Notice of the Final Oral Examination
for the Degree of Doctor of Philosophy

of

SEAN BROWNING

MA (University of Victoria, 2013)
BA (University of Victoria, 2010)

“The Mental Health and Well-Being of Informal Caregivers in Europe: Regime Type, Intersectionality, and the Stress Process”

Department of Sociology

Tuesday, April 20, 2021
9:00 A.M.
Remote Defence

Supervisory Committee:
Dr. Margaret Penning, Department of Sociology, University of Victoria (Supervisor)
Dr. Neena Chappell, Department of Sociology, UVic (Member)
Dr. Min Zhou, Department of Sociology, UVic, (Member)
Dr. Denise Cloutier, Department of Geography, UVic (Outside Member)

External Examiner:
Dr. Pearl Dykstra, Department of Sociology, Erasmus University

Chair of Oral Examination:
Dr. Christopher Eagle, Department of Mathematics and Statistics, UVic

Dr. Stephen Evans, Acting Dean, Faculty of Graduate Studies
Abstract

This dissertation addresses the role of welfare state/family care regimes, intersecting social locations and stress process factors in influencing the mental health and subjective well-being of informal caregivers of care recipients with age-related needs or disabilities within a European international context. The research draws on a modified version of the stress process model (SPM) as applied to caregiving that incorporates welfare state/family care regime types and intersectionality factors to more fully understand the implications of the social structural and policy contexts of informal caregiving. In order to assess the role of welfare state/family care regimes, intersecting social locations and stress process factors in influencing the mental health and well-being of informal caregivers to older adults and thus the utility of the modified SPM, empirical analyses were conducted with secondary data from the 2012 and 2016 European Quality of Life Surveys. The study sample included informal caregivers (n=6,007) residing in seven different welfare state/family care regimes, including Denmark, Sweden, France, Germany, Italy, Greece and the United Kingdom. Ordinary least squares and ordered logit regression models revealed that welfare state/family care regime, social location (including both additive and interactive associations among gender, age group, marital status, and income), and stress process factors were independently associated with the mental health and life satisfaction of informal caregivers. Furthermore, there was some evidence to suggest that social location and stress process factors intervened in some of the relationships between regime type and self-reported mental health and well-being. There was also some evidence that stress process factors intervened in the relationships between social location factors and mental health and well-being. Overall, the results provide support for integrating welfare state/family care regime type and intersectionality factors into the SPM. Thus, future research on informal caregivers’ mental health and well-being ought to incorporate such factors into their empirical analyses. The results also have some policy and practice implications. In particular, UK policy makers should address the greater social location disparities, greater role overload, and lack of coping resources that advantage Danish and Swedish informal caregivers’ self-reported mental health and subjective well-being compared to those residing in the UK. As well, policy makers from all the European countries assessed in the study should address the poorer mental health status of women and rural informal caregivers and the poorer subjective well-being of those with lower levels of formal education.