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Centre for Program Evaluation | Melbourne Disability Institute

Community Based Research Scheme – Melbourne Disability Institute

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Pathways for Carers: No-one can do it alone

Maroondah City Council

Contact Details

Anthea Rutter  
Lead Evaluator, Centre for Program Evaluation  
Graduate School of Education  
The University of Melbourne

**Phone:** +61 3 8344 6304

**Email:** [asrutter@unimelb.edu.au](about:blank)

**Mobile:** 0417 569 649

Kate Collier  
Student Researcher   
Centre for Program Evaluation  
Graduate School of Education, The University of Melbourne

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# Acknowledgements

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# Executive Summary

# Context

This project was conducted and funded through the Melbourne Disability Institute Community-Based Research scheme. The scheme is designed to build the evidence in the disability sector, by linking community organisations to researchers at The University of Melbourne. The evaluation team was from the Centre for Program Evaluation.

1. Introduction

Pathways for Carers[[1]](#footnote-1) began in 2015 in response to a need for carers to learn more about news, services and supports available in their community. The Pathways for Carers program is an evolving community development initiative that aims to improve the health and wellbeing of carers within the City of Maroondah. Pathways for Carers combines the physical and mental health benefits of social group walking, with the direct delivery of targeted messages from providers on an informal platform.

1. Purpose of the Evaluation

The focus of the evaluation is to understand what key stakeholders think is the value of Pathways for Carers. Of particular interest is the views of participants and any benefits they feel come from participating in the program.

Two methods were undertaken to obtain the data necessary for this evaluation:

1. Online Survey

This survey was circulated to all stakeholders on the carer distribution list held by Maroondah City Council. It sought to understand who the carers were, their level of engagement and some early information about their views on the project. This provided quantitative data and the findings were analysed and used to structure the guiding questions for interviews.

1. Semi-structured interviews

Based on the findings from the online survey, a small sample of stakeholders were selected for in-depth interviews to explain and elaborate on initial findings. The results from these interviews were displayed on a matrix and a thematic analysis was developed from the data.

1. Results
   1. Introduction

The data obtained from the online survey and the qualitative interviews was displayed and analysed. Qualitative data was prioritised in answering the evaluation questions, given the need to hear from carers about their experience with the project, and for practical considerations given the limited resources available for the evaluation.

* 1. Online Survey

A total of 34 valid survey results were obtained through the online survey platform (see Appendix 2 for full results). This included responses from 29 project participants and 5 business/community organisations (only 4 of which had participated in a walk). We believe anecdotally that there are around 150 carers on the Maroondah Council database, which gives us a 23% return rate.

* 1. Qualitative Interviews – by zoom

Eight carers were interviewed by zoom as well as two community organisations. The two community organisations interviewed were from EACH Mental Health, (A carers and mental health organisation, and Uniting.

* 1. Responses to Key Evaluation Questions

**Key Question 1. To What extent are carers being reached as intended?**

Survey data indicates that the Maroondah Council newsletter is one of the main sources of information on Pathways for Carers walks. Other sources include social media or via Carers Victoria. However in interviews, carers indicated that the majority of them heard about Pathways through the Lead Carer. It was also clear that there are a large number of hard to reach carers who would benefit from Pathways, but for a number of reasons are unable or unwilling to connect with the program

**Key Question 2. What evidence is there that the project is being implemented as intended?**

The beauty of the Pathways for Carers program lies in its simplicity. It comprises an hour’s walk in bushland where carers can talk with each other on matters of importance to them, without the formality of a face to face meeting. Of course the choice is theirs to also walk on their own if they desire. A guest speaker also goes on the walks and carers are encouraged to bring up any issues or questions. A coffee at the end of the walk and a short presentation by the day’s speaker allows for more questions from carers.

The data from the survey supports the thoughts expressed in the interviews. Both sources endorsed the value of walking in nature and the physical and mental benefit which this brings; the knowledge transfer as well as the emotional support provided to participants.

**Key Question 3. What are the participant perceptions of the project, including its strengths and** **weaknesses?**

The data from both the survey and the qualitative interviews echoed the positive and restorative nature of the Pathways walks. The program has a number of strengths as seen from a carer’s perspective:

* Social connectedness, improvement in mental health and practical advice: *“On a carers walk its great in a social situation, and to get some practical tips. How to go about organising things for people with disabilities. The discussion that follows the walk is good, also talking to people on the walk. Learning how to do things by the book and getting practical tips from a range of providers.”* (carer)
* Peer support offered by the other walkers: *“There are people dealing with the same issues that you are. Also learning about other support services. There is also no pressure to commit, so you don’t feel guilty if you cannot turn up.”* (carer)
* Sharing of ideas,
* The safe nature of the conversations.

A number of weaknesses were articulated by the carers interviewed:

* The lack of a permanent agency presence who could offer professional assistance if a carer becomes upset during the walk. Clearly assistance would be given by other carers and community organisations (if present), but not having a permanent agency coming on each walk was perceived as a weakness.
  + *“I feel that is a massive gap – which was filled when Uniting(community agency) ran the walks”*
* Reliance on Lead Carers. Organising the walks was not seen as onerous by the Lead Carers, but the emotional energy required during the walks can be draining.
* The day or the time of the walk did not suit some carers
* Having no permanent arrangement to fund the morning tea. Having a free coffee was considered an important part of valuing the carers and removes an additional barrier for any carers who are financially constrained.

**Key Question 4. What benefits do the stakeholders believe is obtained from the Pathways for Carers Initiative?**

For carers the benefits are:

* The connections made and the ability to “vent” one’s frustrations: “*Pathways is a good place to vent, as they understand where you are coming from – also a safe space. For new carers it normalises the situation, so you realise that others have the same experiences*.”(carer)  
  “*The value is the connection – finding out about information from the guest speaker, also other information sources from other carers*.” (carer)
* The guest walker, not only for the information and resources supplied, but because they have listened to the carer: “*They have shared their information with you. This has the effect of also feeling validated, because they have listened to you and understand your situation*.”(carer).
* New knowledge. As one carer commented, ”*there has never been a guest speaker where I have not learnt something*”.
* The comforting and supportive experience. Even though one of the carers admitted to feelings of anxiety before a walk, it was always a positive experience: “*Very comforting when you get to the walk – great people – sometimes you feel a bit anxious and wonder if you should go – then you go and its good. Also having a representative from the Council is fantastic*” (Carer)

For community organisations involved in the Pathways walks the perceived benefits are:

* An opportunity to share resources with carers and to offer support. “*We will participate in the walk and talk to a carer who is having a tough time and give support. We are mindful and respectful of the agency or service who come as a guest walker – they have the spotlight. We are there as a backup*,”
* An opportunity to identify carers who need support and help them access the NDIS and other services. The walks offer an ideal opportunity for these agencies to seek out those who need help, and then link them into appropriate services. The National Disability Insurance Service Transition Coordinator is employed by the City of Maroondah and goes on all of the walks. She provides a vital link between carers and other community services.

**Impact on the Carers**

Not only are there benefits of the Pathways walks on carers, there are a number of impacts on the carers themselves which for some, provide a profound change to their lives. The following comments incapsulate the value of Pathways for the Carers involved:

By the nature of their role, carers often put themselves last. In their busy and usually complex lives, their own welfare is often forgotten as their caring role takes president over other activities:

*“For me the walks have been a life-saver” (Carer)*

*“The discussion that follows the walk is good, also talking to people on the walk. Get ideas how to self-manage the funding from the government, getting access to companion cards etc. Learning how to do things by the book and getting practical tips from a range of provide”. (Carer)*

*“Good for my mental health. Not just exercise, good breathing space, fresh air and the bush -almost instantaneous relief!” (carer)*

For some carers, the importance of being able to link into services was a vital part of the Pathways experience:

*“Pathways helped me to understand what to ask for from the NDIS- so now I have a good package for my child! (carer)*

*“Opportunity to hear other people’s stories and how they are coping – also listening to guest speakers and getting knowledge on services in the area which could be useful. Realisation that you are not alone!” (carer)*

In summary, the Pathways walks have a capacity for the carers involved for self-actualisation as they are able to tap into resources and benefits which empower them to be able to make a difference in their lives. The walks present a perfect opportunity for the carer seeking social and peer support, as well as information on services at a local, state and federal level.

**Key Question 5. What changes could be made to improve the program?**

* Date and time of walks: Survey data indicated that changes could be considered around the actual day or timing of the walks.
* Finding time to be safely away from the person they care for is often difficult. Whether respite options could be explored depends on the future funding of the program.
* Location: Data from both the survey as well the interviews showed strong agreement from participants that the walks should be in bushland rather than in suburban streets.
* **Duration of walks**: Some carers indicated that they would prefer the walks to go on for longer. others noted it is also important to respect the time that carers have to give for Pathways, as well as the differing levels of fitness of the carers. **Online support group**: A couple of carers and one of the community organisations talked about forming an online support group for carers.

1. Summary of Results

Although this evaluation has been limited in its scope, there are a number of comments that can be made when drawing the evaluation results together.

One of the main strengths of the Pathways program is its simplicity. A simple walk in nature combined with a safe environment in which to raise any issues of concern.

This then leads to the issue of sustainability. The financial cost of the program is minimal, although the emotional cost can be overwhelming for the Lead Carer, as that role carries the greatest burden. In order for the program to be sustainable, the involvement of the City of Maroondah is crucial for support and guidance.

The role of the Lead Carer is an important one, as it is the glue which keeps the group together. It also has the potential of being a stressful role which requires emotional energy at times when responding to carers’ needs. Owing to the importance of this role a training program should be initiated to train other potential Lead Carers to transition into the role, so that the continuity of the walks is preserved.

One of the gaps identified in the program was the lack of a permanent carer support agency whose skills could be called on if a carer exhibited any feelings of stress or anxiety during the walk. This was part of the role of the inaugural support agency, Uniting, and this role has been taken on by other agencies during the implementation of the program.

There are 150 carers on the database for the Pathways program, although anecdotally there are many more carers in the Maroondah council area. Comments from carers in the Pathways program have indicated that there are many in the community who either lack the self-confidence to attend the walks or are unable to join because of caring responsibilities. Efforts should be made to encourage carers to join the Pathways program.

Both carers and community organisations suggested that an online support group could be formed to provide a further avenue for carers to connect with each other. This might also attract carers who hitherto have been reluctant to join the program. The online group could also suggest other activities that could be run in addition to the monthly walks.

1. Conclusions and Recommendations

The essence of the Pathways for Carers – the simple walk in nature - should be preserved as it provides a supportive environment for carers to connect with each other. Not only are the walks supportive they are an important avenue for the Carer to be able to access support and services to assist them in their lives. Although the program requires limited funding to operate successfully, sponsorship of the morning teas on an ongoing basis is important in terms of celebrating and valuing the carers and guests on the walk.

The support of Maroondah City Council and the staff it provides to enhance the experience of carers is a vital element attributing to the success of the program. The Lead Carers on the walks provide support to the carers present as well as organising the guest speakers for the walks.

**Recommendations:**

The following recommendations are suggested for the Pathways for Carers program:

* Ongoing sponsorship is recommended for morning teas for the program
* The support of Maroondah City Council and the staff it provides to enhance the experience of carers is a vital element attributing to the success of the program.
* Train backup Lead Carers to ensure continuity of the program
* An online carer support group to connect carers as well as those carers who are reluctant to join a walk.
* Ensure that an on-going presence of a carer support agency is available for all walks to offer advice and be available if a carer becomes distressed.

# Context

**The University of Melbourne**

The University of Melbourne has over 160-years of history of leadership in research, innovation, teaching and learning. It is the highest-ranked research university in Australia. Our researchers are at the forefront of international scholarship in a diverse range of fields.

**Melbourne Disability Institute**

The Melbourne Disability Institute (MDI) is an interdisciplinary research institute that was established by the University of Melbourne in 2018 to build a collaborative, interdisciplinary and translational research program to improve the lives of people with disability. Ultimately, the MDI research program aims to capitalise on national reforms and active partnerships with the disability sector to deliver evidence for transformation. The MDI research program is centred around providing much-needed evidence for the disability sector and broader community to address the complex problems facing people with disability, their families and carers.

**Centre for Program Evaluation**

The Centre for Program Evaluation (CPE) undertakes evaluations and research projects for government departments, non-government organisations and community-based agencies across a wide range of policy and program areas but particularly in the areas of education, health, the arts, social wellbeing and the community. Staff members are skilled in the use of widely known, as well as current, emerging and innovative evaluation theory, techniques, and practice, all of which aim to enhance client and stakeholder collaboration and increase the utilisation of evaluation findings.

**Community Based Research Scheme**

This project was conducted and funded through the Melbourne Disability Institute Community-Based Research scheme. The scheme is designed to build the evidence in the disability sector, by linking community organisations to researchers at The University of Melbourne. Projects funded through the scheme include small-medium projects suggested by community-based organisations that build social capital and improve lives of people with disability, their families or carers. The community-based research scheme is intended to support research and evaluation of innovative ideas that build social capital; to share good practice; and to replicate or scale up ideas.

1. Introduction

Pathways for Carers[[2]](#footnote-2) began in 2015 in response to a need for carers to learn more about news, services and supports available in their community. The Pathways for Carers program is an evolving community development initiative that aims to improve the health and wellbeing of carers within the City of Maroondah. It is noted that this program operates in four other council areas in the eastern region of Melbourne. However this report refers to the Pathways for Carers program in the City of Maroondah. (*N.B*. *Due to a successful grant being obtained, this program will now be extended throughout Victoria).*

Pathways for Carers combines the physical and mental health benefits of social group walking, with the direct delivery of targeted messages from providers on an informal platform. Pathways for Carers provides carers an opportunity to learn more about news, services, and support within their communities, with the ultimate goal of increasing social connections and support for carers.

More specifically the purpose of Pathways for Carers is to:

* Provide carers a free opportunity to have a break, connect with nature and enhance mental health and wellbeing through walking and talking;
* Provide opportunities for carers to connect and learn from each other’s experiences on the walk and during morning tea;
* Provide opportunities for carers to receive and share information, resources and supports to prepare and participate in the National Disability Insurance Scheme (NDIS) and to connect to the local community in a fair and equitable environment;
* To increase the capacity of service providers and Council to engage with carers in a relaxed environment, ensuring the carers’ voices are heard and valued in the community;
* Provide an online platform for carers to interact and keep informed about walks and events, and to cross promote services and create an online peer community;
* Provide carers with the opportunity to have one on one time with guest walkers and peers in a safe and relaxed environment.

1. Purpose of the Evaluation

The focus of the evaluation is to understand what key stakeholders think is the value of Pathways for Carers. Of particular interest is the views of participants and any benefits they feel come from participating in the program. As well as looking at the delivery of the program, the evaluation will determine the effectiveness and impact of the experience for project stakeholders. The Maroondah City Council will use the outcomes of this project to further improve and develop Pathways for Carers, particularly as it is rolled out to other parts of Victoria.

1. Methodology
   1. The Project

The Pathways for Carers project is facilitated and supported by the following key stakeholders:

* One primary Community Development Officer from the Maroondah City Council
* Two lead carers who plan and facilitate each walk (in Maroondah twice a month on a Tuesday and a Saturday)
* Although the exact number of carers is unknown for individual walks, it is estimated around 30 carers participate in each walk.

Evaluation Approach

There is currently a limited understand of Pathways for Carers’ reach, and there has not been any formal assessment of participant experiences to date. This evaluation will therefore seek to establish a broad level of understanding of the initiative, its reach, and the experience of participants.

Two methods were undertaken to obtain the data necessary for this evaluation:

1. Online Survey

This survey was circulated to all stakeholders on the carer distribution list held by Maroondah City Council. It sought to understand who the carers were, their level of engagement and some early information about their views on the project. This provided quantitative data and the findings were analysed and used to structure the guiding questions for interviews.

1. Semi-structured interviews

Based on the findings from the online survey, a small sample of stakeholders were selected for in-depth interviews to explain and elaborate on initial findings. The results from these interviews were displayed on a matrix and a thematic analysis was developed from the data.

* 1. Program Logic and Theory-Based Evaluation

Three key stakeholders participated in the program logic exercise on 30 October 2019; including a representative from the Council and a lead carer. Scheduling conflicts made it challenging for more stakeholders to attend. The draft program logic produced through this session is presented in Appendix 1.

A program logic model, or outcome model, outlines what the program will do and how it will do it. It is a visual representation of the underlying program theory, depicting the sequence of steps by which the intended outcomes will be achieved (Owen, 2006). A program logic model is developed by collecting data from stakeholders about their vision for the project, their inputs, activities and perceived outcomes, and the factors that enable or act as barriers to the program. However, a thorough understanding of program aims, objectives, inputs, processes, outputs and outcomes are essential to enable the evaluation team to effectively measure and describe the progress of an initiative, as well as make recommendations to support its ongoing development.

* 1. Impact Assessment

The evaluation will look at the impact of Pathways for Carers on participants. The outcomes of this evaluation will hopefully assist Maroondah City Council to make improvements to the program and guide the expansion of the program to other parts of Victoria.

The following evaluation questions have been developed for this evaluation:

* To what extent are carers being reached as intended?
* What evidence is there that the project is being implemented as intended?
* What are the participant perceptions of the project, including its strengths and weaknesses?
* What benefits do the stakeholders believe is obtained from Pathways for Carers?
* What changes could be made to improve the program?

1. Results
   1. Introduction

The data obtained from the online survey and the qualitative interviews was displayed and analysed. Qualitative data was prioritised in answering the evaluation questions, given the need to hear from carers about their experience with the project, and for practical considerations given the limited resources available for the evaluation. Prioritising qualitative data will allow the participant voice and perspective to unpack the information presented in the survey findings. The reasons for collecting both quantitative and qualitative data is to leverage the two forms of data to bring greater insight about the project than would be obtained through using either method individually. It is stressed that the data collected from the survey and the interviews was limited in nature, therefore the conclusions can be regarded as indicative rather than absolute.

* 1. Online Survey

A total of 34 valid survey results were obtained through the online survey platform (see Appendix 2 for full results). This included responses from 29 project participants and 5 business/community organisations (only 4 of which had participated in a walk). We believe anecdotally that there are around 150 carers on the Maroondah Council database, which gives us a 23% return rate.

* 1. Qualitative Interviews – by zoom

Eight carers were interviewed by zoom as well as two community organisations. The two community organisations interviewed were from EACH Mental Health, (A carers and mental health organisation, and Uniting. Uniting, (when it was Uniting Life Assist), were present at the inauguration of the Pathways walks. They came to each of the walks and were available for the carers to talk to, and Uniting funded the morning tea. EACH Mental Health participate in the Pathways walks across the Eastern Suburbs; they do not attend the Maroondah walks each time. While we cannot expect that the results from eight carers is definitive, they provided data which can be explored in a larger survey.

* 1. Responses to Key Evaluation Questions

**Key Question 1. To What extent are carers being reached as intended?**

Survey data indicates that the Maroondah Council newsletter is one of the main sources of information on Pathways for Carers walks. Other sources include social media or via Carers Victoria. However in interviews, carers indicated that the majority of them heard about Pathways through the Lead Carer. It was also clear that there are a large number of hard to reach carers who would benefit from Pathways, but for a number of reasons are unable or unwilling to connect with the program. This may be because of the onerous nature of their caring responsibilities; lack of knowledge of the program or a lack of self-esteem and confidence to go the extra step and connect with Pathways.

**Key Question 2. What evidence is there that the project is being implemented as intended?**

The beauty of the Pathways for Carers program lies in its simplicity. It comprises an hour’s walk in bushland where carers can talk with each other on matters of importance to them, without the formality of a face to face meeting. Of course the choice is theirs to also walk on their own if they desire. A guest speaker also goes on the walks and carers are encouraged to bring up any issues or questions. A coffee at the end of the walk and a short presentation by the day’s speaker allows for more questions from carers. There are no sign on sheets or other commitments expected from the carers, including no cost. Survey and interview data indicates that the walks are being implemented as was originally intended.

“*Our philosophy was about having a safe place, no detailed records, sign on sheets, no need to justify yourself*.” (Carer)

The original intention of Pathways for Carers was to have a carer organisation involved, so that they could follow-up where required. Uniting filled that role originally, although funding ran out and they left several years ago. Other agencies have filled that gap, but not on a permanent basis.

When the program commenced, the guest speakers were mainly connected to services, i.e. mental health or disability. Lately services for carers themselves, i.e. yoga and outdoor adventures have been introduced. There is also a cross fertilisation of ideas occurring between service providers and guest walkers:

“*Some service providers attend to learn about the guest walkers so they can take the information back to their groups/families*.” (Carer)

The data from the survey supports the thoughts expressed in the interviews. Both sources endorsed the value of walking in nature and the physical and mental benefit which this brings; the knowledge transfer as well as the emotional support provided to participants.

**Key Question 3. What are the participant perceptions of the project, including its strengths and** **weaknesses?**

The data from both the survey and the qualitative interviews echoed the positive and restorative nature of the Pathways walks. The program has a number of strengths as seen from a carer’s perspective:

* Social connectedness, improvement in mental health and practical advice: *“On a carers walk its great in a social situation, and to get some practical tips. How to go about organising things for people with disabilities. The discussion that follows the walk is good, also talking to people on the walk. Learning how to do things by the book and getting practical tips from a range of providers.”* (carer)
* Peer support offered by the other walkers: *“There are people dealing with the same issues that you are. Also learning about other support services. There is also no pressure to commit, so you don’t feel guilty if you cannot turn up.”* (carer)
* Sharing of ideas,
* The safe nature of the conversations.

A number of weaknesses were articulated by the carers interviewed:

* The lack of a permanent agency presence who could offer professional assistance if a carer becomes upset during the walk. Clearly assistance would be given by other carers and community organisations (if present), but not having a permanent agency coming on each walk was perceived as a weakness.
  + *“I feel that is a massive gap – which was filled when Uniting(community agency) ran the walks”*
* Reliance on Lead Carers. Organising the walks was not seen as onerous by the Lead Carers, but the emotional energy required during the walks can be draining.
* The day or the time of the walk did not suit some carers
* Having no permanent arrangement to fund the morning tea. Having a free coffee was considered an important part of valuing the carers and removes an additional barrier for any carers who are financially constrained.
  + *“I think there is a bit of uncertainty around the morning teas and which in the past has been funded by the Bendigo Bank or a sponsoring service or program. Some groups might think that is the responsibility of the carer to pay for the coffee. If they had to pay and were financially challenged, they might not come along. Might be in jeopardy – so need to keep that going, that nurturing, social connection. (community organisation)*

**Key Question 4. What benefits do the stakeholders believe is obtained from the Pathways for Carers Initiative?**

For carers the benefits are:

* The connections made and the ability to “vent” one’s frustrations: “*Pathways is a good place to vent, as they understand where you are coming from – also a safe space. For new carers it normalises the situation, so you realise that others have the same experiences*.”(carer)  
  “*The value is the connection – finding out about information from the guest speaker, also other information sources from other carers*.” (carer)
* The guest walker, not only for the information and resources supplied, but because they have listened to the carer: “*They have shared their information with you. This has the effect of also feeling validated, because they have listened to you and understand your situation*.”(carer).
* New knowledge. As one carer commented, ”*there has never been a guest speaker where I have not learnt something*”.
* The comforting and supportive experience. Even though one of the carers admitted to feelings of anxiety before a walk, it was always a positive experience: “*Very comforting when you get to the walk – great people – sometimes you feel a bit anxious and wonder if you should go – then you go and its good. Also having a representative from the Council is fantastic*” (Carer)

For community organisations involved in the Pathways walks the perceived benefits are:

* An opportunity to share resources with carers and to offer support. “*We will participate in the walk and talk to a carer who is having a tough time and give support. We are mindful and respectful of the agency or service who come as a guest walker – they have the spotlight. We are there as a backup*,”
* An opportunity to identify carers who need support and help them access the NDIS and other services. The walks offer an ideal opportunity for these agencies to seek out those who need help, and then link them into appropriate services. The National Disability Insurance Service Transition Coordinator is employed by the City of Maroondah and goes on all of the walks. She provides a vital link between carers and other community services.

**Impact on the Carers**

Not only are there benefits of the Pathways walks on carers, there are a number of impacts on the carers themselves which for some, provide a profound change to their lives. The following comments incapsulate the value of Pathways for the Carers involved:

By the nature of their role, carers often put themselves last. In their busy and usually complex lives, their own welfare is often forgotten as their caring role takes president over other activities:

*“For me the walks have been a life-saver” (Carer)*

*“The discussion that follows the walk is good, also talking to people on the walk. Get ideas how to self-manage the funding from the government, getting access to companion cards etc. Learning how to do things by the book and getting practical tips from a range of provide”. (Carer)*

*“Good for my mental health. Not just exercise, good breathing space, fresh air and the bush -almost instantaneous relief!” (carer)*

For some carers, the importance of being able to link into services was a vital part of the Pathways experience:

*“Pathways helped me to understand what to ask for from the NDIS- so now I have a good package for my child! (carer)*

*“Opportunity to hear other people’s stories and how they are coping – also listening to guest speakers and getting knowledge on services in the area which could be useful. Realisation that you are not alone!” (carer)*

For some carers, the Pathways program offered the opportunity for self-growth and the possibility to upskill:

*“The Pathways Program allowed me to have a voice at a time when my self esteem was very low. Connecting with the agencies on the walk allowed me to upskill as well as to connect with other carers. (Carer)*

In summary, the Pathways walks have a capacity for the carers involved for self-actualisation as they are able to tap into resources and benefits which empower them to be able to make a difference in their lives. The walks present a perfect opportunity for the carer seeking social and peer support, as well as information on services at a local, state and federal level. That environment is also perfect for the community organisations to talk directly to carers in a safe place and to promote their support and services.

**Key Question 5. What changes could be made to improve the program?**

* Date and time of walks: Survey data indicated that changes could be considered around the actual day or timing of the walks. This is always a difficult issue, as timing is never going to suit everyone.
* Finding time to be safely away from the person they care for is often difficult. Whether respite options could be explored depends on the future funding of the program.
* Location: Data from both the survey as well the interviews showed strong agreement from participants that the walks should be in bushland rather than in suburban streets. Carers suggested Ringwood Lake or McAlpin reserve as alternate venues for walks.
* **Duration of walks**: Some carers indicated that they would prefer the walks to go on for longer. others noted it is also important to respect the time that carers have to give for Pathways, as well as the differing levels of fitness of the carers. **Online support group**: A couple of carers and one of the community organisations talked about forming an online support group for carers. This could be useful for carers who have been reluctant/unable to turn up for walks or the coffee afterwards. The online group could also suggest some other strands of activities which could be pursued.

1. Summary of Results

Although this evaluation has been limited in its scope, there are a number of comments that can be made when drawing the evaluation results together.

One of the main strengths of the Pathways program is its simplicity. A simple walk in nature combined with a safe environment in which to raise any issues of concern. The inclusion of a guest walker as well as workers from other agencies provide a supportive environment in which to ask questions or clarify issues. It was clear from comments received from the carers and the community organisations involved that the essence of the program should remain as is.

This then leads to the issue of sustainability. The financial cost of the program is minimal, although the emotional cost can be overwhelming for the Lead Carer, as that role carries the greatest burden. In order for the program to be sustainable, the involvement of the City of Maroondah is crucial for support and guidance.

The role of the Lead Carer is an important one, as it is the glue which keeps the group together. It also has the potential of being a stressful role which requires emotional energy at times when responding to carers’ needs. Owing to the importance of this role a training program should be initiated to train other potential Lead Carers to transition into the role, so that the continuity of the walks is preserved.

One of the gaps identified in the program was the lack of a permanent carer support agency whose skills could be called on if a carer exhibited any feelings of stress or anxiety during the walk. This was part of the role of the inaugural support agency, Uniting, and this role has been taken on by other agencies during the implementation of the program.

There are 150 carers on the database for the Pathways program, although anecdotally there are many more carers in the Maroondah council area. Comments from carers in the Pathways program have indicated that there are many in the community who either lack the self-confidence to attend the walks or are unable to join because of caring responsibilities. Efforts should be made to encourage carers to join the Pathways program. Avenues could be explored to provide respite care for those carers who would like to be involved but cannot because of caring responsibilities. This of course would have funding implications.

Both carers and community organisations suggested that an online support group could be formed to provide a further avenue for carers to connect with each other. This might also attract carers who hitherto have been reluctant to join the program. The online group could also suggest other activities that could be run in addition to the monthly walks. A number of carers expressed the wish for more walks to be organised. This of course puts extra stress on the Lead Carer. There are also other Pathways for Carers’ walks in the cities of Boroondara, Knox/Monash, Manningham and Yarra Ranges and carers can attend any of the walks regardless of where they live.

The provision of coffee and cake at the end of the walk is a simple gesture to value the carers present. It is important that this custom is preserved, and dedicated funding is important for this to continue.

1. Conclusions and Recommendations

The essence of the Pathways for Carers – the simple walk in nature - should be preserved as it provides a supportive environment for carers to connect with each other. Not only are the walks supportive they are an important avenue for the Carer to be able to access support and services to assist them in their lives. Although the program requires limited funding to operate successfully, sponsorship of the morning teas on an ongoing basis is important in terms of celebrating and valuing the carers and guests on the walk.

The support of Maroondah City Council and the staff it provides to enhance the experience of carers is a vital element attributing to the success of the program. The Lead Carers on the walks provide support to the carers present as well as organising the guest speakers for the walks. To ensure continuity, potential Lead Carers should be identified and trained to step into the role. An ongoing carer support agency is important, not only for continuity but being available to support a carer if they become distressed.

A number of carers expressed interest in an online support group so as to extend the connections between the carers. This may also encourage carers who have been reluctant to join the walks.

**Recommendations:**

The following recommendations are suggested for the Pathways for Carers program:

* Ongoing sponsorship is recommended for morning teas for the program
* The support of Maroondah City Council and the staff it provides to enhance the experience of carers is a vital element attributing to the success of the program.
* Train backup Lead Carers to ensure continuity of the program
* An online carer support group to connect carers as well as those carers who are reluctant to join a walk.
* Ensure that an on-going presence of a carer support agency is available for all walks to offer advice and be available if a carer becomes distressed.

1. Appendices

Appendix 1. Program Logic Workshop

Appendix 2. Raw Data from the Quantitative online survey

Appendix 3. Questions used for the Qualitative Interviews

Appendix 1: Program Logic Diagram

**Program**: Pathways for Carers: No-one can do it alone

| Inputs |  | Outputs | |  | Outcomes - Impact | | | |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  | Activities | Participation |  | Short | Medium | Long | |
| Skills and Knowledge transfer   * Carers * Lead Carers * Steering Committee * Guest Walkers * Maroondah council inputs * Sponsor organisations inputs * Relationships * Learning from peers * Funding * Staff/volunteer time, both paid and unpaid * Small grants for coffees etc.   Relevant documents/information sources:   * Information and resources on support services * Further education * Information on NDIS * Information from service providers   Environment  Venue |  | Walks (Tuesday and Saturday)  Workshops  Information sharing from a variety of sources  Knowledge transfer  Learning about the NDIS  The “chair”  Social engagement i.e. Facebook  Inclusion of guest walkers  Development of publications on carers  Coffee after walks  Discussions  Emotional support | Carers  Guest Walkers  Maroondah Council  Community Agencies  Connections with peers/social interactions |  | Increased mental health  Increased fitness  Appreciation of the natural world  Developing empathy (carers &service providers)  Increased connections  Carers learning to advocate  Carers finding their voice  Learning about events & resources  NDIS outcomes for carers  Appreciation of a safe space for carers (the walks)  Carers linked to information mechanisms between walks  Relationships formed  Positive change for carers due to walks  Learning from the guest walker  Carers attending other events  Reduction in isolation  Increased knowledge by council of carers needs | Increased knowledge and skills  Greater empowerment for individuals  Increase in confidence and self-esteem for participants/self-growth  Increase in coping mechanisms  Extension of the program across other councils  Greater resilience  Realising carers identity  Greater influence with government/all forms of gov’t understanding the needs of carers  Dev’t of a new program  Better access to services  Greater understanding by agencies  Guest walkers linking into council  Opportunities to upskill | | A sustainable program  Increased accessibility  Improved service evaluations  Maximising program reach  Replication statewide  Pathways to further opportunities for carers |

Increasing social connections and support for carers across Victoria.

|  |  |  |
| --- | --- | --- |
| Assumptions   * That people in a position of care for others are willing to engage with the group * Individuals want to engage with, share and learn from other carers * That people can get to the walk * That people are capable of walking * That all carers speak English * That people share a common definition of a carer * That they are going to get support * That the lead carer is empathetic and approachable |  | External Factor   * Increased awareness of and dependence on the community * Advent of the NDIS * Awareness that fitness and increased mental health assist self esteem and motivation * How the council is perceived by the community * Word of mouth – getting the message out * Atmosphere of the café * Guest walkers can change the dynamic * Community partnerships |

Appendix 2: Raw data from the online survey

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Survey Results | | | |  | |  | | | |
| Q1 | Complete | | 34 | | Valid responses | | | |
|  | Incomplete | | 9 | | Permission granted and then no other data provided | | | |
|  | Permission not granted | | 3 | |  | | | |
|  | TOTAL | | 46 | |  | | | |
|  |  | |  | |  | | | |
| Q2 | How are you involved in pathways? | | | |  | | | |
|  | I am a participant in the program | | 29 | |  | | | |
|  | I m a service provider (business/community organisation) | | 5 | |  | | | |
|  | TOTAL | | 34 | |  | | | |
|  |  | |  | |  | | | |
| Q3 | How did you get to know about Pathways for Carers | | | | | | | |
|  | Saw flyer | | 5 | |  | | | |
|  | Talked to carer/lead carer | | 3 | |  | | | |
|  | Service provider | | 1 | |  | | | |
|  | Council staff | | 3 | |  | | | |
|  | Facebook/social media | | 12 | |  | | | |
|  | Other (please specify) | | 5 | | (Jack Mulholland, Carers Victoria Member newsletter, Friend invited, Email, Searching for support) | | | |
|  | TOTAL | | 29 | |  | | | |
|  |  | |  | |  | | | |
| Q4 | Have you attended any walks? | |  | |  | | | |
|  | Yes | | 24 | |  | | | |
|  | No (skip to question 20) | | 5 | |  | | | |
|  | TOTAL | | 29 | |  | | | |
|  |  | |  | |  | | | |
| Q5 | When did you go on your first walk? | | | |  | | | |
|  | At start of program | | 13 | |  | | | |
|  | Last six months | | 8 | |  | | | |
|  | Only this year | | 1 | |  | | | |
|  | Unsure | | 2 | |  | | | |
|  | N/A (haven't attend any walks) | | 5 | |  | | | |
|  | TOTAL | | 29 | |  | | | |
|  |  | |  | |  | | | |
| Q6 | How many walks have you been on since January 2019 | | | | | | | |
|  | 1-2 walks | | 5 | |  | | | |
|  | 2-5 walks | | 3 | |  | | | |
|  | 5-10 walks | | 6 | |  | | | |
|  | 10+ walks | | 7 | |  | | | |
|  | Unsure | | 3 | |  | | | |
|  | N/A (haven't attend any walks) | | 5 | |  | | | |
|  | TOTAL | | 29 | |  | | | |
|  |  | |  | |  | | | |
| Q7 | I had a positive first impression of the Pathways for Carers initiative | | | | | | | |
|  | Strongly agree | | 21 | |  | | | |
|  | Somewhat agree | | 2 | |  | | | |
|  | Neither agree nor disagree | | 0 | |  | | | |
|  | Somewhat disagree | | 1 | |  | | | |
|  | Strongly disagree | | 0 | |  | | | |
|  | N/A (haven't attend any walks) | | 5 | |  | | | |
|  | TOTAL | | 29 | |  | | | |
|  |  | |  | |  | | | |
| Q8 | The Pathways for Carers initiative benefits me | | | | | | | |
|  | Strongly agree | | 19 | |  | | | |
|  | Somewhat agree | | 5 | |  | | | |
|  | Neither agree nor disagree | | 0 | |  | | | |
|  | Somewhat disagree | | 0 | |  | | | |
|  | Strongly disagree | | 0 | |  | | | |
|  | N/A | | 5 | |  | | | |
|  | TOTAL | | 29 | |  | | | |
|  |  | |  | |  | | | |
| Q9 | Why (free text) | | | |  | | | |
|  | Main themes | |  | |  | | | |
|  | | |  |  | | --- | --- | | Connecting, socialising & networking | 16 | | Exercise | 9 | | Obtaining information | 7 | | Feeling supported by carers | 3 | | | | | |  |  | |
|  | |  | | | | |  |  | |
| Q10 | Participating in walks make me feel more connected to my community | | | | | | | |
|  | Strongly agree | | 19 | |  | | | |
|  | Somewhat agree | | 4 | |  | | | |
|  | Neither agree nor disagree | | 1 | |  | | | |
|  | Somewhat disagree | | 0 | |  | | | |
|  | Strongly disagree | | 0 | |  | | | |
|  | N/A | | 5 | |  | | | |
|  | TOTAL | | 29 | |  | | | |
|  |  | |  | |  | | | |
| Q11 | Participating in walks helps me feel less isolated | | | | | | | |
|  | Strongly agree | | 19 | |  | | | |
|  | Somewhat agree | | 5 | |  | | | |
|  | Neither agree nor disagree | | 0 | |  | | | |
|  | Somewhat disagree | | 0 | |  | | | |
|  | Strongly disagree | | 0 | |  | | | |
|  | N/A | | 5 | |  | | | |
|  | TOTAL | | 29 | |  | | | |
|  |  | |  | |  | | | |
| Q12 | I feel physically better from participating in the walks | | | | | | | |
|  | Strongly agree | | 18 | |  | | | |
|  | Somewhat agree | | 4 | |  | | | |
|  | Neither agree nor disagree | | 2 | |  | | | |
|  | Somewhat disagree | | 0 | |  | | | |
|  | Strongly disagree | | 0 | |  | | | |
|  | N/A | | 5 | |  | | | |
|  | TOTAL | | 29 | |  | | | |
|  |  | |  | |  | | | |
| Q13 | My mental health is improved by participating in the walks | | | | | | | |
|  | Strongly agree | | 18 | |  | | | |
|  | Somewhat agree | | 6 | |  | | | |
|  | Neither agree nor disagree | | 0 | |  | | | |
|  | Somewhat disagree | | 0 | |  | | | |
|  | Strongly disagree | | 0 | |  | | | |
|  | N/A | | 5 | |  | | | |
|  | TOTAL | | 29 | |  | | | |
|  |  | |  | |  | | | |
| Q14 | The information presented at walks is useful to me | | | | | | | |
|  | Strongly agree | | 20 | |  | | | |
|  | Somewhat agree | | 4 | |  | | | |
|  | Neither agree nor disagree | | 0 | |  | | | |
|  | Somewhat disagree | | 0 | |  | | | |
|  | Strongly disagree | | 0 | |  | | | |
|  | N/A | | 5 | |  | | | |
|  | TOTAL | | 29 | |  | | | |
|  |  | |  | |  | | | |
| Q15 | I would participate in the walk if it was in a different, more suburban environment | | | | | | | |
|  | Strongly agree | | 3 | |  | | | |
|  | Somewhat agree | | 2 | |  | | | |
|  | Neither agree nor disagree | | 10 | |  | | | |
|  | Somewhat disagree | | 5 | |  | | | |
|  | Strongly disagree | | 4 | |  | | | |
|  | N/A | | 5 | |  | | | |
|  | TOTAL | | 29 | |  | | | |
|  |  | |  | |  | | | |
| Q16 | The nature setting for the walk is important to me | | | | | | | |
|  | Strongly agree | | 19 | |  | | | |
|  | Somewhat agree | | 3 | |  | | | |
|  | Neither agree nor disagree | | 2 | |  | | | |
|  | Somewhat disagree | | 0 | |  | | | |
|  | Strongly disagree | | 0 | |  | | | |
|  | N/A | | 5 | |  | | | |
|  | TOTAL | | 29 | |  | | | |

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  |  | |  |  | | | | |
| Q17 | For you personally, what are the most valuable things about participating in the walks? | | | | | | | |
|  | Gaining new information about services | | 23 | 1 | |
|  | Meeting other carers | | 22 | 2 | |
|  | Time away from caring responsibilities | | 14 | 10 | |
|  | Relationships established with other carers | | 20 | 4 | |
|  | Walking in nature | | 20 | 4 | |
|  | Establishing support networks with other carers | | 18 | 6 | |
|  | Its free | | 18 | 6 | |
|  | Other (please specify) | | 5 | 19 | |
|  | TOTAL | | 140 | 52 | |
|  |  | |  |  | | | | |
| Q18 | Are there barriers to your participation in the walks? | | | | | | | |
|  | Yes | | 21 |  | | | | |
|  | No (skip to 22) | | 8 |  | | | | |
|  | TOTAL | | 29 |  | | | | |
|  |  | |  |  | | | | |
| Q19 | What are the barriers to your participation | | | | | | | |
|  | Of those who said they faced barriers; the following were commonly reported: | | | | | | | |
|  |  | | YES | NO | |
|  | Caring responsibilities | | 13 | 8 | |
|  | Day of the walk doesn't suit | | 7 | 14 | |
|  | Time of the walk doesn't suit | | 3 | 18 | |
|  | Dislike the location | | 1 | 20 | |
|  | Unsure where the location is | | 1 | 20 | |
|  | Unable to get to the location | | 3 | 18 | |
|  | Unable to physically to the walk | | 3 | 18 | |
|  | Speaker topics aren't of interest | | 1 | 20 | |
|  | Personality clashes with others expected to be there | | 1 | 20 | |
|  | Lack of parking | | 1 | 20 | |
|  | Other (please specify) | | 11 | 10 | |
|  | |  | | |  | |  |
| Q20 | | What do you dislike about the initiative? | | | | |  |
|  | | Some of the people involved | | | 4 | |  |
|  | | Time of the walk | | | 3 | |  |
|  | | Location | | | 2 | |  |
|  | | That I can't bring the person I care for | | | 2 | |  |
|  | | Days of the walk | | | 2 | |  |
|  | | Feeling excluded from the group | | | 1 | |  |
|  | | Topics covered by the guest walkers | | | 0 | |  |
|  | | Nothing | | | 6 | |  |
|  | | No response | | | 9 | |  |
|  | | TOTAL | | | 29 | |  |
|  | |  | | |  | |  |
| Q21 | | Please describe any other outcomes (positive or negative) you have experienced from your involvement in the walks? | | | | | |
|  | | Main themes | | | | | |
|  | | |  |  | | --- | --- | | Gaining connections/support network | 6 | | Gaining information | 4 | | Taking time out for self | 2 | | Connecting to other services | 2 | | | | | | |
|  | |  | | |  | |  |
| Q22 | | Do you have any further comments | | | | | |
|  | | Main themes | | | | | |
|  | | |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | | Participant values the project | 6 |  |  |  |  | | Can there be extension/variation of location | 2 |  |  |  |  | | Would like more frequent walks | 1 |  |  |  |  | | Could respite be offered | 1 |  |  |  |  | | | | | | |

Part 3: Business Survey Responses

|  |  |  |
| --- | --- | --- |
| Q1 | Have you attended any walks? |  |
|  | Yes | 4 |
|  | No | 1 |
|  | TOTAL | 5 |
|  |  |  |
| Q2 | When did you go on your first walk? |  |
|  | At start of program | 2 |
|  | Last six months | 2 |
|  | Only this year | 0 |
|  | Unsure | 1 |
|  | TOTAL | 5 |
|  |  |  |
| Q3 | How many walks have you been on since January 2019 | |
|  | 1-2 walks | 1 |
|  | 2-5 walks | 1 |
|  | 5-10 walks | 0 |
|  | 10+ walks | 2 |
|  | Unsure | 0 |
|  | N/A | 1 |
|  | TOTAL | 5 |
|  |  |  |
| Q4 | Our business/organisation has learnt about he needs of carers through engagement in walks | |
|  | Strongly agree | 3 |
|  | Somewhat agree | 1 |
|  | Neither agree nor disagree | 0 |
|  | Somewhat disagree | 0 |
|  | Strongly disagree | 0 |
|  | N/A | 1 |
|  | TOTAL | 5 |
|  |  |  |
| Q5 | I have been able to promote our services to carers through the walks | |
|  | Strongly agree | 4 |
|  | Somewhat agree | 0 |
|  | Neither agree nor disagree | 0 |
|  | Somewhat disagree | 0 |
|  | Strongly disagree | 0 |
|  | N/A | 1 |
|  | TOTAL | 5 |
|  |  |  |
| Q6 | We have seen increased uptake of our services by carers as a result of participating in walks | |
|  | Strongly agree | 1 |
|  | Somewhat agree | 2 |
|  | Neither agree nor disagree | 1 |
|  | Somewhat disagree | 0 |
|  | Strongly disagree | 0 |
|  | N/A | 1 |
|  | TOTAL | 5 |
|  |  |  |
| Q7 | We have been able to tailor our services to the needs of carers as a result of information gained through involvement in the walks | |
|  | Strongly agree | 3 |
|  | Somewhat agree | 0 |
|  | Neither agree nor disagree | 1 |
|  | Somewhat disagree | 0 |
|  | Strongly disagree | 0 |
|  | N/A | 1 |
|  | TOTAL | 5 |
|  |  |  |
| Q8 | Are there any other ways you would like to engage with carers? | |
|  | Social activities, community hubs and resource support, health and wellbeing |  |
|  | networking with other services |  |
|  |  |  |
| Q9 | Are there any barriers to your engagement with carers? | |
|  | They often are unable to commit or book to attend then don's show up - this is due to the demands on carers can be changed so quickly that priorities change. |  |
|  | funding constraints for support programs |  |
|  |  |  |
| Q10 | Do you have any further comments |  |
|  | We would love to do more, but often we find that they (the carers) often don’t put themselves first. |  |

Appendix 3. Questions used for the Qualitative Interviews

**Pathways to Carers: Questions to Carers**

Name: ……………………………………………………………….

Organisation: …………………………………………………….

Carers Questions

1. How did you hear about the Pathways to Carers Program?

2. Do you think that being a part of Pathways to Carers program has been helpful to you? And in what ways?

3. Are there any changes which you would like to see made to the program?

4. Are there any other walking environments which you would recommend for the program?

5. Tell me about what you see as the value in participating in the walks?

6. Is there anything which you don’t like about the Pathways to Carers Initiative?

7. Can you give me examples of how guest walkers on the pathways walks have helped you?

8. Have you accessed any information which they have suggested?

9. Do you have any further comments.

Thank you for your time

**Pathways to Carers: Questions to Community Organisations**

Name: ……………………………………………………………….

Organisation: …………………………………………………….

1. What do you see as the advantages in participating in the walks?

2. Have you seen an increase in service requests from carer in the Pathways Program?

3. Are there changes you would like to suggest for the Pathways program?

4. Is there anything you don’t like about the program?

5. Tell me about any barriers you perceive in relation to engagement with carers?

6. Any other comments

Thank you for your time



1. Carers in this context refer to people who care for those with a disability or mental illness (young or old) [↑](#footnote-ref-1)
2. Carers in this context refer to people who care for those with a disability or mental illness (young or old) [↑](#footnote-ref-2)