

Cancer Nurses
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Perth Convention and Exhibition Centre



Who Is Caring For The Carer?

Supporting The Wellbeing Of Cancer Carers In A Comprehensive Cancer Centre

Friday 19th June 2026

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Peter MacCallum Cancer Centre

Melbourne

Acknowledgement of Country

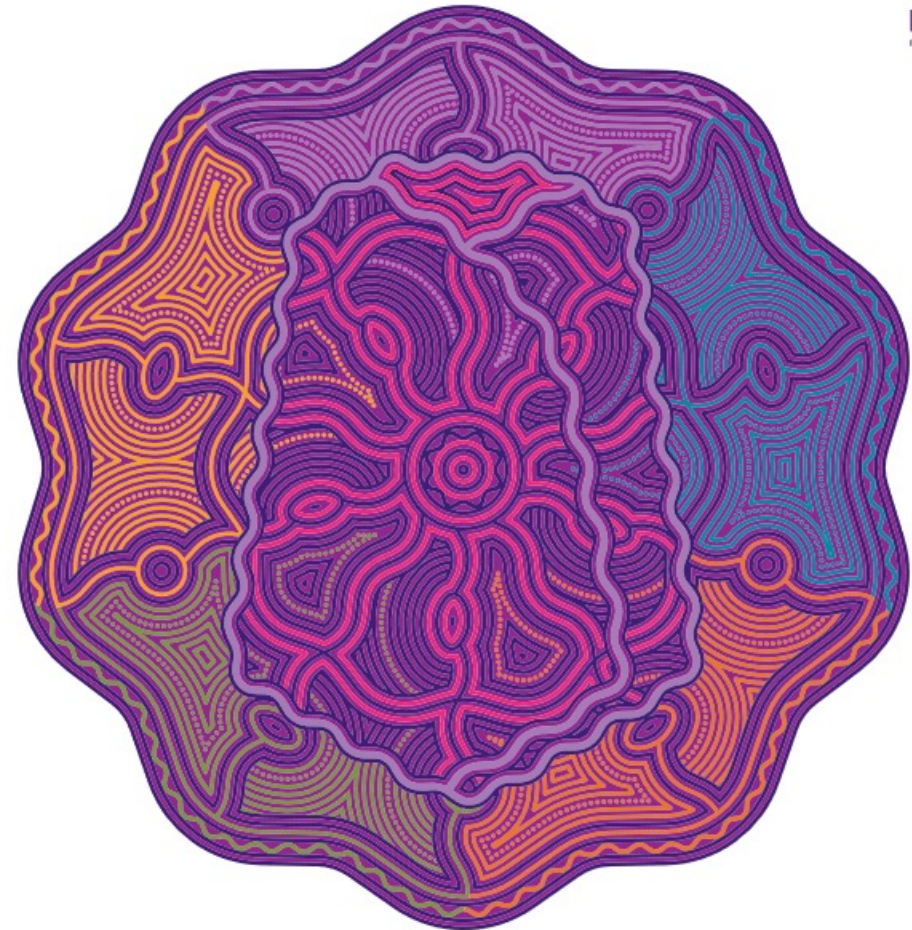
Peter Mac respectfully acknowledges the Traditional Owners of the lands of the Kulin Nation, where our care is provided across our six sites are located throughout Victoria. We pay our respect to Elders, past and present.

Parkville, Box Hill, East Melbourne and Sunshine: Lands of the Wurundjeri Woi-Wurrung People of the Kulin Nation

Bendigo: Lands of the Dja Dja Wurrung People of the Kulin Nation

Moorabbin: Lands of the Boon Wurrung People of the Kulin Nation

We acknowledge that First Nations Peoples are the Traditional Owners of this land. Their care of, and connection to these lands, waters and skies has been continuous for tens of thousands of years. We recognise their strength and resilience and pay our respects to their Elders past and present.



Disclosures



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Victoria Australia

- This project was supported by funding from the Department of Families, Fairness and Housing as part of the Victorian Support for Carers Program.
- No Conflicts.



Families,
Fairness
and Housing

Background



1 in 7

One in 7 Victorians have
an unpaid care role

This number is likely to be an underestimate
as many people with a carer role do not identify as carers.



68% of carers providing
the most support are women

Of people with a caring role more broadly

54%
are women

46%
are men



1 in 2

people caring for a loved one
with cancer are experiencing
depression, anxiety or stress



60%

It is estimated carers
bear 60 per cent of
the financial cost of cancer



1/3

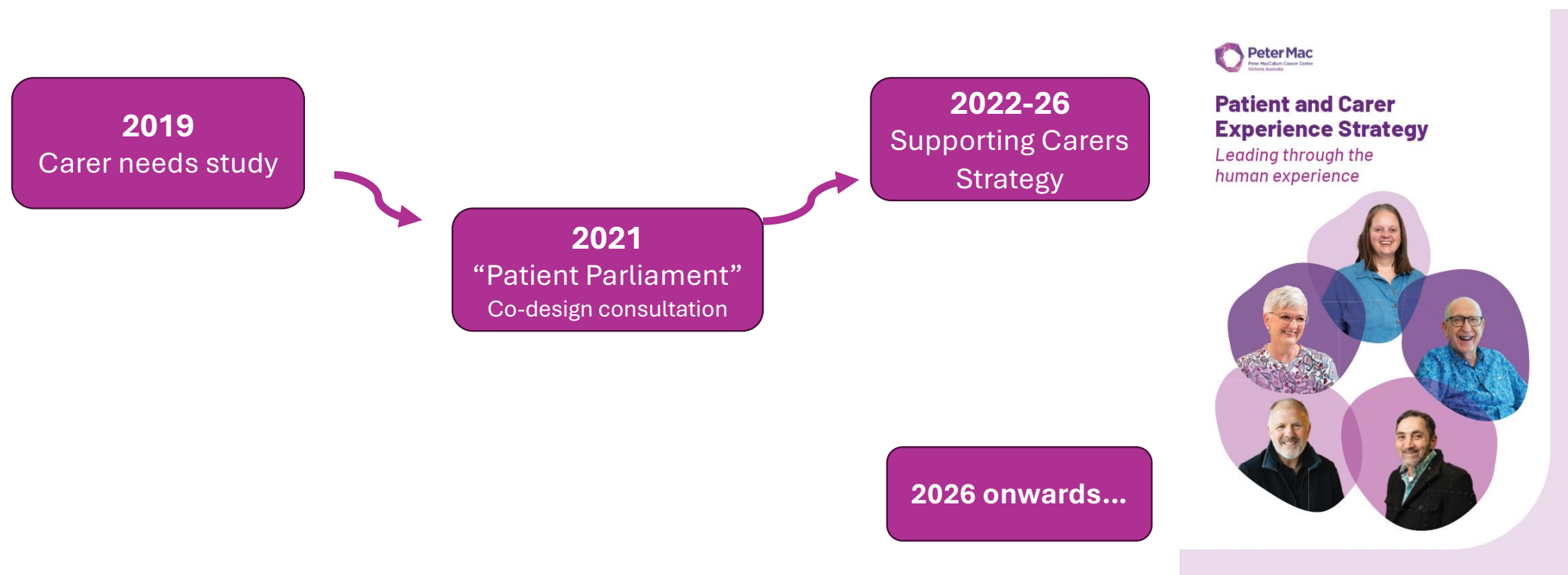
PRIMARY CARERS
provide
40+ hours
unpaid care a week

The Invisible Backbone of Cancer Care

- Informal caregivers now provide more than half of patient care needs.
- 43% of carers perform complex caregiving tasks without any formal training or education.
- Caregivers play a critical role in patient outcomes, influencing quality of life, treatment adherence, prognosis, and survival.
- “Patients in their own right”.



Carer Support at Peter Mac



Carer Support Program



Carer Support Officer

- Completes a needs assessment with the carer to identify support needs and risk indicators.
- Develops a wellbeing plan with the carer.
- Provides ongoing support as agreed.
- Provides tailored resources and information
- Refers to appropriate internal and external services, or alternatively, empowers carers to self-refer.
- Assists the carer in navigating the hospital system.



Carer Psychology Service

A free service available to eligible carers of Peter Mac patients in person or via telehealth with the following concerns:

- Oncology carer experience
- Carer-related distress
- Difficulty coping in carer role



Carer's Circle

- Monthly peer support group facilitated by Carer Support Officer
- Hybrid model –in-person and via Zoom.
- Monthly topics
- Activities such as Forest Therapy, Art Therapy, Sound Bath.

Carer Support Program Evaluation Study

AIM



Study Aim

Evaluate the Carer Support Program by examining carer needs, experiences, and satisfaction, and identifying opportunities for service improvement.

Key Objectives

- Analyse program access and utilisation.
- Understand carers' support needs and supports provided.
- Evaluate program acceptability, uptake, and satisfaction.



Carer Support Program Evaluation Study

METHODS

Methods

Design: Mixed-methods study

- Prospective surveys + retrospective audit
- Quantitative + qualitative analysis

Participants:

- CSO service users (Nov 2024–Dec 2025)
- Carer's Circle attendees (Jun 2024–Aug 2025)

Sampling: Convenience sampling

- CSO survey: $n = 33$
- Carer's Circle survey: $n = 20$

Data Collection:

- Demographics, service uptake, referral data
- Likert-scale + open-ended survey responses
- REDCap audit of referrals, needs, supports, attendance

Analysis:

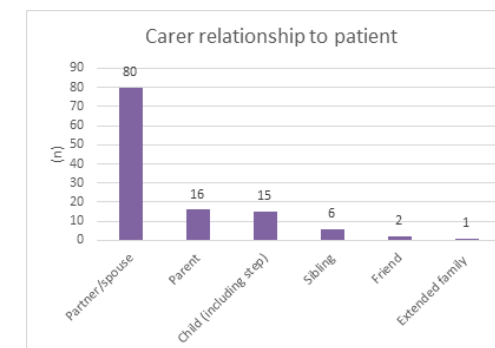
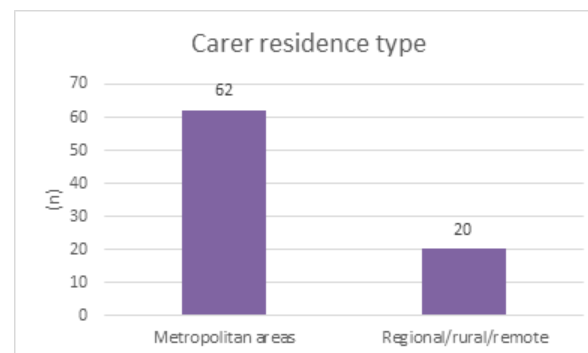
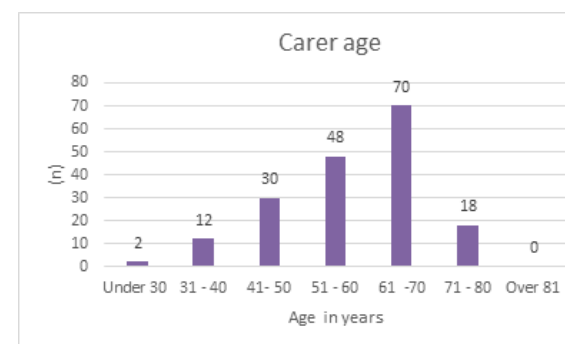
- Quantitative: uptake, usage, satisfaction
- Qualitative: thematic analysis of carer experiences & service improvement opportunities

Carer Support Program Evaluation Study

RESULTS

1. Who are the carers accessing the service?

- Predominantly female carers (~80–90%).
- Majority aged >50 years.
- Most commonly spouse/partner carers.
- Predominantly metropolitan-based.
- Very low representation of Aboriginal and Torres Strait Islander carers.
- Survey cohort consistent with audit population.

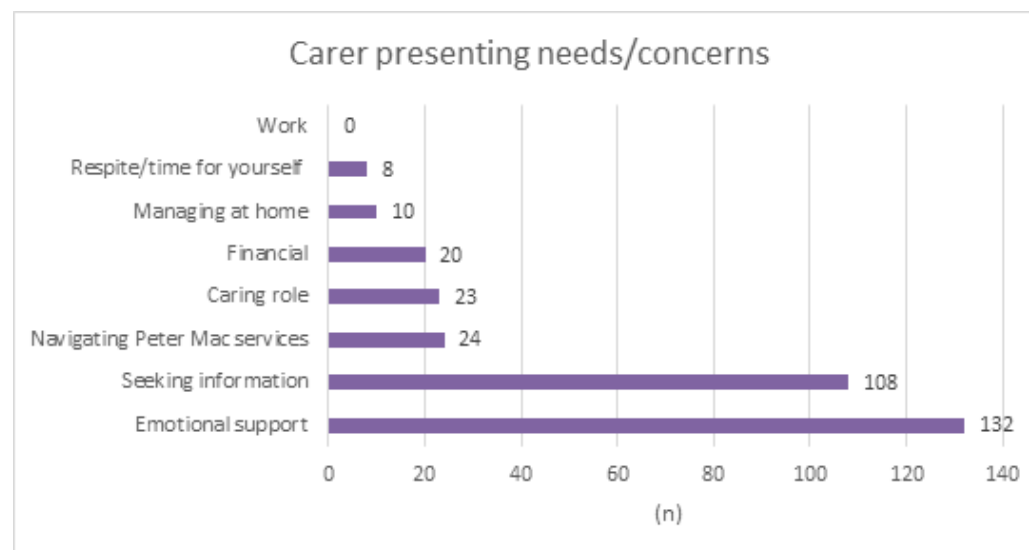


Carer Support Program Evaluation Study

RESULTS

2. What are carers coming to the service for?

- Primary need: emotional support (~41%).
- Secondary need: information seeking (~33%).
- Ongoing needs:
 - reassurance and emotional containment.
 - guidance navigating services and supports.

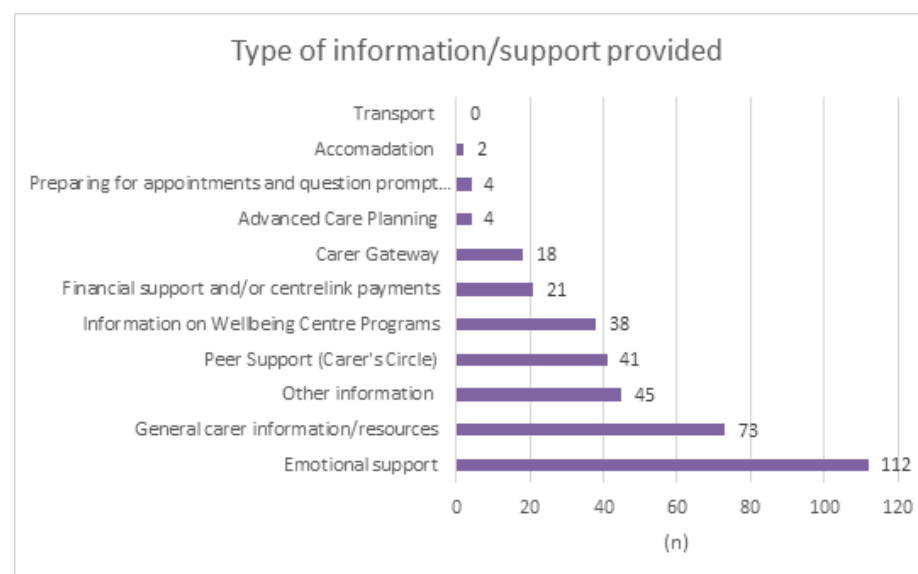


Carer Support Program Evaluation Study

RESULTS

3. What support is actually being delivered?

- Main support provided: emotional support (~31%).
- High proportion of referrals to psychology/carer psychology (57%).
- Strong alignment between presenting needs and support provided.



Carer Support Program Evaluation Study

RESULTS

4. What do carers value most?

Emotional validation & reassurance

- Feeling recognised and affirmed in caring role

Being heard & reducing isolation

- Safe, non-judgmental space outside family

Practical guidance & navigation support

- Improved confidence accessing services

Continuity & trusted relationship

- Consistency with CSO reduces burden

Individualised, tailored care

- Responsive, personalised support

“Talking to someone who I feel comfortable with, non-judgemental listening”

“Just having someone I know I can call or email when I'm struggling is very reassuring”

“I feel seen and listened to, and understood – I don't have to explain cancer”



Carer Support Program Evaluation Study

RESULTS

5. Carer's Circle – what works well?

- Highly valued peer support program.
- Safe, supportive and inclusive environment.
- Promotes connection and shared experience - being able to speak openly with others who “just get it”.
- Reduces isolation and normalises caregiving experience.



Carer Support Program Evaluation Study

RESULTS



6. What can be improved?

CSO

- Desire for increased service availability.
- Greater resourcing to improve access & visibility.
- Clearer communication regarding privacy & confidentiality.

Carer's Circle

- Increased opportunities for informal connection and relationship building.
- More tailored groups for specific caring circumstances.
- Improved accessibility .
- Enhanced flexibility for working and regional carers.

Carer Support Program Evaluation Study

LIMITATIONS

Data completeness & potential bias

- Incomplete audit fields in some CSO interactions (especially brief contacts)
- Some variables (e.g., location)

Self-selection & positivity bias

- Feedback likely reflects engaged service users
- Under-representation of carers who only had brief contact, short-term support or no longer caring.
- Potential overestimation of satisfaction in survey responses

Attribution of outcomes

- Difficult to isolate impact of carer support program service alone
- Outcomes may be influenced by concurrent supports (e.g., psychology, social work)

Conclusion



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- Embedding carer support into routine cancer care strengthens the entire system
- Supporting carers improves patient outcomes—not just carer wellbeing

Key Implications for Practice:

- Identify carers early in the care pathway
- Implement structured triage and support models
- Integrate carer support into standard oncology care
- Improve access, visibility, and resourcing of services

Take home message



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Carers are essential partners in care.

**Investing in carer support is critical to delivering high-quality,
person-centred cancer care.**

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Thank you



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