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Respite Services for Alzheimer's CareGivers

As the United States population grows, the elderly population will become saturated with baby-boomers, leading to more frequent cases of medical ailments stemming from old age. With an increase in such ailments, care is needed for the older population. Alzheimer's Disease is one of the most frequent medical problems found in the elderly population, but care for Alzheimer's patients is often difficult to obtain because of high costs. Therefore, families of those with Alzheimer's are left with the burden of caring for these patients, without any aid. Many support services for caregivers of those with Alzheimer's Disease exist throughout the United States. These are in the form of governmental programs, programs through non-profit organizations, and programs through other volunteer organizations.

Like Vermont, New Jersey has also recognized the need for alternatives to nursing home care. Jennifer Fisher in an article in the *New Jersey Reporter* (1996) points out that only 11% of New Jersey's 725,000 Medicaid clients are elderly. However, nursing homes were the single most expensive item in the state fiscal 1995 Medicaid budget, totaling more than \$1 billion. Figures such as these have led New Jersey and other states to seek alternatives to nursing home care. Although these problems are recognized there is not a wide range of state-funded solutions.

An article entitled, "TOPS: A Consumer Approach to Alzheimer's Respite Programs" (Phyllis Ehrlich, PhD, LISW and Judith White, MA, RN, 1991), discusses how Ohio has developed a viable support service program. The Ohio Department on Aging and Western Reserve Area Agency on Aging has supported a program known as Time Off Promotes Strength (TOPS). TOPS is a state-supported program that provides trained, professional care for those afflicted with Alzheimer's and other related forms of dementia. The program is structured so that the focus is on the caregiver rather than recipient. The TOPS personnel provide services for a minimum of four hours a day, twice a week. Also, the patient is required to attend day care five hours per week. Transportation is provided at an additional cost. The minimum cost for these services is \$109 per week.

According to an article entitled, "Missouri Service Credit System for Respite Care: An Exploratory Study" (Martha N. Ozawa, PhD and Nancy Morrow-Howell, PhD, 1993), the Missouri Division of Aging has developed a program known as The Older Volunteer Service Bank Program: Credit For Volunteer Time (OVSB). The OVSB provide brief periods (less than six consecutive hours) of respite services for families caring for frail and aged persons. The Division of Aging recruits and trains volunteers over the age of sixty willing to assist with care services. These hours dedicated to volunteer care are recorded and saved by a computer as "credits". These credits can be used at a later date for the personal care of the volunteer, if need be. They also may be given to a family member or someone else in need of care, or donated back to the OVSB to be redistributed to those with the greatest need. This program created in 1984 is still in practice today.

Similar reimbursement programs are offered for those who take care of the afflicted by the Time Dollar Network. Time Dollar operates in twenty-one states and provides volunteer support services to those taking care of patients at the home. In return for their services the volunteers receive "time dollars". Time dollars are stored

in a computer bank, where they can be saved until such time as the volunteer may need the services him or herself. The volunteer also may give the "dollars" to a loved one or back to the bank for those who need them. Additional information about the Time Dollar Network can be found at <http://www.timedollar.org/>.

Some studies have been conducted to establish the effectiveness of these programs. A study conducted by the Veterans Administration Hospital of New Hampshire found that families were pleased with respite services (Ellis, 1983). Another study concluded that caregivers mental, physical and social functioning improved through the use of respite services (Cohen, 1982; Marks, 1987; Scharlach and Frenzel, 1986). The findings of some studies, however, have been less favorable. One such study suggested that re spite services merely delayed the institutionalization of Alzheimer's patients and was less effective in reducing the burden on caregivers. It should be noted that the same study found caregiver satisfaction with the services provided was high (Lawton, Br odey, Saperstein, 1989).

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