Family-Friend Care Network among Persons Aged 75 Years and Over in Canada: How Does Marital Status Matter?

Rania Tfaily and Claire Noel-Miller

Abstract

Informal caregivers are instrumental in providing care for seniors, and this is unlikely to change in the near future given the social, economic, health and fiscal changes. Most previous studies on care giving to elderly persons tended to focus on spouses and children. In this paper we examine the relationship between marital status and assistance taking into account all long-term providers and the extent to which each one has provided assistance. We use data from the 2002 Canadian General Social Survey to test the hypothesis that unmarried persons aged 75 years and over are disadvantaged vis-à-vis their married counterparts. We look at how the presence of the spouse affects whether and how often children, other family members and friends and neighbours offer care. We also examine the extent to which the relationship between marital status and care receiving differs by gender, immigrant status, and ethnicity (Anglophones vs. Francophones).

Introduction

Informal caregivers are instrumental in providing care for seniors, and this is unlikely to change in the near future. With the cost of health care for the elderly rising substantially over time, there is increasing concern over the budgetary consequences of population aging. In Canada, where there have been substantial cuts in social programs in recent years (Rosenthal, 1997), the percentage receiving institutionalized care declined recently to less than 10% and 5% among elderly women and men respectively in 2001 (Cranswick and Thomas, 2005). This has been accompanied by a trend towards greater reliance on families in providing care (Rosenthal, 1997). Spouses are the primary caregivers, followed by children, other family members and friends and neighbours (Cantor, 1991; Denton, 1997; Hayward et al., 2004; Stobert and Cranswick, 2004). The social network of the elderly persons often determines the type – if any – and quality of care they receive (Cranswick and Thomas, 2005).

Despite the utility of the family-friend care network, it is argued that it has limited capacity to take in additional demands for care (Keating et al., 1999). This could be critical for unmarried elderly persons. Hayward et al. (2004) found that the presence of a spouse reduces the amount of publicly-funded care that Canadian seniors with long-term illness receive. The amount of care provided by the spouse does not differ by gender (Keating et al., 1999). Divorced elderly persons might be additionally vulnerable as divorce often has a long-lasting and weakening effect on parent-children relationship including caring for parents in olds age (White, 1992). A number of studies found that children of divorced parents are less likely to provide assistance to their parents than children whose parents did not experience divorce (Marks, 1995; Rezac, 2007). A key limitation of the literature on the relationship between marital status and care assistance is the exclusive focus on spouses and children even though other family members, friends and neighbours provide significant share of the care for the elderly persons.

In this paper, we use data from the 2002 Canadian General Social Survey to test the hypothesis that unmarried persons aged 75 years and over are disadvantaged vis-à-vis their married counterparts. Unlike most previous studies, we take into account all long-term providers and the extent to which each one has provided assistance in the last 12 months preceding the survey. We specifically distinguish between instrumental care (household work, outside house assistance, and transportation/banking help) and personal care. We also look at how differences in family structure and family relations affect care assistance to the elderly person. We examine the following research questions are: 1) to what extent is the assistance that married seniors receive in old age comparable to that of unmarried – especially divorced – counterparts; 2) how does the presence of the spouse affects whether and how often children, other family members and friends and neighbours offer care? 3) to what extent does the relationship between marital status and care receiving differs by gender, immigrant status, and ethnicity (Anglophones vs. Francophones).

The study of the family-friend care network is particularly relevant in light of the demographic and social and economic changes. Continuing gains in life expectancy will result in significant increases in the proportion of adult children with surviving parents and grandparents. This is coupled with the rise in the percentage of older people who live as a couple or alone. This is especially in the case of women who are more likely to be widowed than men and also have lower remarriage rates. Labor force participation among women who tend to be the traditional caregivers to their parents has dramatically increased. Adult children especially daughters increasingly face the burden of balancing their labor force participation with their family responsibilities including caring for an elderly parent (Rosenthal, 1997).

This analysis of this paper is based on data from the General Social Survey Cycle 16, conducted by Statistics Canada in 2002. The survey covers various topics related to aging and social support. Respondents were asked about their demographic characteristics, health status, retirement planning and experience, social life, housing characteristics and life experiences. The survey also included very detailed questions about care giving and care receiving including characteristics of each of the long-term providers, the tasks he/she has assisted the respondents in, the time spent and how involved he/she is in taking care of the respondent. The survey sample was randomly selected from a list of respondents who participated in the Canadian Community Health Survey (conducted by Statistics Canada in 2001) and who were aged 45 years and over. The survey sample excluded residents of the Yukon, Nunavut, and the Northwest Territories, full-time residents of institutions, residents of Indian Reserves, Crown lands, or some remote areas, and full-time members of the Canadian Armed Forces. The data collected between February and December 2002 had 84% response rate yielding a sample of 24,870 respondents (Statistics Canada, 2005).

Preliminary descriptive results indicate that unmarried women aged 75 years and over are substantially more likely to receive personal help than their married counterparts. They also are more likely to have their sons and daughters as long-term providers than married women. This pattern is especially striking for Francophones and

immigrants. Unmarried men, on the other hand, are as likely as married men to receive personal assistance with the exception of unmarried immigrant men who seem to be at a disadvantage compared to their married counterparts. With few exceptions, unmarried men are less likely to have sons and daughters as long-term providers and are more likely to rely on other family members, friends and neighbours. In addition to descriptive tables, we are conducting multivariate analyses to examine the relationship between marital status and care receiving from the family-friend social network of elderly Canadians.

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Table 1: Percentages of respondents aged 75+ years receiving help by gender, ethnicity/immigrant status, and marital status

			N	IEN		
	Angl	ophone	Franc	ophone	Imn	nigrant
	Married	Unmarried	Married	Unmarried	Married	Unmarried
	(n=666)	(n=393)	(n=261)	(n=149)	(n=285)	(n=151)
Instrumental	80.1	62.1	56.0	56.8	76.2	58.6
Personal	19.3	21.2	13.8	13.6	20.7	12.6
			WC	MEN		
	Angl	ophone	Franc	ophone	Imn	nigrant
	Married	Unmarried	Married	Unmarried	Married	Unmarried
	(n=399)	(n=1,690)	(n=149)	(704)	(n=182)	(n=582)
Instrumental	79.4	76.6	71.3	76.2	72.0	74.2
Personal	20.7	29.3	17.3	23.1	18.7	26.1

Table 2: Relationship of respondents aged 75+ years to their long-term provider(s) by gender, ethnicity/ immigrant status & marital status (only respondents who received help in the last 12 months are included in this table)

			M	MEN		
Is/are long-term provider(s)?	Anglophone	phone	Francophone	phone	Imm	Immigrant
	Married	Unmarried	Married	Unmarried	Married	Unmarried
Spouse	30.1	1	25.2	ı	36.4	ı
Daughters/daughters-in-law/granddaughters	35.8	51.4	58.2	45.6	40.9	48.6
Sons/ sons-in-law/grandsons	38.8	35.5	51.3	44.5	36.9	32.6
Male relatives	0.9	10.4	12.6	14.0	5.1	12.2
Female relatives	8.3	23.6	7.3	17.4	7.0	12.1
Friends/ neighbours	19.1	36.6	13.7	23.3	18.0	38.0
Other/paid employee/organizations	48.3	41.6	25.7	29.8	41.5	28.8
Is/are lonø-term provider(s)?	Anglonhone	nhone	WO	WOMEN Francophone	Imm	Immiorant
	Married	Unmarried	Married	Unmarried	Married	Unmarried
Spouse	31.0	,	27.7		27.6	
Daughters/daughters-in-law/granddaughters	48.6	52.4	34.0	6.09	42.4	58.9
Sons/ sons-in-law/grandsons	37.2	41.2	29.0	52.3	33.9	50.0
Male relatives	4.6	8.7	2.2	11.6	3.8	6.1
Female relatives	15.5	19.7	22.9	20.0	10.6	13.4
Friends/ neighbours	36.7	36.6	36.1	22.0	33.6	34.3
Other/paid employee/organizations	45.8	51.5	37.3	36.1	41.3	40.9