

# Effects of Social and Financial Supports on Veterans who are Caregivers: Physical & Mental Health and Economic Status

## Author

[Miller, Katherine E.M.](#)

## Abstract

*Objective:* Family caregivers play an essential role in the long-term care system in the United States (U.S.), yet limited policies currently support caregivers. The Veterans Health Administration (VHA) Program of Comprehensive Assistance for Family Caregivers (PCAFC) provides financial and training support to eligible caregivers of Veterans. Our objectives are to (1) examine the effects of PCAFC on caregiver health care use, health, risk of costs, and employment and (2) describe PCAFC in the context of state policies supporting caregivers.

*Methods:* We use a pre-post study design of caregivers of Veterans who are themselves Veterans enrolled in versus denied PCAFC from 2011-2017. We estimate whether enrollment in PCAFC is associated with decreased uncontrolled blood pressure; diagnosed anxiety/depression; outpatient visits (primary, specialty, and mental health); and risk of VHA health care costs. We also examine heterogeneity of PCAFC effects by low baseline income. Using dynamic models, we jointly estimate the effect of PCAFC on caregiver employment and health, using risk of VHA health care costs as a proxy measure of health. Finally, we describe state policies supporting caregivers and compare policies to PCAFC and National Academies of Science, Engineering, and Medicine's policy recommendations to support caregivers.

*Results:* We find PCAFC enrollment is positively associated with: outpatient visits; risk of VHA costs; probability of diagnosed anxiety/depression; and probability of uncontrolled hypertension. We find no evidence of heterogenous treatment effects by low income. Using dynamic models, PCAFC was not associated with changes in employment or health (as measured by risk of VHA health care costs). Finally, we observe an increase in both the number of states adopting policies supporting caregivers and the levels of support over time, yet significant gaps persist.

*Conclusions:* PCAFC is associated with increased outpatient care and diagnosed anxiety/depression but there is no evidence of an effect on employment. While the landscape of support for caregivers is expanding, broadly available financial and training support remains limited. Our study is limited by having claims-based measures, e.g. diagnosed anxiety/depression; yet, as PCAFC expands and with increased policy attention on national caregivers supports, PCAFC may serve as a national model of caregiver supports.

Number of pages

186

Publication year

2021

Degree date  
2021

School code  
0153

Source  
DAI-A 83/2(E), Dissertation Abstracts International

Place of publication  
Ann Arbor

Country of publication  
United States

ISBN  
9798538118526

Advisor  
[Stearns, Sally C.](#)

Committee member  
Van Houtven, Courtney H.; Holmes, G. Mark; Kent, Erin E.; Gilleskie, Donna

University/institution  
The University of North Carolina at Chapel Hill

Department  
Health Policy and Management

University location  
United States -- North Carolina

Degree  
Ph.D.

Source type  
Dissertation or Thesis

Language  
English

Document type  
Dissertation/Thesis

Dissertation/thesis number  
28648056

ProQuest document ID  
2572578136