

A Study on the Sociodemographic Characteristics and Life Satisfaction of Family Caregivers

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Abstract

This study is based on the National Pension Research Institute's 2013 Korean Retirement and Income Study(KReIS) 5 Data for Parents and Children Care over 50 years old and analyzed the satisfaction level of life according to the characteristics of 226 people in society. The results showed that women were more satisfied with their lives than men, and when the age was lower, when they had spouses, and when they had independent economic power. As for the grandchildren caring provider, the higher the education levels, the higher the satisfaction with life. And across all areas, the grandchildren care provider showed greater satisfaction with life than the parents care provider. These results show that the burden of the parents' carers is as great as that. Suggestions based on these results are as follows. First, It is necessary to develop a health care program that can be easily accessed by family carers. Second, Direct economic support is needed, with the primary focus being on family carers. Third, services targeting parents care providers are needed. It is also necessary to form a network that can share the difficulties of parental care.

Keywords: *Middle-aged and older people, family care, family caregiver, Lifesatisfaction, KReIS.*

1. Introduction

Though the functions of the family were weakened by industrialization, urbanization and the rise of social activities of women, the need for family care remained intact. This reality is perceived as the time when old age care is received and care is provided until late. In modern society, although values are changing rapidly in many ways, they are changing slowly in the family care area. Family care has two sides. It is rewarding because family relationships are improved and life understood through family care, but it is also a burden when caregivers are elderly or middle-aged. Because middle aged people are in a time of psychological and physical changes in the development process, they are more

likely to experience negative things. It has also been reported that a large proportion of family caregivers have a limited amount of time required for leisure activities and life satisfaction with the psychological and

physical burden of care [1][2][3]. Life satisfaction is an assessment of oneself from the past to the present ; it provides a basis for successful retirement ; and it provides an important sense of integration into one's own life that is very important [4]. Research into family care was conducted mostly on the providers of care for parents and grandchildren and could identify different characteristics of caregivers and satisfaction with life depending on care type. These results may also mean that caregivers may have different needs depending on the type of care being taken. However, the comparison is very limited. Therefore, through this study, we will explore policy measures for family caregivers by comparing characteristics of parents caregivers with grandchildren caregivers and satisfaction with life.

2. Theoretical background

Family care is the care of family members who are unable to care for themselves based on blood ties and emotions [5]. It can be defined as the care of children, grandchildren, spouse, parents and grandparents, and other family members, either resident together or not. Korea has decreased the rate of living with children, but the elderly, the elderly, and the traditional values of family care are the main reasons why we provide family care. In a 2011 study of older adults aged 65 and older, 53 % were cared for by their spouses [6]. Living with grandchildren is declining but grandparents who provide care in blood relations [7]. As a result, the need for family care is still strong. Family caregivers are seeing an overwhelming proportion of women. Family caregivers had an overwhelming proportion of women, 50 % of parents caregivers and 80 % of grandchildren caregivers [8], In [5] studies, the proportion of women was 73 %. As a reflection of these results, most studies of family care [9] [10] [11] [6] were conducted on women. Parents caregivers comprised more than 90 % in their 50s and 60s, and grandchildren caregivers comprised more than 79 % of those in their 50s and 60s and those in their 70s and older. The age range was higher for work-caregivers [8]. In addition, [5] studies of family caregivers for parents and grandchildren showed that 33 % of those in their 50s, 31 % in their 60s, and 35.5 % in their 70s and older were in their 20s and older. [6] study also found that 63 % of family caregivers were aged 70 or older in 2011. In [1], the study also provided parental care as age increased. The results show that there is considerable family care being done at the High age. In [8] study found that 49 % of parents caregivers are more than high school graduation and 29 % of grandchildren caregivers are more than high school graduation. The results are likely to be due to the older age of the grandchildren care provider. [6] reports that the provider of family care has a slightly higher academic background than a non-professional worker. [13] study found that 40 % of those with higher than high school education were found to have higher education levels of family care providers. 88% of the parent caregivers have a spouse, and 73% of the grandchild care providers. This result seems to be related to the age of care provider [8]. In [14], the percentage of grandchild caregivers with spouses was 57% and that of general elderly was 64%. [9] showed that 70% of the elderly caregivers who live with their spouses live. However, grandchildren providers are in contradistinction to the fact that married people are lower than the overall average [12]. As can be seen from the above results, it can be seen that the spouse status of the subject is related to the age group. Economic independence means that they have independent economic power to live without dependence on others. Therefore, in the previous study focusing on the economic condition [12], the income level was lower when the grandchild care was provided. In the study of [15], 57% of households earning monthly income less than 2 million won, of which 31% of households earn less than 1 million won. In the study of [1], the lower the household income, the more parental care is provided. These results are also related to the poverty of the elderly in Korea. In the study of [8], 30% of the cases of unhealthy parents and 43% of the cases of healthy parents were found, and 32% of the elderly caregivers were healthy and 37% were healthy. These results also seem to be related to the age distribution. [6] reported

that 24% of grandchild care providers, 13% of other family care providers, and 15% of general elderly responded that they were "healthy" and that grandchild caregivers rated their health better have. However, in the case of grandchildren providing grandchild care, it is contrary to the study of [12] that they perceive their health condition as negative.

Life satisfaction is a subjective and complex emotion that is affected by individual psychological and environmental factors, past, present and future and feels happiness and satisfaction for the whole life [16]. Satisfaction with life is an important factor in providing a sense of unity of life that has lived so far and successfully sending long years of life [4]. Male life satisfaction was higher. The lower the age, the higher the economic status and education, and the better the health status, the higher the satisfaction of life [4]. The results of this study are summarized as follows: 1) The life satisfaction of parents' caregivers is lower than that of non-providers. In this way, the satisfaction of life is mixed in reports that family caregivers are low, and that they are different according to the types of family care.

3. Analysis Results

This study used the fifth data from the KReIS in 2013. The subjects were 226 middle - aged and elderly people who are over 50 years old and are caring for their parents and grandchildren. Parental care carries out the care of the parents of the child and the spouse, and care for the grandchild is the care of the grandchild and the child of the offspring of the third grade or lower of elementary school. Life satisfaction was measured as 1: very bad - 5: very good. Satisfaction with life means satisfaction with life as a whole, and higher score means satisfaction with life.

The results of the analysis are as follows. As shown in Figure 1, the difference in gender was higher among women in the case of parents' care providers, while the lives of men and women were the same in grandchild care providers. Both males and females were more satisfied with the life satisfaction of their grandchild care providers. Life satisfaction according to age is shown in Figure 2. In all age groups, life satisfaction of grandchild caregivers was slightly higher than that of parent care providers. Life satisfaction was slightly lower with age. The peculiarity is that the life satisfaction of parents' carers who are over 80 years of age has fallen sharply, while that of grandchild caregivers has only slightly changed. These results are consistent with previous research [10], [11], which shows that life satisfaction decreases as age increases.

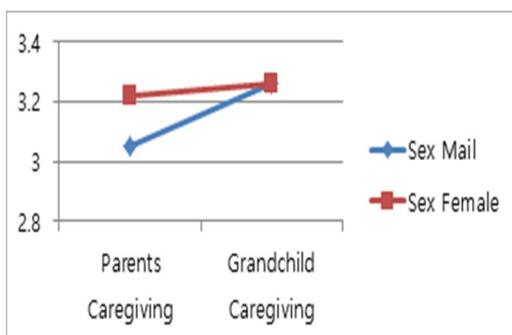


Figure 1. Sex and Life Satisfaction

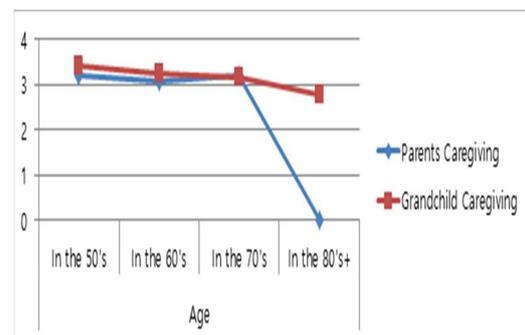


Figure 2. Age and Life Satisfaction

Regardless of the level of education, life satisfaction of grandchild caregivers was slightly higher than that of parent caregivers as shown in [Figure 3]. The higher the educational level, the higher the satisfaction of life for grandchild care providers. However, in the case of parents' care providers, there was no positive

change in life satisfaction except in the case of no school. As shown in [Figure 4], there was a high level of life satisfaction with both spouses. These results suggest that the spouse reduces the physical and psychological burden of caring for the family by acting as an assistant in the family caring process. The life satisfaction of the grandchild caregiver was higher than the parental caregiver regardless of the spouse or not.

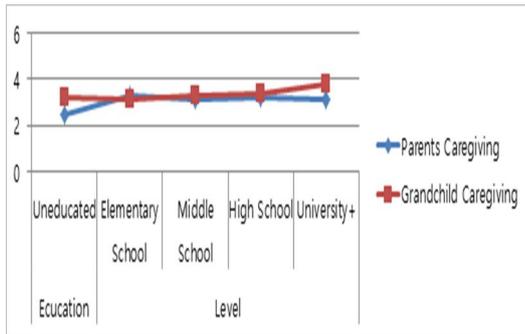


Figure 3. Education Level and Life Satisfaction.

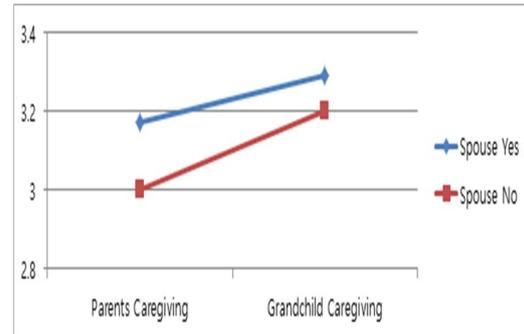


Figure 4. Spouse and Life Satisfaction

As shown in [Figure 5], when both groups had economic independence, life satisfaction was high, and regardless of whether they had independent economic power, grandchild caregivers were more satisfied with life than parents caregivers. As shown in [Figure 6], the satisfaction of life for the elderly care provider increased as the health condition improved. However, the life satisfaction of parents' caregivers has the opposite tendency. In particular, parents' caregivers had the lowest satisfaction with life satisfaction when their health condition was very good. This result is a result that can not be found in the previous studies.

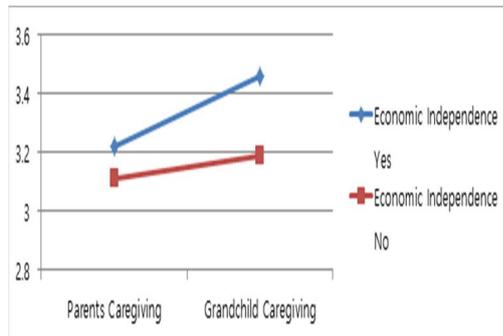


Figure 5. Economic Independence and Life Satisfaction

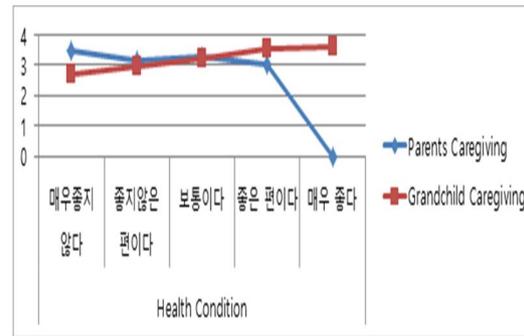


Figure 6. Physical Status and Life Satisfaction

4. Conclusions & Suggestions

This study used the fifth data from the National Pension Service Survey Panel of the National Pension Service in 2013. The subjects of this study analyzed the life satisfaction according to socio - demographic characteristics of 226 people over 50 years old who provide parental care and grandchild care. The results showed that the satisfaction of life was higher when women were younger, younger, spouse, and had independent economic power than men. Grandchildren caregivers were more satisfied with life when they

had high academic ability. Also, in all domains of gender, age, educational level, marital status, economic independence, and health status, grandchild caregivers have higher life satisfaction than parent care providers. The peculiarity is that the parents' caregivers have a low life satisfaction when their health condition is good, and the need for follow-up research is raised.

Suggestions based on these results are as follows.

First, due to changes in values such as gender equality, the participation of men in family care is expected to increase in the future. Therefore, education and support programs for family care are required for men. Second, if there is a spouse, life satisfaction is high regardless of care type. Third, economic support is needed for the primary caregiver of the family. This is the point when it is necessary to worry about the family care allowance system. Fourth, the life satisfaction of the grandchild carers is higher than the parent carers in all areas. These results show that the burden of the parents' carers is as great as that. To this end, it is necessary to form a network that can share the difficulties of parental care and services to help people understand care.

Acknowledgement

“The present Research has been conducted by the Research Grant of Kwangwoon University in 2018.”

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