
CONFERENCE ABSTRACT**Understanding the carer role and challenges in Central and Eastern Sydney in Australia: a population based linked cohort study of people age 45 years and over**

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Introduction

Carers comprise a significant portion of the Australian community. In 2015, almost 2.7 million Australians were identified as carers, and almost one-third (31.7%) of this group were identified as primary carers. There is currently a lack of understanding of the impact of being a carer on a persons health and wellbeing compared to non-carers.

Methods

A record linkage study using questionnaire data from the 45 and Up Study, Medicare Benefit Scheme claims, hospitalisations and deaths was undertaken on participants in Central and Eastern Sydney (n=29,489). Characteristics of carers and non-carers were described. Outcomes for each of these groups—General practice (GP) use, hospitalisations and mortality—over an 8-year period were also calculated and compared. Characteristics of carers who were coping well compared to those who were not (using quality of life as the indicator) were also described as well as differences in health service use and mortality.

Results

Around 12% of the cohort were carers at a given time, though most transitioned in and out of caring roles over a five-year period. Compared with non-carers, carers in CES were more likely to be: female, married, speak a language other than English, current smoker, engaging in adequate physical activity, have ever had anxiety, psychological distress, heart disease, self-rated poor quality of life and less likely to be older, have higher incomes, and need help with daily activities. Carers had higher rates of GP use than non-carers [Adj. HR (95% CI): 1.21(1.13, 1.30)]. However, hospital admissions and mortality were not significantly different.

Compared with carers who were not coping well, carers who were coping well in CES, once adjusted for all of the other covariates, were more likely to self-report good quality of health, and less likely to have high psychological distress. Carers who were coping well were 24% less likely to be high GP users [Adj. HR (95% CI): 0.76 (0.63, 0.94)] and had 33% lower mortality rates [Adj. HR (95% CI): 0.67 (0.51, 0.87)]. Hospital admissions were not significantly different.

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Discussion and Conclusions

This study confirms the transitions between carer and non-carer roles occur, and that only a proportion of carers remain in these roles for many years. Caring often starts suddenly and people need to quickly learn and adapt to their new role.

This study's finding that carers are well-engaged with general practice suggests that GP is an important setting to: identify people in caring roles; identify carers who may be struggling in these roles; and delivering interventions for carers. This is particularly important for those who are not coping well.

Limitations/Suggestions for future research

While the 45 and Up Study cohort is reasonably representative of the population from which it was drawn, non-response at baseline may mean that the cohort varies slightly from the population. Nevertheless, comparison of these rates over time and between sub-groups is still valid.

Further research examining differences between long-term carers and those who transition in and out of the caring role would also assist in better understanding the carer role and challenges.