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# Thinking about Hard Times in Elderly Care: Actual time vs. Desired time for care

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# Background

- Korean's attitudes or thoughts on the family care responsibility of their old parents have changed.
  - In 1998, 89.9% of Koreans agreed with the idea that the care responsibility of their old parents belongs to the family.
  - Percentage decreased to 70.7% in 2002, 67.3% in 2006.
  - Only 27% of family members agreed on that the family is responsible for elderly care in 2018 statistics (Kim, 2019).
- The shape of the "Care Diamond" started to change as NLTCI (National Long-term Care Insurance), private services through the market expanded since 2008, and other types of public care services has launched recently.

# Background

- The government and the market has begun to play an important role in elderly care while, the family burden seems unchanged.
- Family members still report that "taking care of the elderly is getting more and more burdensome and hard."
- More support has given, but why it is still difficult to care elderly? How can we understand this paradox? What is the reality of family care?

# **Background: time spent for care**

- Time spent for care is truly one of the key factors that accurately describe the care situation (Moen & De Pasquale, 2017).
  - TUS (Time Use survey) data provides valuable information.
  - In terms of time use, scholars try to answer *how much time* people dedicate to care work/care activities, *who spends more time* in care, and within a 24-hour, *when does care mostly occur*.
  - *Secondary activities* have also been considered, in addition to main activities, in counting care hours (Craig & Brown, 2016; Folbre, 2006).

# Background: time spent for care

- Yet attitudes toward engaging in care has been rarely questioned.
  - the *willingness* and *personal attitudes* among the caregivers toward elderly care were undetected.
  - recent labor studies introduced/tested the desired work hour and the discrepancy between the actual work hour and desired work hours as well as mismatch in work hours.
  - The association between the desired work hour and the life satisfaction was pronounced.

# **Research Agenda**

- If we consider both actual time and desired time for care, we may able to address a new series of interesting questions.
  - Are people able to take care of the elderly as much as they want?
  - Do they tend to care for more hours than they prefer (over-caring)?
  - Is it difficult to adjust care time as one desire? Why is it so difficult?
  - Is the difficulty/hardship in care time associates with the certain characteristics of care work?
  - Does **gender matters** when men or women become a caregiver?

# **Research Agenda**

- As a starting point for answering these interesting questions, we examine actual time and preferred time among family caregiver.
  - Recent statistics indicate that the attitude on the responsibility for elderly care by the family is sharply decreasing.
  - Considering such attitude changes, the discrepancy between actual versus preferred time for elderly care may be large.
  - We assume family caregivers suffer from severe over-caring situation, and that is a key reason why care become so hard and difficult.
  - We assume that female caregiver may suffer more than male caregiver in the caregiver context.

### Data

- We utilized family caregivers who take care of elderly members in the family from the <sup>[2018</sup> Family Survey for Child and Elder Care\_for our analysis.
- Data was gathered from a family member who takes care of their elderly parent as the main caregiver.
- We define "the main caregiver" as one currently living with an elderly parent and who takes full responsibility of the care situation.
- Either, the main caregiver may live apart from the elderly parent and visit at least three times per week and provide more than 2 hours of care work to the elderly per a visit.
- The number of family caregiver respondents providing care work to elderly family members in our data was 501.
- Need to mind that these caregivers are specific group of people!
- The descriptive of the sample is presented in Table 1.

### Measurements

- Actual care time "how often do you care for your elderly family member on weekdays and weekends (number of days per week (weekday/weekend) and the average care hours on a caring day (weekday/weekend)?"
- **Preferred care time** "If you could choose, how often would you care for your elderly family member, on weekdays and weekends (numbers of days per week (weekday/weekend) and the average care hours on a caring day (weekday/weekend)?'
- The deviance between actual and preferred care time and the types of care time was calculated by subtracting actual care time from preferred care time.
- If the number is less than zero it indicates that the respondent prefers more time for care than they actually perform (under-caring). A number more than zero means a person is caring more hours than one desires (over-caring). If the deviance is zero, it means that one is caring for the elderly as much as one desires (matched).

#### <Table 1> Sample characteristics

			frequency/	percent/S.D.
			mean	
Caregiver	Sex	Male	77	15.37
		Female	424	84.63
	Relationship with elderly	Spouse	79	15.77
		Children or Siblings	422	84.23
	Age group	30–40's	111	22.15
		50's	229	45.71
		60 +	161	32.14
	Education	High school and under	408	81.44
		College and above	93	18.56
	Employment status	Employed	153	30.54
		Not-employed	348	69.46
Elderly	Sex	Male	216	43.11
recipient		Female	285	56.89
	Health status	Fair	52	10.38
		Bad to worse	449	89.62
	Mean age		81.25	6.97
	Living arrangement	Live together	311	62.08
		Live apart	109	37.92

Actual time spent for elderly care vs. Preferred hours for care

	Actual Care Time		Preferred Care Time		
	Weekdays	Weekends	Weekdays	Weekends	
mean	7.79	7.51	4.53	3.80	
SD	227.95	267.10	160.35	183.87	
	Actual Care Hours	Preferred Care Hours	The Gap (actual - pre	ferred)	
	(per week)	(per week)	(per week)		
mean	50.79	24.57	26.22		
SD	27.81	18.51	23.54		

#### <Table 2> Descriptive of Care Time of Family Caregiver

This indicates that

 $\checkmark$  The average caregiver is doing double the amount of care work than they desire.

✓ The family caregivers wish to reduce the time for caring elderly

The gap seems to be a bit larger on the weekends compared to weekdays, which means caregivers wish to spend less time on care on weekends compared to weekdays. [Figure 1] Distribution of the gap between actual time spent for care and desired time (per week)





#### <Table 4> Care Context by Care Hour Types (%, mean)

(*continue*)

		Under-caring	Matched	Mild Over-caring	Severe Over-caring
Ν		17	93	161	230
Caregiver's sex	Male	41.18%	15.05%	15.22%	13.04%
	Female	58.82%	84.95%	<b>84.78</b> %	<b>86.96</b> %
Caregivers' age group	30-40's	23.53%	35.49%	16.15%	20.87%
	50's	64.71%	17.90%	48.03%	29.26%
	60+	11.79%	20.43%	31.30%	42.24%
Caregiver's employment rate	Not-employed	23.53%	62.37%	67.39%	81.37%
Financial support from other kin members	Receive support	41.18%	40.86%	50.87%	48.45%
Change in living arrangements	Had changed living arrangements	29.41%	32.26%	25.65%	40.37%
Care duration in years (mean)		3.66	4.44	4.39	5.08

[Figure 2] Association between actual time spent for caring elderly and life satisfaction: marginal estimation after regression



[Figure 2] Association between the deviance of care hours and life satisfaction: marginal estimation after regression



[Figure 2] Association between the deviance in care hours and life satisfaction: marginal estimation after regression



- ✓ It is the deviance (or mismatch) that matters rather than the actual time spent for care.
- ✓ The more they over-care, the less they are satisfied.
- ✓ What makes the caregiver to spend more time than they desire?

The association with the characteristics of care and care hours in elderly care context

### Association between prolonged work hours and work characteristics: Implications from the paid labor studies

- Social script matters (Van Echtelt, Glebbeek, & Lindenberg, 2006).
  - If a person feels finishing a task in a timely manner is important, completing the task is beneficial for their reputation, wishes to receive rewards, and places the sake of the group above themselves, then they may not weigh the benefit of additional hours against the cost in free time.
- Working additional hours occurs in a cumulative fashion (Lindenberg, 1986).
  - Small decisions to work more at several moments over several days add up, each decision being unrelated to their contracted weekly working hours
- Specific job characteristics (in a supervisory status, blurry boundaries due to smart devices) may be a main driver (Van Echtelt, Glebbeek & Lindenberg, 2006)

# **Connecting together: Important characteristics of Care work in the literatures**

#### **Characteristics of Care work**

- Competence
- Patchworks of Activities (involve various activity/knowledges/skill)
- Immersed experience/ attentiveness
- Personal growth/Emotional rewards (personal, social)
- Intimacy/ relationship building
- Intergenerational ethics/responsibility
- Time consuming/ time pressure

#### **Related field**

Important factors in Human Service provision (Servqual model indicators)

- Assurance --- profession/ expert
- Tangibles ----activity based
- Responsiveness --- respond to the needs
- Empathy ---- relationship building
- Reliability ---- responsibility

### Measurements

- **Care work characteristics**: Extracting common traits from the literature, we argue that the following characteristics reflect the characteristics of caring labor: <u>attentiveness (AT), receiving</u> <u>gratitude from others (RG), building good relationships (GR), feeling responsibility (RP),</u> <u>experiencing growth, and emotional benefits (GB), and time-dependent performance (TDP).</u> We were able to draw relevant items from our survey data to measure each characteristic.
- Most of the items were measured by 5-point Likert scales, except for responsibility for care which was measured using a 10-interval scale ranging 0-100 points and gratitude consists of 3 categories.
- Good relationship with elderly (GR), were in single item with 5 likert scale
- Items for attentiveness (AT), experiencing growth and emotional benefits (GB), and time-dependent performance (TDP), there were two relevant items for each, so we added up the scores and then divided by the number of items in order to construct score ranges from 1 to 5.

140013	Coef.	Std. Err.	t P	>t Beta	
Attentiveness	14.78	2.89	5.12 ***	0.21	
Express gratitude	1.43	2.52	0.57	0.02	
Build good relationship	4.97	2.46	2.02 **	0.09	
Growth/benefits	-1.78	2.61	-0.68	-0.03	
Responsibility to care	6.98	2.42	2.88 ***	0.12	
Time dependent	2.05	2.35	0.87	0.04	
Elderly gender	0.20	2.26	0.09	0.00	
Elderly age	-0.07	0.17	-0.38	-0.02	
Giver sex	-0.76	3.29	-0.23	-0.01	
Giver age	6.59	1.58	4.18 ***	0.19	
Giver emp	9.90	2.63	3.76 ***	0.16	
Giver edu	-0.87	2.82	-0.31	-0.01	
Giver hhld income	-1.39	0.36	-3.90 ***	-0.18	
_cons	13.39	17.62	0.76		
Ν	501				
F(13, 487)	12.66				
R-squared	0.25***				

<Table 3> Regression Results of Actual Time Spent for the Elderly Care and the Relevant Factors

\*: p<.05, \*\*:p<.01, \*\*\*: p<.001

	Coef.	Std. Err.	t P>	t Beta	
Attentiveness	9.82	2.61	3.76 ***	0.17	
Express gratitude	1.39	2.28	0.61	0.03	
Build good relationship	1.12	2.23	0.50	0.02	
Growth/benefits	-0.65	2.37	-0.28	-0.01	
Responsibility to care	0.57	2.19	0.26	0.01	
Time dependent	4.07	2.13	1.91 ***	0.09	
Elderly gender	-0.85	2.04	-0.42	-0.02	
Elderly age	-0.01	0.15	-0.07	0.00	
Giver sex	0.83	2.99	0.28	0.01	
Giver age	3.13	1.43	2.19 **	0.10	
Giver emp (not-employed)	6.77	2.39	2.84 ***	0.13	
Giver edu	0.15	2.56	0.06	0.00	
Giver hhldincome	-1.01	0.32	-3.12 ***	-0.15	
_cons	3.69	15.97	0.23		
Ν		501			
F(13, 487)	6.29				
R-squared		0.1	437		

<Table 4> Regression Results of the Deviance of Care Time for the Elderly Care and the Relevant Factors

< Table 5 > Summery table for testing Interaction terms on the actual care hours spent for elderly care

	Coef.	Std. Err.	
Attentiveness	16.85	8.10	*
Express gratitude	25.29	13.90	**
Build good relationship	7.74	10.37	
Growth/benefits	-9.09	10.88	
Responsibility to care	0.23	0.10	*
Time dependent	-2.72	6.85	
Gender of caregiver	26.66	29.57	
Attentiveness X gender	-3.40	4.31	
Gratitude X gender	-12.48	7.32	+
Good relationship X gender	-2.49	5.47	
Growth/benefitsX gender	3.42	5.72	
Responsibility X gender	-0.85	2.03	
Time dependent X gender	1.20	3.67	

†: <.10 \*: p<.05, \*\*:p<.01, \*\*\*: p<.001

Note) Control variables were not shown in the table, which control variables were the same as Table 6.

# Findings

- Implying that the caregivers spend longer hours on care work because the elderly family member needs on-call care and the caregiver has a positive emotions towards and feels strong responsibility for the elderly family member, and care need of elderly consists of time depending tasks.
- Yet, it is obvious that the prolonged care hours are not motivated by personal growth or benefits.
- Additionally, we tested the interaction terms with gender and the care characteristics.
  - Gender difference in the sensitivity of care characteristics were not found, except for expressing the gratitude .
  - If other family members express the gratitude/appreciation towards the caregiver, then especially for female caregiver may experience shorter hours of care time, perhaps, the other family members actually share the time burden or they manage to reduce the care time of the caregiver.

## Conclusion

- Not only the actual time spent for care makes difficult for caring elderly, but the gap (between actual time and the desired time for care) is playing a key role in this context.
- Majority of family caregivers are over-caring their elderly recipients against their preference.
- Attentiveness, Good relationship, Responsibility, Time dependent tasks: those characteristics of care actually attribute for the prolonged hours, because caregivers wanted to fulfill the elderly's needs.
- Still we found that over-caring caregivers have their mind set on the elderly's wellbeing, meaning they are very much aware of the elderly's need and wishes.
- Rather than gender difference more similarities were found in elderly caregiving situation.
- Yet, need to mind that the majority of family caregiver is currently women.

# Movie "Romance"

- This is a story of an elderly couple diagnosed with dementia. Wife was diagnosed first and the husband understands her suffering and determines that he will look after her.
- In the meanwhile, the husbands also gets realize that he is also having dementia symptoms. And the couple finds out the way how to care each other....



# Implication to the care policy

- The majority of care was given by women.
- More men is becoming care givers due to the changing family structure and increasing longevity
- If one becomes a main caregiver, especially for elderly care, over-caring situation is evident for both male or female caregiver.
- Putting the issue of the gendered norm or the inequality in the distribution of care work aside, how are we going to share this?
- Deep-understanding, Relationship history, Empathy, Memories all matters
- New social script for care needed.

Thank you so much for your attentions

contact for comments and advise

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