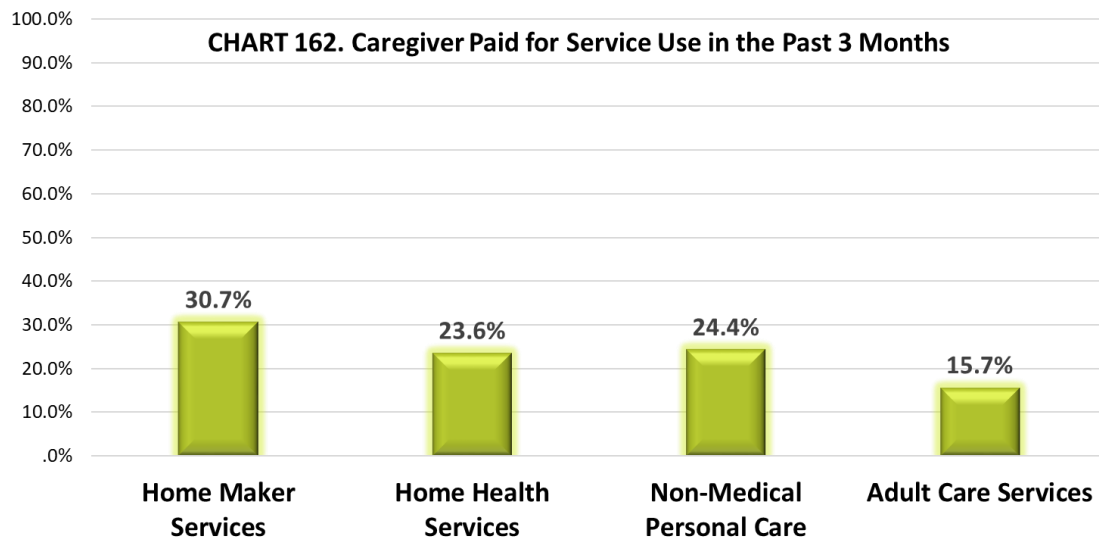
35. Perceived Neglect or Abuse: Caregivers rate their perceived risk of anyone providing help to their loved ones. The items in the scale are: neglecting care for the care-recipient (38.5%), trying to force them to do things that did not want (36.6%), taking money away without permission (35%), and making the care-recipient to feel bad, 25.2%), ([Chart 160](#)).



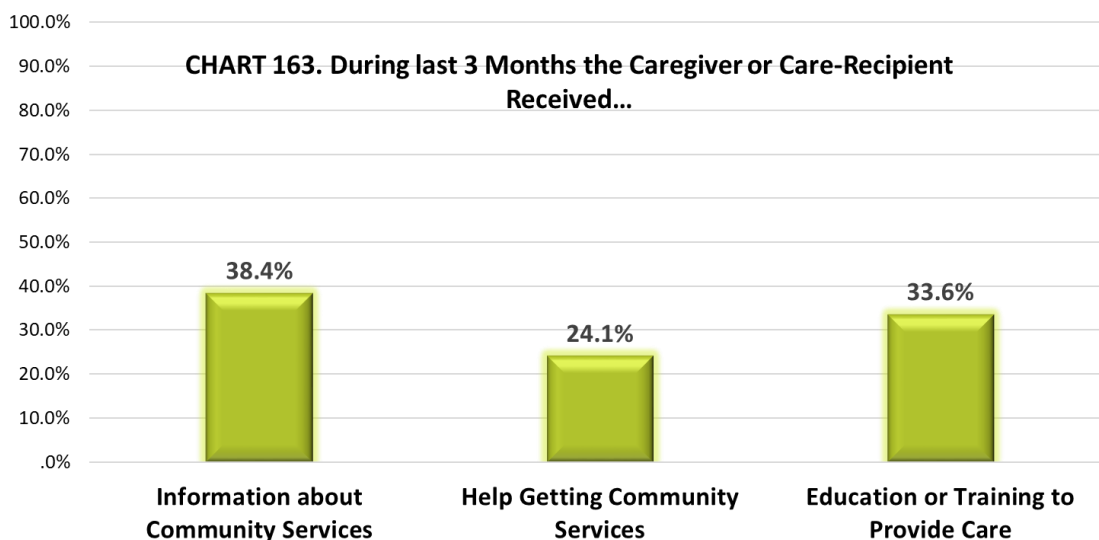
36. Caregiver service Use: Caregivers reported their frequency of use of medical and community services for the past 12 months. Most of them visited the doctor (86.9%) and a few a Hospital emergency room (34.1%). However, use of community services was very low ranging from Senior Centers and Adult Day Care (18%) to short nursing care (6.6%), ([Chart 161](#)).



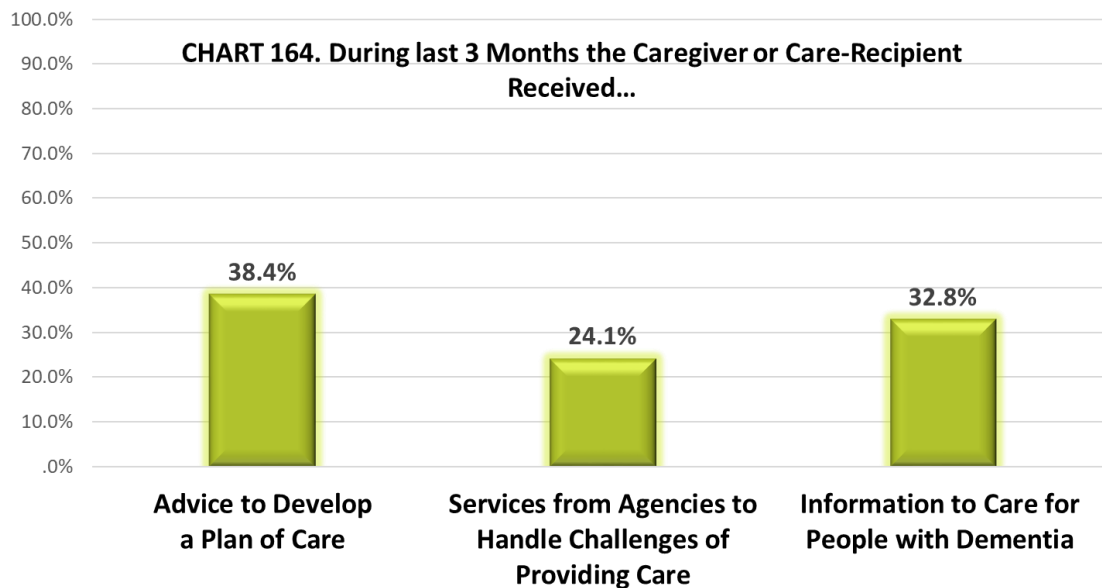
Caregivers reported low levels of use of paid services (in the past months) regarding homemaker services (30.7%), home health services (23.6%), non-medical personal care (24.4%), and adult day care services (15.7%), ([Chart 162](#)).



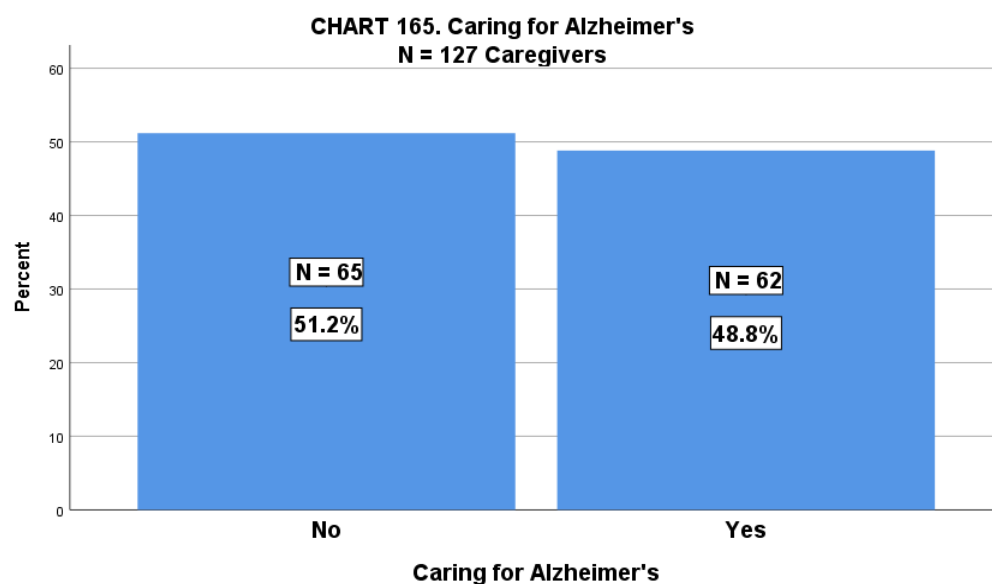
Caregivers also reported low levels of support from community services regarding information about community services (38.4%), help getting community services (24.1%) or education and training help to provide care (33.6%), ([Chart 163](#)).



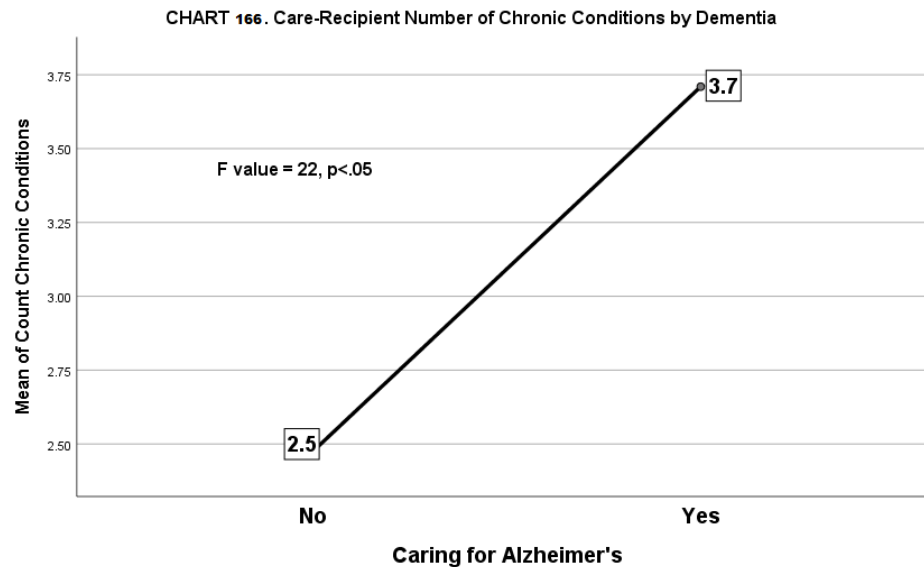
Additionally, over one-third of caregivers indicated that they had received advice to develop a plan of care for their care-recipient (38.4), information to care for people with Alzheimer’s or dementia (32.8%), and fewer caregivers reported obtaining services from community agencies to help them to handle challenges of caregiving (24.1%), ([Chart 164](#)).



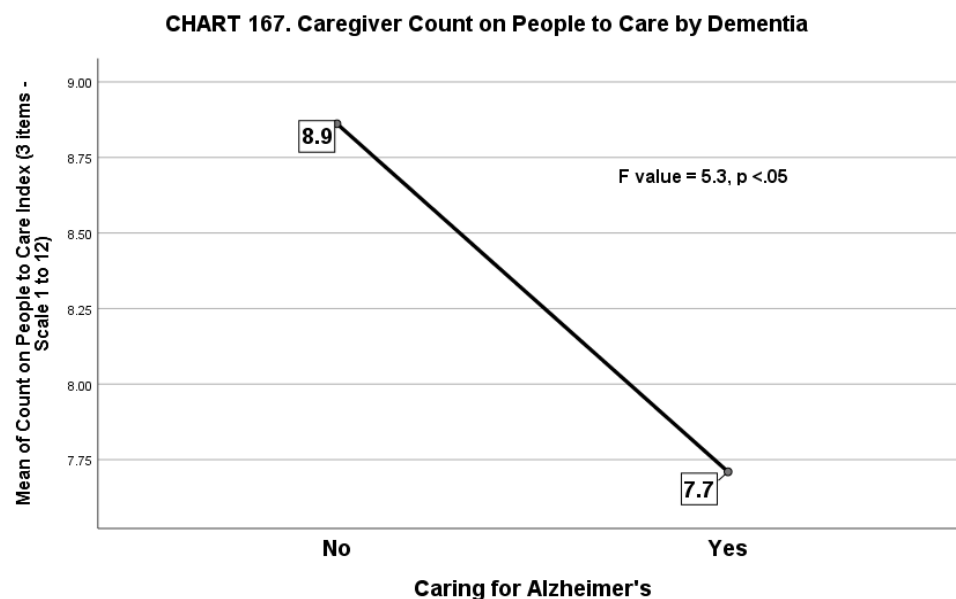
37. Caregivers for people with Alzheimer’s and Dementia: This section compares on selected characteristics and care outcomes on dementia caregivers with caregivers for people with other disabilities or chronic conditions. Our sample of caregivers (N = 127) includes 62 caregivers providing care to people with Alzheimer’s or dementia. Half of the caregivers in the sample reported providing care to loved ones with Alzheimer’s and dementia, ([Chart 165](#)).



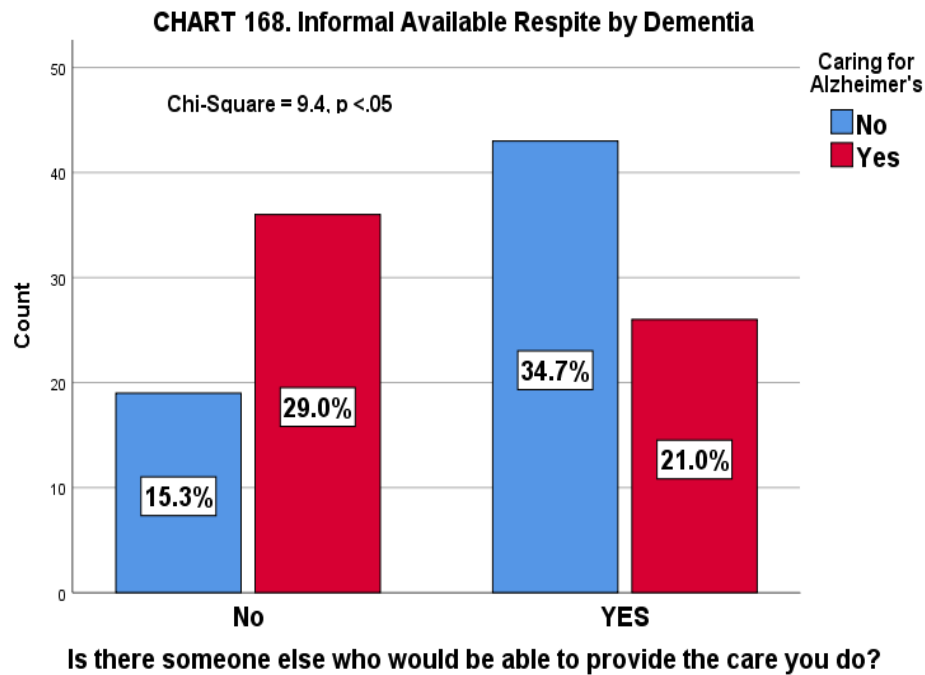
Those caregivers of people with dementia reported that their loved ones have on average higher number of other chronic conditions (3.7) than non-dementia care-recipients (2.3), ([Chart 166](#)).



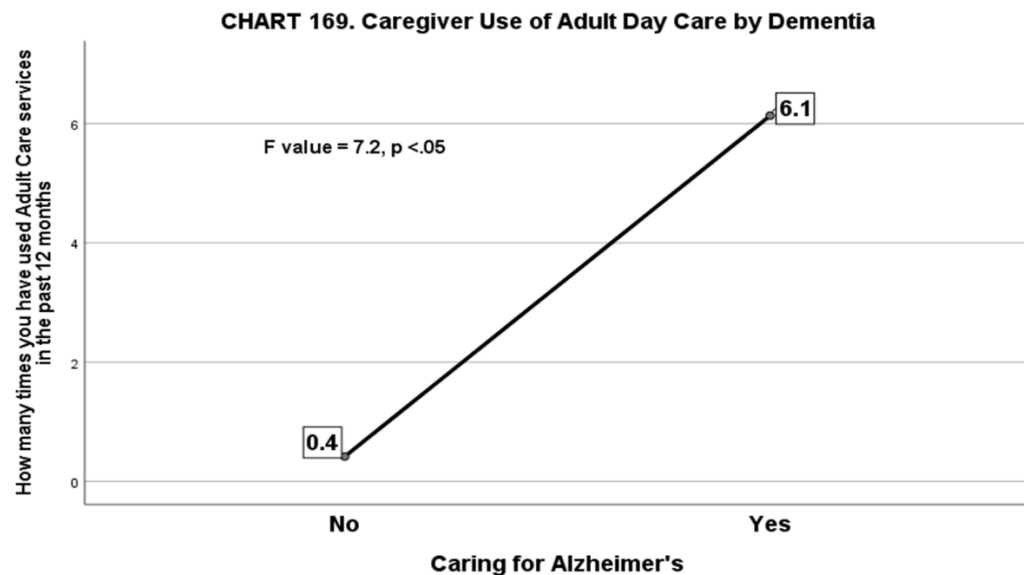
Caregivers of people with dementia also differed significantly from non-dementia caregivers in their level of support in case they needed help from people around them, they needed to talk about their feelings and challenges, or get information to get help. The level of support to count on people was higher for the non-dementia caregivers (8.9) on these three dimensions of help, than the dementia caregivers (7.7), ([Chart 167](#)).



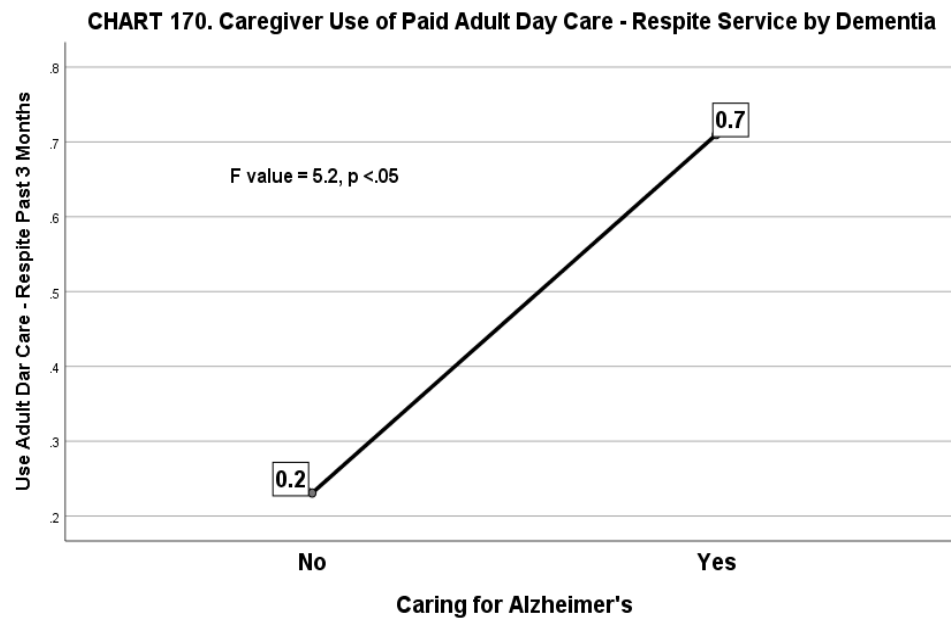
Likewise, availability of informal help with respite was higher for non-dementia caregivers (34.7%), than for dementia caregivers (21%), ([Chart 168](#)).



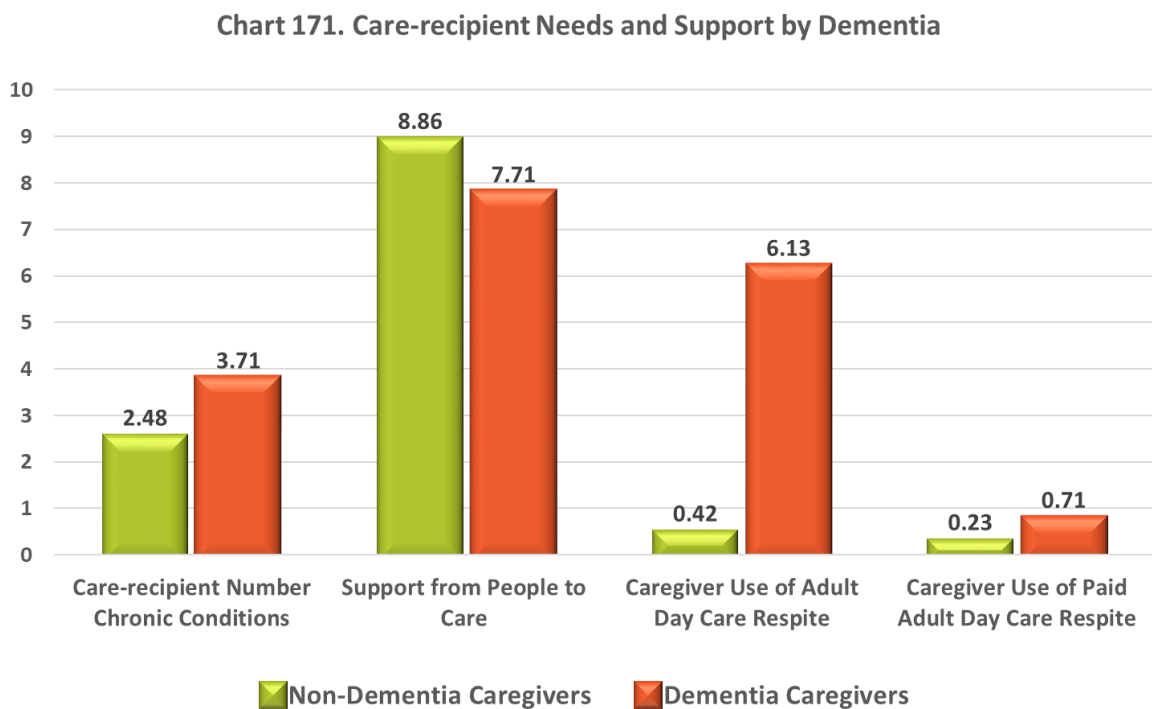
Significant differences among caregiver groups indicate that dementia caregivers use more Adult Day Care services (6.1) than non-dementia caregivers (0.4), ([Chart 169](#)).



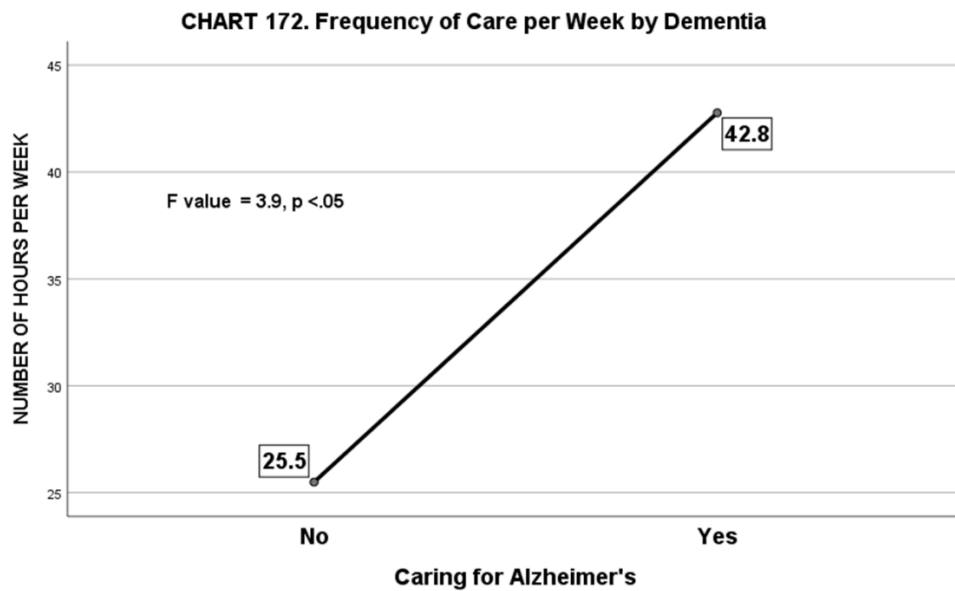
Furthermore, the use of paid Adult Care Respite services is also higher on average among dementia caregivers (0.7), than among non-dementia caregivers (0.2), ([Chart 170](#)).



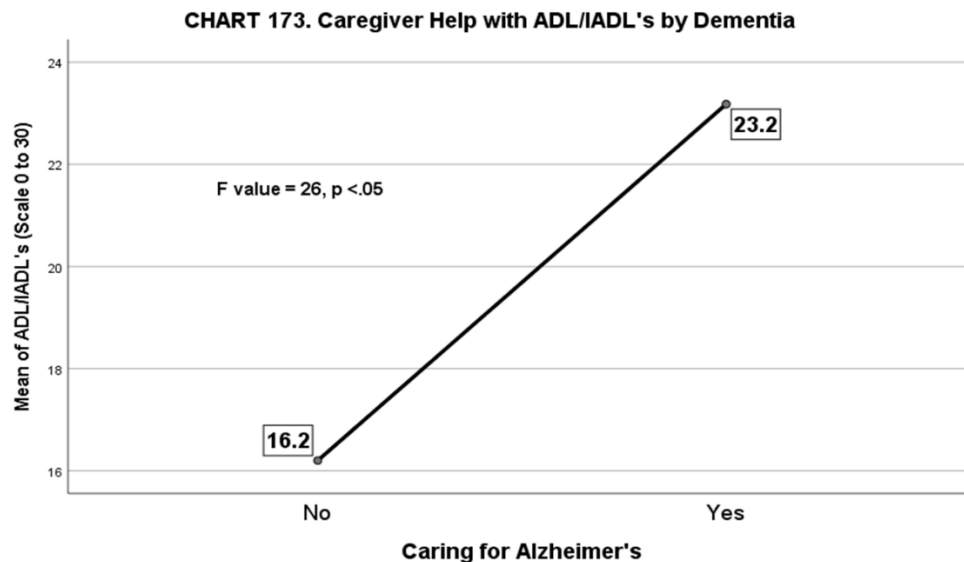
It appears that Dementia caregivers do face important challenges in comparison to non-dementia caregivers related to the higher demands for assistance for their loved ones, and the challenges of getting informal and formal support, ([Chart 171](#)).



Additionally, not surprisingly dementia caregivers reported on average a much higher level of hours of care a week (42.8) than non-dementia caregivers (25.5), ([Chart 172](#)).

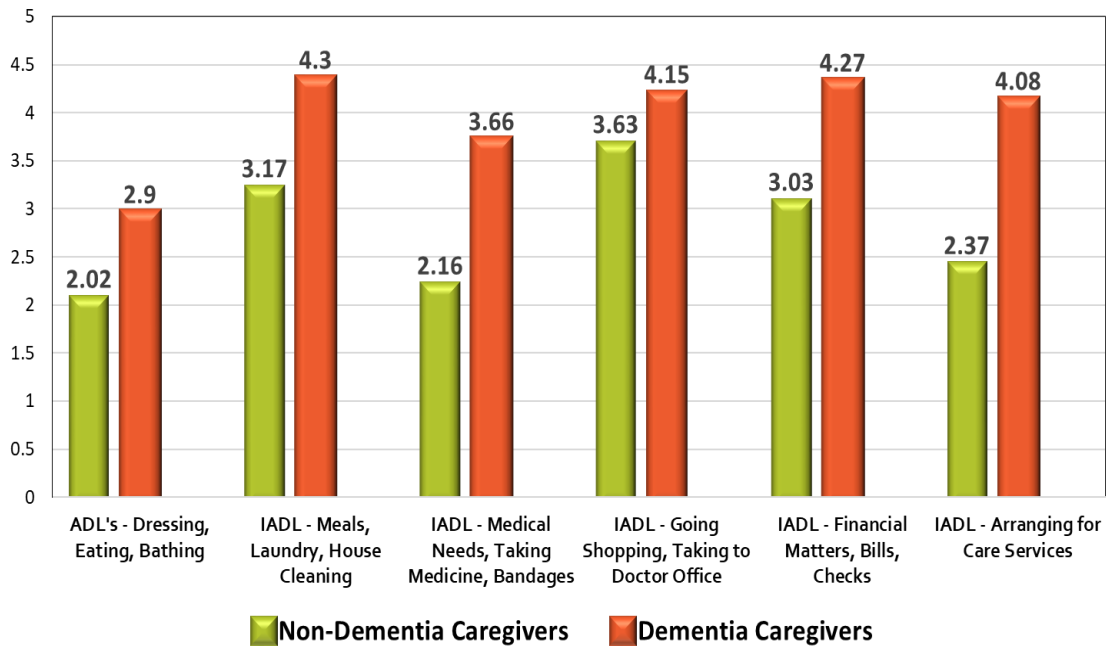


The dementia prognosis of care-recipients impacts the amount of help caregivers provide to them. Dementia caregiver reported on average a higher level of help with activities of daily living (23.2) than non-dementia caregivers (16.2), ([Chart 173](#)).



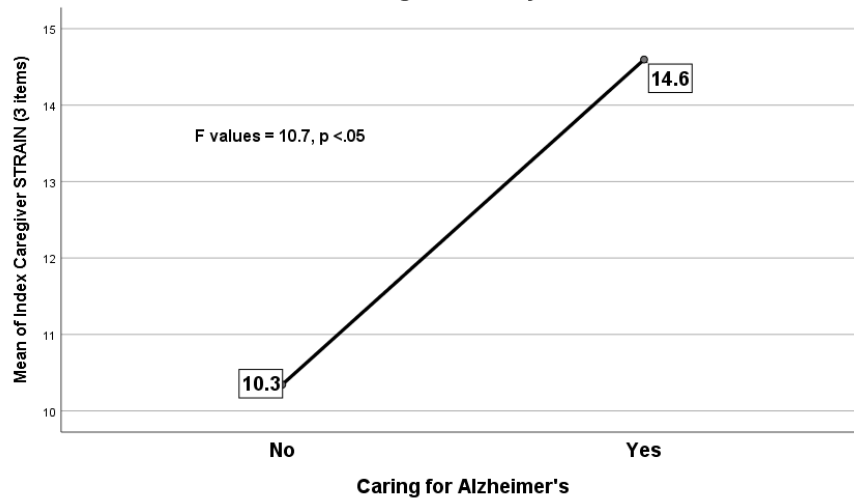
Specifically, caregivers providing care to loved ones with dementia on average assist them at a much higher level than non-dementia caregivers across all the types of needs (personal, financial, cognitive, instrumental, etc.), (Chart 174). All help differences between both caregiver groups are statistically significant.

Chart 174. Caregiver Help with ADL/IADL's Needs of Care-recipient by Dementia

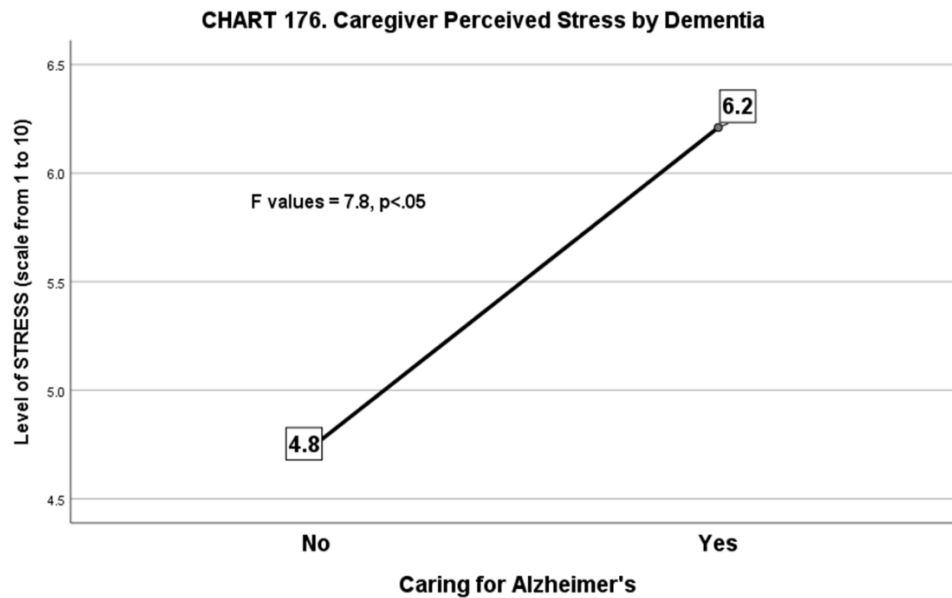


Health Outcomes: Caregiver Strain: Caregivers reported on an index of hardship/strain due to financial hardship, physical strain and emotional stress. Dementia caregivers reported significantly higher levels of caregiving strain (14.6) than non-dementia caregivers did (10.3), (Chart 175).

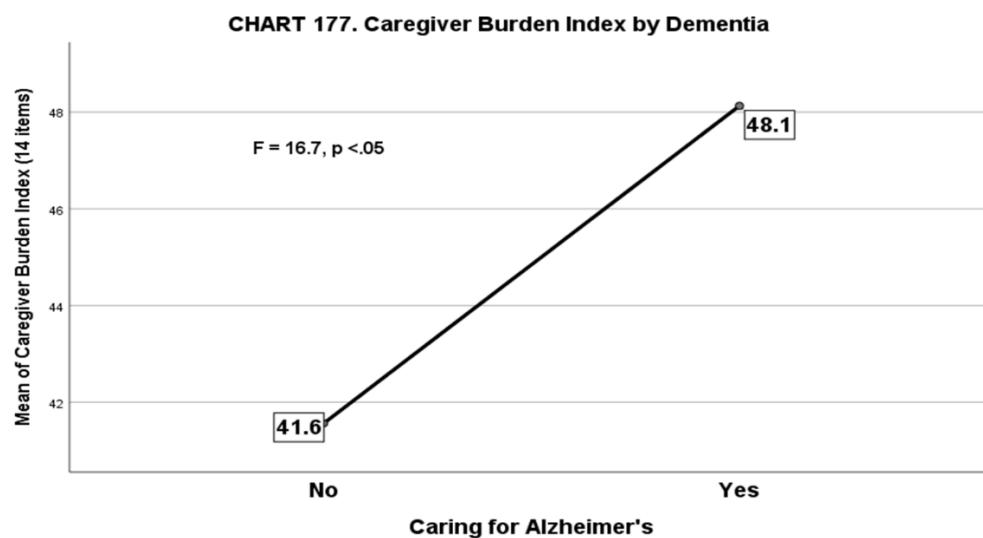
CHART 175. Caregiver Strain by Dementia



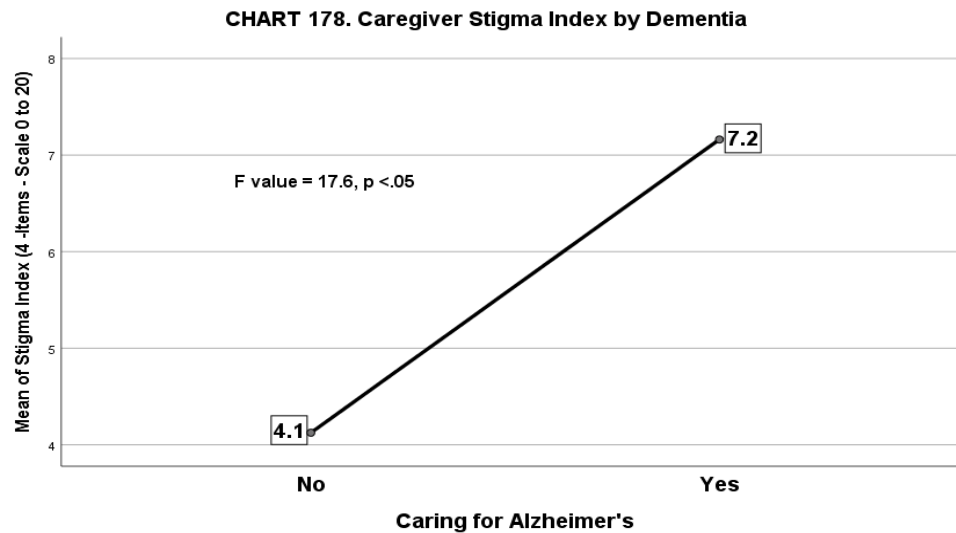
Health Outcomes: Caregiver Perceived Stress: Caregivers reported on their level of perceived stress with a single item (scale from 1 to 10). Dementia caregivers reported a significant higher level of perceived stress (mean = 6.2) than non-dementia caregivers (mean = 4.8), ([Chart 176](#)).



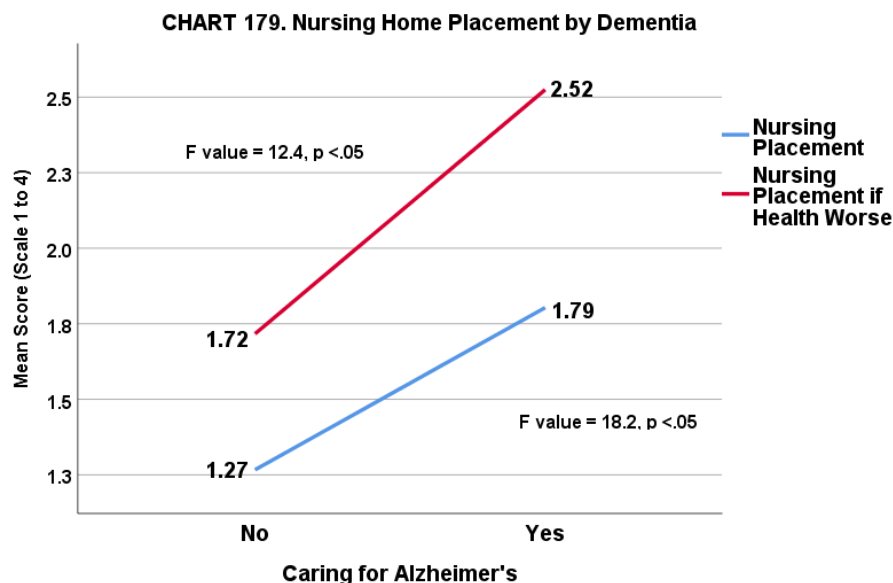
Health Outcomes: Caregiver Burden: Caregivers reported on fourteen items related to three dimension of caregiver burden: changes on the amount of time for themselves, level of tension and perceived caregiving demands. Dementia caregivers reported a significant higher level of perceived burden (mean = 48.1) than non-dementia caregivers (mean = 41.6), ([Chart 177](#)).



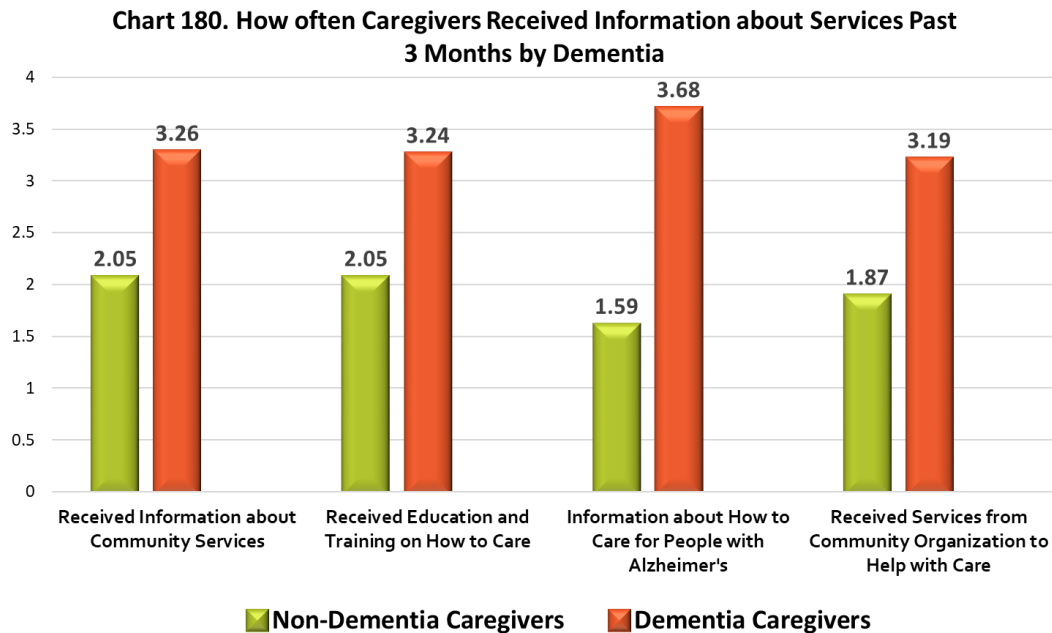
Caregiver Perceived Stigma: Caregivers were asked if they were embarrassed over behaviors of the care-recipient; if they were uncomfortable having friends at home with the loved one; if they were anxious about taking the care-recipient to public places, or if they were not willing to let others know about the care-recipient. Dementia caregivers provided on average significantly higher level on the index of perceived stigma (mean = 7.2) than non-dementia caregivers (mean = 4.1), ([Chart 178](#)).



Intention to Place Care-recipient in Nursing Care: Dementia caregivers reported on average a higher intention to move the person they are caring for into a nursing facility given his/her current health (mean = 1.79) or in the eventuality their health would get worse (mean = 2.52) than non-dementia caregivers (mean = 1.27 and mean = 1.72 respectively), ([Chart 179](#)).



Use of Caregiving Community Services: Dementia caregivers in comparison to non-dementia caregivers indicated a significantly higher level of use of caregiving services available in the community. They received more information about services, more education/training on how to care, more information about caring for people with Alzheimer's, and received more services from community organizations on how to care for their care-recipients, ([Chart 180](#)).



Overview Caregiver Health Outcomes: Dementia Caregivers reported health impacts that are more negative for them than for non-dementia caregivers, ([Chart 181](#)).

