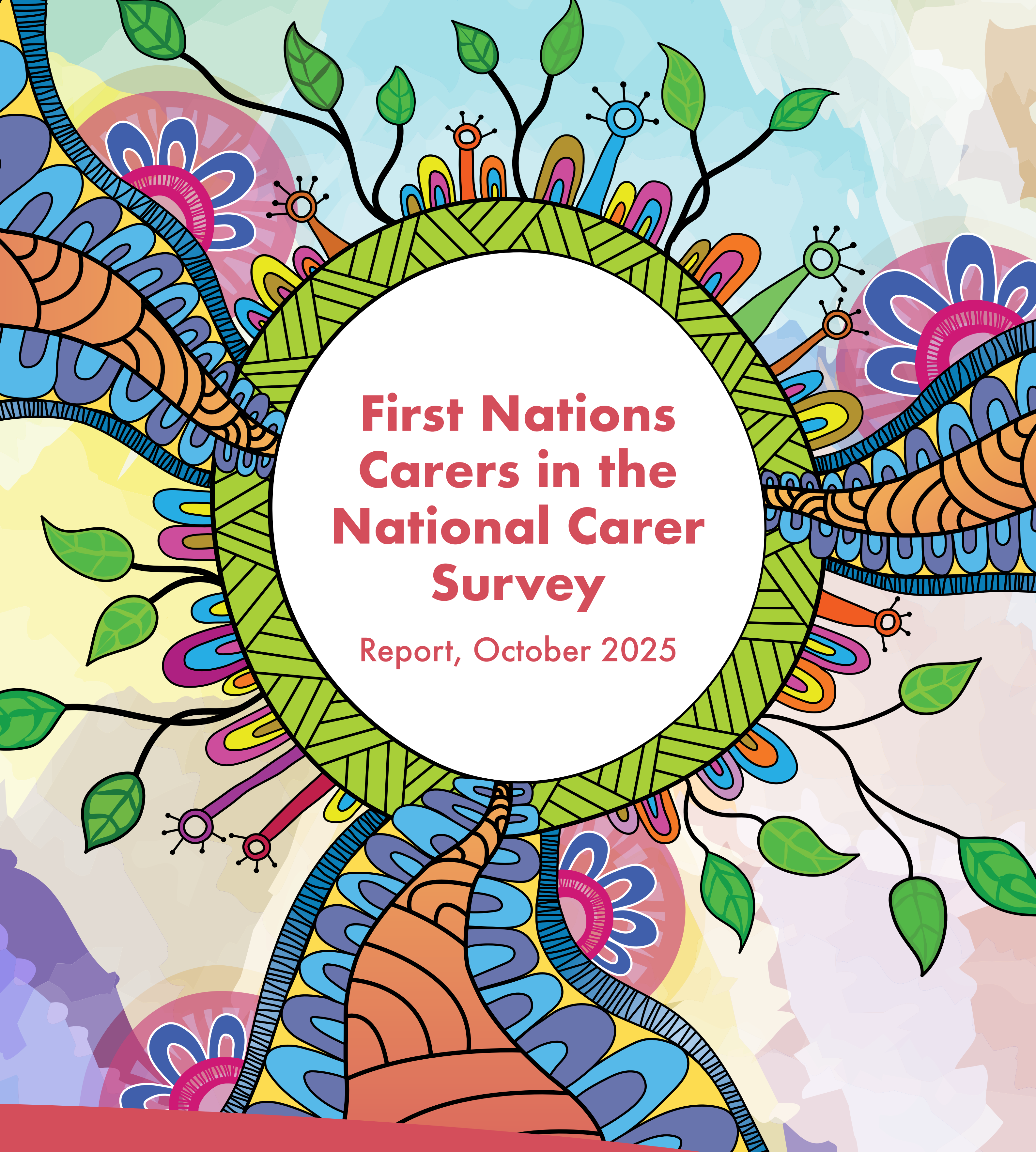

First Nations Carers in the National Carer Survey

Report, October 2025

Carers NSW
Australia

Carers Australia ACT
Carers NSW Australia
Carers NT Australia
Carers QLD Australia
Carers SA Australia
Carers TAS Australia
Carers VIC Australia
Carers WA

ABOUT CARERS NSW

Carers NSW is the peak non-government organisation for carers in New South Wales (NSW). Carers NSW is part of the National Carer Network and a member of Carers Australia. Our vision is an Australia that values and supports all carers, and our goals are to:

- Be a leading carer organisation in which carers have confidence
- Actively promote carer recognition and support
- Actively support carers to navigate a changing service landscape that will be characterised by ongoing policy reform
- Promote connected community experiences and opportunities for carers that are inclusive of diverse carer groups
- Lead and advocate for carer-specific and carer-inclusive policy making, research and service delivery
- Continue to be a quality-driven, responsive and carer-focused organisation.

www.carersnsw.org.au

https://twitter.com/CarersNSW

https://www.facebook.com/carersnewsouthwales/

ABOUT CARERS

A carer is any individual who provides unpaid care and support to a family member or friend who has a disability, mental illness, drug and/or alcohol dependency, chronic condition, terminal illness or who is frail.

Across NSW, there are approximately 958,500 carers,[1] and to replace the care they provide the NSW Government would have to spend more than $25 billion each year.[2] Carers come from all walks of life, cultural backgrounds and age groups. For many, caring is a 24 hour-a-day job with emotional, physical and financial impacts that can also affect their participation in employment, education and community activities.

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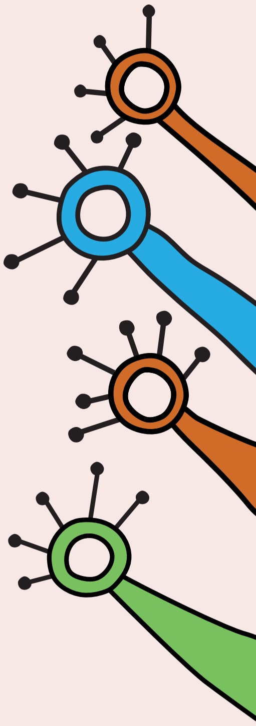

Prepared by the Carers NSW Research team

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[1] Australian Bureau of Statistics (2024) Disability, Ageing and Carers, Australia: Summary of findings, 2022. Australian Government, Canberra.

[2] Carers NSW estimate based on Deloitte Access Economics (2020) The economic value of informal care in Australia in 2020, Carers Australia.

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Executive Summary

Led by Carers NSW with the support of the State and Territory Carer Organisations, and proudly funded by the NSW Department of Communities and Justice, the National Carer Survey is conducted every two years since 2020 with the aim of expanding the evidence base regarding carers' experiences and support needs. In three waves, the National Carer Survey asked carers across the country about their caring roles, their experiences with services for themselves and the people they care for, their work life, health, and wellbeing.

This report presents the First Nations responses to the National Carer Survey since 2020. It focuses on First Nations carers' economic and social needs, caring relationships, carers' experiences accessing services, and their health and wellbeing. In 2024 the National Carer Survey included a dedicated Survey module for First Nations carers. This report aims to amplify their voices in their call for better recognition, inclusion, and understanding of carer's connection with country and culture.

Findings show that many services do not meet First Nations carers' needs to support their wellbeing, and that many carers face strong social and economic challenges. Carers identify a lack of recognition from government and the wider community, as well as a need to improve cultural safety and inclusivity of services.

First Nations carers however also highlighted their connection to country and culture as a source of strength and resilience. First Nations understanding of care as a holistic, ongoing connection needs to be recognised and valued to better support First Nations carers.

Introduction

Led by Carers NSW with the support of the State and Territory Carer Organisations, funded by the NSW Department of Communities and Justice, the National Carer Survey is conducted every two years since 2020 with the aim of expanding the evidence base regarding carers' experiences and support needs. The National Carer Survey asks carers across the country about their caring roles, their experiences with services for themselves and the people they care for, their work life, health, and wellbeing.

For the 2024 Survey, a dedicated focus was set on engaging with First Nations carers, who face a particular set of challenges and are often not adequately represented in research, policy and service provision. While only limited research exists on First Nations carers in Australia, the literature has shown that First Nations carers face a particular set of challenges and are often not heard in decisions on policy and service design. They are confronted with a lack of understanding in mainstream services, and systems that continue colonial practices of oppression (Klein et al 2021).

This report aims to add to the evidence-base to better support First Nations carers and presents survey findings over three waves of data collection from 2020 to 2024, with a focus on the most recent data.

To better represent the voices of First Nations carers, this report highlights the findings of the dedicated survey module for First Nations carers in 2024, which was designed with the aim to amplify First Nations voices by a First Nations led research group (see also Carers NSW 2025).

The research team would like to thank the many First Nations carers who responded to the National Carer Survey in 2020, 2022 and 2024, who made this report possible.

About the National Carer Survey

Each wave of the National Carer Survey was led by the Carers NSW Research Team, in consultation with an academic advisory group, a working group of representatives from the State and Territory Carer Organisations, carer representatives, and other stakeholders. The Academic Advisory Groups focused on the scientific rigour of the questionnaire design and panel data analysis. The State and Territory Working Groups focused on planning and logistics to ensure effective, inclusive design, distribution, analysis and reporting. It guided the implementation and participant recruitment in the states and territories and has continued to work closely with the Carers NSW Research team to analyse, report on and disseminate Survey findings. First Nations representatives were part of each year's advisory groups to ensure cultural safety and inclusivity.

The development of the First Nations module in the 2024 National Carer Survey was led by a dedicated working group made up of identified (Aboriginal and Torres Strait Islander) representatives from Carers NSW and Carers WA, in accordance with the AIATSIS Code of Ethics (AIATSIS 2020), and informed by extensive consultation with Carers NSW Carer Gateway Outreach staff, including several additional identified staff members.

The members of the working groups were listed as investigators in the ethics application and named on the Participant Information and Consent forms. The research protocol for the National Carer Survey was approved by the Macquarie University Faculty of Arts Human Research Ethics Committee (Reference No: 52020623314360).

The National Carer Survey is based on a framework centred around the thematic segments of the caring relationship (including information on the person cared for), the caring role, access to and experiences of services and supports, employment and paid work, health and wellbeing, social connectedness, and financial wellbeing. Within this thematic framework questions have been refined and changed over the years, while maintaining a core set of indicators and validated scales on wellbeing, psychological distress, and social connectedness.

Psychological distress was measured using the Kessler 5-Item Scale of Psychological Distress (K5), which is categorised to indicate low, moderate, high or very high levels of psychological distress. The K5 scale is an adaption of the Kessler 10-item Scale of Psychological Distress (Kessler et al 2003), developed by the Australian Bureau of Statistics (ABS) to provide a population-level screening tool for psychological wellbeing that is culturally safe for surveys including Aboriginal and Torres Strait Islander respondents (see ABS 2012).

Wellbeing was measured using the Personal Wellbeing Index (PWI). It measures wellbeing as a combination of satisfaction with seven dimensions: standard of living, health, achieving in life, personal relationships, feelings of safety, community connectedness and future security (Cummins et al 2007).

The social connectedness experienced by carers was measured using the "Friendship Scale" (Hawthorne 2000). This scale provides a measure of overall social connectedness and social isolation. Its six questions explore the degree to which a person has found it easy to relate to others over the past four weeks; if they have felt isolated from other people; if they had someone to share their feelings with; the ease with which the person has been able to get in touch with others if they needed to; whether the person felt separated from others in the past four weeks; and, if they felt alone and friendless. Scores on the friendship scale can be categorised into five levels, ranging from "Highly socially isolated" to "Highly socially connected" (for details see Hawthorne 2006).

Each wave of the National Carer Survey was distributed in both online (via Survey Monkey) and paper questionnaires, over the months of May and June in the survey years. Participants were recruited through the websites and social media accounts of Carers NSW and the State and Territory Carer Organisations, through their printed and email newsletters, member and client databases, and broader stakeholder networks.

All summary reports, publications and questionnaires are available online at www.nationalcarersurvey.com.au.

First Nations respondents, 2020 to 2024

Since its inception in 2020, the National Carer Survey has aimed at being inclusive of First Nations carers, and has continuously increased First Nations participation in absolute and relative terms. The dedicated First Nations engagement plan of the 2024 National Carer Survey led to sample more than double the size of 2022. Table 1 presents the First Nations response to the National Carer Survey since 2020.

Table 1: First Nations response to the National Carer Survey since 2020

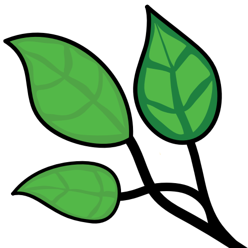
Year	First Nations respondents		Valid % of survey respondents
2020 (n=7,735)	Aboriginal	147	1.9
	Torres Strait Islander	5	0.1
	Aboriginal and Torres Strait Islander	3	0.1
2022 (n=6,825)	Aboriginal	160	2.4
	Torres Strait Islander	5	0.1
	Aboriginal and Torres Strait Islander	11	0.2
2024 (n=10,096)	Aboriginal	347	3.5
	Torres Strait Islander	17	0.2
	Aboriginal and Torres Strait Islander	16	0.2

While differing in size, the samples are largely comparable in terms of basic demographic characteristics over the years (see Table 2). Together with the increase in the First Nations response, the 2024 Survey saw a significant increase in male First Nations carers to almost one in six First Nations respondents (17.8%).

Table 2: Basic demographic characteristics by survey year

Characteristic		2024	2022	2020
Age (average)		46.7 years	53.2 years	48.2 years
Gender	Female	81.4%	84.1%	87.0%
	Male	17.8%	13.6%	11.0%
	Non-binary/other	0.8%	2.3%	0.2%
Region	Major cities	47.9%	41.8%	42.7%
	Inner regional	32.4%	34.7%	34.7%
	Outer regional	16.7%	21.8%	22.0%
	Remote/very remote	1.2%	1.8%	0.7%

In all survey years, the First Nations respondents were on average younger than the survey respondents overall, with the highest average age recorded in the 2022 sample. The age structure is comparable across all three survey years, with the exception of the 2022 sample having the most respondents in the age group of 60 to 69 years, whereas in 2020 and 2022 the largest age group of First Nations respondents was 50 to 59.



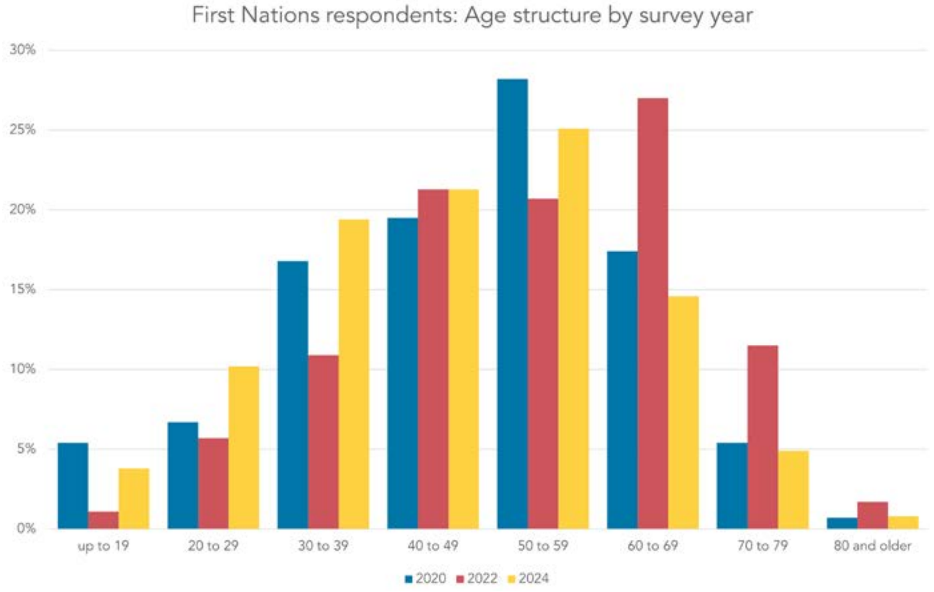


Figure 1: Age structure by survey year

First Nations carers in the National Carer Survey were across all years more likely to live regionally than other respondent groups. Nevertheless, in each survey year, the majority of First Nations respondents lived in major cities (see Table 2). Across all survey waves, the largest group of First Nations respondents came from New South Wales, followed by South Australia. In 2024 Western Australia and the ACT recorded significantly more responses compared to previous years (see Table 3).

Table 3: First Nations response by state/territory

	2024	2022	2020
Australian Capital Territory	4.7%	0.6%	2.6%
New South Wales	30.5%	29.0%	38.7%
Northern Territory	2.1%	4.0%	3.2%
Queensland	11.3%	14.8%	14.8%
South Australia	20.5%	25.6%	20.0%
Tasmania	7.4%	12.5%	11.0%
Victoria	13.9%	10.2%	7.7%
Western Australia	9.5%	3.4%	1.9%

Over the survey years, the proportion of First Nations respondents who participated in paid work steadily increased, from one in three in 2020 to two in five in 2024. In the 2020 and 2024 survey samples however about one in six respondents were looking for work, in both years more than double compared to the sample of 2022.

Table 4: Labour force participation

	2024	2022	2020
Employed	39.1%	35.8%	32.3%
Unemployed	15.0%	6.3%	13.5%
Not in labour force	45.9%	58.0%	54.2%

While there are notable differences in sample composition over the years, particularly in regard to age, labour force participation, and geographic distribution, the National Carer Survey nevertheless provides valuable insights over time.

The following chapters present findings for each survey year, with a particular focus on the dedicated First Nations module of the 2024 National Carer Survey.

Response to the 2020 National Carer Survey

Caring roles

The First Nations respondents to the 2020 National Carer Survey were much more likely to have multiple caring roles than other respondents to the survey. 45.1% of First Nations carers were caring for more than one person, and 17.6% caring for three or more people.

Almost two in three (59.5%) First Nations respondents were caring for a child (incl. adult children), while 28.6% each were caring for a partner and a parent. The people they cared for were also significantly younger than the survey average, with 70.7% being younger than 65 years.

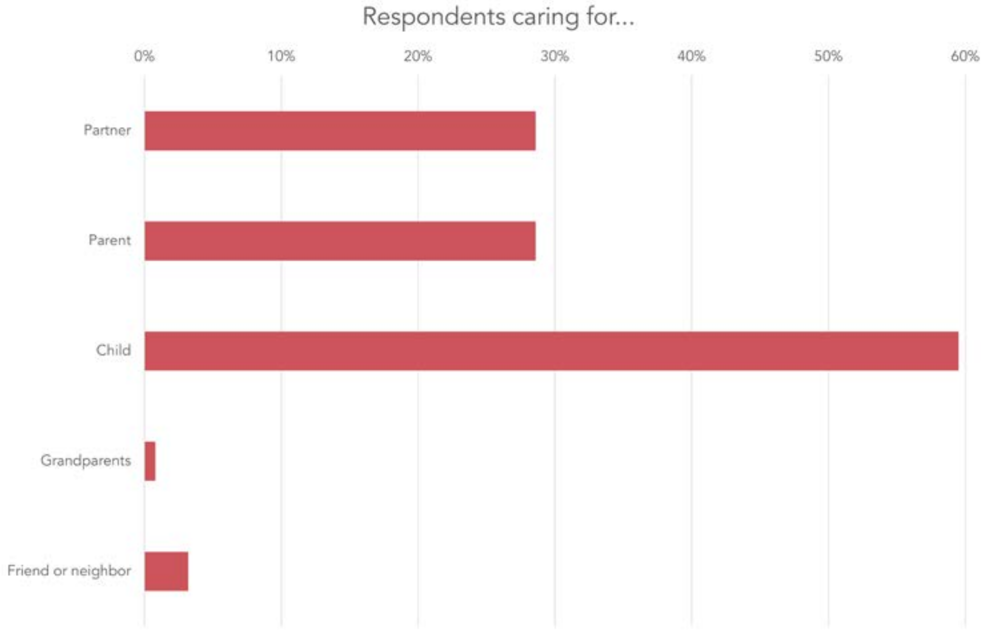


Figure 2: Caring relationships, 2020

Most commonly, First Nations respondents were caring for someone with Autism (37.7%), a chronic health condition (36.2%), or someone living with a mental illness (35.5%).

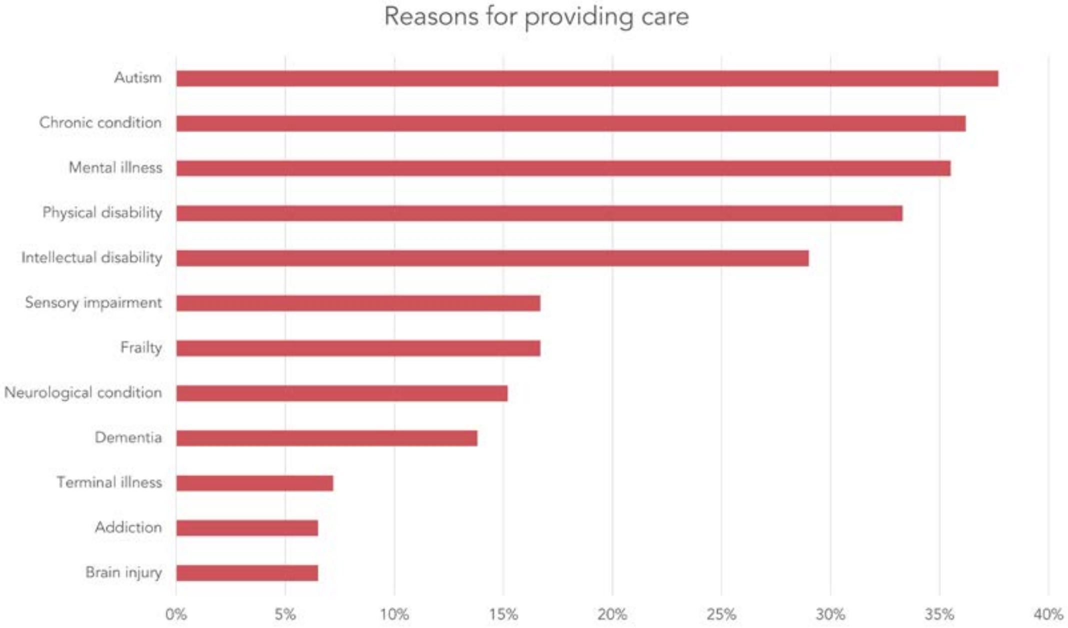


Figure 3: Reasons for care, 2020

First Nations respondents to the 2020 National Carer Survey provided significant amounts of care. Almost two in three First Nations carers reported caring for more than 60 hours per week (59.4%), with 21.3% providing 24/7 care. While 82.9% were living with a person they care for, almost one in five were caring for someone living separately (17.1%).

Experiences accessing services

The National Carer Survey asks carers about their experiences accessing services with or on behalf of the person they care for, to assess the extent to which services are inclusive and supportive of carers. In 2020, First Nations carers responding to the Survey were most commonly caring for someone accessing disability services (81.4%), while almost three in five (58.9%) were caring for someone accessing mental health services. One in three (33.3%) were caring for someone accessing aged care services.

Across all service types, a majority of First Nations carers in 2020 felt that they were not asked about their needs as a carer, particularly by aged care services. A majority across all service types also reported not receiving all the information they needed. Around two in five of those caring for someone with aged care services or NDIS services reported that these supports enabled them to take a break from providing care, while only 8% reported the same for mental health services. A majority also reported that the services for the person they cared for allowed them to stay in or look for work.

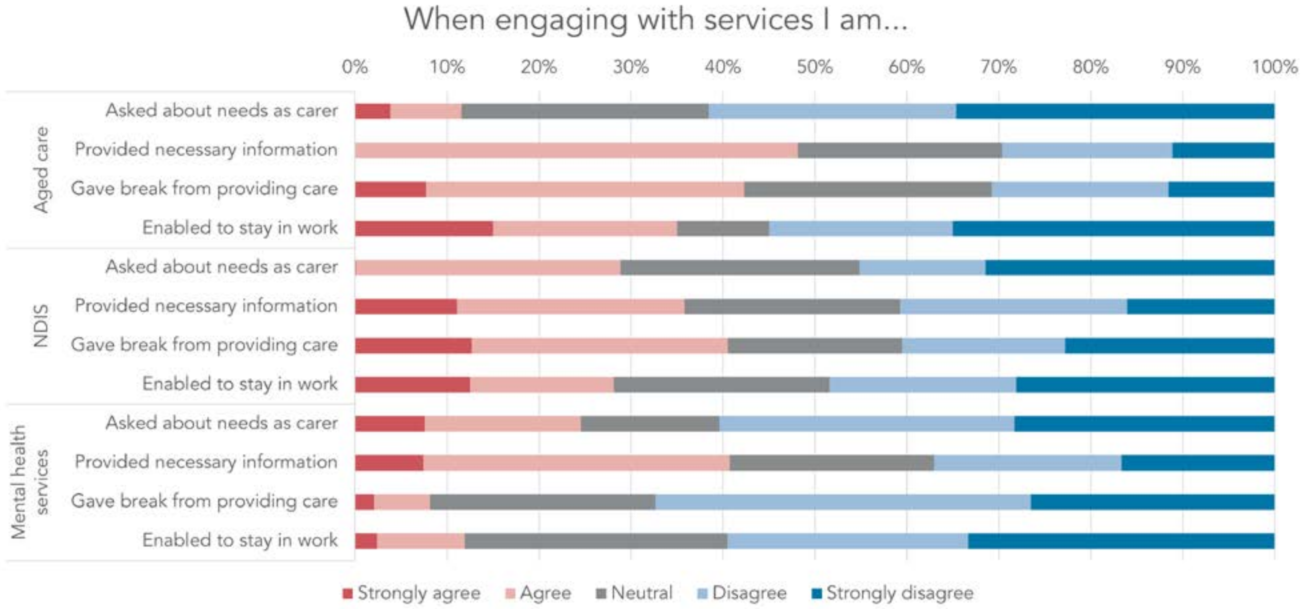


Figure 4: Service experience, 2020

Around one in six First Nations carers (16.2%) reported that no culturally appropriate services were available for the person care they care for in at least one required service type. Across service types, the most commonly encountered issues were long waiting periods, high administrative burden, and a lack of information.

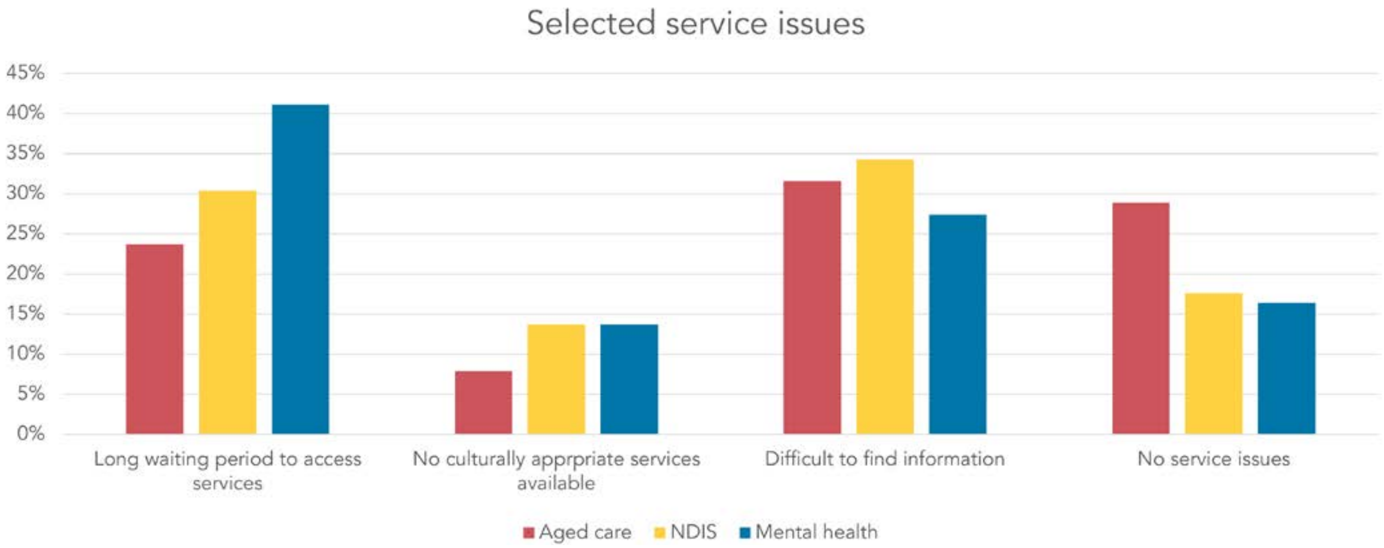


Figure 5: Selected service issues, 2020

Carer recognition

For First Nations respondents to the 2020 National Carer Survey, the strongest source of recognition were their families, with more than half of respondents agreeing to the statement that family members were recognising and valuing their caring roles. Far fewer respondents felt recognised by service providers, nevertheless only one in four answered negatively, with one in three remaining undecided. For the wider community and government a majority however answered negatively on the question of carer recognition, with only 13.7% feeling that their caring roles are recognised by government.

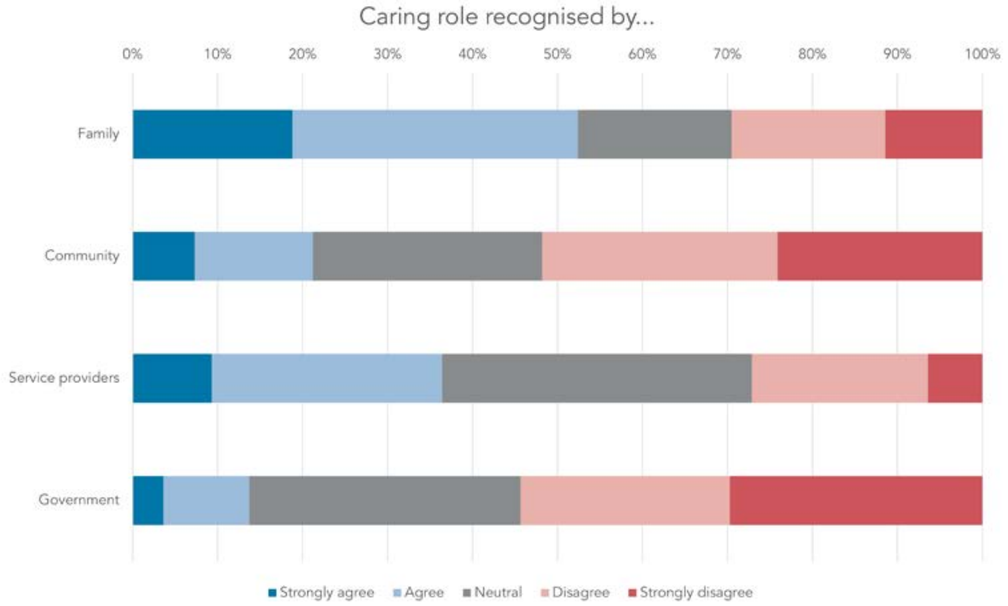
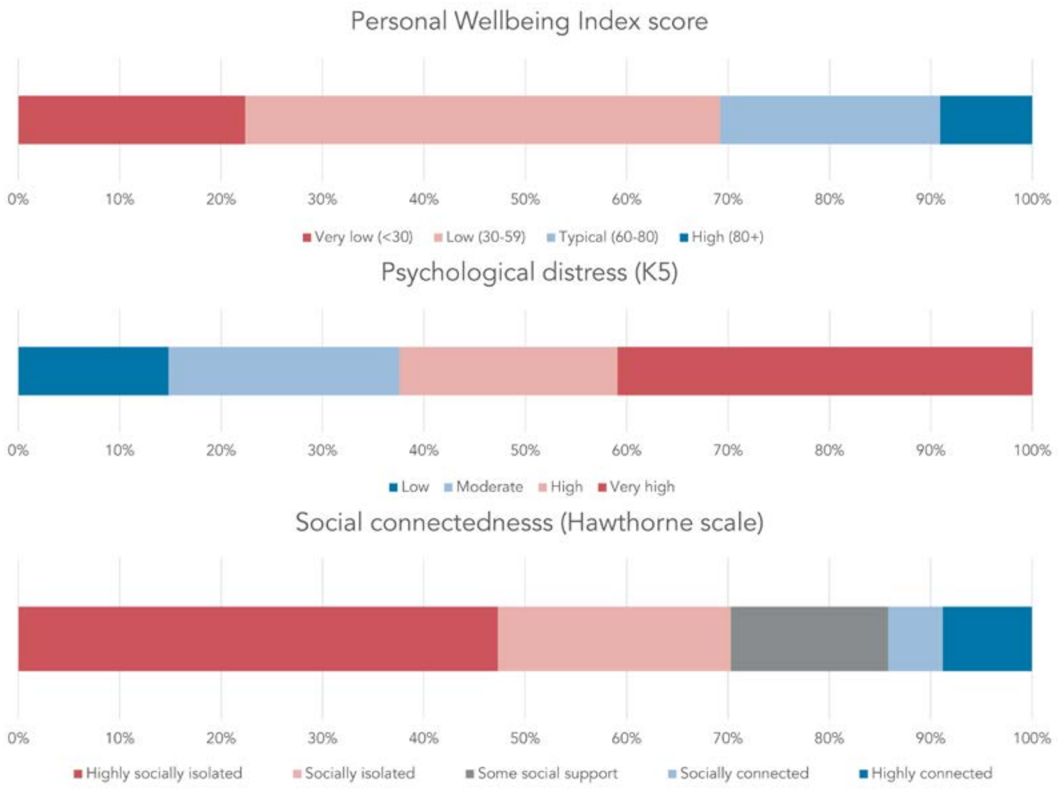

Caring role recognised by...

Figure 6: Sources of carer recognition, 2020

Health and wellbeing

The health and wellbeing data collected through the National Carer Survey indicates a high need for support for carers, and even more so for First Nations carers. On average First Nations carers in 2020 reported a Personal Wellbeing Index score of 50.2%, significantly below the survey average of 57.5%. These averages can be categorised as low wellbeing, whereas typically scores between 60 to 80 would be expected. Overall, two in three First Nations carers reported a score categorised as low or very low wellbeing, and 61.2% of First Nations respondents reported high to very high psychological distress, indicating high likelihood of experiencing anxiety or depression. More than two in three First Nations carers also reported being socially isolated or highly isolated.


Personal Wellbeing Index score

Psychological distress (K5)

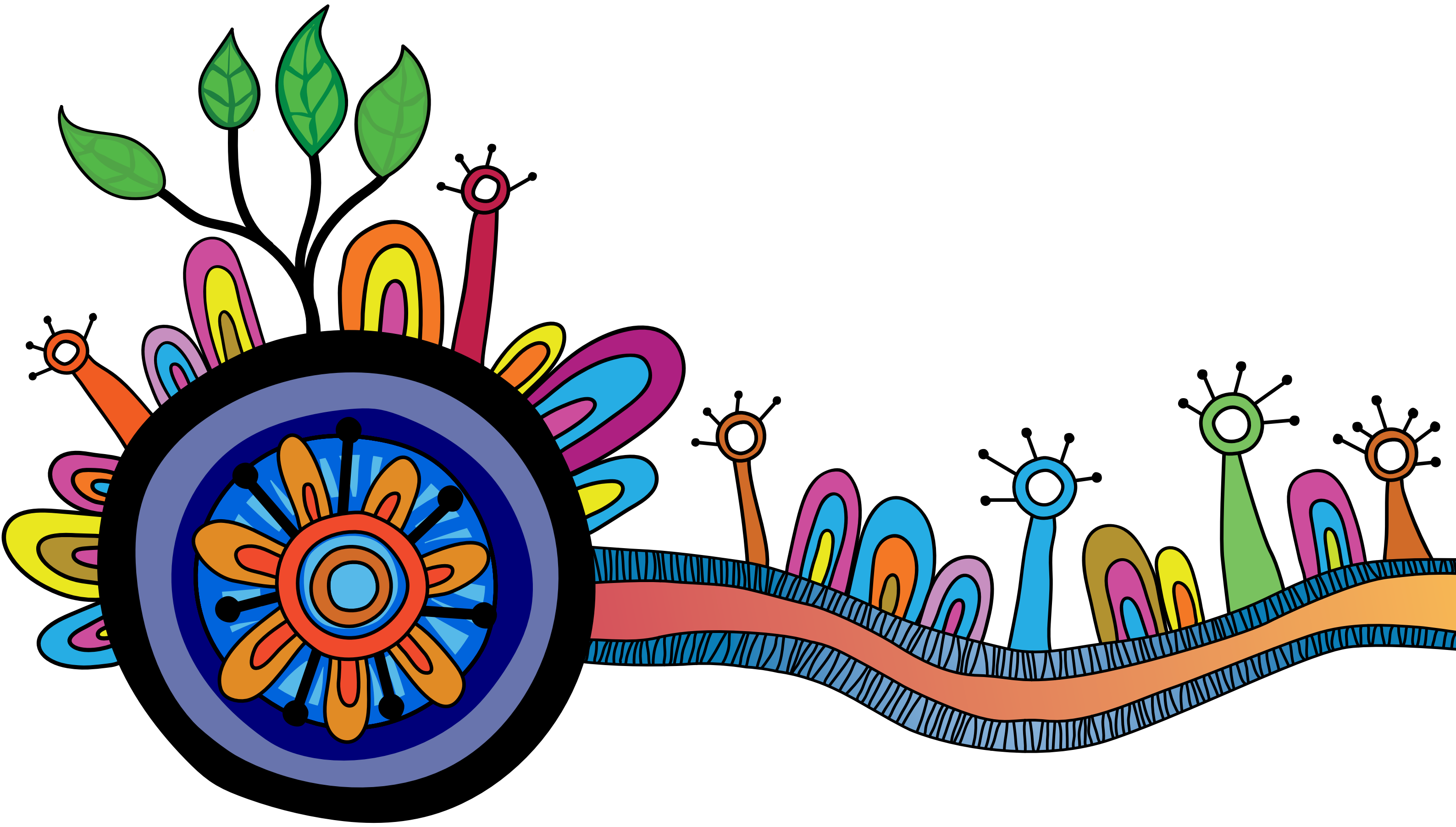
Social connectednesss (Hawthorne scale)

Figure 7: Health and wellbeing indicators, 2020

Financial security

The National Carer Survey primarily uses the financial stress item bank developed by the Australian Bureau of Statistics to indicate the economic situation of respondents. Financial stress is measured by a range of experiences such as not being able to pay bills, or having trouble affording unexpected expenses (ABS 2020). More than 70% of First Nations carers in the 2020 National Carer Survey reported experiencing some form of financial stress, with nearly one in three (29.5%) reporting four or more such experiences, indicating a high level of economic insecurity.

Figure 8: Financial stress experiences, 2020



Response to the 2022 National Carer Survey

The 2022 National Carer Survey asked First Nations respondents about their cultural heritage for the first time. First Nations respondents came from traditional lands all over the continent and 6.6% of respondents spoke a language other than English at home. The most frequently named First Nations peoples were Wiradjuri, Kaurna, Darug/Burramattagal, Bundjalung, and Kamilaroi, however more than half of respondents (50.5%) did not specify a group or said they did not know about their ancestral connection because they or their parents belonged to the Stolen Generations.

Caring roles

With 43.1% of identified respondents caring for more than one person, and 17.4% caring for three or more people, First Nations respondents in 2022 were again much more likely to hold multiple caring roles than other respondents to the Survey. The people they cared for were also significantly younger than the survey average, with more than four in five (85.4%) being younger than 65 years. Only one in three First Nations respondents were caring for someone older than 65, as two out of three were caring for a child (incl. adult children), one in four for a partner, and one in five for parent.

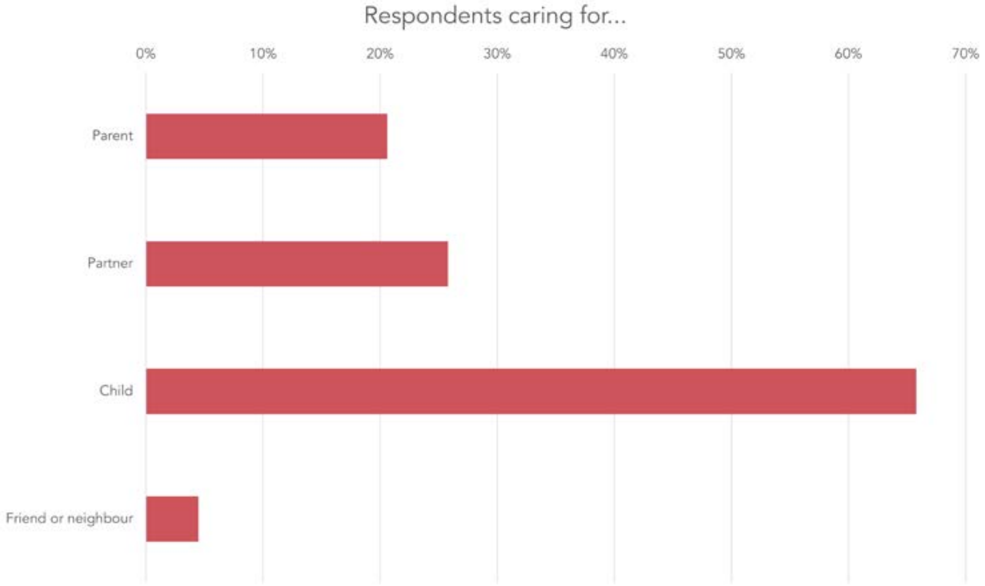


Figure 9: Caring relationships, 2022

The majority (80.9%) were caring for someone living with a disability, 42.6% for someone with a chronic health condition, and 39.5% were caring for someone living with a mental illness.

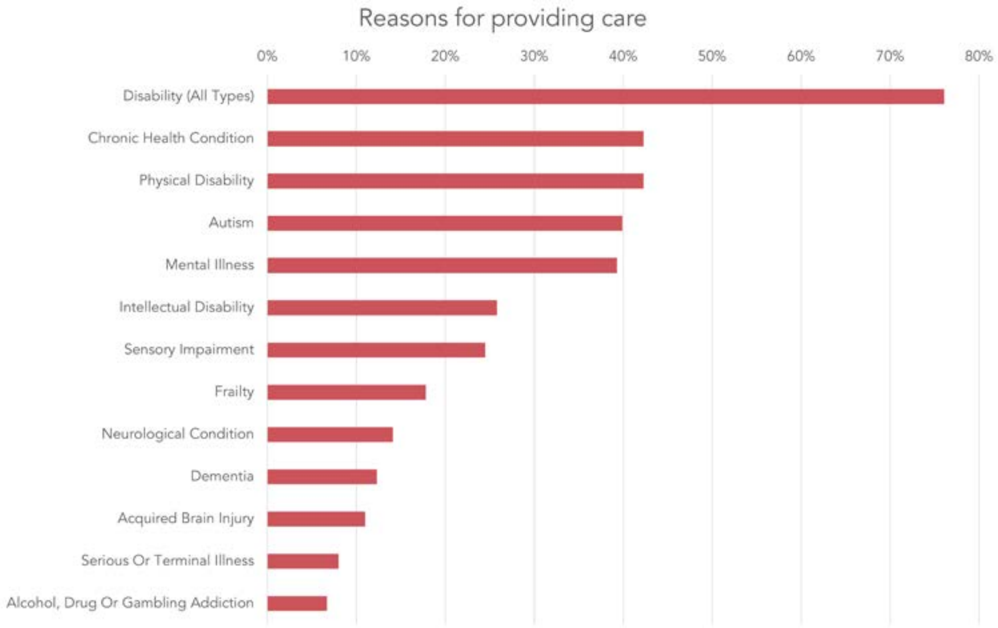


Figure 10: Reasons for care, 2022

Aboriginal and Torres Strait Islander respondents spent an average of 112 hours per week caring, with more than half (55.1%) providing 24/7 care, and the majority (81.5%) caring for five years or more. While 90.8% of were living with a person they care for, almost one in four were also caring for someone living in a different household or in supported accommodation.

Experiences accessing services

The 2022 Survey asked carers about their experiences accessing services with or on behalf of the person they care for. First Nations carers were most commonly caring for someone accessing mental health services (50.9%) or disability services (50.3%), while one in four (25.4%) were caring for someone accessing aged care services.

Across all service types, around half of First Nations carers felt that they were involved in planning and decision-making, however they were significantly less likely to be asked about their needs as a carer than the survey average. While most First Nations carers across service types felt they were provided with all relevant information, a majority felt that the provided services didn't meet their needs as a carer, demonstrating the need to strengthen carer inclusivity.

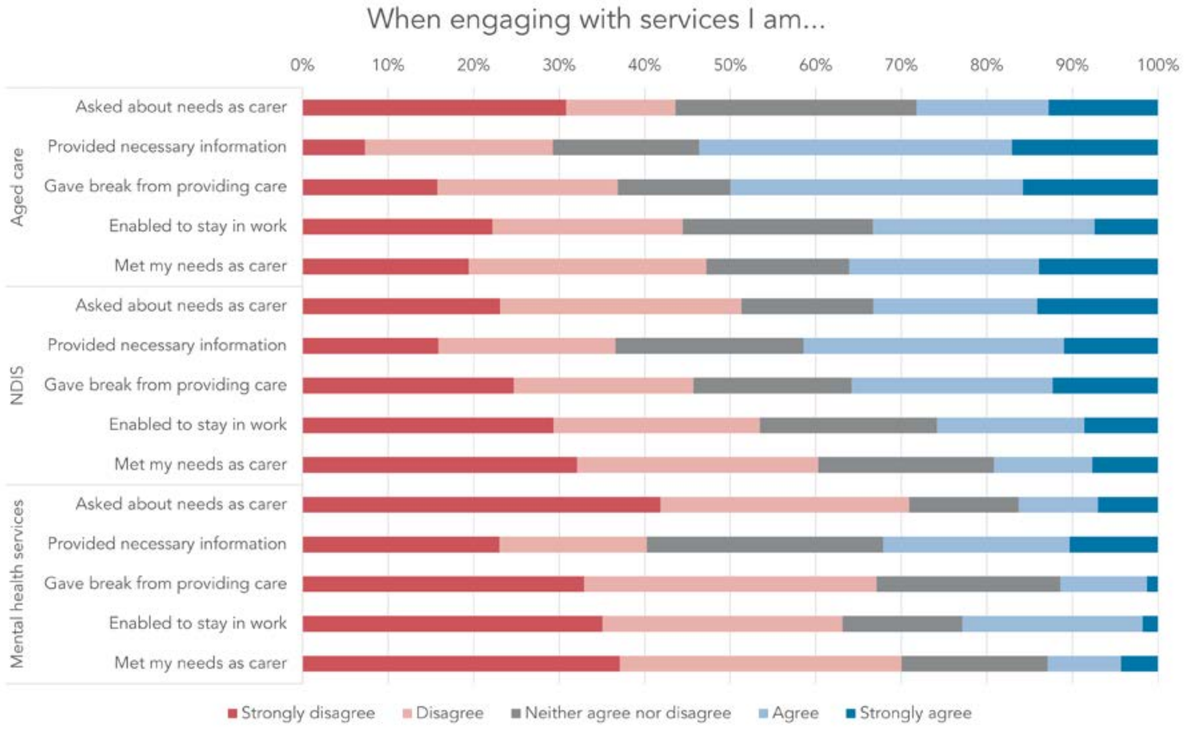


Figure 11: Service experiences, 2022

The most frequently reported service issues across all settings were the long wait times to access services (reported by 62.9% of carers), interruptions due to Covid-19 (60.9%), and that the required services were not available locally (reported by 32.6%). Across service types, a total of 17.4% of First Nations respondents reported that no culturally appropriate services were available for the person they cared for, a finding similar to the 2020 Survey. Overall, the Covid-19 pandemic had a significant impact on accessibility and quality of services.

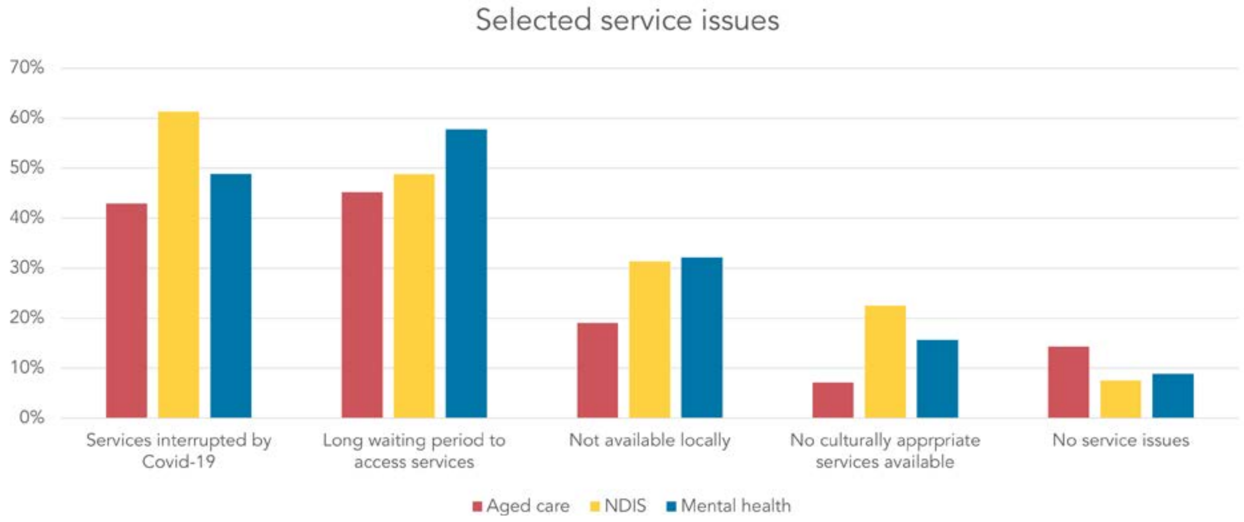


Figure 12: Selected service issues, 2022

First Nations carers were more likely than others to access online services for themselves, though overall they accessed carer services at a similar rate to other carers. First Nations respondents to the 2022 Survey however also reported higher unmet needs for carer services, especially respite (48.3% reporting an unmet need), carer coaching (44.9%) and in-person counselling (41.5%).

Carer recognition

For First Nations respondents to the 2022 National Carer Survey, the sources of recognition were similar to 2020, with more than half of respondents agreeing to the statement that family members were recognising and valuing their caring roles, and service providers, the wider community and government being considered negatively on the question of carer recognition, with only 13.0% feeling that their caring roles are recognised by government.

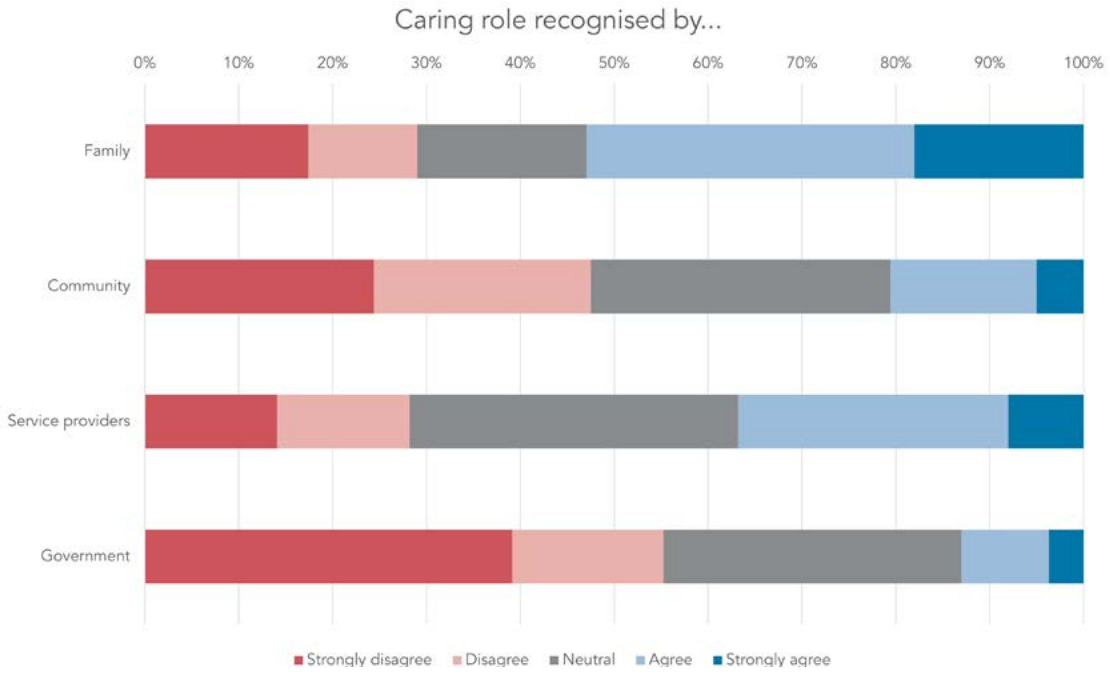


Figure 13: Sources of recognition, 2022

Health and wellbeing

On average First Nations carers reported a wellbeing score of 50.2%, significantly below the survey average of 57.5%. Almost five in seven (69.4%) reported being socially isolated and 61.2% reported high to very high psychological distress.

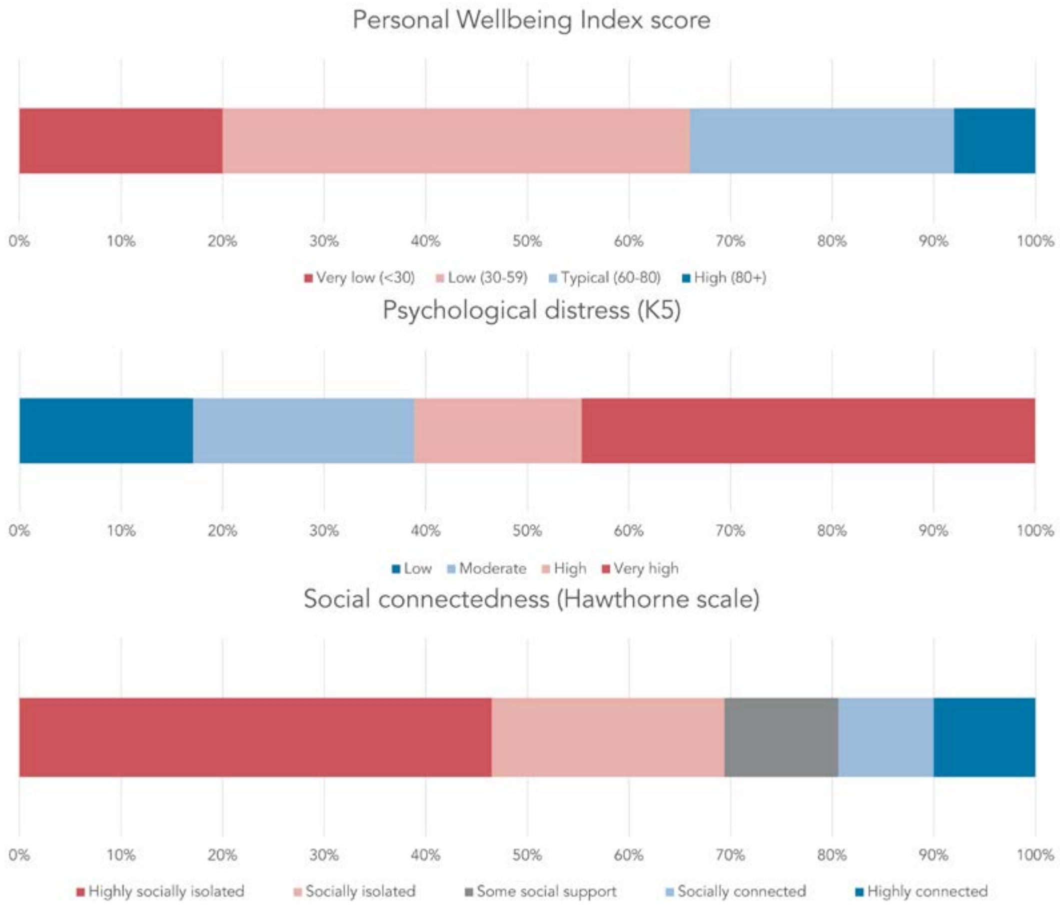
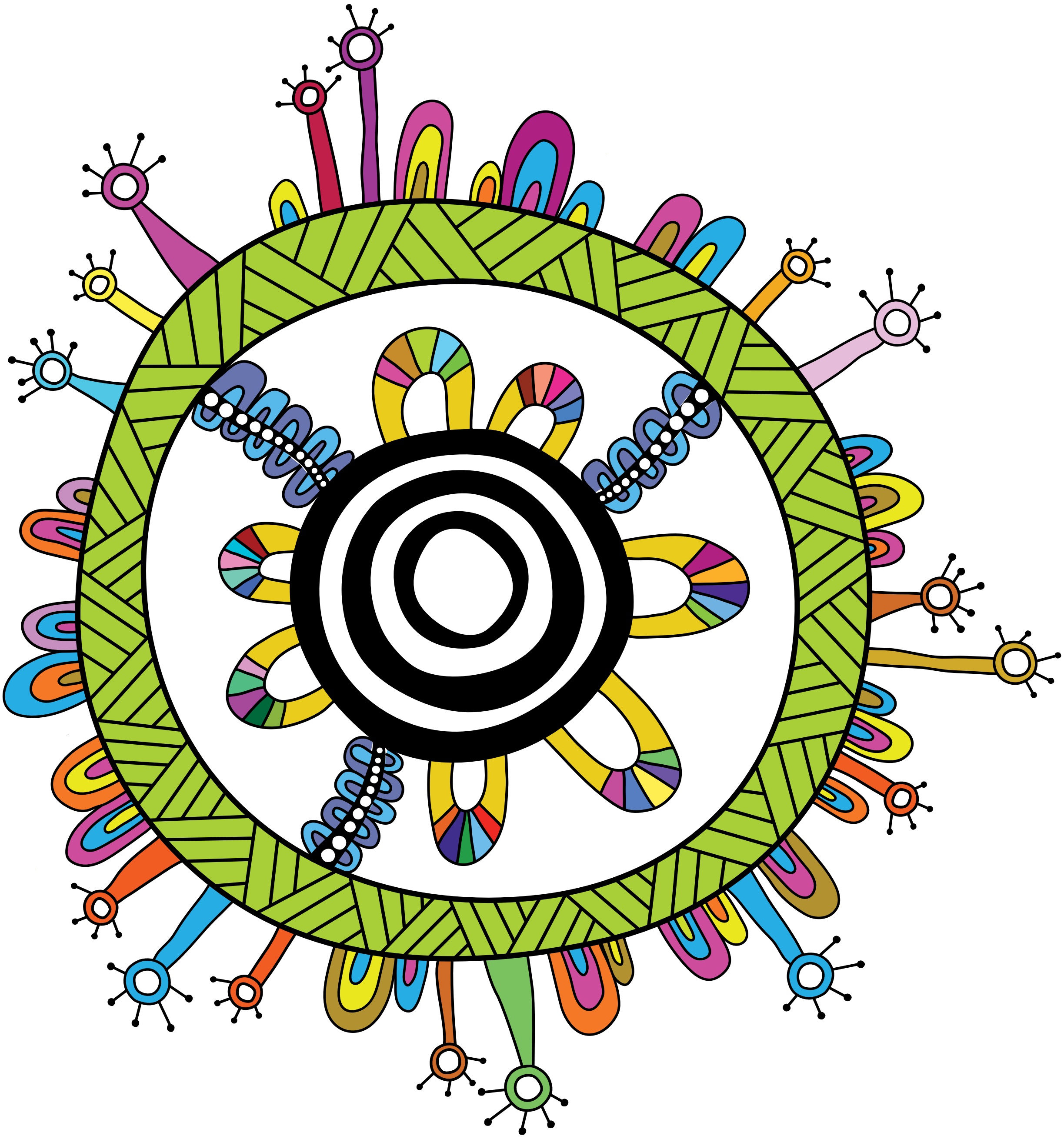


Figure 14: Health and wellbeing indicators, 2022

Financial security

Despite the restrictions of the Covid-19 pandemic that were in force during the period of 2020 to 2022 and their economic impact, the First Nations respondents to the 2022 Survey reported an increased labour force participation rate (see Table 4). Nevertheless, like in the 2020 Survey, First Nations respondents reported a high rate of financial stress. More than four out of five First Nations respondents to the 2022 Survey (84.3%) reported experiencing some form of financial stress, with nearly two in five (38.4%) reporting four or more such experiences. This also impacted other areas of carers' lives, as one in five First Nations carers reported to have accessed emergency support in the past two years, and 33.6% report that their home was not adequate for the requirements of their caring role.

Figure 15: Financial stress experiences, 2022



Response to the 2024 National Carer Survey

The 2024 National Carer Survey for the first time included a question module specifically for First Nations carers. Respondents came from more than 50 traditional lands and Nations from all over the country, the most frequently named were Wiradjuri, Gamilaroi, Kaurna, Gumbaynggirr, Wajarri, Bundjalung, and Ngarrindjery. Like in 2022 however, a majority did not, or could not, name their ancestral connection, often because they or their parents were separated from their families as part of the Stolen Generations.

Caring roles

Like in the previous surveys, First Nations carers were more likely to have multiple caring roles than other respondents, and were significantly more likely than other carers to care for more than one person (59.0% compared to 67.8%), with 13.1% caring for four or more people, underscoring the wider networks of care in First Nations communities. Just over half (51.4%) of First Nations respondents were caring for a child (including adult children), 25.7% were caring for a parent or parent-in-law, and 17.4% were caring for a partner (see Figure 16). Around 6% each were caring for a former partner, a sibling, or other family relations, and around 5% for a friend or neighbour or foster/kinship child. Most First Nations respondents (82.1%) reported caring for someone living with disability, and 46.2% reported caring for someone with mental ill health.

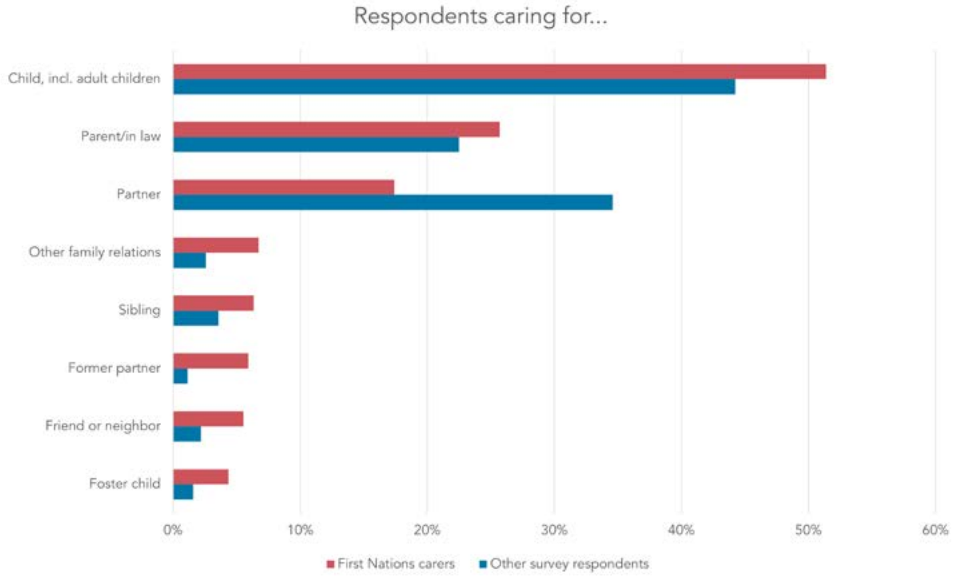


Figure 16: Caring relationships, 2024

On average, First Nations carers provided 124.1 hours of care per week, with 62.6% providing 24/7 care. Most commonly, First Nations carers were the sole carer (55.3%) and the majority (84.8%) were living with the person they care for. Around half (49.7%) reported that the person they care for also identified as a First Nations Australian.

Experiences accessing services

First Nations carers were more likely than other respondents to be caring for someone who was not receiving formal services (aged care, disability, or mental health services), with 46.5% caring for someone who was not receiving such supports.

In terms of carer inclusion, the findings of the 2024 Survey were in line with the previous Surveys. While most respondents reported that they were provided with necessary information, most were not asked about their needs as a carer. There were very limited respite and replacement care effects reported, as a majority of First Nations respondents did not find that formal care services enabled them to properly rest and recharge, or focus on work or other responsibilities outside their caring role. In all questions on carer inclusivity, aged care services were however reported to be more carer inclusive than disability or mental health services.

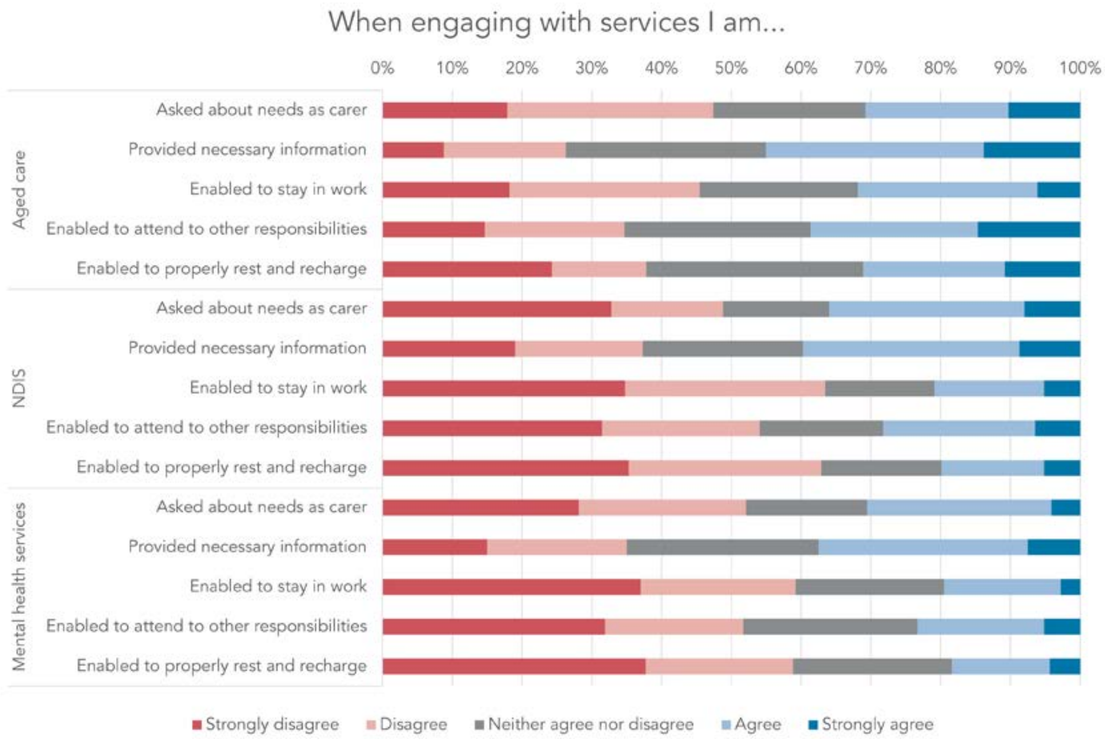


Figure 17: Service experiences, 2024

For those who were accessing formal services, First Nations carers also reported access issues at a rate higher than the Survey average, across all service systems, with 40% to 50% reporting long wait times for necessary services, and around one in three carers reporting that necessary services were not locally available (Figure 18). For each service type, one in four First Nations carers found that services were not meeting the cultural needs of the person they cared for. Only 10% to 15% reported no issues with formal care services.

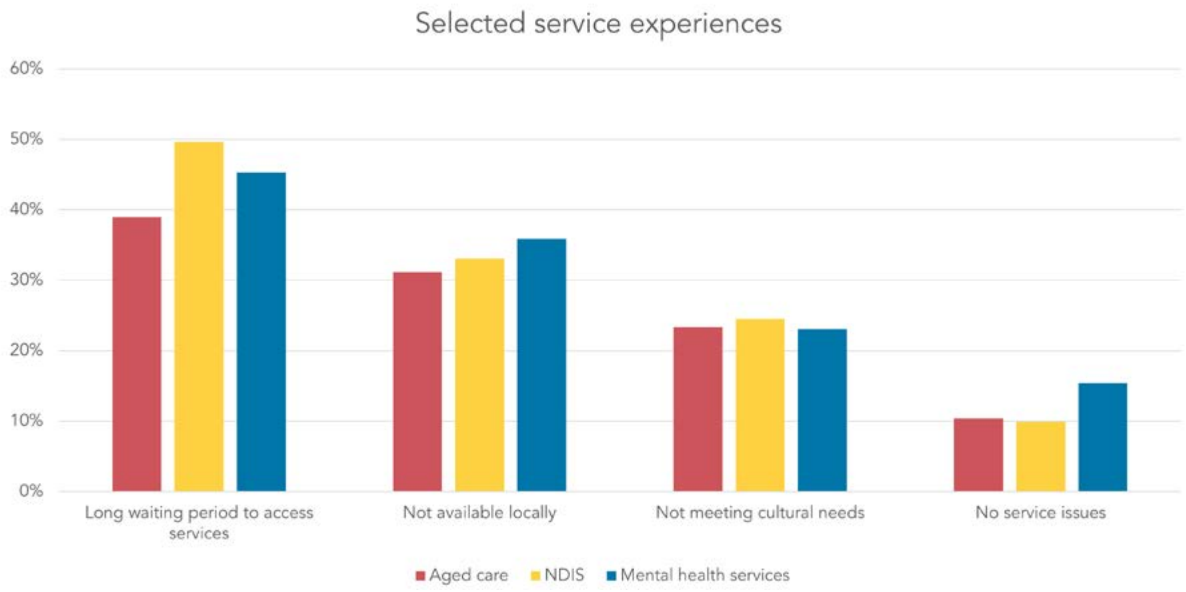


Figure 18: Selected service experiences of First Nations carers, 2024

Asked about the extent to which they carers feel culturally safe when engaging with mainstream services (including services for themselves), 60% of First Nations respondents answered “mostly” or “always”, while 30.2% only sometimes, and 10.2% never felt culturally safe, underscoring the need for better implementation of culturally safe and informed practices in mainstream services (see Figure 19).

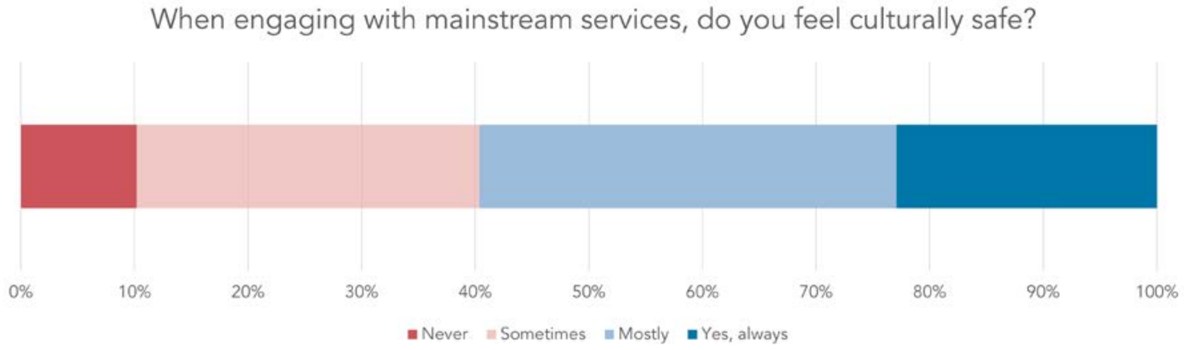


Figure 19: Reported cultural safety of mainstream services, 2024

Social support and recognition

The most common source of recognition for First Nations carers in the 2024 Survey were the people they cared for, with 59.7% reporting feeling recognised and valued by their loved ones. First Nations carers felt equally recognised in their caring role by both friends and family, yet less so by their community overall, with 43.7% of respondents disagreeing with receiving community recognition and support. As in the previous Surveys, the majority of First Nations respondents in 2024 (62%) felt their caring roles were not recognised by the government.

Support from family and friends was mostly received as emotional support, reported by 36.7% of First Nations respondents. Support was less likely to be financial, with only 21.9% of carers reporting they could turn to family and friends for financial assistance.

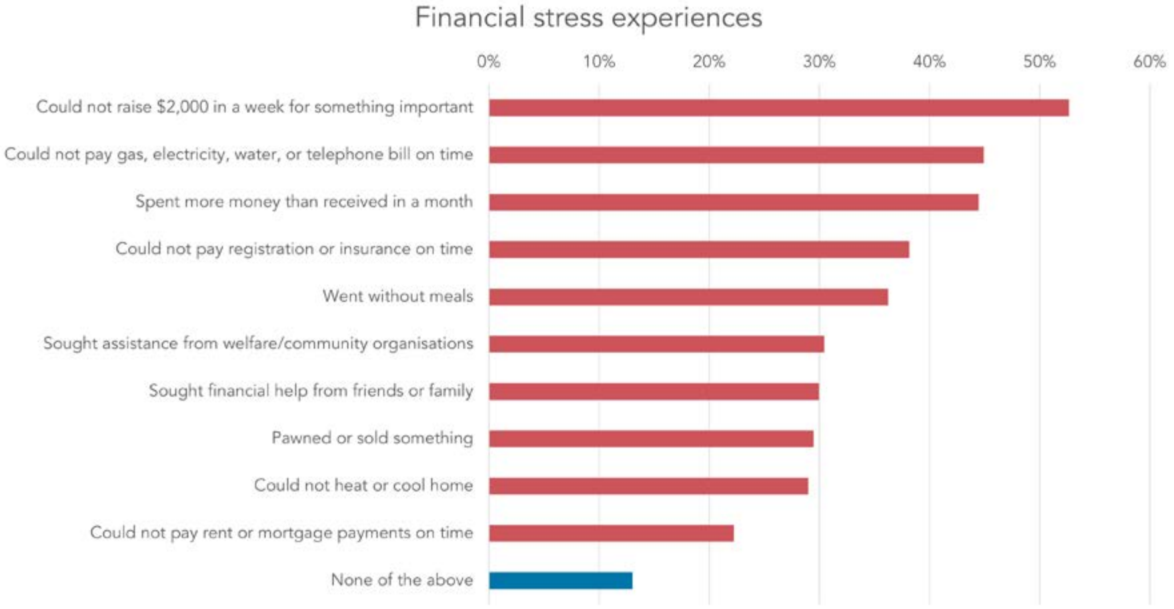


Figure 20: Financial stress experiences, 2024

Health and wellbeing

In terms of health and wellbeing outcomes, the response to the 2024 National Carer Survey was consistent with previous years. On average, First Nations carers had significantly lower wellbeing than other carers, with an average Personal Wellbeing Index score of 49.9%, compared to 55.9% for other carers. Almost two thirds of First Nations carers (60.2%) experienced high to very high psychological distress, and more than two in three were socially isolated.

Figure 21: Health and wellbeing indicators, 2024

Economic security

As research and government reports consistently show (e.g. Commonwealth 2025, Klein et al. 2024), First Nations peoples still experience the effects of colonialism, racism, and intergenerational trauma. These effects are particularly visible in economic and material aspects of life. This is also true for First Nations carers, which the 2024 National Carer Survey reported have their basic needs met at a significantly lower rate than other respondents (see Figure 22). One in three First Nations respondents reported only sometimes having enough food to not go hungry, and only one third reported always having access to enough food. Almost one in five only sometimes had a safe place to live, and around only one in four First Nations carers had always access to affordable healthcare or reliable transport.

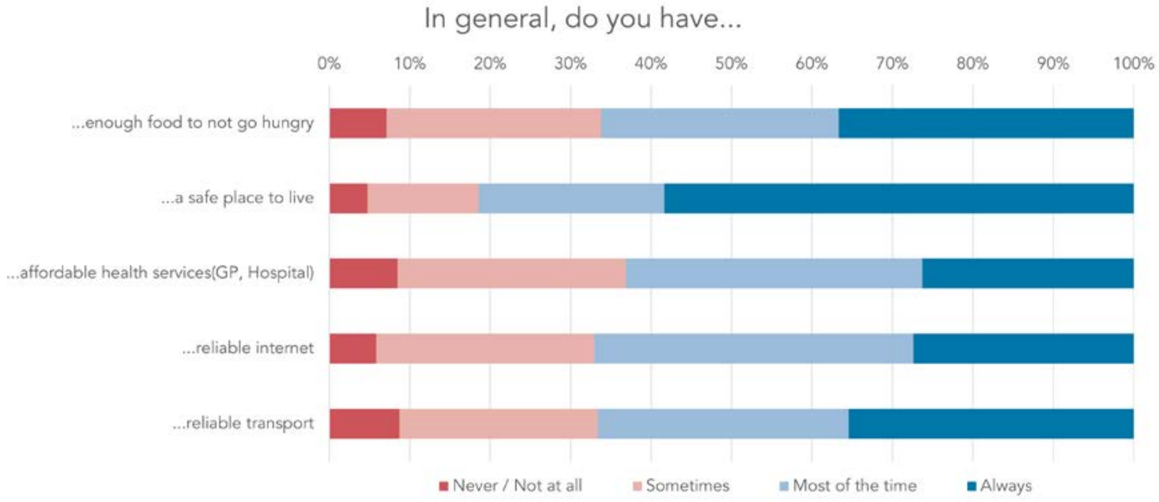


Figure 22: Basic needs, 2024

Although First Nations respondents were engaged in paid work at a slightly higher rate than other carers (39.1% compared to 37.3%), a larger proportion than other respondents were also receiving Centrelink payments (87.6% compared to 76.6% among other survey respondents).

Despite the strong labour force participation, a large majority of First Nations carers (87.0%) experienced at least one form of financial stress, 1.5 times the rate of other respondents, and further increased compared to the 2022 Survey. 44.0% reported four or more financial stress experiences over the past 12 months, indicating high economic insecurity.

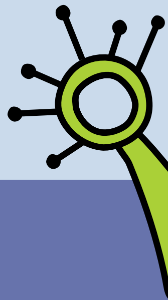
First Nations carer voices: Qualitative insights from the 2024 National Carer Survey

The First Nations module of the 2024 National Carer Survey was designed around open questions, to better contextualise the Survey findings and to amplify the voices of First Nations carers. The following analysis of the questions “As a First Nations carer, what are the most important issues for you? What would help?” and “What makes a service safe and welcoming for you?” reveals themes such as the importance of culture; the need for culturally safe services for both carers and the person(s) they care for; an emphasis on the connection between knowing, learning, and caring; and First Nations carers’ varied wellbeing needs. This analysis was led by the First Nation-identified investigators of the 2024 National Carer Survey and conducted with the support of the Carers NSW Research Team.

Understanding culture

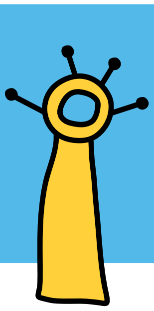
In the 2024 National Carer Survey, First Nations carers shared that culture, family, kinship and community are crucial for belonging and connection. The cultural needs of Aboriginal and Torres Strait Islander carers vary across communities and geographical areas. However, many carers nationwide reported that yarning and learning from Elders, sustaining and sharing culture and traditional knowledge, and preservation of language, values and traditional practices were important to them. Carers reported that services who met these needs, and who prioritised cultural safety, positively affected their experience and helped them feel listened to, valued and empowered.

> *“A good service is a service who welcomes you. They take the time to listen and value you and want to know your story. A service that is safe is a service you can rely on, that responses to you and your needs are meet. For people of culture, we want a service that is culturally safe. Cultural safety means helping us feel empowered and engaging with us in a meaningful way. You need to be sensitive to our past and know that some things still impact us like racism. Safety and culture is a way which respects us and our ways.”*



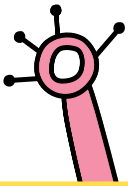
> *“More cultural support from services. More funding to help my family go on country and practice culture and reconnect to family and land and feel spiritual safe.”*

Similarly, many First Nations carers who responded to the Survey emphasised the importance of services understanding the ongoing impacts of colonisation. It was important to carers that systems address the enduring racism and discrimination, and work to break down systemic barriers. Respondents expressed the need for services to support First Nations carers in a trauma-informed way, showing respect and empathy.



> *More cultural support from services. More funding to help my family go on country and practice culture and reconnect to family and land and feel spiritual safe."*

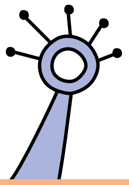
Over 40% of First Nations carers who responded to the Survey were living on Country. Many spoke about connection to Country as being important for their general wellbeing. Even for carers who were not living on Country, this connection was reported as being equally important to their identity and wellbeing.



> *Living on country and getting supports on Country is important for me. I have never lived off country, my family is here, my cultural connections are here, this is where I belong.*

> *My Cultural identity is very important to me. I was born and raised off Country, but being able to connect to Elders and mob is builds and maintains my spirit and resilience.*

Carers also spoke about women's and men's business, and the importance of services and the community understanding and respecting cultural practices. In 2021, the Gari Yala (Speak the Truth) report (Evans 2021) detailed concerning intersectional impacts of caring on Aboriginal and Torres Strait Islander female carers in the workplace, with the report finding that Aboriginal and Torres Strait Islander female carers often experience a 'triple jeopardy' effect due to the compounding effects of racial and gendered inequality, and disadvantage due to being a carer. Female First Nations carers who completed the 2024 National Carer Survey shared similar experiences, suggesting that the intersection between these three aspects of their identity has an influence on their experiences in other domains, including access to services for themselves and the people they care for.



> *I find that they generally try to provide a good service but have no idea about women's cultural needs. They respond when told but not really sensitive to it.*

> *Cultural appointment services e.g. female to see female dr's etc regarding women issues. Having a choice that fits in with our culture.*

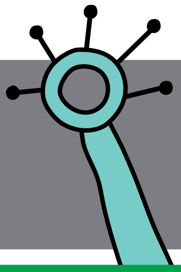
While there are rewarding aspects of the caring role, carers of all backgrounds share that caring can have significant impacts on their health and wellbeing, economic security, and social and community participation. Improved rights and recognition for carers is likely to support them to achieve greater equity in relation to health and wellbeing outcomes, social and economic participation and financial wellbeing. This is true for First Nations carers too, with respondents to the Survey wanting respect, to be treated with dignity and to receive equal treatment by society.

Culturally safe and inclusive services

Many First Nations carers responding to the Survey expressed the need to have access to culturally safe services and supports for themselves, as well as for the person(s) they care for. Some respondents cited negative experiences with mainstream services that didn't seem to understand their cultural needs or that of the person they care for, while others expressed the desire to be treated fairly and not be discriminated upon.

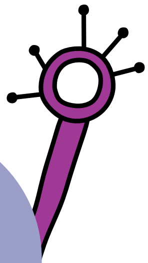
> “ *Not many mainstream services are culturally safe.* ”

> “ *When caring for an Aboriginal person, people don't understand the traditional sense of care for elders.* ”



> “ *Be treated the same, where I receive the same support as others.* ”

Many preferred accessing community controlled services for these reasons, as they found that these services provided them with the quality of care they needed to feel safe and welcomed.

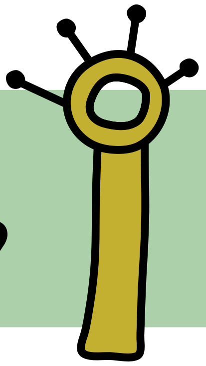


> “ *We attend Aboriginal and Torres Strait Islander Community Health Service who looks after all of us very well, and their connections to outside medical are usually safe and welcoming.* ”

First Nations respondents to the Survey highlighted the importance of 'mob in jobs' or how seeing First Nations staff when accessing services allowed them to feel more comfortable when doing so. Respondents also noted the powerful impact of acknowledgment of their identity through the physical environment, and how Aboriginal artwork made clinical spaces more inviting.

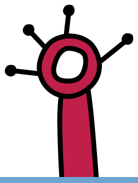
> “ *When I see Aboriginal artwork in services/ buildings, it makes me feel welcome and acknowledged.* ”

> “ *It breaks down barriers and makes us feel safe.* ”



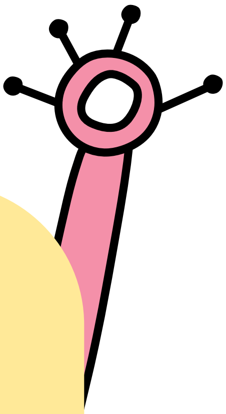
> “ *Seeing an Aboriginal person being employed by a service, knowing that person is from Country is important so we can connect on a real level. We feel comfortable and at ease seeing our mob in jobs.* ”

Respondents in the Survey emphasised how, in general, they want to be supported by culturally competent and welcoming staff who show respect and empathy towards them and recognise their worth.



> *When the services I go to and the people I speak to are culturally trained and aware of First Nations people; friendly staff/people are in the service/s, and when I feel important and like I matter and am worthy.*

First Nations carers responding to the Survey described what they saw to be culturally competent and culturally safe practice among service providers and staff, emphasising how important it is for their identities to be understood, acknowledged, and respected. This includes their history as a people; their deep connection to family, culture, community, and Country; and their values, beliefs, languages, and traditions.



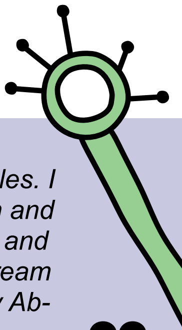
> *The service needs to be inclusive of the individual's family. Understanding of self and the connection to family, culture, community and what their experiences have been with western systems. This is critical to cultural safety and understanding cultural needs and implications.*

Structural barriers and enduring colonialism

Further, respondents expressed their need for service environments and staff to recognise the different barriers First Nations carers and the persons they care for face such as historical trauma, systemic oppression and shame; as well as health and social issues that impact them greatly. Services need to understand the valid reasons for distrust of government and services in First Nations communities, and that they are rooted in ongoing experiences of colonial violence.

> *Understanding my fear of not wanting help.”*

> *Ensuring that the service environment is culturally safe, meaning it recognizes and addresses power imbalances, historical trauma, and systemic discrimination that Indigenous individuals may face. It involves fostering trust, respect, and a sense of belonging for Indigenous clients.*



> *As an Aboriginal woman, I have many roles. I work full time, care for my 5-year old son and also have kinship roles with my nephew and nieces. This is not considered in mainstream services other than services provided by Aboriginal health service.*

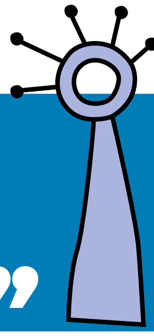
> *My children feel safe when people have patience and understand that they have additional needs and recognise what could be triggering for them.*

Self-determination

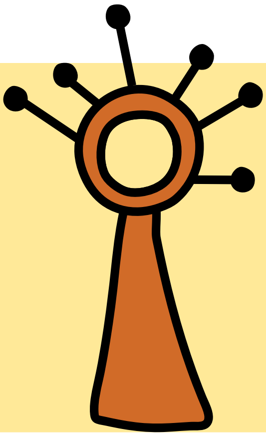
First Nations respondents also emphasised their need for choice and self-determination when it comes to accessing services. This presented in different ways, such as being listened to, being asked for their opinion or provided options, including an opportunity to personalise care according to their needs and preferences. They also spoke about the importance of considering the needs of the carer as well as the needs of the person(s) being cared for and the family, country and community more broadly, while working with carers. Carers would like to be given the opportunity to connect with community controlled services when desired.

> *"Understanding culture, having cultural support, being respected, asking opinions or choices for care."*

> *"Being asked what we need and listening rather than blanket decisions on our behalf."*

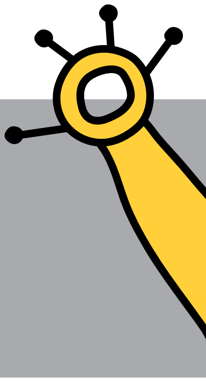


Part of self-determination is also being equipped to better care for themselves, their families, and communities. A few respondents emphasised the importance not only of improving access to funded services on Country and closer to their home and family, but also of strengthening education, research, and innovations in Aboriginal and Torres Strait Islander health, or enhancing health promotion practices through community support networks, more widely available psychological support, nutritional intervention, and the like.



> *"Strengthen medical facilities and services in Indigenous areas and improve healthcare levels. This includes increasing medical personnel and equipment, improving transportation conditions, so that Indigenous peoples can more easily access medical services. Focus on promoting the health of Indigenous people..."*

First Nations carers responding to the survey additionally identified the need for access to reliable, affordable, and timely services. Consistency among support staff was likewise identified as a priority.

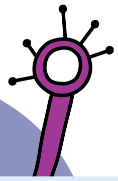


> *"Just getting the supports we need when we need them and at a reasonable price and locally-based. Not having to travel long distances to get supports or relying on telehealth type services. Face-to-face services with the same people each time."*

Respondents would also like greater access to specialists and a wider range of services including specialised health and medical services, emotional and cognitive stimulation services, mental and spiritual supports, and practical in-home supports. They emphasised the need for supports to be user-centred and responsive to the needs of the carer or person being cared for who will use these services. The need for good quality care, and to work with staff who exhibit professionalism and integrity was likewise deemed important by respondents. Transparency regarding carers' and service users' rights, access to information when needed, and protection of their privacy were also raised by some respondents.

Knowing, learning and caring

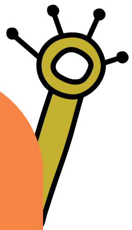
First Nations carers who responded to the 2024 National Carer Survey reported a lack of helpful, culturally appropriate information and resources. Carers expressed wanting to understand available support pathways and services, and feel more supported in their caring role. Through the Survey, carers shared wanting to know more to be able to better support good mental health and wellbeing. Carers also shared wanting to build knowledge and capacity to support their own community and future generations, while learning and connecting more to their culture.



> “…Education is the key and having access to resources that can connect us with our communities and people is essential for the future generations. I am sick of people just doing things to tick boxes for their own benefit and gain this does nothing for us or our people and culture, future generations.”

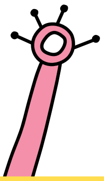
> “There needs to be more help for carers in knowing what is out there to help in the caring role. Culture is important and we need that to be a support in our caring roles.”

While the Survey shows the need for staff to offer helpful and informative support and services to carers, it also highlighted the importance of cultural awareness and cultural safety training of service providers with appropriate credentials.



> “The most important thing is to take good care of the people who need care. Professional knowledge and experience and technology will help to take care of those who need care.”

First Nations carers who responded to the Survey described the importance of services demonstrating continuous learning and improvement in their practices policies and practices, ensuring reliability of service delivery, privacy and security of data, regular evaluation and personalised care.



> “A reliable system, clear guidelines, and prompt response to issues make a service safe and secure for me. Also, protection of personal data and a trusted team behind the service are crucial.”

> “…Continuous improvement: Continuously optimise service quality and user experience according to user feedback. In a word, a safe and welcoming service should always be user-centred, pay attention to the needs and experience of users, and ensure the data security and privacy of users.”

Holistic wellbeing

A recurring theme found in the responses was the importance of wellbeing, including barriers to achieving optimal wellbeing and how the wellbeing of First Nations carers could be promoted in a multitude of ways. Some carers responding to the Survey cited their own experiences of health issues and burnout amid their often-multiple caring roles. They also observed a lack of access to support including limited access to respite and mental health support.

> “*Mind you, all throughout my carer role, I’ve had my health issues [which were] at times serious and debilitating. But I still continued my carer role even though I was pushing myself far past what I could do... I kept goin’ even though I was dead on my feet but I still kept goin’ without any help.*”

> “*It’s such a struggle to seek help alone. I am struggling to care for everybody who is needing me. I still have to work and look after my own family.*”

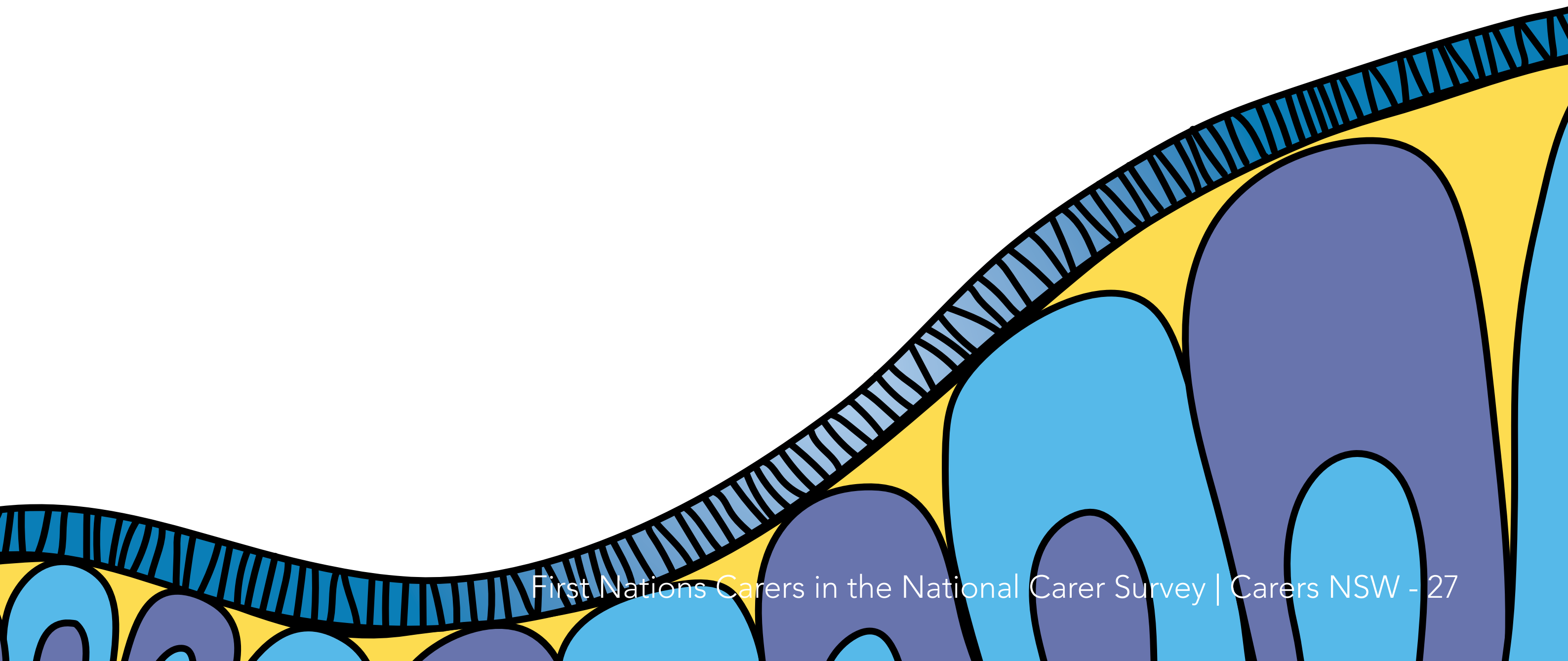
> “*Would like more respite when needed, not when they’re ready. I really need respite now but I have to wait for a certain month until a bed is ready.*”

Other respondents also stressed the existence of financial barriers to wellbeing, highlighting the conundrum of not having access to Carer Payment because of the paid work they need to engage in to support the person they care for.

> “*I’m on full-time Carer Payment which does not pay enough especially in this economic crisis we are in. Most days, I go without food and mental self-care things so my wife and son can have the best life.*”

Some of the respondents emphasised the interconnectedness of their own wellbeing with that of the social and emotional wellbeing of their family and community, and how this is supported when their family is on Country and has access to adequate shelter.

For other First Nations carers completing the Survey, culture was integral to their wellbeing. Respondents felt that yarning with their people, sharing and keeping cultural practices alive, and having others practise cultural empathy and respect towards them was important in helping them achieve positive wellbeing. Connecting with land and Country was similarly important to some respondents, who highlighted the positive impact of bush walking, access to land and water, being on Country, and cultural activities within their homes for their healing. Further, approaching the caring role with a traditional sense and culture integrated was also seen as protective to their wellbeing as carers.



Conclusion

First Nations carers' responses to the National Carer Survey since 2020 provide insights into the issues that are most significant to them. In line with other research (Klein et al 2023, Evans 2021) this report shows that First Nations carers are undertaking vast and high amounts of unpaid care. They are more likely to have multiple caring roles and to be caring for more than one person. The high intensity of their caring roles leaves little time for carers to maintain their own health and wellbeing. Nevertheless, formal services are consistently reported to do little to alleviate the stresses of the caring roles. The findings across the three waves of the National Carer Survey show that psychological distress and economic insecurity are highly prevalent among the First Nations respondents to the National Carer Survey. The lack of appropriate supports likely contributes to First Nations carers consistently reporting across all Survey waves that they did not feel recognised for their caring role by the community or government.

Their own voices however also show their sources of strength and resilience. Connection to culture and Country is an incredible resource that First Nations carers draw on to sustain themselves and their caring roles. "Caring" is for many respondents more than caring for a person in need, it involves caring for Country and community, and is an ongoing practice rather than an exceptional state, as government policy understands it. This holistic understanding of care needs to be reflected by policy and services, which requires First Nations carers in positions of power to lead conversations about the required reforms.

First Nations carers require services to be culturally safe for themselves, their families and the person(s) they care for. This means having increased access to community-led services, having more First Nations staff at service providers, and ensuring all staff have the cultural competency to support First Nations carers in a way that recognises their history and needs while promoting their dignity and self-determination.

The analysis of responses to the 2024 National Carer Survey demonstrates that greater recognition of First Nations carers needs to incorporate the importance of culture, cultural safety, respect and self-determination into policy and service delivery. The data on health, wellbeing and economic security shows that fundamental changes to policy and practice are needed to improve the outcomes of First Nations carers in Australia. First Nations carers need to be recognised through holistic, culturally safe and ongoing support services, led by First Nations communities themselves.

References

ABS (Australian Bureau of Statistics). (2020). General Social Survey: Summary Results, Australia. ABS. https://www.abs.gov.au/statistics/people/people-and-communities/general-social-survey-summary-results-australia/latest-release.

Carers NSW (2021). 2020 National Carer Survey: Summary report. Available online at: http://www.carersnsw.org.au/research/survey

Carers NSW (2023). 2022 National Carer Survey: Full report. Available online at: http://www.carersnsw.org.au/research/survey

Carers NSW (2025). 2024 National Carer Survey: Summary report. Available online at: http://www.carersnsw.org.au/research/survey

Cummins, R.A., Hughes, J., Tomyn, A.J., Gibson, A., Woerner, J., & Lai, L.C. (2007). Wellbeing of Australians: Carer health and wellbeing. Report for Carers Australia, Canberra.

Evans, O. (2021). Gari Yala (Speak the Truth): Gendered insights, WGEA Commissioned Research Report in partnership with the Jumbunna Institute of Education and Research and Diversity Council Australia. Available online at: https://www.wgea.gov.au/publications/gari-yala-speak-the-truth-gendered-insights

Hawthorne, G. (2006). Measuring Social Isolation in Older Adults: Development and Initial Validation of the Friendship Scale. Soc Indic Res 77, 521–548. https://doi.org/10.1007/s11205-005-7746-y

Klein E., Hunt J., Staines Z., Dinku Y., Brown C., Glynn-Braun K., Yap M. (2023), Caring about Care (Commissioned Report No. 7/2023), Centre for Indigenous Policy Research, Australian National University. https://doi.org/10.25911/7S8N-8C87

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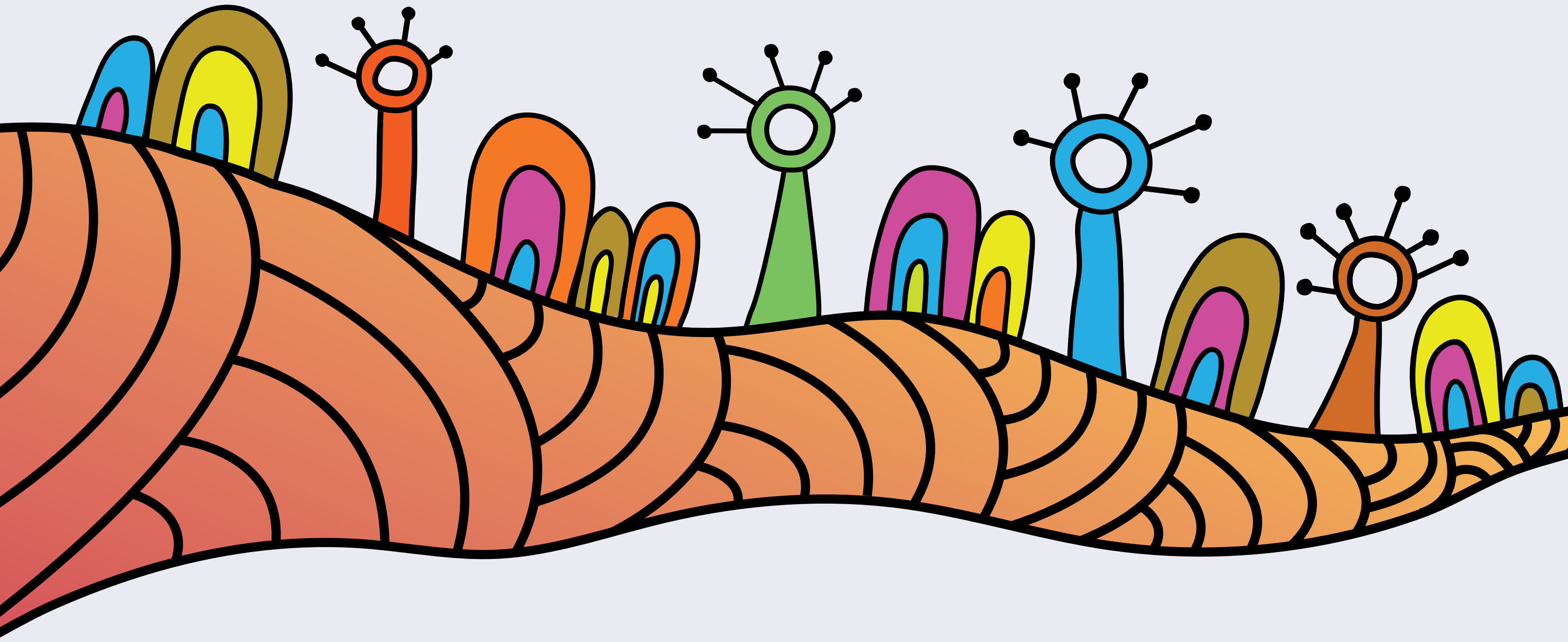

The artwork - Together we stand

Together we stand represents carers, Aboriginal and Torres Strait Islander, and non-Indigenous standing together. Caring impacts not only the people we care for, but us as people everyday in our own lives. We connect with country, the people we care for, and each other. We are separate, but we come together to stand as one.

The artist: De Greer-Yindimincarlie

De Greer-Yindimincarlie is an Australian Aboriginal woman from Wiradjuri country in central western New South Wales, and multi award-winning artist. She celebrates her Aboriginal culture everyday through working within her Authentic Aboriginal businesses delivering to public and private collections world wide, her stunning Aboriginal artworks. De works in many mediums including art, music, graphic and textile design, and film.

De was awarded the 2008 South East Queensland NAIDOC award for 'Distinguished Services in the Visual Arts Industry; and was nominated for 'Visual Artist of the Year' in the 2011 and 2013 National Deadly Awards. She also won the Professional Deadly Dressed Award at the 2013 Deadly Awards, for the collaboration piece The 'Yindi' dress, which bore De's textile design. In 2022, De also won the SA Woman First Nations Women in Business award. De's artwork can be found on every continent of the world.

De is a respected member of the community, and she is one of Australia's highly sought after female Aboriginal graphic designers, and she has worked and collaborated with several organisations including Department for Agriculture, Water and the Environment, Austrade, TAFE NSW, Australian Skills Quality Authority, and The Treasury.

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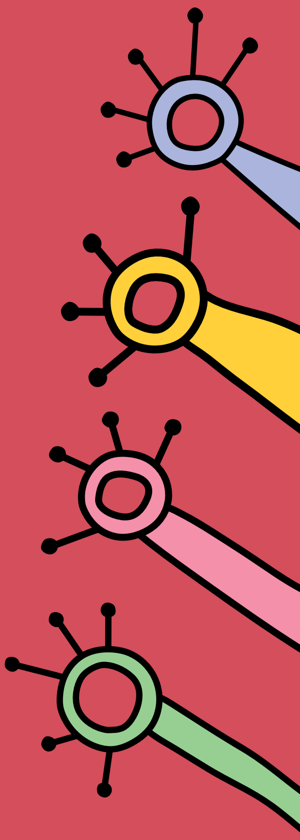

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