

# A STEP AHEAD

**AUTUMN EDITION 2021**



**Amputees & Families**  
Support Group Qld Inc.

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## FROM THE OFFICE

Welcome to the Autumn Edition of A Step Ahead!!

We hope that everybody had a lovely christmas relaxing and spending time with their family and friends.

We are now back in the office and looking forward to the year ahead.



Every year we make New Years Resolutions that we don't stick too or are not really achievable and after 2020 it is hard to make longer term decisions after the uncertainty of last year.

This year is great opportunity to embrace new beginnings, set your goals or intentions and create some happy and healthy routines. Start small and embrace the new year. We definitely are with a year filled with events and information sessions.

In December 2020 we applied for a Tender with Brisbane South PHN to be part of a Healthy Ageing Hub pilot program which will run for 6 months, we have been successful with this and look forward to sharing more information with our members.

We will be holding Healthy Living Workshops throughout this year which will encompass healthy eating, cooking for one, limited mobility exercises, falls prevention and more. Each month we hold an Open House morning tea and each alternate month we will cover a topic of interest for our members to help live a happy and healthier lifestyle. The event flyers will be in the A Step Ahead so that you are kept up to date with what is happening this year.

We have been working on our new website and are looking forward to launching this in the coming months.

Congratulations to our member and peer support volunteer Chris Rice on his Local Legend Award received from Jim Chalmers MP. You can read Chris's story on page 10. If you would like to share your story please contact me.

This year we are proud to celebrate 35 years of operation in Queensland. We recognise the hardwork and diligence of our founding members and the work of previous Committees. We look forward to celebrating our 35th birthday in October and sharing some of our history.

**Lynda Foulis** | State Coordinator

# PEER SUPPORT VOLUNTEERS

**ACACIA RIDGE**

Mary Woods  
0407 623 762

**BIRKDALE**

Allan Churchward  
0407 580 403

**BRAY PARK**

Kevin & Ann Holding  
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**CAIRNS**

Bernie Wolland  
07 4098 5607

**CARINA**

Phil Taylor  
07 3398 8722

**GYMPIE**

Anne Barron  
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**LOGAN VILLAGE**

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**LOGAN**

Darren Wyer  
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**MACKAY**

Marcia Andersen  
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Chris Rice  
0410 331 599

**SUNSHINE COAST**

Debbie Murr  
0416 042 735

**TANAH MERAH**

Gina Bird  
0414 915 540

**TOOWOOMBA**

Annie Cathcart  
0401 556 215

**YOUTH GROUP**

Josh Jones  
0499 773 788

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# DATES FOR THE DIARY

## March

3rd Open House morning tea (Champion Health)  
17th Pallichat  
24th Bingo

## April

2-5th Easter Closure  
7th Open House morning tea  
26th ANZAC Day  
28th Bingo

## May

3rd Labour Day  
5th Mother's Day Lunch  
26th Bingo

## June

2nd Open House morning tea  
23rd Bingo

## July

7th Open House morning tea  
22nd Christmas in July  
28th Bingo

## August

4th Open House morning tea (guest speaker)  
25th Bingo  
28th AGM

## September

1st Open House morning tea  
22nd Bingo

## October

4-11th Amputee Awareness Week  
6th Open House morning tea  
10th 35th Anniversary Lunch  
27th Bingo

## November

3rd Open House morning tea  
24th Bingo

Please contact the office with any queries. All events and functions can change without notice so please ensure that you contact the office or check our Facebook page for updates.



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## Every Dollar Counts...What is Available!

Every magazine we will include information on concessions that are available for you to access further if they are required. <https://www.qld.gov.au/housing/buying-owning-home/maintenance-modifications/maintenance-assistance>

### Community Flyer

TransitCare is an innovative not-for-profit organisation dedicated to assisting clients to remain active in the community and live independently in their own homes. TransitCare connect people to the community through their Community Flyer Transport Service and achieve this through the provision of shared pre-booked transport and social support programs for people with disabilities; and older members of our community. TransitCare service areas are within Brisbane; Logan and Townsville and surrounds.

To contact TransitCare phone: 1300 153 636 or email: [intake@transitcare.com.au](mailto:intake@transitcare.com.au).

### Council Cabs

A number of Councils in Queensland offer a council cab service. Council cab services generally offer shared taxis to and from nearby shopping centres for around \$1.50-3.00 each way.

Some of the councils offering a council cabs service include:

- Brisbane City Council
- Gold Coast City Council
- Ipswich City Council
- Logan City Council
- Noosa Shire Council
- Sunshine Coast Council

If you are not sure whether your area provides a Council Cab then please contact your local Council or call the office and speak to Lynda who is happy to help find the information for you.

### Seniors Enquiry Line

Seniors Enquiry Line is a statewide information and referral service. Queensland Seniors, their family, friends and carers can talk to a real person to access information on a wide range of topics of interest to seniors including:

- |                         |                                 |                               |
|-------------------------|---------------------------------|-------------------------------|
| • Home help             | • Social and leisure activities | • Housing options information |
| • Concessions           | • Health                        | • Scams                       |
| • Financial information | • Technology                    | • Consumer issues             |
| • Legal information     | • Transport                     | • Housing info                |

The Seniors Enquiry Line links seniors with community information across Queensland.  
Telephone: 1300 135 500







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# Life After Amputation

by Chris Rice

We sat down with Local Legend award winner Chris Rice who is happy to share and inspire with his amputation journey.

Chris's journey started in March 2020 when an artery collapsed in seven places, this caused an infection in two toes as well as the ball of his foot. Due to the infection Chris received a right below knee amputation on 11 April at the PA Hospital.

After losing his leg it was difficult being away from his family because it was during the COVID-19 lockdown and the kids couldn't come to visit. He didn't get to see his kids for over a month, it was a truly difficult time for everybody.



Chris was feeling down and the nurses contacted the Amputees & Families Support Group Qld Inc for peer support. Chris received a peer support visit from Darren Wyer. Chris said that Darren really helped him and let him know that life was not as bad as he thought! Speaking to Darren helped Chris set goals, the main goal being to walk again. Chris said that peer support helped alot and it made a big difference to him both mentally and physically, speaking to somebody who had been through the same situation as him helped turn everything around.

The physiotherapists at Bunya were amazing and helped so much, they pushed me and got me going every day. They also gave me a knee scooter to use which I felt helped me transition to my interim prosthesis.



Within two days of receiving my prosthesis I was carrying my walking stick and within 5 days I was home.

I knew I wanted to walk again, it was my goal and after being able to walk back on my leg after 3 or 4 months it was overwhelming. It felt like a great accomplishment after everything that I had been through.

My family and the support that they gave me was everything, I could not have gotten through without them.

Today I am registered with the NDIS and about to receive my definitive prosthetic, I am walking, active and waiting to go back to work!



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# Celebrating 35 years

1986 - 2021

This year we celebrate our 35th birthday in October with a look down memory lane at one of our founding members Peter Burgess.

## The Beginning by Peter Burgess



It was October 1986, I was 28 years of age. I had an accident that caused the loss of both of my hands, broke one leg and sustained facial injuries while working in heavy construction at the Brisbane International Airport.

I was hospitalised at Royal Brisbane Hospital for 6 weeks, during that time I saw my family, my wife, 2 primary school aged children and one still in nappies, come and go with much frustration, disappointment and upset. My family were having trouble coming to grips with my loss of limbs, the uncertainty of our future and what it would bring.

Suddenly dad couldn't bring home the bacon or be the active sportsman and father that I used to be!

I was being cared for medically in the RBH, no one could be more helpful, all the medical staff bent over backwards to assist me. I can remember having conferences around my bed in the ward, with all the doctors each patting themselves on the back for their part in my rebuild, however nothing was offered to the family in regard to adjustment and support.

My first wife Gail felt at a loss, totally alone and unable to communicate with anyone. There was nobody to offer her any assistance, guidance or help as a family member of a fresh amputee, as all was concentrated on me.

Gail had no idea what home assistance was available, we didn't know who to ask, even the social workers were at a loss to be of assistance. I saw a social worker 6 weeks later, the day I left. It was then that we realised that there had to be something out there, better than what we were experiencing.



# The Beginning

## cont

Once home I was required to do occupational therapy for months, they organised private transport for me daily initially to and from hospital for rehab, as my leg was still in plaster and I had no hands to help me get around.

Friends and neighbours John and Pam Marshall (not amputees) chipped in to help at home and did whatever they could to assist Gail and myself to help the family do the jobs that I used to do. Conversations ensued around BBQ'S with the odd quiet one and the idea of a support group was formed. Our main concern was that all the efforts were concentrated on me, but the family were pushed to the side and felt isolated and neglected. They were hurting, confused and forgotten in the drama that was MY accident.

Next door to us was an ambulance driver, he was involved in these early discussions and offering his perspective that we knew nothing of. Gail was instrumental in searching out what was available at the time and found out that it was very limited. Also once I got home, according to the specialists, I was fixed, finished with, done. Little did I know that my battle had just begun.



While I was in hospital surrounded by other sick people. I felt okay, given the circumstances, I felt lucky to still be alive and breathing. Once I got home and reentered the real world, reality hit and I realised how vulnerable and dependant I was on family, friends and other people. Something had to be done!

Gail placed an ad in a local paper calling for expressions of interest by other amputees and their families to come together to meet and greet, to share ideas and to help support each other.



The first meeting was at home, Bill and Pat McDonald, Alan and Joy Churchward, Johnny and Pam Marshall, Duncan and Rhonda Brabon, Jeff Todd (Artificial Limb manufacturers), Pam and I as well as a few others that attended that first meeting/get together.

Amputee, Hennrietta Lowerse became the initial newsletter editor of the Amputees & Families Support group and she did a wonderful job, we had many a convivial social evening at her place. I can't remember who they were, apologies if you are reading this story, that was 35 years ago. I think there may have been an OT there too.

# The Beginning

## cont

We continued having social meetings once a month at different homes of amputees, the beach, Victoria Point etc for BBQ's, picnics and support. Everyone involved was happy to be there to talk things through and as everyone else had missing legs, I couldn't grasp their situation exactly as I was missing hands. I was the only arm amputee at that time. Regardless of that, it was good to be involved as it was much needed social contact and I'm sure everyone else felt the same because if they weren't happy they wouldn't have been a part of it. The social side of events is what kept the group small but strong, as there was a vast variety of ages and backgrounds.

In 1988 I was awarded the Logan City Disability Achievement Award for initiating and starting up the Amputees & Families Support Group in Brisbane. I am stoked that this humble beginning has grown to become part of a Nationwide voice for those families who need help. What we set out to do back in 1986 has been an overwhelming success due to the involvement of all of you. Congratulations to you all, this is just the story of how it began, the first chapter if you will.



As the group grew stronger, with more people, I decided to take a back seat and get on with my life and let new blood bring their ideas and strengths to the group.

I wanted to get away from city life, so I had to leave the group behind but still stayed a member. I moved to Bundaberg free of the city shackles.

Nowadays I spend my time gardening organically, travelling occasionally, fishing whenever I can, enjoying as much sunshine as possible, bee keeping, kayaking, tractor driving, hobby farming, still tinkering in the shed almost daily, sharing good food ideas with others around campfires, and leading a healthy, organic, stress free life. I have had a remarkable journey through this, my second chance at life. I appreciate every day, regardless of what comes and I sincerely hope that all of you who read this are doing the same!







## A chat, a yarn or a chinwag.

Whatever you call it, we're here to talk about ageing, loss, dying, grief and bereavement.

As we get older, we all face challenges. Sometimes we don't have anywhere to turn to for information, advice or connections. PalliChat helps you access the support that can assist you when you need it.

### Join us for to learn more about Pallichat!

**Date:** Wednesday, 17 March 2021

**Where:** Amputees & Families Support Group Qld Inc  
Logan Central Community Centre  
9-11 Jacaranda Avenue  
Logan Central

**Time:** 10am followed by morning tea

**RSVP:** 3290 4293 or email [lynda@afsg.org.au](mailto:lynda@afsg.org.au)

Please ensure you RSVP as we have limited numbers due to COVID-19.  
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# Becoming a Carer

When you become a caregiver it may seem difficult to view yourself in that role. You already have an established relationship with the person you are caring for and now that relationship has changed. While you remain a wife, husband, son, daughter, grandchild, parent; you are also a carer if you:

- Talk to medical staff about the person's conditions and organise their medications.
- Take care of chores, finances and meals for someone because they cannot manage to do it themselves.
- You care for another person without getting paid.

Doing these things may feel to you as something that you 'just do' when a loved one needs assistance and your role as carer is to be expected. However officially designating yourself as a carer means that you may have access to:

- Information about your family member's condition and the right to be present during consultations.
- Services such as respite care, a carer's allowance from Centrelink and tax offsets.
- Training on more complicated aspects of your family member's care such as giving insulin injections.
- The right to be involved in decisions on long term care.<sup>(1)</sup>

## The four phases of caring

In the earlier section on grief there was information on the stages of grief, caring is similar in that it also has stages. You may find the stages overlap and some will last longer than others. The shock stage may not occur if the person's health was declining steadily and the carer's role had been expanding over time.<sup>(2)</sup>

### The shock stage

This is the period immediately after the accident/illness when stress is high and you are coming to terms with what happened. Many people cope well at this stage as you are living on adrenalin and offers of help come from family and friends. It is important to not rush into major decisions

such as giving up your job or selling your home: think through decisions and gather as much information as you can.<sup>(2)</sup>

### The reality stage

This period is marked by increasing feelings of loneliness, isolation and resentment. The resentment you feel may not be directed at the person you are caring for; it may be directed towards the friends and relatives who are no longer helping or the situation in general. When people outside of the home feel that the crisis is over they will return to their normal lives and activities and think "she/he has it all under control"

As a carer you are particularly vulnerable to developing depression as you have put so much of your life on hold and you may fear losing your individual identity. This period is when you may settle into routines that are not healthy such as doing tasks late at night instead of sleeping.<sup>(2)</sup>

### The acceptance stage

You can reflect on your role and are coping with the routine in your life. At this stage you will find yourself considering your options as you reflect on how much you can do. The person you are caring for may have also come to accept what is happening or become more independent (e.g. they have a prosthesis) While you may have come to terms with your role, be aware of unhealthy behaviours such as thinking you are the only person capable enough to care for your family member and viewing your identity solely through the lens of a carer.<sup>(2)</sup>

### The end of caring stage

When your role as carer ends through the independence of your family member, the need for nursing care or death; you may struggle with your identity. You had invested so much of yourself in the caring role that now you find yourself lost or isolated. It is important to not rush into decisions but consider what you want to do now: return to work, volunteer, learn something new and investigate how to make it happen.<sup>(2,3)</sup>



## Communicating effectively

As a carer you will have occasions when you need to have a conversation that may result in disagreement. The basics of effective communication are levelling, listening, validating and non verbal communication.<sup>(4)</sup>

### Levelling (the playing field):

Disagreements often occur because we assume people can read our minds or 'between the lines' When you are communicating make sure that you clearly express your needs and feelings.

### Listening:

Communicating is more than talking: you need to listen. Pay attention to what the person is saying, clarify you are understanding them and let them speak without interruption.

### Validating:

You need to show that you understand how and why they feel the way they do. This

does not mean you have to agree with them. Accept their feelings as truthful.

### Non verbal communication:

When communicating your tone, eye contact, and gestures are the real indicators of how you feel. If your non verbal expressions do not align with what you are saying the other person will know you are not speaking truthfully.<sup>(4)</sup>

### Other communication tips

- Try to choose a time that will have minimal interruptions and stress.
- Avoid sarcasm
- Stick with the pressing issue, avoid bringing up everything at once or old grievances.
- Don't use 'you always' or 'you never' both of these will make the other person defensive.
- Postpone the discussion if you or the other person are becoming angry.<sup>(5)</sup>

## Using "I" Statements

In this section there are references to a communication technique called "I statements" This is a way to minimise conflicts and express needs. Using I statements such as "When you x I feel y" instead of "You can't x" is a way of communicating your needs in a way that may reduce conflict. When you express your feelings as if they were a universal fact and not your subjective experience the other person will become defensive as they see your statement as telling them their feelings are wrong.<sup>(6)</sup>

The following is an example of a conflict without "I" statements. Do keep in mind that this technique is not a guarantee of resolving conflicts but it may help.<sup>(6)</sup>

Daughter: *Dad you can't live on your own, if you had a fall no one would be there.*

Father: *I like this house, I've been there 48 years and I can look after myself just fine.*

Daughter: *Don't be selfish, think about how others feel for once.*

Father: *You're the selfish one, I'm a grown man, you don't make my decisions for me.*  
Daughter: *You're so stubborn I can never make you see sense.*

Notice how both people become determined to be 'right' and the conflict grows, hurtful things are said and the original issue is not resolved. Now the conversation with "I" statements:

Daughter: *Dad, now that you are living on your own I am worried about what happens if you had a fall.*

Father: *I've been here 48 years, I need my independence so I don't want to move.*

Daughter: *How can I not worry about you?*

Father: *If you are really worried I could phone you at a certain time each day.*

Daughter: *I think that will work, let's try it for a while and see if it helps me to worry less.*

You will find communicating in this way takes practise but it will become more natural over time.<sup>(6)</sup>

## Stress

Providing care for a loved one can be immensely rewarding but also stressful. It is natural to feel stress; as a caregiver your life changes significantly. Stress can come from different sources you might experience it from one source or many in your role as caregiver. If you can recognise the source of your stress it becomes easier to deal with.<sup>(7)</sup>

### Recognising sources of stress

**Physical stress:** You are tired, not eating well. The care tasks are physically demanding such as transfers which are causing you pain such as backache.

**Emotional stress:** The person may be angry, lashing out or depressed. You may be grieving, guilty or feeling alone and unsupported. You may have drifted away from friends, lack the freedom to socialise or had conflicts with family about the caring arrangements.

**Financial stress:** You have lost a source of income, your retirement plans are on hold, your savings are dwindling and medical expenses are costly.<sup>(7)</sup>

Some stress can keep us motivated but too much is bad for your physical and emotional health. How do you know that you are becoming too stressed? The signs to watch for include:

- You have symptoms of depression
- You have anxious feelings and overwhelming worries.
- Minor illnesses take a major toll on your health.
- You are exhausted.
- You are quick to anger and are often irritable.
- You forget things easily or cannot concentrate.
- You have lost interest in hobbies.
- Your weight is fluctuating.
- You are neglecting your own health such as missing your annual mammogram.
- You have recurring health problems like headaches.
- You find yourself needing alcohol or drugs (legal or illegal) to get through the day.<sup>(7)</sup>

## When it's too much

If the stress is too much external care is something to consider. You have options when choosing respite including:

- Residential care, the person stays in a care facility for two weeks or more.
- Respite care: The person has a few days away from home in a care facility.
- Day respite: The person goes to a care facility for the day and returns at night.
- In home care: a professional carer comes to your home.
- Family arrangements: You arrange informal respite with relatives or close friends.<sup>(8)</sup>

Not all options are available in all areas so investigate what is available where you are.

When considering respite it is normal to feel guilty and to worry about your loved one leaving your care. Think of respite as helping you to be a better carer by allowing your body and mind to rest. If the other person is not amenable to respite try to work out a compromise so that you have some time for yourself on a regular basis. You can explain that you need the rest so that you can continue to care for them at home as long as possible and you are not giving up or abandoning them.<sup>(8)</sup>

Often we are fearful of respite because we do not know what is involved. If you have seen reports on sub-standard care facilities or abuse by carers; you or your loved one may be fearful. You may also be of an age where you knew of somebody in an 'institution' and how depressing and restricted those places were. A good respite facility will allow you to visit, take a tour and ask questions. The practise of strict control over clients is long gone, client's are encouraged to maximise their independence and make choices. You could look into short stays to assess the facilities before committing to longer care.<sup>(8)</sup>

Shorter respite can help ease the transition to longer respite for both of you, helps you choose a good facility and give both of you peace of mind by knowing an option is there if you cannot be a caregiver because of injury or illness.<sup>(8)</sup>



## Tips for making caring less stressful

- Think over the big decisions before acting. Never sell your home, quit your job or move a family member into your home until you have researched and evaluated your options.
- Set limits. You don't have to do it all. Look for ways you can delegate tasks.
- Consult with other family members. Discuss their feelings on how your family member should be cared for.
- You may be eligible for a carers allowance, tax offsets and funding for equipment or respite services. Talk to Centrelink, your occupational therapist, doctor and the ATO about what you may be eligible for.
- Plan for the future. Investigate the prognosis for your family member's future and think about your own future. Let go of guilt and make the decision for assisted care when it is needed.
- Don't give up things you enjoy. Keep involved in some of your favourite activities as it keeps you from feeling overwhelmed and isolated.
- Make a list of the most important tasks you need to do each day.
- Be willing to change what you are doing when something goes wrong.
- Know where to find all the financial, legal, and medical papers.
- Make lists of emergency phone numbers, medicines, and other important information. Post these lists in places where people will see them.
- Know your limit. Be willing to say "no" when one more task will cause you too much stress.<sup>(9)</sup>

## Future and emergency planning

As a carer you will need to undertake long term planning as you may not be able to continue caring due to illness, injury, death or natural disaster. The following are some ways to minimise the stress of a change in a loved one's care.

Organise legal affairs for both of you including wills and powers of attorney. You both need to have directives covering financial responsibilities and health care. Decide how your loved one should be cared for if you cannot do it any more.<sup>(10)</sup>



Don't give up activities you enjoy.

Image courtesy of Wikimedia Commons

Organise your finances to cover the costs of outside care. Consider the future costs of external care and have contingency money for difficult times.

Imagine you have gone to the bank where you trip over, hit your head and are taken to hospital while unconscious. Would anybody know there is a person reliant on you at home? As unpleasant as it is to think about your own incapacitation or death; carry emergency details with you so that medical personnel know that someone is in your care.<sup>(10)</sup>

Decide with your loved one on an emergency carer. You may need to have a surgical procedure or attend to a family issue such as an interstate funeral. Make sure the emergency carer knows the reality of what is needed from them and is willing to do it. If you do not have someone know what your local respite options are.<sup>(10)</sup>

Is your home at risk of floods, cyclones, severe storms or bushfires? Plan how and when you would evacuate and where you could go if ordered to leave your home on short notice. Plan how you would transport your loved one's aids, equipment and where to get needed medications. Consider the risks of being without electricity or clean water for days after a natural disaster.<sup>(11)</sup>



## Staying physically healthy

- Eat a healthy diet and drink plenty of water and other liquids without alcohol or caffeine.
- Splurge sometimes by eating “comfort foods” These include pasta, potatoes, and other high-carbohydrate foods which can help you feel better when stressed.
- Make extra portions when you cook. Freeze the extra in meal-sized containers which you can later heat up.
- Let someone else cook. Ask if any local groups, such as “meals on wheels,” offer free or low-cost meals to older people and those with disabilities.
- Try to go to bed and wake up at about the same time each day.
- Keep your bedroom cool.
- Listen to quiet music or relaxation tapes to lull yourself to sleep.
- Exercise during the day, not at bedtime.
- Do not drink caffeine or alcohol before bed.
- Go to the doctor for check-ups.
- Be active each day. This may be walking, swimming, gardening or doing other activities with a friend.
- Stretch your muscles to help your body relax and stay strong.<sup>(9)</sup>

## Staying emotionally healthy

When friends and family members ask how you are, tell them. This includes talking about your feelings and what you find hard about being a caregiver.

- Write in a journal. For many people, this is a good way to express feelings.
- Visit with friends and family rather than always being alone.
- Ask for help when you have problems, concerns, or do not know what to do.
- Laugh. Maybe you and the person you are caring for can both enjoy laughing at funny books, web sites and TV shows
- Calm yourself by taking deep breaths, doing yoga, or meditating.
- Reach out. Studies show that people often feel better when they hug someone or pet an animal.
- Take time for yourself. Do something you enjoy such as playing music, reading, or being outdoors.
- Get help when you need it. Tell your

doctor or healthcare provider if you have signs of depression. These signs include having no appetite or trouble sleeping, feeling cranky, crying a lot, or having trouble thinking or remembering.

- Do not deal with your feelings by drinking alcohol, taking drugs or working too much
- Take a break from being a caregiver. Ask family, friends, or healthcare workers to help so you can take some time for yourself.
- Do something you enjoy at least once a week.
- Give yourself a treat from time to time.
- Do activities that can be quickly stopped and started again. These might be reading, doing crossword puzzles, and playing games like chess or drafts.
- When people offer to help, let them. You have nothing to feel ashamed or guilty about.
- Have lists of small chores and jobs that others can do.
- Ask people to do what they are good at. For instance, someone who likes to cook can make you meals. Or someone who likes to garden may want to mow your lawn.
- Join a local caregiver support group to meet others facing the same problems as you.<sup>(9)</sup>



Try hobbies that can be stopped and started when you have time to spare.

Image courtesy of Wikimedia Commons



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This Article was taken from "Information for People Living with Amputation" by Queensland Health. If you would like a copy of this book please contact the Amputees & Families Support Group Queensland Inc on 07 3290 4293 or via email [admin@afsg.org.au](mailto:admin@afsg.org.au) and we will arrange for a copy to be sent to you.

## Connecting carers to support services



Carer Gateway gives you access to a range of free services and supports to help you when you are caring for someone else. Services include support planning, counselling, peer support, financial packages and emergency respite.

If you support a family member or friend who has a disability, mental health condition, chronic health condition, terminal illness, or is frail aged these services are for you.

**Call 1800 422 737 or visit [carergateway.gov.au](http://carergateway.gov.au) to find out more.**

**wellways**

**Carer Gateway**  
An Australian Government Initiative

Wellways works with individuals, families and the community to help them imagine and achieve better lives. We have been supporting carers for the past 40 years and continue to do this across Queensland and the New South Wales regions of South West Sydney and Nepean Blue Mountains via Carer Gateway. Carer Gateway is a national service funded by the Australian Government.





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# Carb Smart

Join us in this Carb Smart workshop to help clear up any myths and give you the facts about carbohydrates!

You will receive practical information about food and diabetes, choosing quality carbohydrates, daily carbohydrates needs and how carbohydrates impact your blood glucose levels.

The workshop will be run by Emily Madden, Dietitian/ Diabetes Educator from Champion Health.

**Dates:** Wednesday, 3 March

**Where:** Amputees & Families Support Group Qld Inc  
Logan Central Community Centre  
9-11 Jacaranda Avenue  
Logan Central

**Time:** 10:00am followed by morning tea

**RSVP:** 3290 4293

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## Join us for a Catch Up

Feel like getting out of the house, relaxing and enjoying the company of others?

Come down, enjoy a free cuppa, morning tea and have a chat.

- Dates:**
- Wednesday, 3 March**  
(guest speaker - *Champion Health*)
  - Wednesday, 7 April**
  - Wednesday, 5 May**  
(guest speaker - *Exercise Physiologist*)
  - Wednesday, 2 June**



**Where:** Amputees & Families Support Group Qld Inc  
Logan Central Community Centre  
9-11 Jacaranda Avenue  
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**Time:** 10:00am - 12:00pm

**Everybody is welcome!**






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# Incontinence

## Bladder and Bowel

A healthy bladder and bowel is important for your overall health. Common problems like incontinence can affect men and women of all ages. Find out about bladder and bowel health, what to do if you have a problem, and what we're doing to help improve bladder and bowel health in Australia.

For any queries or concerns in relation to incontinence contact:

National Continence Helpline: 1800 330 066

If you are always looking for a toilet or worry about whether there will be a toilet at your destination download the National Public Toilet App or visit [www.toiletmap.gov.au](http://www.toiletmap.gov.au).



## Continence Aids Payment Scheme (CAPS)

The Continence Aids Payment Scheme (CAPS) provides a payment to help with some of the costs of your continence products.

### What is CAPS?

CAPS is an Australian Government program. It provides a payment to eligible people, to help with some of the costs of buying continence products.

### Why is CAPS important?

CAPS is important because more than 4.8 million Australians have a bladder or bowel problem. CAPS help you reduce the costs of buying continence products from a supplier of your choice.

### Who is eligible?

You need to meet all the eligibility requirements to get CAPS. The basic requirements are that you:

- have permanent and severe incontinence
- have an eligible neurological condition or eligible other condition that is the cause of your permanent and severe incontinence
- be 5 years or older
- be an Australian citizen

The CAPS team is part of Services Australia and operates from 8.30am to 5pm (AEST) Monday to Friday. Telephone 1800 239 309 with any queries.





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## Join us to learn more about Exercise Physiology!

An exercise physiologist can help improve quality of life, disease management or treatment outcomes across all ages and stages of life!

You will learn practical information from a qualified exercise physiologist and see how a tailored exercise program can help you reach your health and fitness goals no matter what your abilities are.

**Dates:** Wednesday, 5 May

**Where:** Amputees & Families Support Group Qld Inc  
Logan Central Community Centre  
9-11 Jacaranda Avenue  
Logan Central

**Time:** 10:00am followed by morning tea

**RSVP:** 3290 4293 or email [lynda@afsg.org.au](mailto:lynda@afsg.org.au)







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Email: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

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Cause of amputation: \_\_\_\_\_

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☐ I enclose my Cheque / Money Order to the value of \$ \_\_\_\_\_  
for membership and/or donation.

Signature.....Date:.....

Complete application and return with payment to:  
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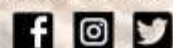
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