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UNIVERSITY OF LUXEMBOURG
Integrative Research Unit on Social
and Individual Development (INSIDE)

HEALTH CAPABILITY OF FAMILY CAREGIVERS

Contribution of, and relations between its dimensions

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Family caregivers and their health

- A growing public health challenge
 - Complex care provided day to day in addition to personal life
 - About 10% of the population
- A lifestyle which entails risks for their health (2 meta-analyses):
 - Problems with physical health (Vitaliano & al., 2003)
 - Stress, depression, (Pinquart & Sörensen, 2003)
- + Social isolation (Spitz & Sordes, 2007)

Vitaliano, P. P., Zhang, J., & Scanlan, J. M. (2003). Is caregiving hazardous to one's physical health? A meta-analysis. *Psychological bulletin*, 129(6), 946–972.

Pinquart, M., & Sörensen, S. (2003). Differences between caregivers and noncaregivers in psychological health and physical health: a meta-analysis. *Psychology and aging*, 18(2), 250.

Spitz, E., & Sordes Ader, F. (2007). Qualité de vie, entourage, soutien social. In *Qualité de vie et maladies rénales chroniques: satisfaction des soins et autres Patient-Reported Outcomes*. John Libbey Eurotext, Paris., pp. 109–123.

The capability approach

- Developed from the 1980's by Amartya Sen (Sen, 1992)
 - Welfare economist and philosopher
 - Nobel Price of Economy in 1998
- A way to conceive quality of life
 - Alternative to economic models of development:
 - Resourcist (economic development)
 - Utilitarist (improvement of satisfaction)
- Capability
 - What a person can do or be according to the choices which really are available to them

Capability approach: Application to health

- Capability to be healthy
 - Fundamental for human dignity (Sen, 1993; Nussbaum, 2011)
 - A complex set of capabilities (Venkatapuram, 2011)
- Contribution of health economics
 - Finding indicators of capability to evaluate health interventions
 - Reconsider health & health-related quality of life to measure effectiveness
 - Questionnaires of capacity to accomplish valued domains of life
(Coast & al., 2008 ; Kinghorn, 2010 ; Al-Janabi & al., 2012)

Sen, A. (1993). Capability and well-being. *The quality of life*, 1(9), 30–54.

Nussbaum, M.C., 2011. *Creating capabilities*. Harvard University Press.

Venkatapuram, S. (2011). *Health Justice*. Polity Press.

Coast, J., Flynn, T. N., Natarajan, L., Sproston, K., Lewis, J., Louviere, J. J., & Peters, T. J. (2008). Valuing the ICECAP capability index for older people. *Social science & medicine*, 67(5), 874–882.

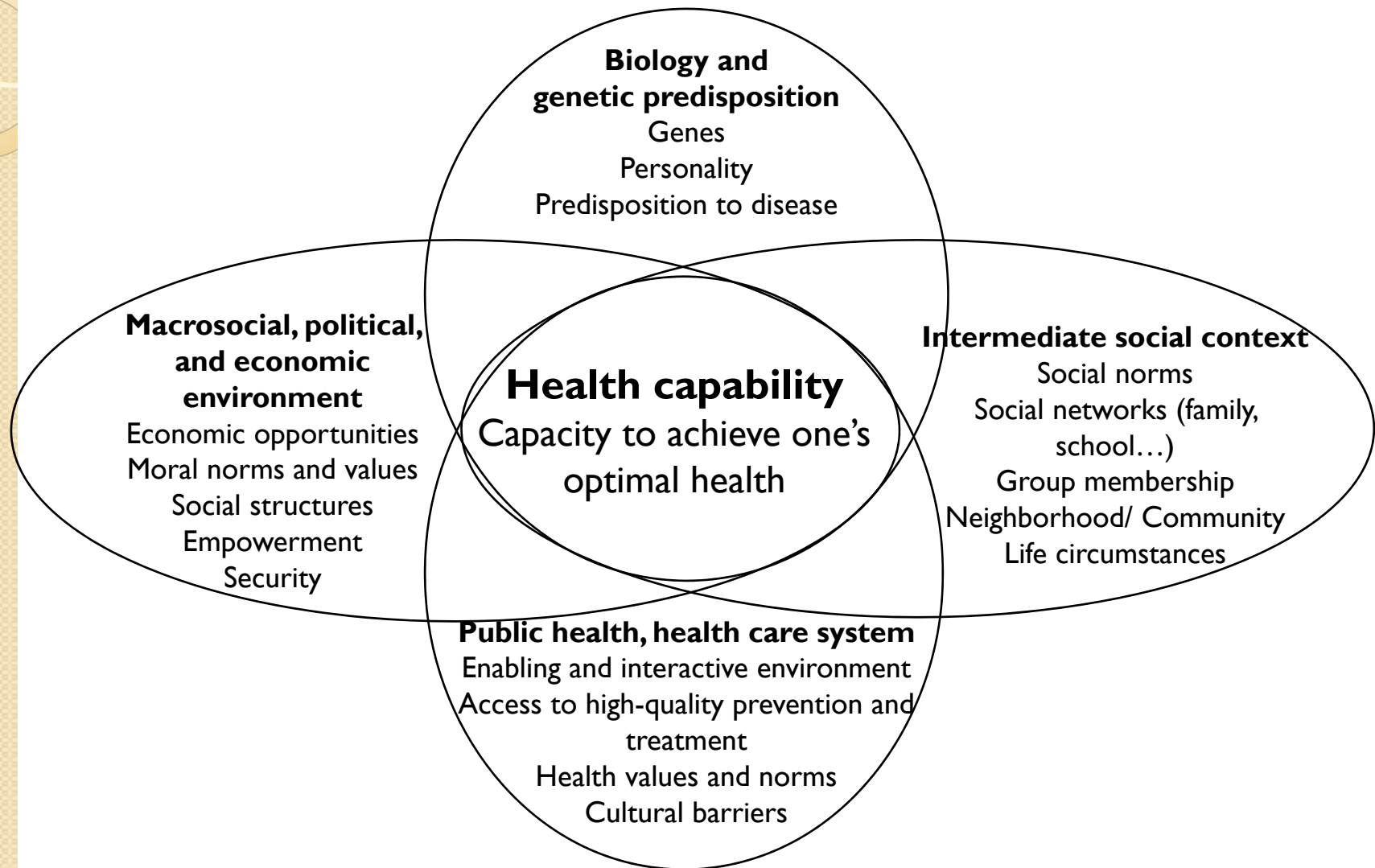
Kinghorn, P. B. (2010). *Developing a Capability Approach to Measure and Value Quality of Life: An application to chronic pain*. University of East Anglia.

Al-Janabi, H., Flynn, T. N., & Coast, J. (2012). Development of a self-report measure of capability wellbeing for adults: the ICECAP-A. *Quality of Life Research*, 21(1), 167–176.

The Health Capability Paradigm (Ruger, 2010)

- Medical ethics and health politics
- Theory of a right to health
- Capacity to achieve one's optimal health
 - Health status (functioning)
 - The way a person takes care of his/her health (agency)
 - Choice?

Conceptual model of health capability



HCFC-8 domains: a tool for measuring health capability of family caregivers

- National stroke survey - Luxembourg
- Health Capability of Family Caregivers questionnaire (8 domains - 20 items; Bucki, 2014)
 - Psychological health (3 items),
 - Physical health (2 items),
 - Self-efficacy (2 items),
 - Lifestyle value (3 items),
 - Family support (3 items),
 - Social capital (3 items),
 - Material condition / Security (2 items),
 - Satisfaction with health services (2 items)
- Psychometric and content validity tested

Aim

To determine:

- Which relations exist between the dimensions of health capability,
- Which dimensions contribute the most to health capability

Methodology

Participants

- Family caregivers who participated to the Luxembourg stroke survey (n=62)

Design

- Face-to-face structured interviews

Instrument

- HCFC-8 domains questionnaire

Statistical analyses

- Bayesian approach
- Structural equation modelling

Characteristics of the sample

- n=62
- 64.5% women
- 85% partners
- Average age : 59.3 (\pm 13,7)
- \approx 50% of caregivers accompany victims who have motor and/or sensory (especially pain) impairments

Domains of health capability : Which relations ?

Psychological
health

Family support

Physical health

Social capital

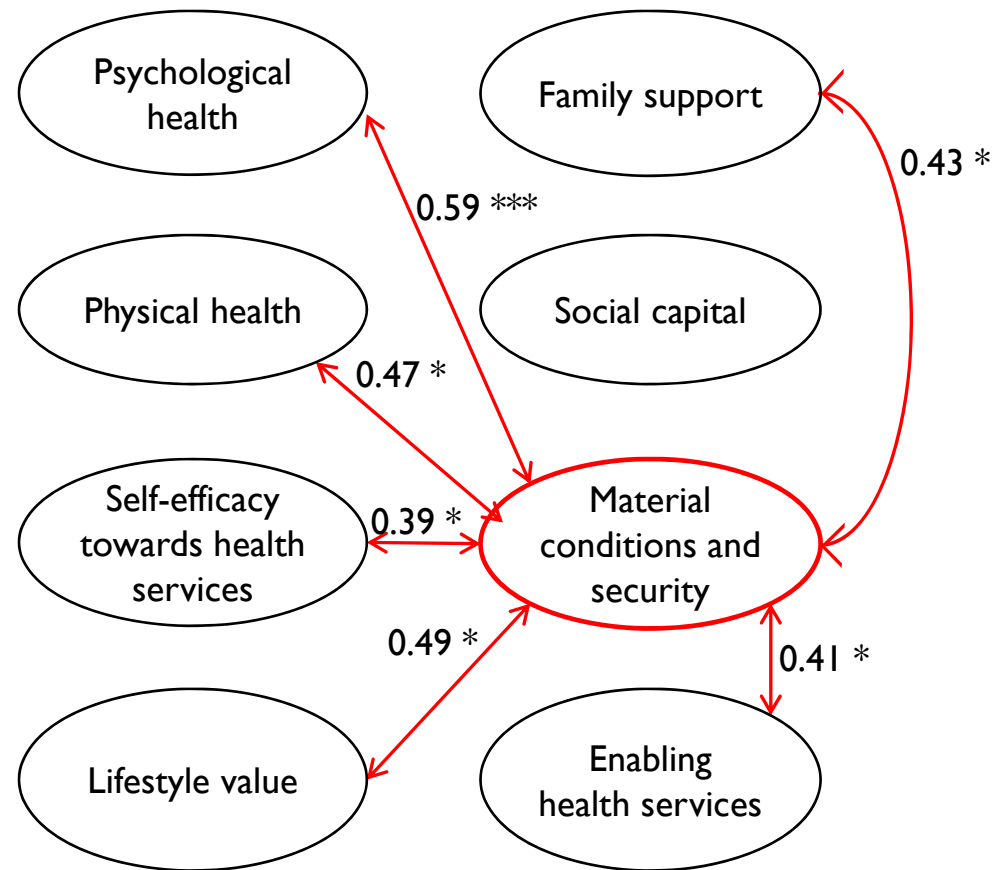
Self-efficacy
towards health
services

Material
conditions and
security

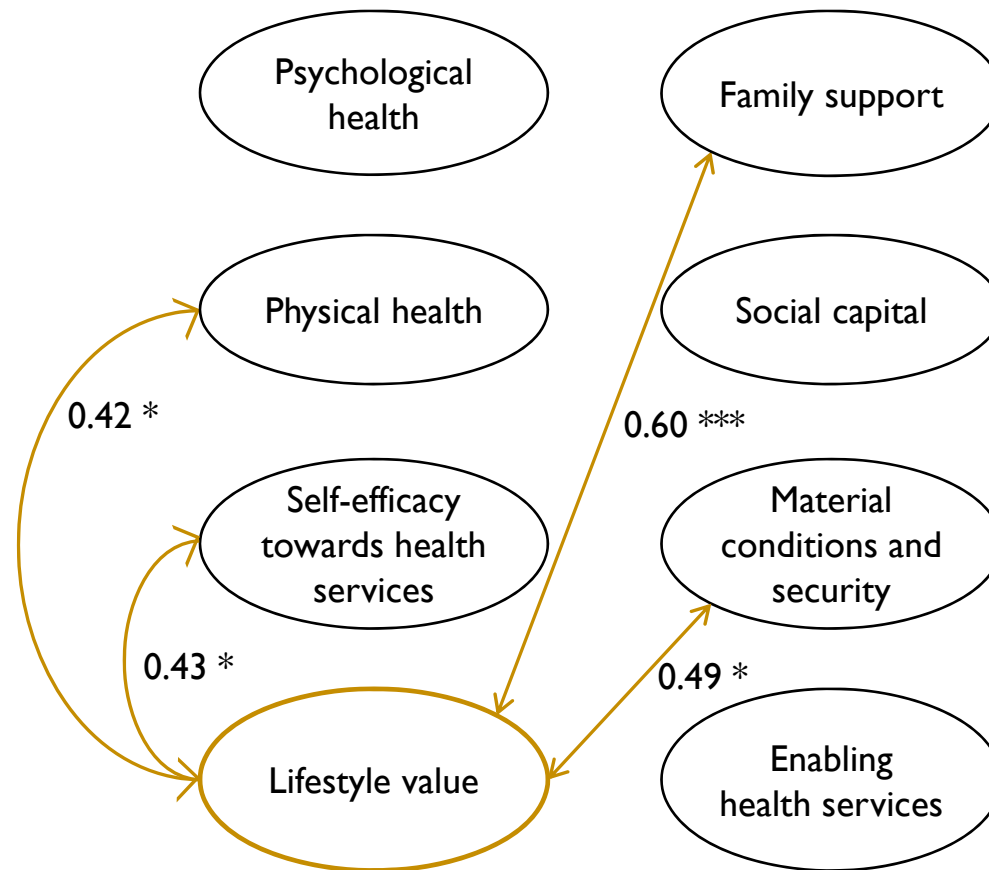
Lifestyle value

Enabling
health services

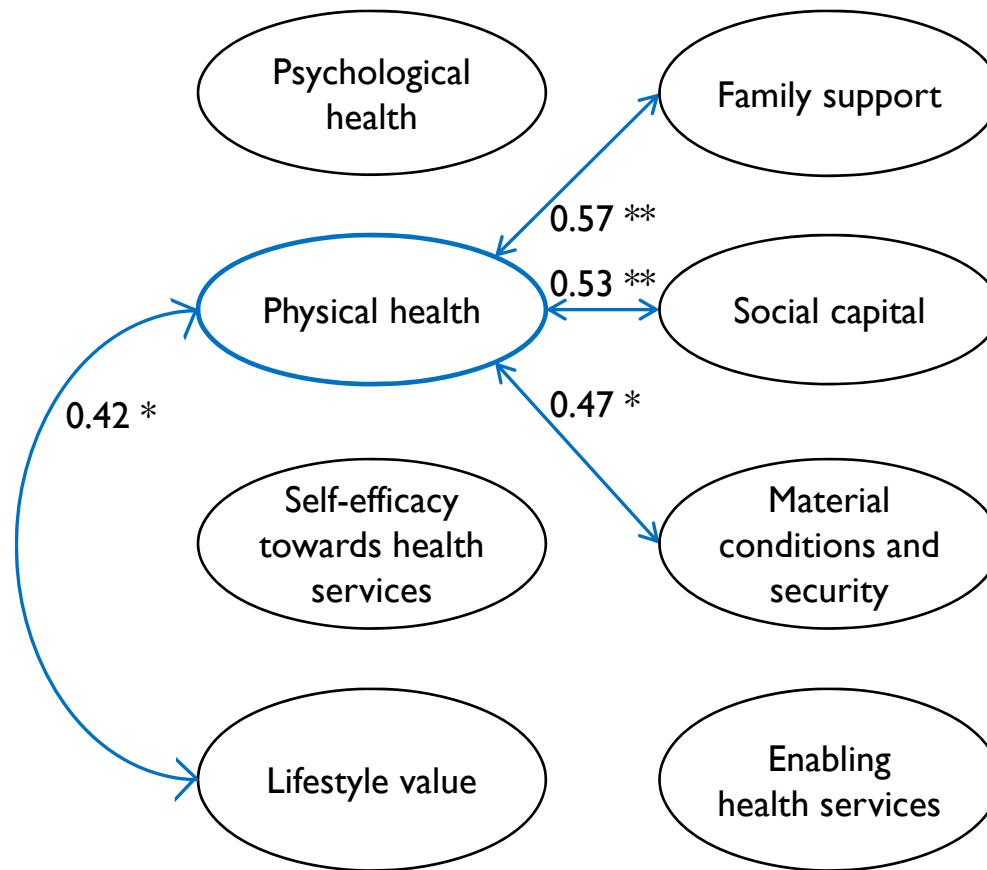
Domains of health capability : Which relations ?



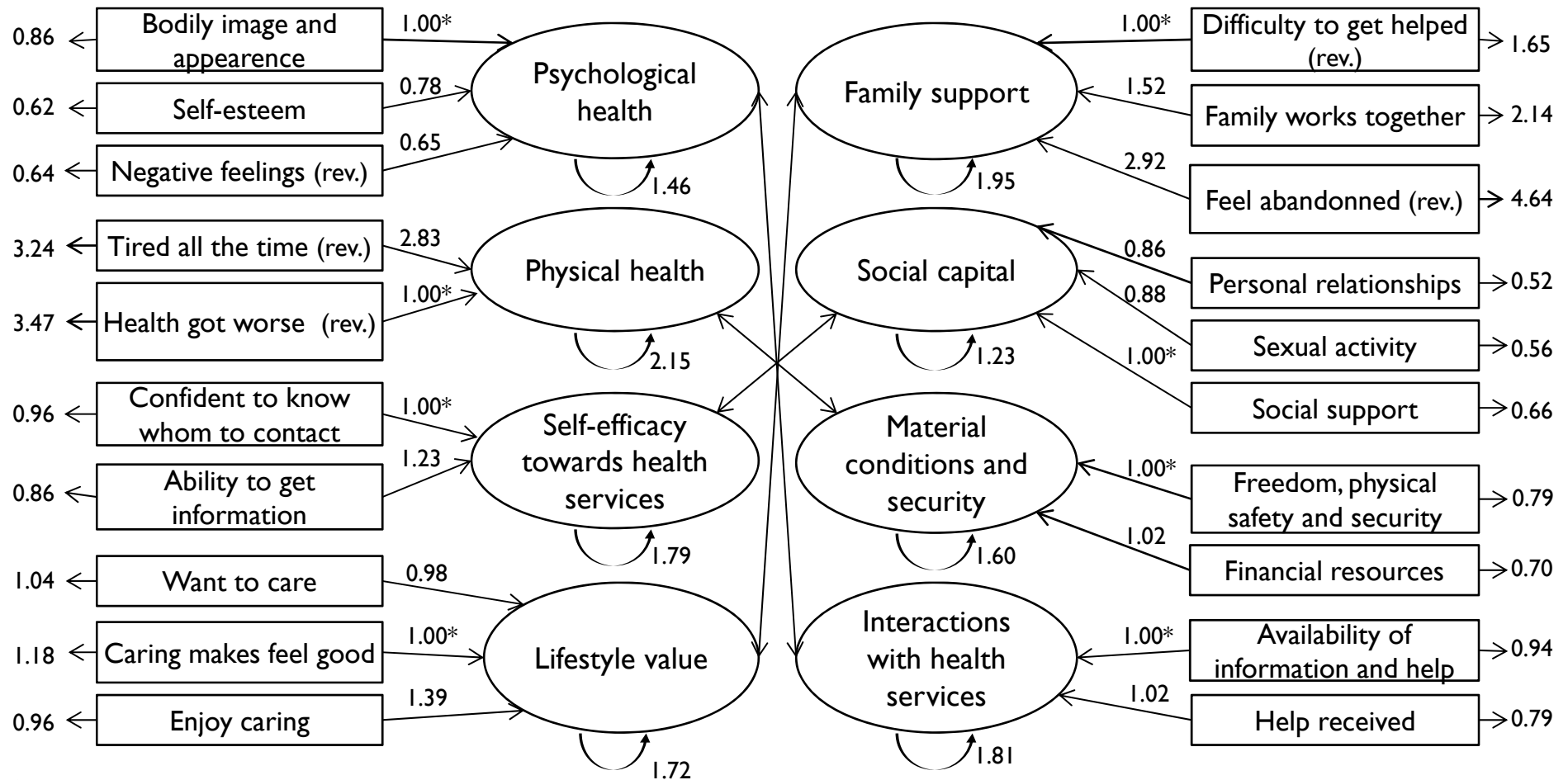
Domains of health capability : Which relations ?



Domains of health capability : Which relations ?

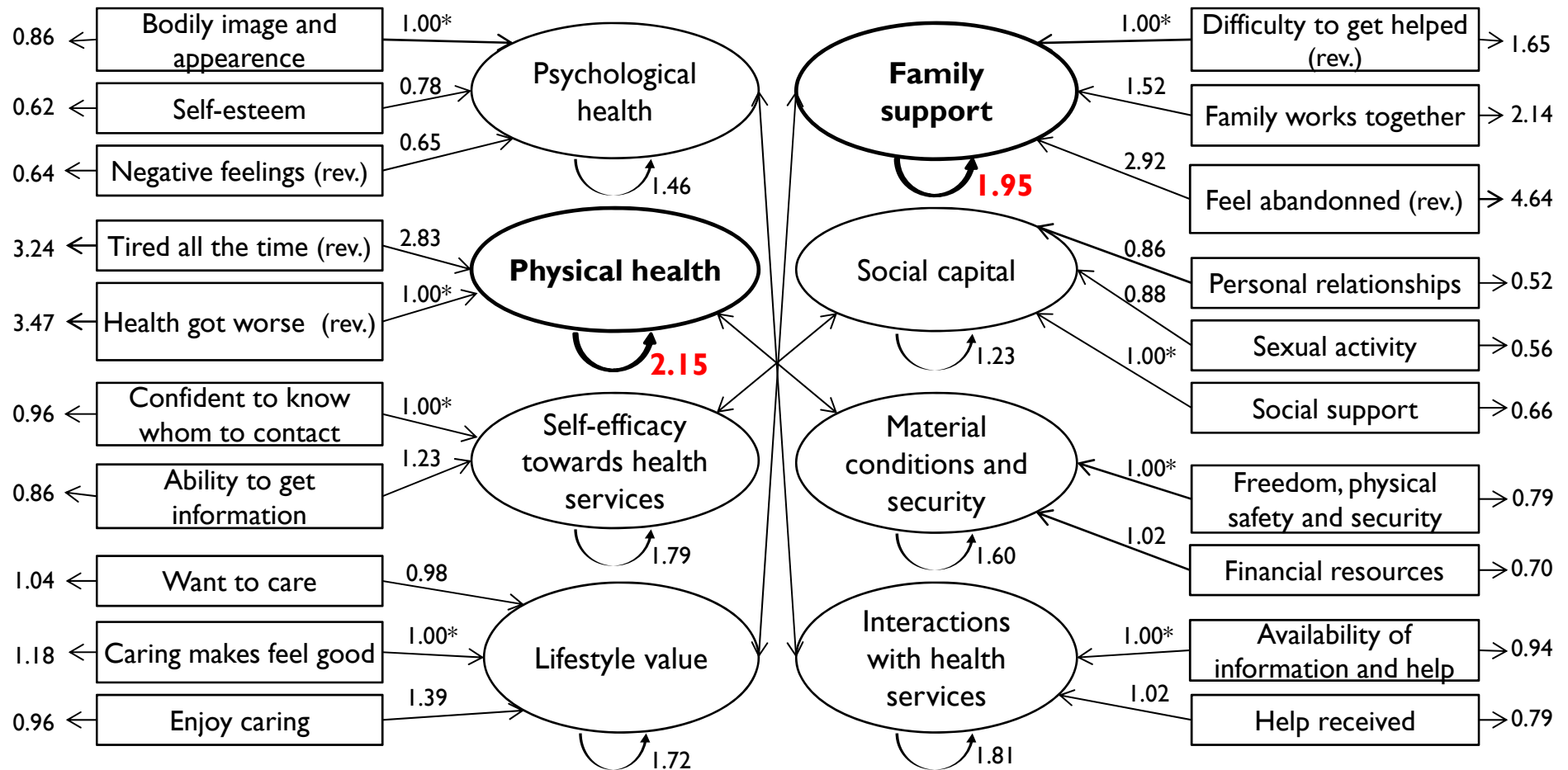


Domains of health capability : Which contribution ?



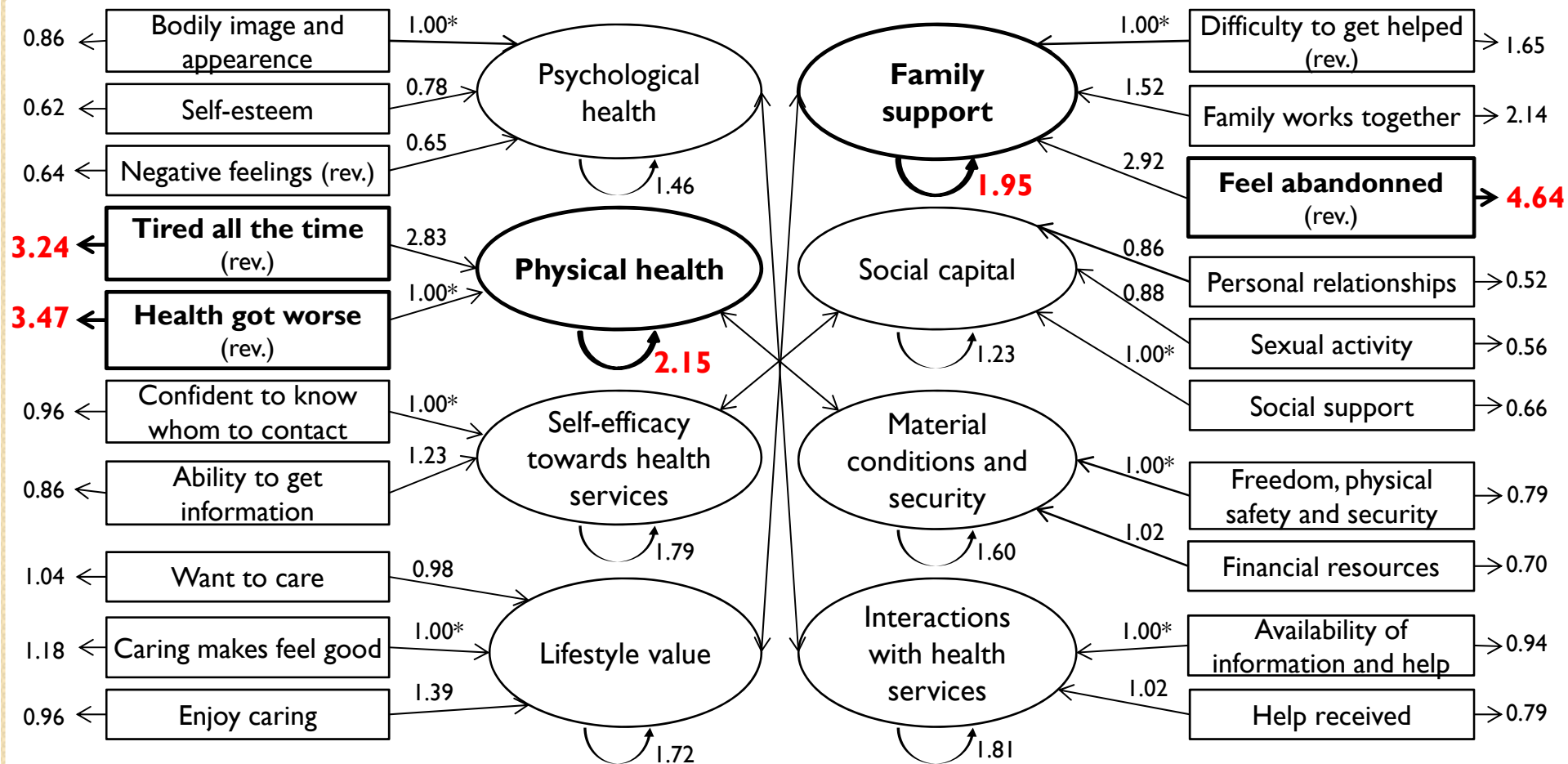
* Reference value

Domains of health capability : Which contribution ?



* Reference value

Domains of health capability : Which contribution ?



* Reference value

Enhance family caregivers' health capability

- Find ways to:
 - relieve them physically,
 - foster family networking around the ill
- + giving priority to the socially disadvantaged
- For example:
 - Trialogues (Amering, 2010)
 - Access and training to Information and Communication Technologies

Limits

- Sample size
 - ⇒ Impossible to generalize the results
 - ⇒ Need to validate the HCFC questionnaire with a larger sample
- Cross-sectional study
 - ⇒ How has health capability evolved ?

Perspectives

- Finalize the HCFC questionnaire
 - Complete the domains and items
 - Administer to a new and larger sample of caregivers
 - Validate the final version
- Applications of the HCFC questionnaire
 - Evaluation of complex health interventions
 - Diagnosis of family caregivers' needs
- A European research project in preparation



Thank you for your attention.

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