

Improving Mental Wellness in Family Caregivers through Community Paediatric Palliative Support Care Approach

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Introduction

- Caring for a child with life-limiting conditions is often a devastating and stressful experience for parents. Non-governmental organisations (NGOs) play an important role in providing **palliative care support** to paediatric patients and their families, both in hospital settings and within the community.
- The study aims to measure improvements in **mental health and loneliness** among family caregivers. This is a preliminary analysis of the ongoing study focused on evaluating how the **community support care approach enhances mental wellness in family caregivers**.

Methods

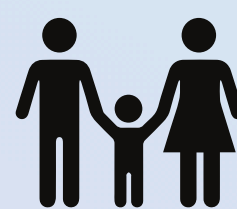
- A longitudinal intervention-controlled study design has been employed since February 2024.
- The intervention group consisted of 120 family caregivers who joined the community paediatric palliative care programme, while the control group comprised 120 family caregivers who received routine community support.
- Caregivers' mental wellness** was measured using the Kessler Psychological Distress Scale (K10), and the UCLA-3 Loneliness Scale over three time points: baseline (T0), the fourth month (T1), and the eighth month (T2) of the study period.
- Difference-in-Differences (DID) regression models were conducted to evaluate the impact of community support on the mental wellness of family caregivers between T0 and T1 during the preliminary analysis. The average intervention effect is significant at $P < 0.05$.

Community paediatric
palliative care
programme



Intervention group
(N=120)

Routine
community
support



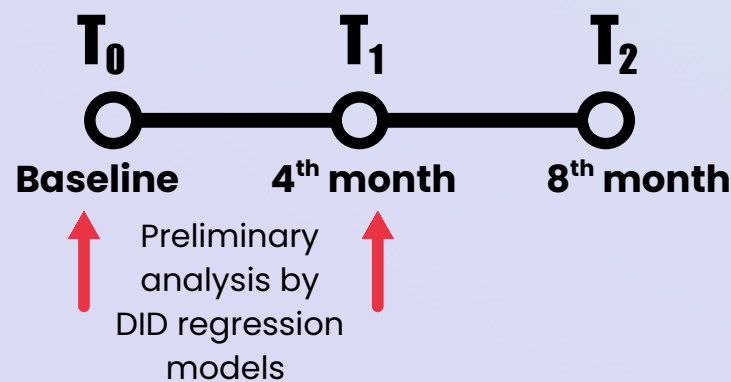
Control group
(N=120)

Caregivers' mental wellness:



**Kessler
Psychological
Distress Scale
(K10)**

**UCLA-3
Loneliness
Scale**



Results

Characteristics (N=101)	N (%)
Group	
Intervention	31 (30.7%)
Control	70 (69.3%)
Age group	
<45 years old	52 (51.5%)
≥45 years old	49 (48.5%)
Relationship with the diseased child	
Mother	89 (88.1%)
Father	9 (8.9%)
Others family members	3 (3%)
Working status	
Employed	42 (41.6%)
Unemployed/Home-maker	59 (58.4%)

- So far, 101 family caregivers have been recruited at T0, with 69 in the control group and 32 in the intervention group.

Intervention group

Kessler Psychological Distress Scale (K10)

	T ₀	T ₁	
Mild to severe psychological distress	54.9%	47.4%	↓
Severe psychological distress	22.6%	0%	↓
Mean score	21.2	19.7	↓

UCLA-3 Loneliness Scale

	T ₀	T ₁	
Feeling "Lonely"	31.8%	26.3%	↓
Mean score	4.8	4.4	↓

- The preliminary findings show that the **caregiver's psychological distress ($\beta = -1.734$, $P = 0.555$) and loneliness ($\beta = -0.102$, $P = 0.904$) can be alleviated** in the treatment group, and the improvement effect is superior to that of the control group.
- However, the DID changes between T0 and T1 were not statistically significant, probably due to the minimum sample size not being met yet.

Conclusions

Preliminary results are very encouraging that the community-based palliative care support funded by the Jockey Club Charity Trust brings a positive impact on the caregivers' mental health and loneliness. Additional data is required to draw a definitive conclusion.