

Older carers' social support, wellbeing and service use



Timothy Broady, Tom Hinton and Karren Graham, Carers NSW

With approximately 620,000 Australian carers aged 65 years or over, a vast body of evidence exists that indicates these carers experience challenges that are compounded by increasing age and health issues, with detrimental effects on their personal wellbeing. Findings from the Carers NSW 2016 Carers Survey suggest that social support and formal services are significant in mitigating some of the negative outcomes associated with caring roles.

Carers from across New South Wales were invited to complete a survey regarding their caring experiences, support and service access, and wellbeing. A total of 559 were aged over 65. 102 were caring for a son or daughter and 305 care for a spouse, 32 cared for both. We have compared older spousal carers and older parent carers in relation to their perceived level of social support and service use against personal wellbeing indicators.

Spousal carers were less likely to be receiving services for the person they care for (see Figure 1) which is consistent with many attitudes to spousal caring that accept that caring is simply an extension of the spousal relationship but also a reluctance to accept outside support (Johanna et al, 2015).

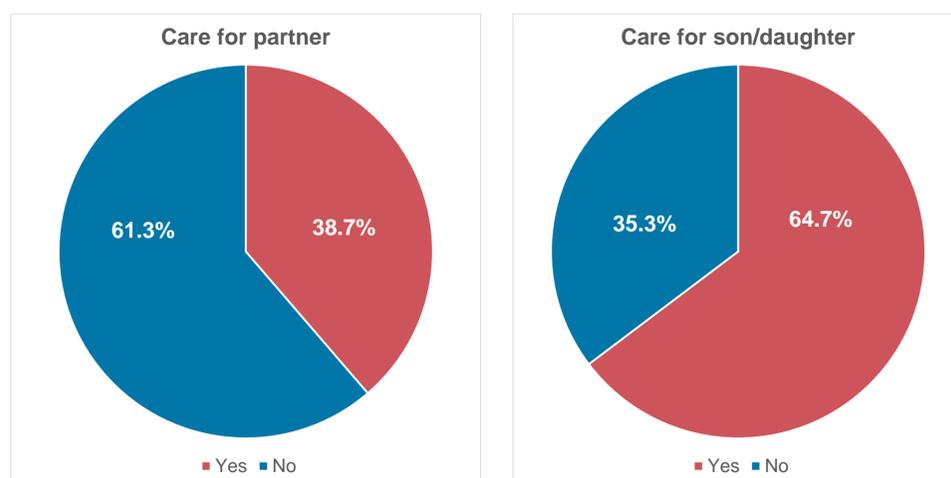


Figure 1. Does the person you care for receive any formal support/services?

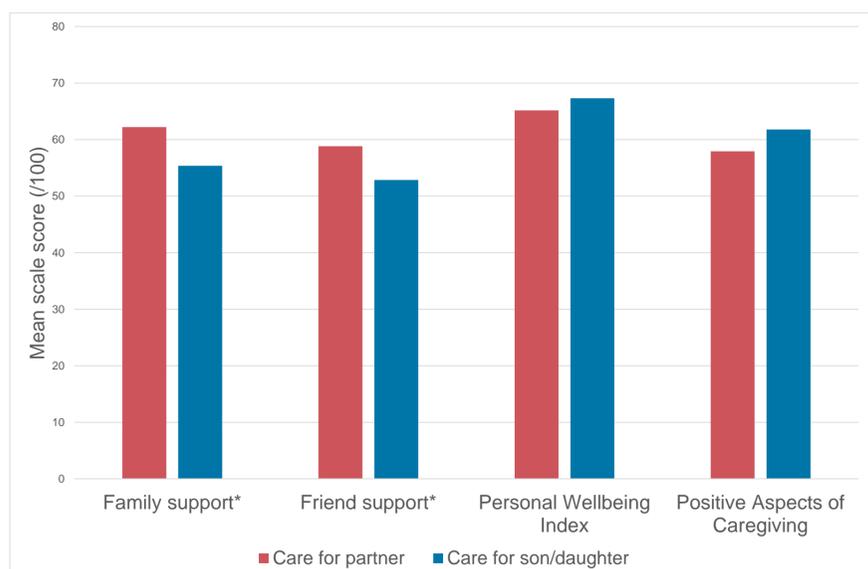


Figure 2. Comparisons between those caring for partner and those caring for son/daughter

With the exception of respite, older carers of adult children were less likely to feel that they had adequate access to carer support services (see Figure 3), despite being more likely to be caring for someone in receipt of formal services (Figure 1). Spousal carers appear to have better or more adequate access to social support, however less than a quarter of older carers were able to use respite and counselling supports as much as they needed.

Figure 3 represents a notable difference in service needs and service expectations in the two cohorts, suggesting that the carer's service needs are influenced by their relationship to the person they care for. Most older parent carers will have challenges associated the ongoing sustainability of an existing caring role whereas older spousal carers may be taking on a caring role for the first time in their life.

Although older carers share many commonalities relating to age, health and carer disability, services and supports to older people should not overlook the differences in need arising from the nature of their caring role. A carer's relationship with their care recipient must be carefully considered when planning service delivery to a particular cohort and this remains true for older carers.

Those caring for a partner reported better support from family and friends than those caring for a son/daughter. However there was no significant difference between these groups on Personal Wellbeing Index or Positive Aspects of Caregiving scores (see Figure 2).

Supplementary research highlights more significant health and wellbeing challenges relating to age and cognitive decline leading to a higher likelihood that an older carers will have a disability themselves (AIHW, 2015). This can blur the lines of carer and care recipient. Older carers are more likely to report that they are able to care without assistance than younger carers (AIHW, 2015). This may indicate that formal services are being replaced or supplemented by family, friend or even reciprocal support from their care recipient.

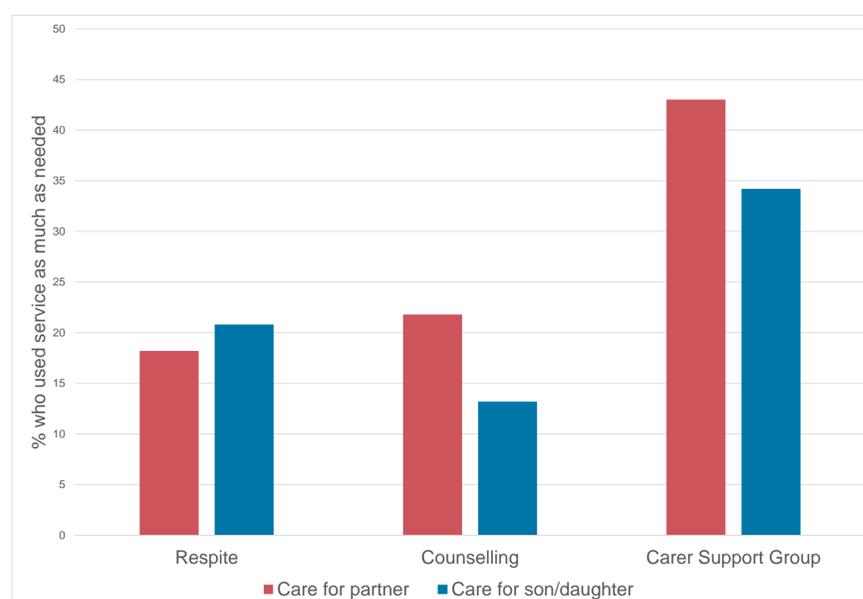


Figure 3. Perceived adequacy of service use