

Health disparities faced by female caregivers when caring for older adults and children in middle-income countries



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SAGE

- WHO's SAGE: Study on global AGEing and adult health.
- Longitudinal study in 6 middle-income countries: China, Mexico, Russia, Ghana, South Africa, and India.
 - China did not complete the caregiver section of the questionnaire and was not included in this study
- Cross-nationally comparable self-report, anthropometric, and performance health data on older women (N=15,975)
 - Smaller comparison groups of 18 to 50year-old were also sampled

Introduction

- Caregiving and its relation to poor health is not well studied; however it has been shown that there is a neglected burden for older caregivers of children and adults (Thrush et al., 2014).
- Marital status, living in rural areas, and having sustainable income all affected the health of older and younger caregivers (Legg et al., 2013).
- Difficulty scores were due to outside factors (e.g., economic downfall)

Hypotheses

- Caregiving for adults and children will be associated with overall poorer health for women aged 18-50 in all five countries
- More difficulties associated with caregiving for women will be associated with worse self-reported health
- Poor self-reported health in caregivers will be associated with less sustainable income, living in rural areas, and not being married

References:

Legg N, Weir J, Langhorne P et al., Is informal caregiving independently associated with poor health? A population - based study. *Journal of Epidemiology and Community Health*. 2013: 657: 95-97

Thrush A, Hyder P. The neglected burden of caregiving in low- and middle-income countries. *Disability and Health Journal*. 2014: 7:262-272.

Method

Participants

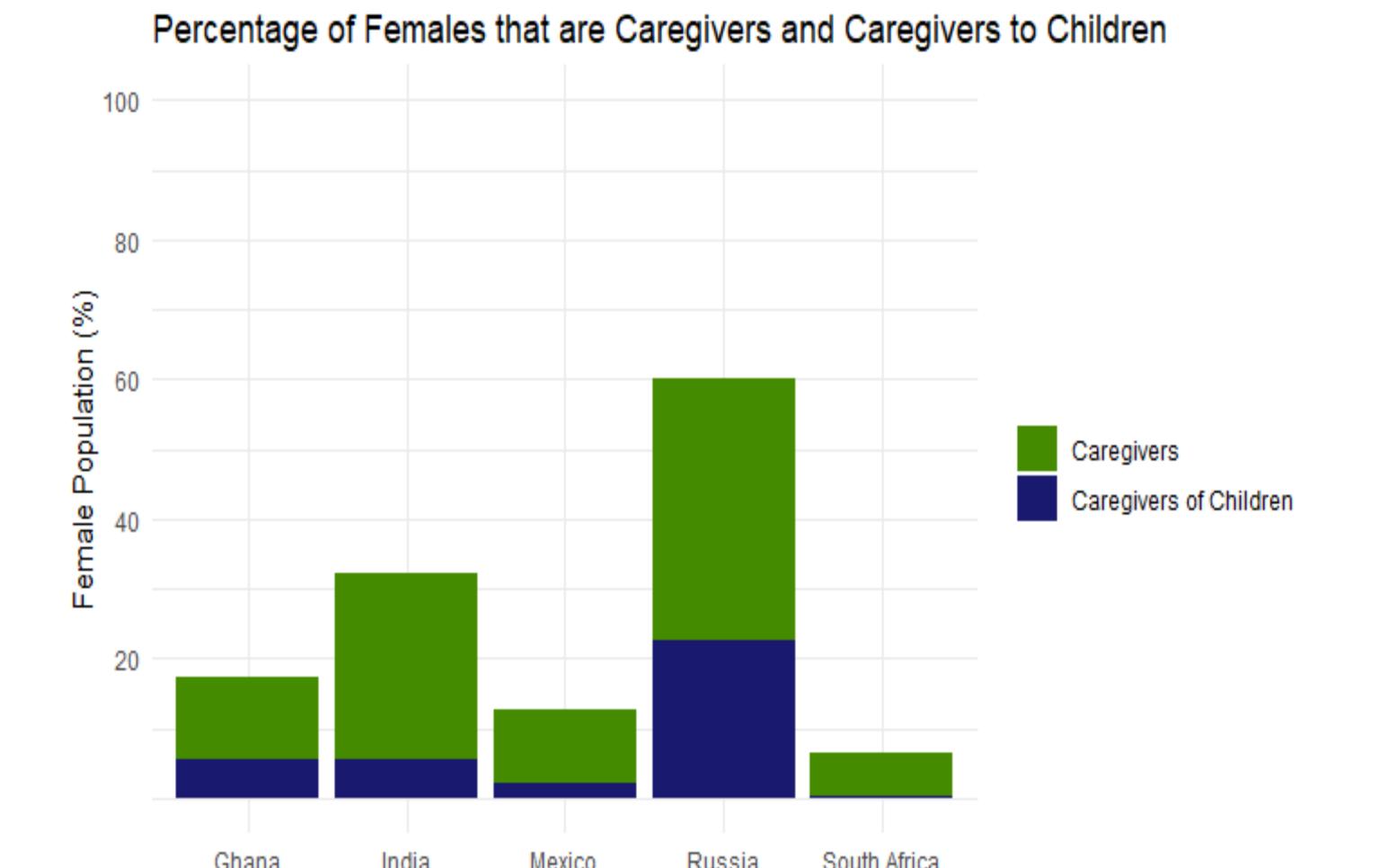
- All participants were women: *N* = 17164
- 18 to 50 years old: n = 5,221, 30.5%
- 50+ years old: n = 11943, 69.6%
- Caregivers to children and adults: n = 1636, 9.6 %
- Caregivers to Children: n = 421, 2.5%

Materials

- Impact of care questions: "As a result of providing care, or the increase in providing care, over the last 12 months, how much difficulty have you had with:"
- Self-rated health: 1 "very good health" to 5 "very poor health"
- Marriage: 1 "Married or cohabiting" or 0 "Divorced, Separated, or Widowed"

Procedure

• A random sample of non-caregivers was selected from each country to form equal groups for comparison (n=1,360).



	Ghana	India	Mexico	Russia	S. Africa
Age	0.02***	0.02***	0.02*	0.02***	0.01
Wealth	0.04	-0.07	-0.74*	-0.24**	-0.35 [†]
Marriage	-0.13	0.08	0.28	0.11	-0.19
Rural	-0.03	0.03	0.03	0.16*	-0.39
Caregiving Difficulties	0.15	0.22***	0.03	0.15**	0.09

Results

- Caregiving was associated with poor health for all countries except Mexico and Russia
 - In Russia caregiving was associated with better heath
- Difficulties from caregiving were associated with poor health in all countries except Mexico and South Africa
- Poor health in caregivers was most frequently associated with older age, followed by lower wealth and more caregiving difficulties
- The overall correlation between caregivers dealing with difficulties and poor health is statistically significant (Pearson's r = .21, p < .001)

Discussion

- Overall these findings suggest that caregiving is associated with poor health in three of the five countries
 - Women who live in rural areas, have a low socioeconomic status and are not married are affected the most.
- Furthering our investigation into what leads to the differences in the relationship between health in caregivers across nations could improve outcomes globally for this population.

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