



Difficulty in Providing Care Among Informal Caregivers

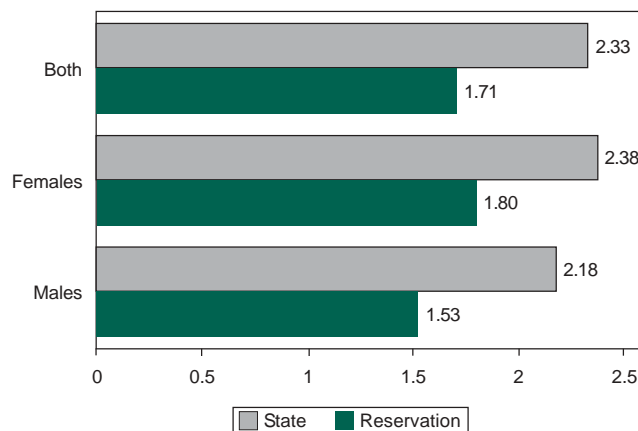
In this analysis we examine characteristics of informal caregivers who experience difficulties when providing care to Native American elders. Informal caregivers include those persons providing care on a long term basis to a person or persons over age 60 as a volunteer. The data used were collected by five reservation communities and was part of a larger statewide research project in North Dakota. The survey instrument was developed to characterize caregivers in the state and to represent their service needs and issues related to accessibility of support services. This questionnaire contained items reflecting caregiver characteristics; reasons for caregiving; location of care; difficulties experienced by caregivers; availability and use of other informal caregivers; a series of items on specific services indicating availability, use, desire, access, and evaluation of available services; characteristics of care supplied; types of information or services desired; and impacts of caregiving on caregivers lives.

Thirteen items were used to reflect the difficulties that might be of concern to caregivers. It included difficulties such as less time for themselves, less time for family, no consistent help from other family members, affects on family relationships, conflicts with their social life, emotional aspects, less privacy, interference with their job, financial obligations, lifestyle change, having the responsibility for making major life decisions for loved ones, their physical health is deteriorating due to caregiving, and unable to get the sleep needed due to caregiving. The seriousness of the difficulties experienced were rated from 1 to 5 with a score of 5 representing "very serious."

Before discussing the data collected at the reservation it would be appropriate to pose the question of whether there are socially significant differences or similarities in the patterns observed between the reservation sample and the general population when it comes to difficulties in providing care. The answer is a definite yes. There is a distinct difference between the reservations and the general population when it comes to the experience of difficulty providing care.

The statewide general population scored all items higher than the American Indian caregivers from the reservations, suggesting that American Indian caregivers providing informal care tend to adapt well. This is probably due to the differences in age structure. The American Indian elders, both caregivers and care recipients, are clustered in relatively young age cohorts, with few in the 80's, while the general state population has a higher number of caregivers and recipients in the older age cohorts. Because of their age, the informal caregivers in the general population might have a harder time performing caregiving tasks. The caregivers in the general population are also more likely to be widowed and retired than the Native American population. The data also shows that females have a higher level of difficulty in providing care and there are a higher percentage of female caregivers in the general population (see Figure 1).

Figure 1. Gender Difference in Difficulty Providing Care



All informal caregivers are most likely to provide care to spouses and mothers, but the proportion for each of these is higher for the general sample. Numerous reasons for informal care are given by the respondents, with the most common reasons being a general aging process, physical disability and cognitive impairment. Cognitive impairment is reported more frequently with the general population, most likely related to their older age and the presence of Alzheimer's Disease.

The general population provides a higher number of caregiving tasks and these tasks are related to providing care to people with cognitive impairment which probably have an impact on their difficulty in providing care. The amount of care required is indicated by the amount of time the recipient could be left alone. The proportion that could not be left alone at all was similar in the two populations, but the proportion that could be left alone for most of the day was much higher for the American Indian respondents. This observation suggests again that the relatively young American Indian elders also bring disabilities that are not as severe as the older, general population. Caregivers with the highest level of difficulty providing care in the general population are people with part-time jobs. The majority of people with part-time jobs are women and most of them are older than caregivers with full-time jobs. In this case economics might be a factor when it comes to the feeling of difficulty in providing care. Women in general make less money than men and part-time workers make less money than full-time workers and people with multiple jobs.

What are the caregiver characteristics of those who experience difficulties in providing care in the Native American population?

Even though there are several similarities between the Native American population and the general state population there are also dissimilarities due to the differences that exist between the social worlds found on the reservations and those found in North Dakota's towns and cities. The Native American population experiences less difficulty in providing care than the general state population. This can be explained by the Native Americans' strong traditions of extended family support and the fact that it represents the primary option for providing care to their elders. This does not imply that the Native American informal caregivers do not have difficulties in providing care – they just might not voice their difficulty to the same extent as people living off the reservations.

The majority of the informal caregivers on the reservations are females between the ages 45-54. They are most likely employed full-time or not working at all and caring for a mother or a spouse. The reservations also have a high number of caregivers under the age of 35 who are not working. There are a small number of people who have multiple jobs and those are also the people who experience the highest level of difficulty in providing care. The caregiver's relationship to the recipient of care is a factor that also affects the experience of difficulty in providing care. Figure 2 presents the difficulty scores for different relationships. Caregivers who provide care to their mothers or mother-in-laws experience the highest level of difficulty while those who care for a friend or an adult child experiences the lowest level of difficulty.

Figure 2. Level of Difficulty in Providing Care Related to Care Relationship

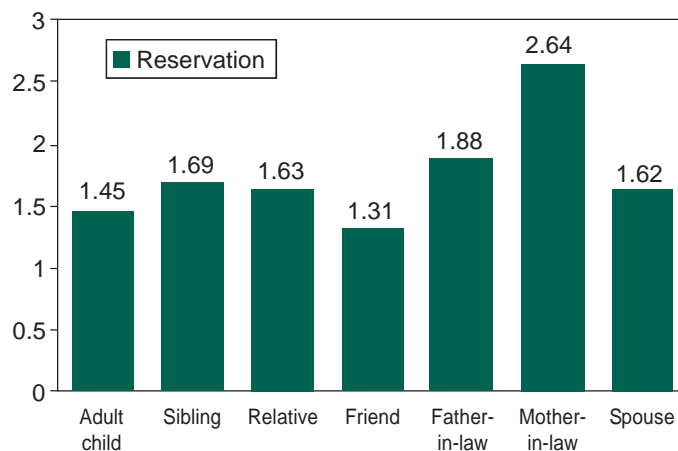


Table 1 contains the different scores related to employment status. The largest category experiencing difficulties in providing care are women between the ages of 55-64, that either work full time or not at all, and those that are divorced or separated.

Table 1. Level of Difficulty in Providing Care Related to Employment Status

Full-time	1.74
Part-time	1.45
Multiple jobs	1.96
Retired	1.53
Not working	1.76

The fact that Native Americans on the reservations have lower levels of difficulty in providing care than the general population might be explained partly by the younger ages of the American Indian caregivers and recipients, and partly by a strong tradition of family values. The age pattern is expected to change with time as the survival rate among the American Indian elders increases.

For more information, contact: Leander "Russ" McDonald, PhD, or Richard Ludtke, PhD, at the National Resource Center on Native American Aging. *Native Aging Facts* is supported by a grant, No. 90-AM-2751 from the Administration on Aging, Department of Health and Human Services.

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