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Factors influencing the non-use of respite services by caregivers of people living with dementia differ according to respite product and by caregiver and care recipient need

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Publication Details

Phillipson, L. & Jones, S. C. (2009). Factors influencing the non-use of respite services by caregivers of people living with dementia differ according to respite product and by caregiver and care recipient need. 8th National Conference of Emerging Researchers in Ageing (p. 5). Melbourne, Australia: Monash University, Medicine, Nursing and Health Sciences.

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Abstract

Abstract presented at the 8th National Conference of Emerging Researchers in Ageing, 23 Oct 2009, Melbourne, Australia

Keywords

factors, influencing, non, respite, services, product, caregivers, according, dementia, living, people, differ, care, caregiver, need, recipient

Disciplines

Education | Social and Behavioral Sciences

Publication Details

Phillipson, L. & Jones, S. C. (2009). Factors influencing the non-use of respite services by caregivers of people living with dementia differ according to respite product and by caregiver and care recipient need. 8th National Conference of Emerging Researchers in Ageing (p. 5). Melbourne, Australia: Monash University, Medicine, Nursing and Health Sciences.

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Factors influencing the non-use of respite services by caregivers of people with dementia differ according to respite product and by caregiver and care recipient need

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Presenter Profile

Lyn Phillipson initially trained as a physiotherapist and also has a Masters in Public Health. She has worked in clinical practice as a physiotherapist, as a health educator, and as a research associate in a population health research centre. She is currently undertaking her doctoral study investigating the factors that influence the non-use of respite services by carers of people with dementia.

Abstract

This paper utilizes Anderson's behavioural model of service use to discuss the various factors associated with the non-use of respite services by carers of people living with dementia, many of whom themselves are aged. The physical and psychological burden of providing care for someone with dementia is well established. Formal services can assist carers to support people with dementia to live at home for longer by providing a break or 'respite' from their responsibilities. Such an outcome is consistent with both community and government preference for older people to remain living in their own homes for as long as possible. However, despite dementia caregivers indicating a need for respite services, their use of such services is often low, and little is known about factors that may be associated with non-use of different types of respite services. In this paper, the results of a critical literature review (inclusive of both qualitative and quantitative papers), reveal that the predisposing, enabling (or disabling) and need factors associated with respite non-use differ according to respite product (i.e. day care or in-home respite services) and are not just the inverse of those factors that have been associated with respite use. Results highlight the need for the evaluation of approaches to supporting respite service use that consider what actions may be required to overcome the specific barriers to the use of particular respite services for both the caregiver and those living with dementia themselves.