Looking after your Back:

Back Care for Parents and Carers of children whose physical disability prevents them from being able to transfer on their own e.g. from bed to chair / chair to toilet

Looking after your back

The daily care of children with a disability is physically demanding. Consequently many carers of children who have a physical disability experience some back pain. Also these demands can increase suddenly if there are changes in the child’s level of mobility due to pain, surgery or a fracture.

Looking after your back is a complex issue

- When your children are young and need your help, you lift them a lot. As they grow it can be difficult to recognise when the physical assistance you are giving to your children has gone beyond what can be safely expected.
- Parents want their children to grow and develop normally, so you may feel reluctant to start using special equipment which admits your child’s disability.
- It can be difficult to ask for help. It is natural to want to retain your family’s privacy and freedom. It is alright to want your house to feel and look like a normal family home and not like a hospital.
- Equipment can be expensive and takes up space. At first it can make care slower and using equipment appears to be more difficult.
- In addition to caring for your child, you use your back when doing household chores, shopping, at work and during leisure.

It is important to think carefully about the future – rather than waiting for a crisis to occur

- Homecare workers have (work) health and safety standards. They are not permitted to lift a person over 16kgs unless using special (manual handling) equipment, such as an electric high/low bed, a hoist or a shower chair.
- Plan to get equipment applications in as soon as possible as it may take some time (months or years) to get the right assessments and funding to purchase this equipment.
- An injury or problem with your back will make caring for your child very difficult without manual handling equipment.
Assess your physical risk factors

If you answer yes to any of these questions you are at risk of a back injury

- Is your child over 16Kg?
- Do you lift your child frequently?
- Do you bend or twist when lifting?
- Do you sometimes lift in a restricted space?
- Is your child awkward to lift?
- Is it awkward to keep your child close to your body while lifting them?
- Do you lift your child from a low height or from surfaces above waist height?
- Do you often need to reach or bend forward?
- Is it hard to get help to lift when you need it?
- Do you experience back pain?
- Have you previously needed treatment for a back injury or back pain?
- Do you have any arm or leg pain or injuries?

What you can do:

Gather information

- Look at your situation – write down exactly what you do in a day/week so that you can gain a clearer picture of when and how often you are lifting. This may help you find ways of reducing the number of lifts, or changing the timing of activities so that you can get more help.
- Request help from an Occupational Therapist as soon as possible. There can be a waiting time for services and funding may be limited. An Occupational Therapist can advise and assist with applications for equipment and home modifications.

Implement Back Care Strategies – during all lifting activities

- Think about method:
  - Plan your lift or transfer.
  - Make sure there are no objects which will get in the way of your lifting and carrying.
  - Lift with your child's weight, or any other object you are lifting, close to your body.
  - Use your legs to do the work; do not bend your back.
  - Tighten your stomach muscles without holding your breath - this provides your back with extra support during the activity.
  - Ask for assistance if your child or the load is too heavy or awkward to lift.
  - Avoid lifting above your head or below your knees.

- Think about getting manual handling equipment such as:
  - Slide sheets (moving child up the bed, pivoting into car).
  - Pivot pads for transfers (such as moving your child from chair to car).
  - Hoists, to move your child from the bed to chair/toilet etc.
  - Electric high / low beds – Can go up or down to make it easier for you and your child.
  - Wheelchairs which can be transported in a vehicle.
  - Mobile shower/toilet chairs.

- Plan for the future when purchasing a house or a car. For example you may need:
  - To eliminate or minimise stairs and steps.
  - Space and a flat floor to allow for shower equipment.
  - Space to allow the use of a hoist.
  - A van with a lifting platform to transport your child in a wheelchair.
• Consider going to a manual handling course or asking your therapy team for specific manual handling advice. The appendix has some extra ideas to help you care for your back.
• Try a regular exercise routine, even just a 20 minute walk every few days, will keep your muscles in good condition and make caring for your child safer and easier.
• Seek treatment and advice at the first sign of back pain.

**Remember:**
• Many parents suffer back pain when caring for their children who have a physical disability.
• A back injury can be painful and debilitating and make it very difficult to care for your child.
• You can do something now and in the future to stop an injury occurring.
• Your Occupational Therapist can help you to find the right solutions.
Appendix: Guide for safe manual handling tasks

**PICKING UP A CHILD FROM THE FLOOR:**

Squat down to pick up the baby/child, and bring the child close to you before standing up. If you are not able to squat down, then you can do a semi-squat.

Maintain the natural curves in your back at ALL times.

**CHILD IN/OUT OF TUB OR AREA ON GROUND LEVEL:**

Squat or kneel down close to the edge of the tub/area to lower the child or to lift the child. For tub areas - you may want to have a safety mat to provide increased stability.

Maintain the natural curves in your back at ALL times.
CHILD IN/OUT OF CAR:

Keep the child close to you, and be as upright as possible. Try to avoid leaning to one side, and try to keep the child centred when holding them.

Maintain the natural curves in your back at ALL times.

CARRYING A CHILD:

Keep the child close to you, and be as upright as possible. Try to avoid leaning to one side, and try to keep the child centred when holding them.

Maintain the natural curves in your back at ALL times.

LIFTING TO/FROM LOW SHELF:

Squat down, and bring item close to your body. You can kneel or do a semi-squat if you are not able to do a full squat. Keeping the load close to you will reduce the load on your back and reduce the risk of injury.

Maintain the natural curves in your back at ALL times.
LIFTING TO/FROM THE FLOOR:

If you don’t have equipment available to move objects, ask for assistance. Do not lift object if unable to perform the task safely. Coordinate the lift, and use your legs to lift.

Maintain the natural curves in your back at ALL times.

TEAM LIFTING:

If you don’t have equipment available to move objects, ask for assistance. Do not lift object if unable to perform the task safely. Coordinate the lift, and use your legs to lift.

Maintain the natural curves in your back at ALL times.

PUSHING:

Keep your arms close to your sides and walk with the object you are pushing. Keep the object close to you rather than at arms distance. Keeping the object closer to you reduces pressure on the spine, and helps to facilitate upright positioning.

Maintain the natural curves in your back at ALL times.
REACHING DOWN OR REACHING ACROSS:

When reaching across or down, lift the opposite leg to assist with keeping your back straight.

When reaching down in hard-to-get-to areas, or when reaching at or below mid-thigh height, lift the opposite leg to the arm reaching. This will help to keep your spine in alignment and reduce twisting.

Maintain the natural curves in your back at ALL times.

UNLOADING/LOADING FROM BOOT OF VEHICLE:

Place one foot/knee on the bumper, and slide items close to you before lifting.

Maintain the natural curves in your back at ALL times.

“Guide for safe manual handling tasks” used with permission from the Occupational Health and Safety and Injury Management Department, The Children’s Hospital at Westmead.