

## **OLDER PEOPLE SPEAK OUT SURVEY**

1. Do you experience any limitations in fulfilling your social/leisure needs due to caring for your grandchild/ren?  
..... YES/NO
2. Do you experience any problems related to disobedience by your grandchild/ren?  
..... YES/NO
3. Do you encounter any financial difficulties due to caring for your grandchild/ren?  
..... YES/NO
4. How do you rate your overall health (physical and mental)?  
..... GOOD/FAIR/POOR/NOT SURE
5. Do you feel burdened with the care of your grandchild/ren?  
..... YES/NO
6. Do you ever feel isolated due to inadequate social support?  
..... YES/NO
7. Do you feel that caring for your grandchild/ren has negatively affected your relationships (with you and your partner/children/grandchildren/friends)?  
..... YES/NO
8. Do you feel limited in your ability to satisfy the needs of your grandchild/ren (ie social and financial needs)?  
..... YES/NO
9. Through your parenting role do you feel that you can provide all the caring needs to raise your grandchild/ren?  
..... YES/NO
10. Do you find it challenging to care for your grandchild/ren in a different social context compared to when you last parented?  
..... YES/NO
11. Do you feel that your current health status would have been different if you were not providing full time care to your grandchild/ren?  
..... YES/NO
12. Do you feel that your health is different to other grandparents who don't have the additional responsibility of providing full time care to their grandchild/ren?  
..... YES/NO