There are 5.5 million men and women in the United States providing assistance for a current or former service member who has a disabling injury or illness. These individuals—who we term military caregivers—are typically unpaid and often assume caregiving duties along with other work and family obligations. They are our country’s hidden heroes, whose support keeps veterans out of institutions and living longer, higher-quality lives. Military caregivers provide critical support for service members and veterans in performing daily activities, such as bathing, dressing, managing medications, and helping the disabled up and down stairs. While health care providers play an essential role in the recovery and reintegration of wounded, ill, and injured service members, military caregivers also play a part in helping veterans get the care they need and adhere to treatment.

Easing the Burden

Caring for a loved one is a demanding task. Military caregivers consistently experience worse health, greater strains in family relationships, and more workplace problems than non-caregivers, and it is worse for those caring for people who served after September 11, 2001. Military caregivers also face an elevated risk for depression; caregivers who spend more time caregiving and whose care recipients cope with behavioral problems are most likely to exhibit symptoms of depression. All corners of society can play a role in supporting military caregivers to mitigate these adverse consequences. Health care providers can play an important part in acknowledging caregivers’ roles and attending to their health-related concerns.
Here is what health providers can do to support military caregivers:

**Routinely assess caregiving needs and the presence of caregiver support.**

Health providers who treat injured or ill veterans should receive training in conducting a caregiving needs assessment that includes evaluating and documenting whether patients have a caregiver or other form of caregiving support. Caregiving needs will vary based on a number of factors, including the care recipient's condition, age, and recovery trajectory. Thus, these assessments should be repeated and updated as appropriate over the course of the individual's treatment.

**Acknowledge caregivers as part of the health care team.**

Military caregivers assume responsibilities to help maintain and manage the health of their care recipient: Fifty percent report administering physical or medical therapies or treatment, but they also help care recipients manage pain, maintain emotional stability, and engage in healthy behaviors. Performing these tasks effectively requires that caregivers interact regularly with health care providers: physicians, nurses, and case managers. Accommodating caregivers’ engagement and involvement in service members’ and veterans’ care helps recognize the importance of their role and can help support treatment adherence and healthy behavior at home.

**Integrate military caregivers into health providers’ culture.**

For health providers serving military and veteran populations, and particularly for those serving the mentally ill and disabled, increased efforts to educate staff about the role and needs of military caregivers can help build more respectful and trusting interactions. While specific curricula can be developed for provider training, opportunities to change the culture in health care can occur at professional meetings, continuing medical education events, and through the professional literature. There are opportunities for providers to learn more about caregivers online and in peer-reviewed journals, and providers might also benefit from tailored information and fact sheets delivered through professional societies, professional training, or leadership initiatives in health care settings.

**Adopt appropriate caregiver documentation requirements to facilitate their engagement.**

If the health provider identifies the presence of a caregiver, he/she should work to engage the caregiver in health care planning to facilitate treatment adherence. In some settings, specific documentation (such as a power of attorney or formal identification) may be required before a provider will allow a caregiver to participate in treatment sessions. Other treatment settings may already incorporate caregivers and implement specific efforts to engage them with less restrictive requirements (such as simple patient consent.)
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