Challenges and Strategies in Distance Caregiving:

A Comparative Study With Co-Resident Care for Family Caregivers

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I. Background

With shifting household dynamics, a growing number of older adults in Japan rely on distant care from family members who reside elsewhere. Despite the increasing prevalence of this caregiving arrangement, there is scant research on the support needs of distant family caregivers. This study aims to elucidate the challenges of distance caregiving and strategies to address them through a quantitative comparison with co-resident care for family caregivers and a qualitative exploration of the distance caregiving process.

II.Study 1

Differences in background factors and factors that influence the family caregivers' burden between family caregivers living with and distant family caregivers for older adults

This segment investigates the disparities in background factors and their impact on the burden experienced by family caregivers living with the care recipients versus those providing care from a distance to older adults with dementia. In total, 1,385 family caregivers (307 distant family caregivers) who provided care to older adults with dementia participated in this cross-sectional study.

The analysis variables were background factors (age, sex, relationship, job status, and period of nursing care), social support (availability of consultations, number of nursing care insurance services used), and care receivers' factors (symptoms of dementia, nursing care level, and family caregivers' burden). These variables were analyzed using nonparametric tests and multinomial logistic regression.

The non-parametric test showed that distant family caregivers were younger than the caregivers of older adults. Distant care is associated with shorter nursing care periods. Compared to caregivers living with older adults, there were more full-time employees and fewer people who left work to provide care. Multinomial logistic regression analysis showed that the factors that influenced the distant family caregivers' burden were relationship, job status, symptoms of dementia, nursing care level, availability of consultation, and number of times using nursing care insurance services. Notably, access to consultation appears to alleviate caregiver burden, while the early use of nursing care insurance services impacts the current burden experienced by caregivers.

III.Study 2

Processes in which distant family caregivers continue to provide care and choose to enter a facility

This study aimed to clarify the process by which distant family caregivers continue to provide care and the process by which they choose to enter a facility. The interviewees were 20 family caregivers (14 daughters, 2 daughter-in-law, 2 sons, and 2 nieces; mean age = 56 years). A snowballing approach was adopted for the selection of participants, and theoretical sampling was adopted as data collection progressed. We asked participants about caregiving strains, positive aspects, and prospects. The grounded theory was adopted for data analysis. This study aimed to clarify the caregiving process. Family caregivers start distance care and worry about the lives of the care recipients. Next, they face the first difficulty and aim to stabilize distant care. If they can be well controlled, they obtain conditional willingness to continue distance care, but time passes with vague prospects; then, they face another difficulty and return to stabilizing distant care. This is a cyclical process. If they cannot stabilize distant care, they are overwhelmed by the caregiving strain. Considering an increase in the negative stressor of the inability to ensure the safety of the care recipient, they give up on continuing distant care. Thus, during the process of distant care, stability and instability alternate.

IV. General Discussion

Helping to continue long-distance care for an extended period is not a goal of support. It is difficult to continue distant care until end-of-life because of caregivers' considerable anxiety about not being able to be by the care recipient's side. Distant family caregivers may decide to give up distant care at some point.

Assessing the tipping point for giving up distant care may help them decide to give up on it. It is critical to support distant family caregivers in choosing whether to continue distant care and be satisfied with the decision.

We must continuously assess the changes in the thoughts and circumstances of distant family caregivers.