

# Comparison Survey on Family Caregivers of Elderly People in Japan and Thailand

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In Japan, the proportion of the elderly (over 65 years of age) population was 27.3% in 2016 and is expected to rise (Annual Report on the Aging Society, 2017). On the other hand, the elderly population in Thailand has been increasing since 2000, and its proportion is growing faster than the Japan proportion. Currently, Thailand is promoting facility services and human development related to elderly care as a national strategy. However, these promotional efforts are not sufficient; therefore, it is important to grasp the current situation of family caregivers who are providing care at home. Furthermore, it is also important to investigate the factors related to the quality of care from in-home family caregivers and to examine what kinds of support should be provided to them.

The purposes of this survey were to investigate the current situation of family caregivers and to conduct an international comparison survey of family caregivers in Japan and Thailand in order to improve quality assurance of in-home elderly care. In this report, results of this survey on family caregivers in Japan and Thailand are summarized.

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This research is a cross-sectional exploratory descriptive study using a self-written questionnaire. Participants were 217 in-home family caregivers in Japan and Thailand (114 in Japan and 103 in Thailand), and this survey was conducted in 2014 and 2015. Ethical approval was obtained from each university's Institutional Review Board.

## Survey Results

### 1. Characteristics of participants (family caregivers and care recipients)

The participants were 217 in-home family caregivers in Japan and Thailand (114 in Japan and 103 in Thailand). Of the family caregivers, 71.9% were female in Japan, and 73.8% were female in Thailand. The mean age of the family caregivers was  $65.3 \pm 9.6$  years old in Japan, and  $49.1 \pm 13.3$  years old in Thailand. Of the care receivers, 64.2% were female in Japan, and 56.3% were female in Thailand. The mean age of care receivers was  $84.8 \pm 8.6$  years old in Japan, and  $77.1 \pm 9.5$  years old in Thailand. Care levels of care receivers in Japan were the following: 20.4% requiring long-term care 5, 23.1% requiring long-term care 4, 18.5% requiring long-term care 3, 20.4% requiring long-term care 2, 10.2% requiring long-term care 1, 1.9% requiring support 2, and 4.6% requiring support 1. Figure 1 shows of care level distributions for care receivers living at home in Japan and Thailand. The prevalence of dementia was 67.6% in Japan, and 49.5% in Thailand.

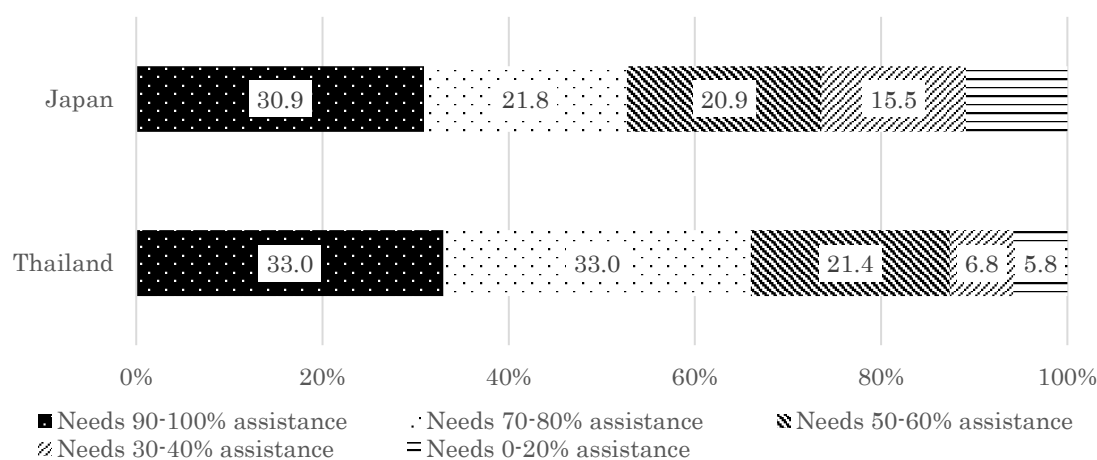


Figure 1. Care level for care receivers living at home

## 2. Caregiving period

The average period of caregiving was  $6.0 \pm 4.8$  years in Japan and  $11.7 \pm 9.8$  years in Thailand. In Japan, 58.4% of participants had performed caregiving less than 5 years, and 89.4% had performed caregiving less than 10 years. In Thailand, 35.0% of participants had performed caregiving less than 5 years, and 58.3% of participants had performed caregiving less than 10 years (Figure 2).

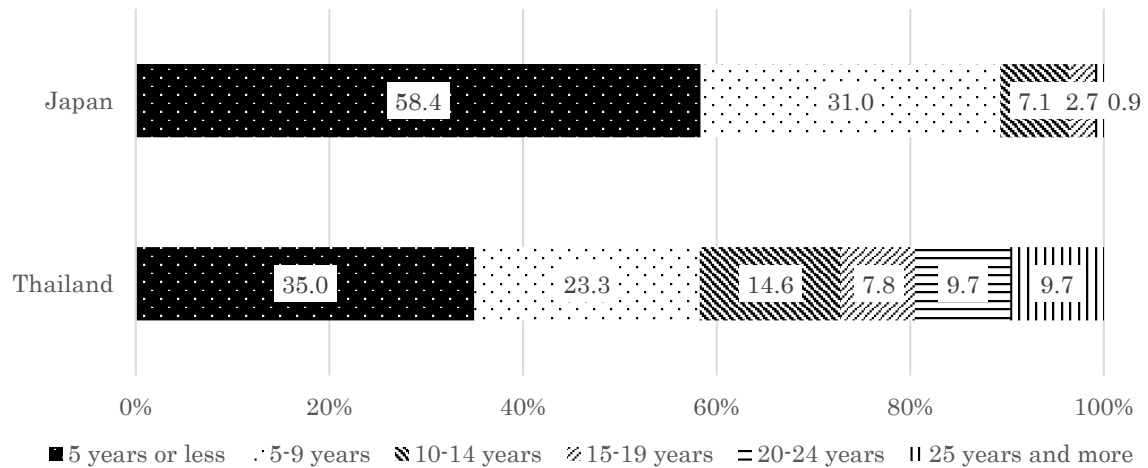


Figure 2. Caregiving period

## 3. Family members / Employment

The average number of family members was  $3.2 \pm 1.3$  in Japan, and  $3.6 \pm 1.3$  in Thailand. As shown in Figure 3, 28.1% of caregivers in Japan, and 79.6% of caregivers in Thailand were employed.

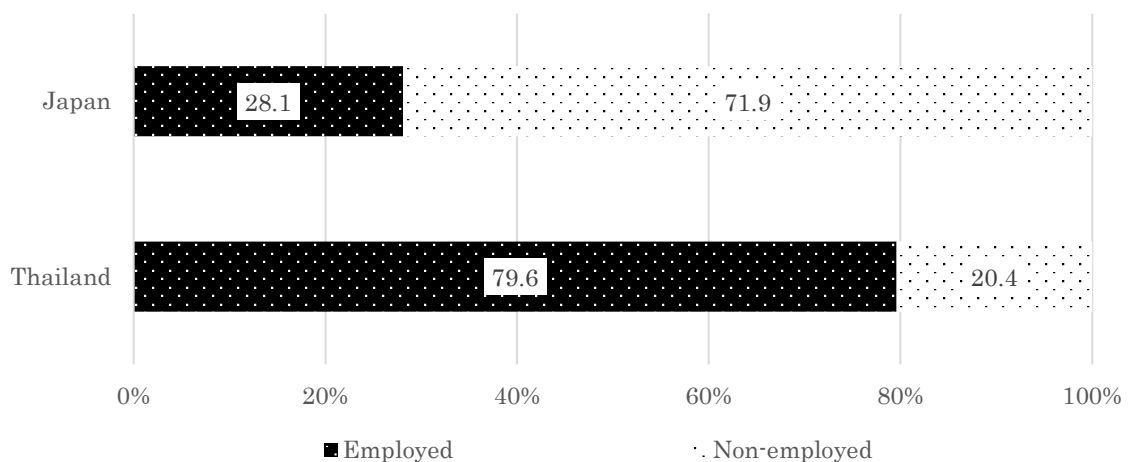


Figure 3. Employment of family caregivers

#### 4. Economic condition

In Japan, 27.7% of family caregivers felt “very strained” or “strained”. In Thailand, 8.7% of family caregivers felt “very strained” or “strained” (Figure 4).

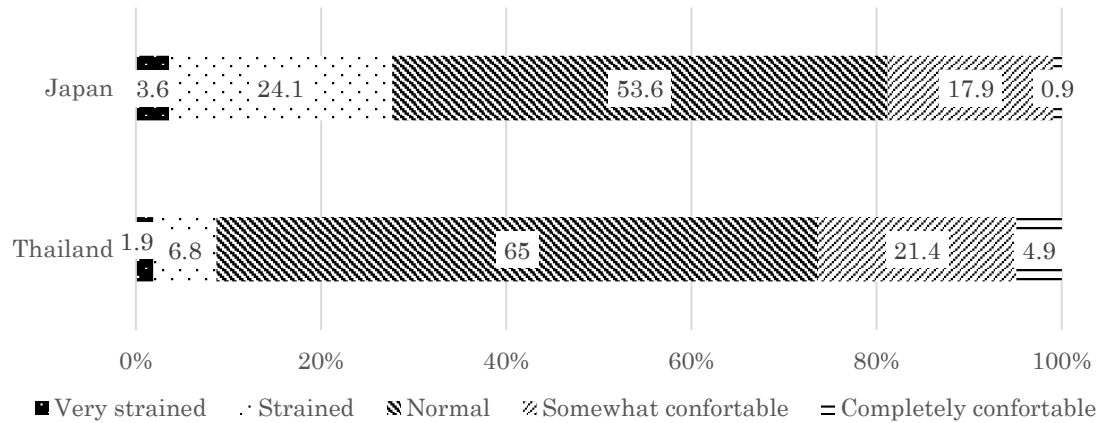


Figure 4. Economic condition

Economic burden from in-home caregiving was as follows: 38.3% of family caregivers felt a “very heavy economic burden ” or “some economic burden” in Japan, and 35.3% felt so in Thailand (Figure 5).

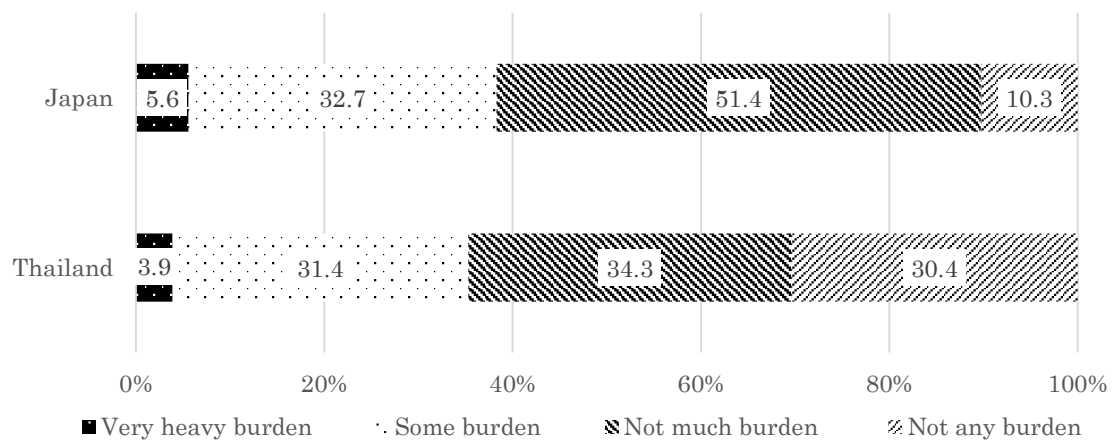


Figure 5. How much of an economic burden family caregivers feel

## 5. Relationship between family caregivers and care receivers / Motivation to continue caregiving of care receivers

In Japan, 88.5% of family caregivers felt a “very good” or “good” relationship with their care receivers, and 89.3% felt so in Thailand (Figure 6).

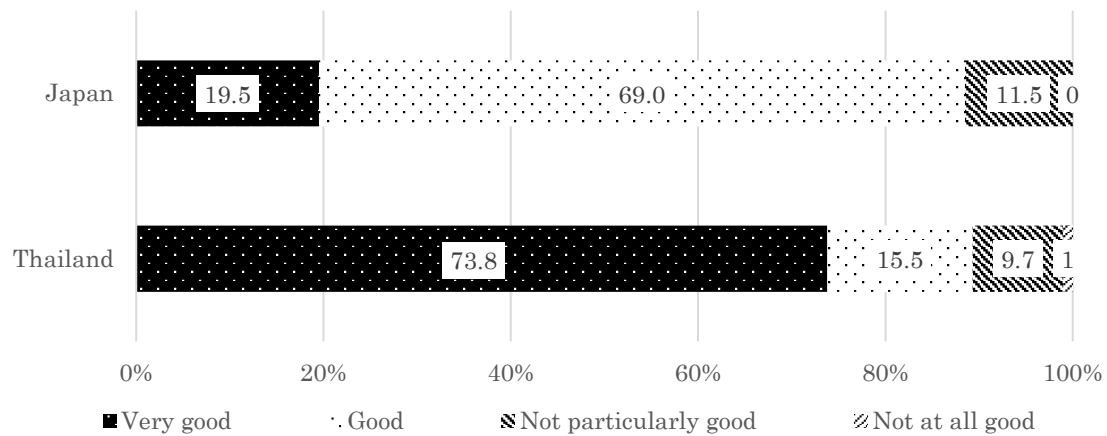


Figure 6. Relationship between family caregivers and care receivers

In Japan, 47.7% of family caregivers wanted to continue taking care of their care receivers, and 89.4% wanted to continue taking care in Thailand (Figure 7).

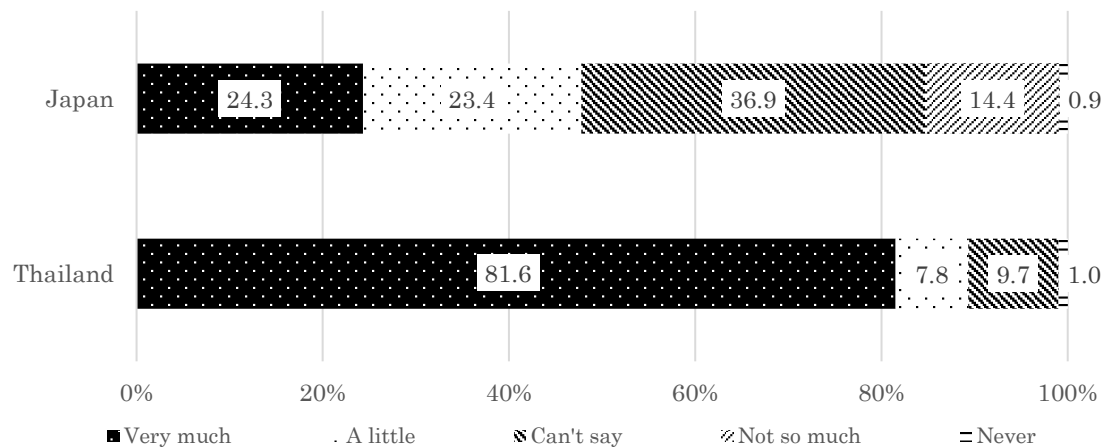


Figure 7. Motivation to continue taking care of care receivers

6. Persons who can be consulted about caregiving / Ways to get information on caregiving

In Japan, 86.7% of family caregivers had someone who they could consult about their caregiving. In Thailand, 64.1% of family caregivers had someone who they could consult about their caregiving (Figure 8).

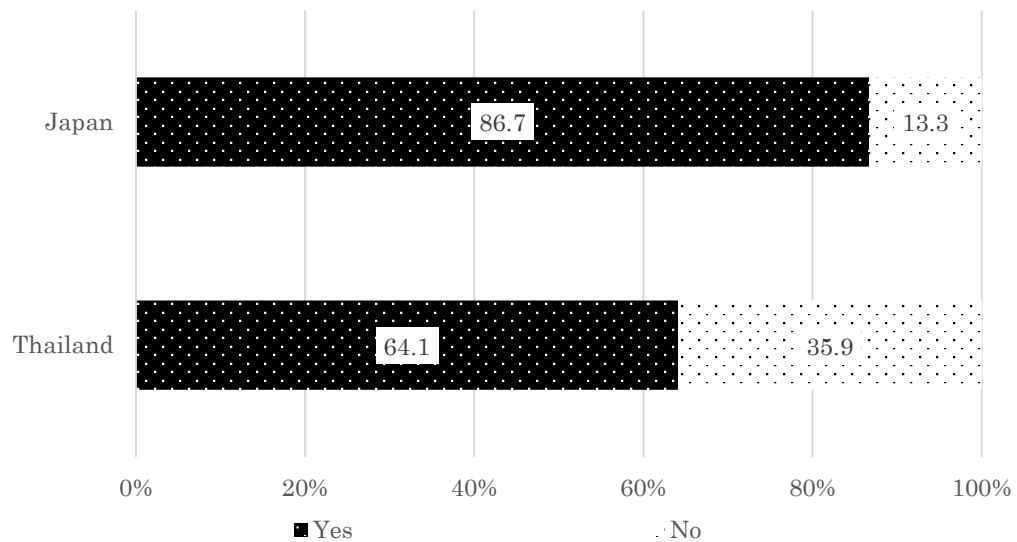


Figure 8. Have someone to consult about caregiving

In Japan, 75.7% of family caregivers have some way to get information on caregiving. In Thailand, 54.4% of family caregivers have some way to get information on caregiving (Figure 9).

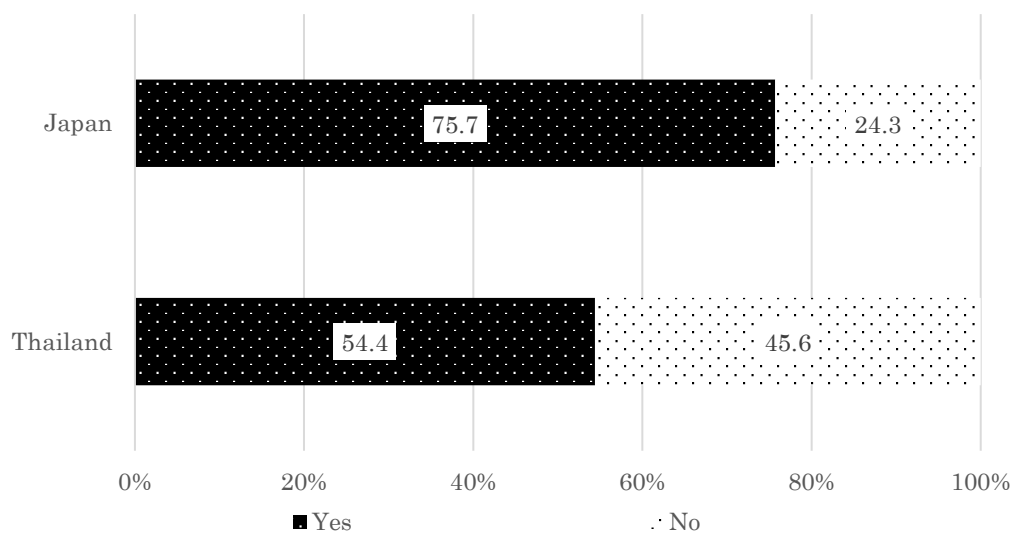


Figure 9. Have some way to get information on caregiving

## 7. Care burden (Results of Zarit Burden Interview)

Care burden was compared using a short version of the Zarit Burden Interview (ZBI). The short version of the ZBI uses a 8-item, 32-point self-reported questionnaire. Higher scores reflect more severe care burdens.

As shown in Figure 10, mean scores of ZBI were  $13.4 \pm 7.1$  in Japan, and  $6.6 \pm 5.8$  in Thailand.

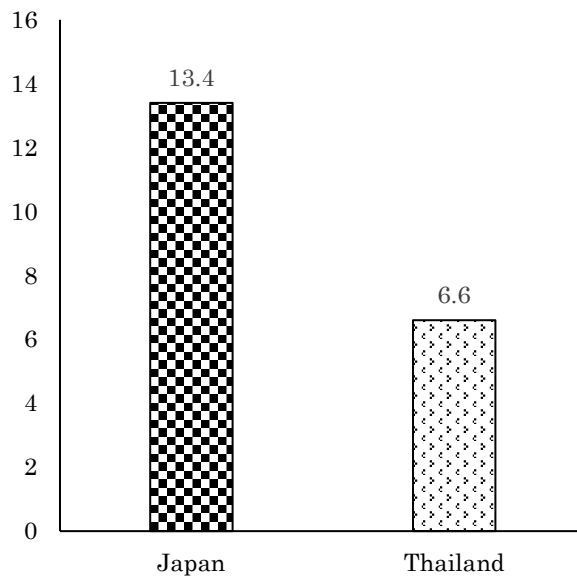


Figure 10. Mean scores of the ZBI

## 8. Summary

This study revealed that the characteristics of family caregivers and care receivers were different between Japan and Thailand. Particularly, in Japan, the ages of family caregivers and care receivers were higher than in Thailand. In Japan, both family caregivers and care receivers were elderly. In Thailand, care receivers were also elderly, but family caregivers were younger than those in Japan, so they were employed and did not feel the economic burden.

Economic burden of providing care at home was not different between Japan and Thailand. However, more Japanese caregivers had persons who they could consult about caregiving than did Thai caregivers. It was thought that support by a long-term care insurance system was more prevalent in Japan than in Thailand. However, the feelings of family caregivers continuing care at home were not very positive in Japan. This suggests that there are problems with how family caregivers are supported.