

Defining Care Moments: Unequal rebounding from crises for family senior caregivers

Alexa Carson, Izumi Niki, Pelin Gül, Ito Peng
Department of Sociology, University of Toronto

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RESEARCH CONTEXT & QUESTIONS

- In 2022, over 20% of Canadians performed unpaid care for care-dependent adults (Statistics Canada 2023)
- COVID-19 pandemic exacerbated senior care stressors and service access

What influences unpaid senior caregiver stress and challenges? Which caregivers are struggling the most and why?



ANALYTICAL FRAMEWORK

Impacts of Caregiving on Unpaid
Care Providers

(Bastawrous et al. 2015; Carr et al. 2018; Kayaalp, Page, and Rospenda 2021; Stanfors, Jacobs, and Neilson 2019; Statistics Canada 2023)

Stress Process Model: primary and
secondary stressors

(Amin and Ingman 2014; Gordon et al. 2012; Lahaie, Earle, and Heymann 2013; Pearlin, Aneshensel, and Leblanc 1997)

Socioeconomic status;
intersectional implications

(Bastawrous et al. 2015; Cameron et al. 2020; Cohen et al. 2019; Versey 2017; Zajicek et al. 2006)

DATA & METHODS

Eligibility: main unpaid caregiver of a person 65-years or older who needs support with daily activities due to long-term health conditions, disabilities, or problems due to aging

57 in-depth video interviews with family senior caregivers across Canada

Video interviews
conducted by graduate
student Research
Assistants from March –
August 2023

Recruitment via follow-
up to a nationally
representative online
survey (n=1000) done in
August 2022

Average interview length:
1 hour and 15 minutes

WHAT ARE DEFINING CARE MOMENTS?

Defining care moments are conceptualized as points in time when a care situation either becomes untenable or is projected to become such. As a result, family caregivers seek to organize a new care arrangement, either in crisis or as a preventative measure.



May be due to
changing care needs or
changes in caregiver
circumstances (or both)

Can be sudden
or gradual, crisis
response or
preventative





FINDINGS

WHY DEFINING CARE MOMENTS MATTER

1) The impact of defining care moments on caregiver stress

(2) Unequal rebounding from defining care moments shaped by:

(a) class

(b) geographic location



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DEFINING CARE MOMENTS AND CAREGIVER STRESS

"I think **because my life is so stressful, I don't remember like I used to.** So, I forget things that are kinda important, **which affects my work. And sometimes my relations with my coworkers...** because I can't remember." (Barb, female age 60, caring for 65-

year-old husband, Labrador)

"It was **really getting stressful** with her. Not very often, but every once in a while I'd go there and I'd find her on the floor. **She had fallen down and she can't get up.** ... and it became really stressful with her medication as well. We ended up having to take it right out of the house because she would actually get into it and start taking it, thinking, I don't know if she thought it was candy or something. So yeah, **it's definitely much better because now, I can sleep at night** knowing she is... You know, somebody is looking after her 24 hours a day." (Leslie, female aged 60 caring for 96-year-old mother, ON)

2A

UNEQUAL REBOUNDING: SOCIOECONOMIC STATUS

Interviewer: So are you thinking if she's going to [move] somewhere, is that like a [public] long-term care home?

"It would have to be. I looked into it. There's a [private] dementia village out in [nearby town]... But **it's really freaking expensive. We can't afford it.**" (Sarah, female aged 54, caring for 75-year-old mother, B.C.)

"My stress level reduced immensely once I quit my job. ... I found that I just could not do it all. Uh last summer, when I was selling my dad's house, I had to clear the house. My parents had been living there for 50 years. So just clearing the house was—oh, man, it was a chore. So I took a leave of absence then. And then when I came back, uh I found that uh I still had too much to do. I could not do it all. So I simply ... resigned I was lucky that I'm a retiree and ... financially [it] was not an issue." (Kumar, male aged 64 caring for 88-year-old father, B.C.)

2B

UNEQUAL REBOUNDING: GEOGRAPHIC LOCATION

"honestly, that was another thing of like moving her here versus in Toronto. Beyond that we, if we'd put her in a facility **in Toronto, it was like, well, we're never gonna visit you, and it's gonna cost more. ... it's cheaper here.**" (Janet,

female aged 63 caring for 94-year-old mother, small town ON)

"it made more sense financial and health wise since my husband has a lot of health problems, and so **we were traveling back and forth to the hospitals and doctor's appointments fairly frequently and it's an hour and a half, one way to drive to those appointments.** So yeah, so it made, it made sense for us to try to move. ... **The [PSW] workers that come to mum's. They're so stretched. They, they work in the country so some of their places are 45 minutes apart.** And they don't give them any travel time in between. Or not enough travel time." (Linda, female, aged 62 caring for husband & 92-year-old mother in rural NS)

DISCUSSION & POLICY RECOMMENDATIONS

In addition to direct care tasks, many caregivers struggle with care management

- Reduce LTC waitlists
- Increase home care support
- Simplify service access processes (more centralized)

A comprehensive universal approach to LTC and home care recommended (Tuohy 2021; Peng, 2020)

Policy action also needs targeted additional support for lower-income seniors & their caregivers

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