



Converging
PROFESSIONAL WISDOM
FOR Family Well-Being

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Message from Mrs. Patricia CHU, Chairperson, CIFA



While the whole world is struggling with COVID-19 pandemic which has disrupted many aspects of our lives, CIFA manages to cope with the difficult situation, thanks to the development of ICT, through attending online meetings, whatsapp exchanges, and communication via emails so that the Council can continue to function and carry out its normal businesses.

While the two signature events, namely the 6th CIFA Regional Symposium and Wofoo 3A Project 2020 have to be rescheduled to June 2021, we are excited to have been invited by the SAR Philharmonic Orchestra to co-organise the 'Bringing Hope Home' Concert 2020 with Haven of Hope Christian Service on 22 November 2020, with a view to injecting positive energy among the audience, in the midst of the pandemic, to face the difficult time with hope and resilience, and at the same time provide an opportunity for us to raise funds. The information of these activities are highlighted under the section on 'What's New' and I appeal to all to give support to the work of CIFA!

The development of CIFA depends much on the staunch support from its members and individuals/organisations who share the vision of "Converging Professional Wisdom For Family Well-Being". The Membership Committee has been making efforts to improve connection with existing members and taking steps to launch membership drive. Please refer to the appeal from the Chairman of the said Committee to "Stay Connected" and also Membership application forms to facilitate the application process for those who are interested to join the CIFA family.

Many Asian countries are facing challenges of aging population which are posing much burden on the society and the care givers. most of whom are adult children. In this issue, I am pleased to include two articles on this important subject of concern, with Professor Machiko Ohara (Japan) and Dr. Herman Lo (Hong Kong) to share the thoughts on "Balancing Work and Family Care" and actions on conducting the cross regional study on "The Mental Health and Coping Styles of Adult Children Caregivers of Frail Elderly in Asia" coordinated by the Research & Training Committee. I believe these will throw light on formulation of policies and service development to improve the well-being of both the elderly and their caregivers.

Time really flies and we are already at the end of the third quarter of 2020. Let's look forward to a brighter tomorrow with hope and positive energy to face the challenges ahead. With firm commitment and collaborative efforts, we shall overcome!



Challenges Faced by Family Caregivers in Japan: Balancing Work and Family Care

Machiko OHARA, Ph.D

Professor
Japan College of Social Work

1. Circumstances surrounding elderly care in Japan

The total population of Japan was 126.93 million in 2016. The number of those aged 65 or older is 34.59 million, accounting for 27.3% of the total population (rate of aging). Meanwhile, the total population is in a phase of decline. In the future, it is estimated that the number of elderly people will decrease by 40 million and the aging rate will reach 40% by 2065. The aging rate of other countries is expected to accelerate in the next 50 years. When comparing the rate of aging according to the number of years it takes from the point where the aging rate exceeds 7% to double that rate (that is, 14% in the doubling year), France is 115 years, Sweden is 85 years, the United States is 72 years, the United Kingdom is 46 years, Germany is 40 years and Japan is 24 years. Korea and Singapore are expected to experience an even faster aging society in an even shorter period of time than Japan.

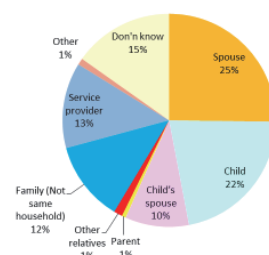
2. Current status of quitting employment to provide family care

In recent years in Japan, it has become an issue for workers to quit employment to care for their parents. To realize "Zero turnover due to family care" the Japanese government has announced plans to increase the number of nursing care facilities and make it easier to take family care leave.

In Japan, a family-centered care system has been accepted until now. However, a survey of family caregivers has revealed that the burden of caring for family members is a social problem. An improvement of "social care" is required to break away from family-centered care. Starting around 1989, various plans were formulated as policies, and the long-term care insurance system came into effect in 2000. In recent years, problems surrounding nursing care services include labor shortage, an increase in the number of elderly people who cannot secure family caregivers, an increase in dementia and elderly abuse, and serious human rights violations. All of these are expected to continue to pose social problems.

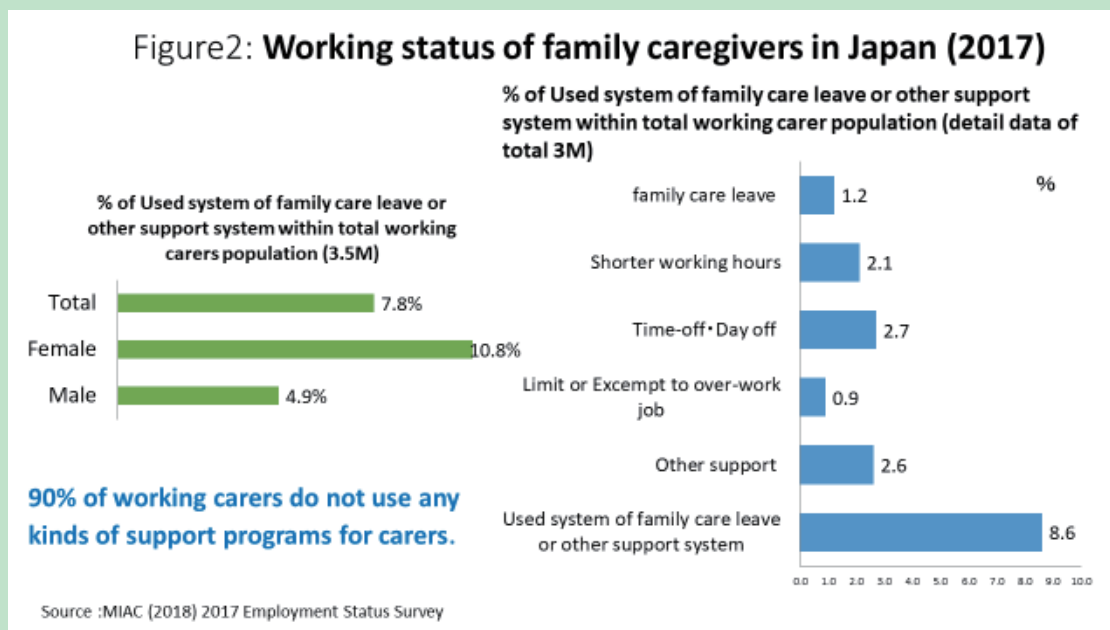
The situation of family caregivers in Japan can be outlined as follows. 25% of the main caregivers who live together with the recipients are their spouses, 22% are their children, and 10% are the spouses of their children (Figure 1). About 70% of male caregivers are in their 60s, and there are many male caregivers aged 80 or older. Also, 54.7% of those aged 65 and over and 30.2% of those aged 70 and over are family caregivers living together with the recipients. In other words, it is a characteristic of Japan that family caregivers of the elderly care for the elderly inside the family. This is expected to continue.

Figure1:status of family caregivers in Japan

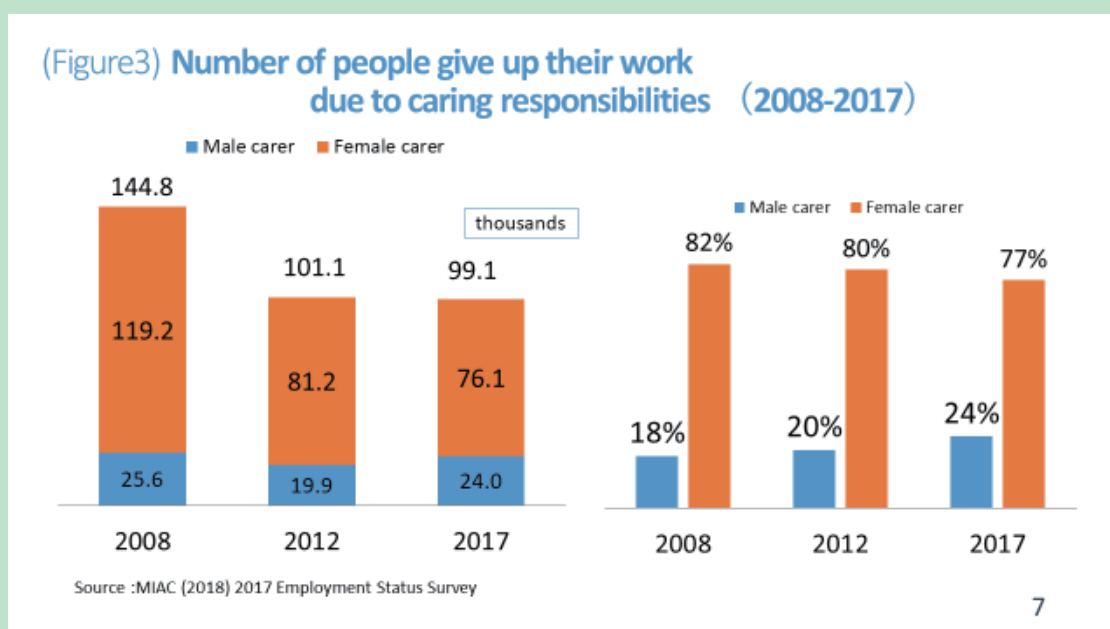


Source :MHLW (2018) :National life basic survey (2017)
*Excluding 2016 data of Kumamoto pref.

More than half, or 3.5 million out of 6.3 million family caregivers, continue to care for family members while working. The number of family caregivers is increasing for both men and women, and it is expected that the number of people who continue to provide care while working will increase in the future. Of the 6.3 million family caregivers, 70% are 60 years old or younger. It is also apparent that both female and male caregivers are in their 40s and 60s while working. The following data shows the situation of workers who provide family care in Japan in 2017. As shown in Figure 1, of the 3.5 million caregivers, 90% have no social support, and only 10.8% of female workers and 4.9% of male workers used family care leave. Of the 3 million workers taking care of family members, only 8.6% used the family care leave system or related services (Figure 2). This is due to the fact that workers in their 40s or older are in managerial positions with increased responsibility and often cannot be replaced.



Furthermore, not being able to use the family care leave system can also be considered as one of the reasons. As shown in Figure 3, approximately 99,000 people gave up their jobs in 2017 to care for their families, and the rate of women quitting jobs is particularly high. It is estimated that this will not decrease in the future. The Japanese government promotes the use of various services and systems as available options for establishing an environment to balance work and family care. In particular, under the family care leave system, up to 93 days of family care leave can be taken per family member. However, many people have not taken advantage of the family care leave system yet. Even if there is a system in place, it is difficult to take time off because of the corporate atmosphere, and people do not want to utilize the system because it may hinder promotion and career opportunities.



3. Survey report on caregiver QOL in Japan

In the United Kingdom, the Care Act was enacted in 2014, and QOL and wellbeing research for caregivers (carers) has been widely implemented with "well-being" as the main concept for both persons requiring care and care providers. We studied the QOL of caregivers as we developed the Japanese version of the Social Care QOL Scale for Carers (ASCOT Carer SCT4), which is also used as a policy indicator in the United Kingdom as of 2018^{i, ii}.

Survey participants were family caregivers who have family members who use long-term care insurance services and work while providing care. There were altogether 600 participants, of whom 376 were male and 224 female. The average age was 51.6 (SD=8.9).

Questions consisted of the following 7 domains that the family caregivers answered themselves: (1) own time, (2) daily control, (3) self-care, (4) personal safety, (5) social participation, (6) self-sufficiency, and (7) support and encouragement. These were measured on a four-point scale. Other variables expected to be relevant were gender, age, employment status, subjective views of health, isolation, living with those in need of care, dementia among those in need of care, and physical disability among those in need of care.

The survey found that 66% of the participants were full-time employees or in managerial positions. As many as 76.7% of these workers were the primary caregivers of family care and did not have another caregiver to support them. The level of necessary care was found to be moderate to severe in nearly 50% of cases. Generally speaking, if one assumes that one's work is eight hours a day, the time required for family care at home and housework is limited to nearly five hours. These results suggest that family caregivers have less free time and sleep. The findings from this survey show that one characteristic of Japan, where people take care of family members while working at the same time, is that there are various family care relationships during people's life courses, and in particular, sons and daughters are often involved. QOL of family caregivers was related to the caregiver's health, the satisfaction with personal relationships in the workplace, ADL and/or IADL of the person requiring care, and the degree of care needs.

Based on the above, it is necessary to consider social care for family caregivers. In Asia, especially in a country like Japan where we do not see the mass introduction of immigrant care labor, balancing family care and work is directly linked to the QOL of caregivers. In addition, the improvement of policies to support family caregivers is expected to lead to future economic growth in the country as well as the well-being of individuals.

ⁱ Quality of Life of Working Carers in Super-aging Japan: An exploratory study on factors that influence Carer's QOL: Yamaguchi, M. Yamaguchi, I, Nakamura, H., Rand, S.E., Razik, K., Matsuzawa, A., Ohara, M., & Horikoshi, E Aging & Society: Eighth Interdisciplinary Conference, Tokyo, Japan 2018

ⁱⁱ Cross-cultural validation of the Japanese version of the Adult Social Care Outcomes Toolkit for Caregivers (ASCOT-CARER): Nakamura HT, Yamaguchi M, Yamaguchi I, Matsuzawa A, Ohara M, Rand S, Razik K :11th Pan-Pacific Conference on Rehabilitation, Hong Kong

CIFA Cross-Regional Study:

The Mental Health and Coping Styles of Adult Children Caregivers of Frail Elderly in Asia

Dr. Herman LO

Associate Professor
Hong Kong Polytechnic University

Challenges of Aging Population in Asia

Many Asian countries are now facing challenges of aging societies, including a growing number of dependent elderly population, increases in demands for health and social care services, and tremendous burden on family caregivers. The growing population of elderly in moderate to severe frailty has raised the attention of family professionals for more endeavors in developing related family researches, and improved practices. Frailty refers to a multidimensional syndrome of loss of physical ability and accumulation of deficits among elders. It would increase steadily with age and its prevalence rises from 22% at 65 to 69 years old to 44% for those over 85 years old. There is a gradual and cumulative decline in several physiological systems of the elderly, which is associated with higher risks of disability, falls, hospitalizations, and death. Frail persons are 8 times more likely to have dementia than healthy elders. As a consequence, the number of family caregivers has shown a drastic increase due to growth of aging and dependent population. Along with the care-giving process, adult children of elders often experience family conflict and role conflict. Primary informal caregivers have worse health profile, more medical consultations, anxiety and depression, weight loss, and lower quality of life.

Burdens of Family Caregivers

Global studies on family caregivers have consistently reported that perceived burden and depressive symptoms of caregivers are associated with severe impairment of care recipients, and adult children living together as caregivers experiencing role conflicts reported highest level of burden. It is also alarming to note some research findings that abusive behaviors towards elderly with dementia were predicted by anxiety and depression of caregivers, as such association was mediated by extended hours of care and care-giving burden.

Traditional Filial Beliefs: Responsibilities vs Burden

While traditional filial beliefs in many Asian families provide motivation for family care-giving, the regrets of unfulfilled responsibilities create emotional distance between parents and adult children. Difficulties encountered by adult children to fulfill such expectations for filial care of parents, are often burden by a lack of accessible and feasible community care services, and this disjoint between ideal expectation and feasibility of performance can result in feelings of shame and guilt, blame by family and community, leads to family conflict and caregiver burden.

Coping Strategies of Family Caregivers

Studies on caregiver's coping strategies have revealed mixed results in the outcomes of traditional classification of problem-focused and emotion-focused coping (Folkman & Lazarus, 1980; Carretto et al., 2012). Problem-focused coping refers to strategies that would work on solutions for the problem that create distress, while emotion-focused coping involves the management of emotional distress experienced after the encounter with stressor. It should be noted that emotion-focused coping strategies are very diverse and heterogeneous, including wishful thinking, avoidance, self-blame, spirituality, and

seeking social support. There is a general assumption that problem-focused coping of caregivers would lead to less burden, and those with avoidance coping had higher distress. However, some studies suggested that problem-focused strategies may be less helpful to improve the elder's situation and emotion-focused strategies such as acceptance, getting emotional support, positive reframing were found to predict lower severity in depression and anxiety of caregivers. There was a tendency that female caregivers were likely to report wishful thinking and self-blame with anxiety while male caregivers were more likely to report health problems. More studies should be conducted to understand the family caregiving process and the relationship of coping.

CIFA Cross-Regional Study on Adult Caregivers of Frail Elderly

In meeting the challenges of the aging society and the growing needs of family caregivers in the Asian region, CIFA has resolved to launch this Cross-Regional Study on Caregivers of Frail Elderly in 2019. The Study objectives are listed below:

- 1) To investigate the caregiver burden, mental health, and quality of life of caregivers of frail elders;
- 2) To investigate the coping styles, relationship qualities, and conflicts in these families;
- 3) To investigate the relationship of filial piety, caregiver burden, depression, and family conflicts
- 4) To explore the factors that contribute to the better mental health of caregivers and their family relationships

A total of 7 Asian countries have participated in the Cross-Regional Study, including China, Hong Kong, Japan, Korea, Malaysia, Singapore, and Taiwan. We shall recruit 300 adult caregivers of frail elderly from each participant country, including adult children or children in-law of the frail elderly. However, we would exclude caregivers who have been diagnosed with serious mental or physical disabilities, or cognitive impairment.

Study subjects will be invited to complete a self-report questionnaire, which can be completed within approximately 20 minutes. Questions will cover areas on family functioning, levels of dependency in physical functioning, cognitive impairment, caregiver burden, caregiver depression, family conflicts, obligation in filial piety, and coping styles.

Data collection has been commenced since November 2019. Unfortunately, due to the unprecedented global COVID 19 crisis in 2020, data collection has been greatly affected in all participant Asian countries. However, the very dedicated and enthusiastic Research Team has agreed to continue the data collection when the pandemic situation has shown significant improvement. Hopefully, data collection could be resumed in last quarter of 2020 and completed latest by March 2021, with a view to present the preliminary findings at the coming 6th CIFA Regional Symposium at Taiwan in June 2021 with the theme of Family First: Supporting Asian Families in the Era of Inclusive Growth.

References

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- Lo, H.H.M., Chung C.M.L.F., Kim, Y.H., Mui, M.W.K., Feng, J.Y., Zhu, M., Wong, K.S., Chinapan, B., & Lee, N.S. (2018). Exploratory study on relationships between family functioning, demographics and individual well-being in East Asia. *Hong Kong Journal of Social Work*, 52(1/2), 3-31.



SAR Philharmonic Orchestra – Bringing Hope Home Concert 2020 愛樂·家點希望音樂會 2020

Date: 22 November, 2020 (Sunday)

Time: 7:30 pm

Venue: Concert Hall, Hong Kong Cultural Centre, Tsimshatsui, Hong Kong

Presented by: SAR Philharmonic Orchestra

Beneficiaries: CIFA

Haven of Hope Christian Service

Guest of Honour: Professor Gabriel Leung (Dean, Li Ka Shing Faculty of Medicine, HKU)

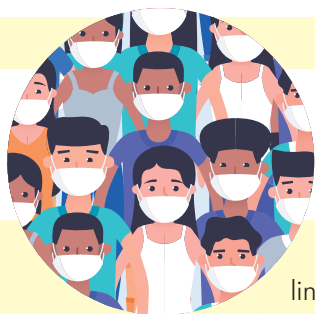
Programme: Beethoven Egmont Overture, Op. 84

Beethoven Symphony No. 1 in C major, Op. 21

Beethoven Symphony no. 8 in F major, op.93

The worldwide pandemic of COVID-19 has led to social isolation, unemployment, loss of loved ones, and affecting various aspects of family life, thus causing anxiety, a feeling of loss, helplessness and even hopelessness. The Bringing Hope Home Concert 2020 is a good opportunity for us to take a step back and appreciate a moment of peace with family and friends. We hope to recharge you with positive energy through music to overcome hiccups in life.

We wish to appeal to our member organisations and strategic partners for your support by attending the concert and / or making a donation/pledging a sponsorship. Watch out for the invitation letter and promotional leaflet on the concert which will be issued soon!



Stay Connected !

line meeting, teaching and learning seem to become the new norm. For those of us who are working directly with families and children, new ways and new mode of service delivery have to be put in place in order to reach out to those who are in need, to make sure that they are not isolated and being forgotten. Perhaps nothing is as important as to connect with each other, to share and to offer support especially in difficult times.

The CIFA Membership Committee has been discussing how best to connect with CIFA members. In the past year, we have tried to gather information from members to establish a resource network so that CIFA members could share their expertise with each other. We are also in the process of including a Members Resource Corner in the CIFA website to facilitate communication among members. Moreover, we encourage all members to participate in the 6th CIFA Regional Symposium which has been rescheduled to 9 – 11 June 2021 in Taiwan, where we would meet old friends and welcome new members to join our CIFA family. Please be reminded that paid up members will enjoy reduced registration fee for participating in the said Symposium.

To facilitate better communication, the Membership Committee has set up an exclusive email address at cifamembership@gmail.com for members to correspond with the Membership Committee on matters related to members registration, renewal, members information updating and members resources. Please feel free to get in touch with us using this new email address.

Let's stay connected with each other! Keep safe! Keep well!

Dr. Margaret Wong
Chairman
Membership Committee

For membership application, please visit: http://www.cifa-net.org/files/news/Combined%20membership%20form_2019.pdf.

What's new

6th CIFA Regional Symposium

- In view of COVID-19 pandemic, The CIFA Council has decided to reschedule the Symposium **to 9-11 June, 2021**:

Deadline for abstract submission is extended to **31 December, 2020**

Announcement of acceptance of paper is extended to **31 March, 2021**

Deadline for Early-Bird Registration is extended to **30 April, 2021**

Confirmation of Presentations and papers is extended to **8 May, 2021**

Pre-Symposium Agency Visits is rescheduled to **6-7 June, 2021**

Pre-Symposium Workshop is rescheduled to **8 June, 2021**

- Despite the rescheduling, the Editors of the International Journal on Social Welfare has kindly agreed that the previous commitment for the Journal to host a **Special Issue** drawing upon papers from the symposium still stands. This is a great opportunity to share your research findings and good practice!
- A new sub-theme on "Family Well-Being, Family Cohesion & Innovative Services under COVID-19 Crisis" is added

For more details and update, please visit: <https://cfrc.ntu.edu.tw/cifa/>

Wofoo 3A Project 2020

- The adjudication procedures of Wofoo 3A Project 2020 have been adjusted to match with the schedule of the 6th CIFA Regional Symposium:

Deadline for Submission of Initial Application is extended to **30 September, 2020**

Announcement of First Round Adjudication Results is postponed to **20 November, 2020**

Deadline for Submission of Projects for Second Round Adjudication is postponed to **29 January, 2021**

Second Round Adjudication Interview is postponed to **18-19 March, 2021**

Announcement of Second Round Adjudication Results is postponed to **16 April, 2021**

Final Round Adjudication (in Taiwan) is rescheduled to **10 June, 2021**

Award Presentation Ceremony at the Gala Dinner (in Taiwan) is rescheduled to **10 June, 2021**

- To encourage more teams to participate and feel more at ease to present themselves at the Second Round Interview Session, someone from the team to do the translation from their national language to English will be allowed.
- In response to the COVID-19 pandemic, we would also like to encourage projects that include services/ practices related to coping with the impact of COVID-19 pandemic on families to join the Wofoo 3A Project 2020.
- Please help to spread the message and appeal for submission from your region/country.

For more details and update on Wofoo 3A Project 2020, please visit: <http://www.cifa-net.org/content.aspx?urlkey=5xg4Gsg19RUd3Pz7>