

Influence of Husband Availability and Type of Care Recipient on Caregiver Stress among Married Working Women in Elder House-Hold Care System in Nigeria

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Abstract

The study investigated the influence of husband availability and type of care recipient on caregiver stress among a sample of caregivers in Nigeria. The sample comprised 226 caregivers made up of 136 in-husband household caregivers and 90 out-husband household caregivers. In the in-husband household type, sixty-seven of the caregivers care for their aged mother/father while sixty-nine of them cares for their mother-in-law/ father-in-law. Among the out-husband caregivers, forty-eight of them provide care services to their mother/father while forty-two of them care for their mother-in-law/ father-in-law. The caregivers were administered with a 14-item caregiver stress questionnaire, which was designed to measure the stress caregivers experience as they take care of their mothers/fathers or fathers in-law/mothers-in-law. It was hypothesized that caregivers of in-husband household will not differ significantly from caregivers of out-husband household on caregiver stress. It was also hypothesized that caregivers that provide care services to mother/father will not differ significantly from their counterparts who provide care services to the mother-in-law/father-in-law on caregiver stress, irrespective of household type. Results showed that caregivers in the out of husband household experience more care giving stress than their counterparts in the in-husband household ($F(1, 218) = 10.97, P < 0.05$). Caring for the mother/father was found to be less stressful than caring for father-in-law/mother-in-law ($F(3, 218) = 23.27, P < 0.05$), while caring for the father-in-law was more stressful than caring for the mother-in-law. Results of this study suggest that the absence of husbands in elder care house-hold system exacerbates caregivers' stressful feelings whereas caring for mother-in-law/father-in-law is much more stressful than caring for mother/father.

Keywords: Household type, Care recipient, Caregiver stress, In-husband, Out-husband.

Introduction

In spite of modernization process that is taking place in Africa and which is beginning to weaken the intergenerational bonds, the care of the old people still takes place in the adult children's household and remains a significant issue for adult children in Nigeria. Old people in Africa are, in turn, still dependent on the willingness and the ability of their children to take care of them when they cannot fend for themselves any more (Bruun, Mugabe & Coombes, 1994). Providing care to someone, especially to the elderly, whether full-time, formal or informal, takes a huge toll, both physically and emotionally (Okoye & Asa 2011).

Literature suggests that care giving, in general, produces great amounts of caregiver burden and stress (Gupta, Role, Pillai, 2009; Nerenberg, 2002; Gupta & Pillai, 2005), and this is even more when the care recipient is an aged (Ugwu, 2006). However, the amount of stress and burden caregivers experience may be influenced by supports from their husbands and by the familial relationship between the care recipients and the caregivers. Many writers (e.g., Stommes, Given & Given, 1990; Compton, Flanagan & Gregg, 1997) suggest that providing care services to aged ones whose relationship with the caregivers is by descent (consanguinity) is less stressful than caring for aged ones whose relationship with the caregivers is by marriage. The stress of care giving is bi-directional in nature with caregivers and care receivers experiencing stress. While Chang, Chiou and Chen (2009) and Edwards and Higgins (2009), in their separate studies, found that care giving stress contributes to caregivers' health risk, Tennstedt (1999) and Lau (1994) reported that care receivers experience care giving stress as do caregivers.

Previous researches on the consequences of care giving have focused predominantly on documenting negative well-being outcomes associated with care of the aged and have been limited to studies looking into the nature and causes of caregiver stress among daughter(s) and daughter(s) in-law who co-reside with their husband on daily basis (in-husband household), often excluding women caregivers whose husbands are geographically separated from them by work (Ugwu, 2006; Doress-Worters, 1999).

Women caregivers of in-husband household type are those whose husbands work site is proximal to the house and who, after each work day, get back to their homes. On the contrary, women caregivers of out-husband households are those whose husbands work a distance away from home such that they only come back to their homes during weekends. These two households have not been differentiated by other researchers. Furthermore, a vast majority of literature in this area centered on studies that compared caregivers with non caregivers; women caregivers with men caregivers; and caregivers of cognitively impaired care recipients with caregivers of relatively healthy care recipients, on caregiver stress and burden.

Little is known about the stress associated with caring for elders in out-husband household type in comparison with that of the in-husband household type. Studies that compare women caregivers of out-husband household type and in-husband household type on stress associated with care giving, are lacking; and literature in this area is scanty. Evidence from studies in related field has shown that single parents experience more stress than women in intact households (e.g.; Osborne, 2004; ACS & Nelson, 2004; Brown, 2001). Evidence also shows that female householders face a greater variety of hardships (stressors) than do females in the two-parent families (Parcel, 1998; Quinn & Allen, Richards, 1989). Other researchers also suggest that stress is likely to be more when female caregivers take up elder care in conjunction with caring for the husband and children while still performing formal organizational roles (Son, Erno, Shea, Femia, Zarit & Stephen, 2007; Ugwu, 2010).

Therefore, incorporating the elderly into the adult children's home in cities, whether father, father-in-law, mother or mother-in-law, is bound to exacerbate the stress of the caregivers.

Another major focal point of this paper is centered on whether providing care services to the father/mother is more stressful than caring for the father-in-law/mother-in-law. There is dearth of literature in this area but few researchers (e.g., Oshorn, 2004, Brown & Shlosberg, 2006) suggested that women caregivers feel more comfortable interacting with their father/mother than doing so with their mother-in-law/father-in-law. This study attempts to contribute empirical data in these areas. Understandably, none of the studies coming from the West looked into the stress daughters/daughters-in-law experience in caring for mother-in-law/father-in-law because in the West most elders are cared for in formal institutions. With very few studies in this area coming from Africa, the present study aims at providing data from Africa (Nigeria). The study therefore addresses these gaps in the following ways: (1) It compares in-husband household caregivers with out-husband household caregivers on care giving stress; (2) it compares caregivers who provide care services to mother/father with caregivers that provide care services to mother-in-law/father-in-law on caregiver stress. In line with the above stated objectives, the following hypotheses were postulated: (1) Caregivers of in-husband household will not differ significantly from caregivers of out-husband household on caregiver stress. (2) Caregivers that provide care services to mother/father will not differ significantly from their counterparts who provide care services to the mother-in-law/father-in-law on caregiver stress, irrespective of household type.

Method

Participants

The participants for this study (working mothers who are also caregivers) possessed the following characteristics: (a) they are customarily or legally married to a man and not divorced or separated or widowed; (b) are formally employed in any formal organization; (c) have incorporated their debilitated or impaired aged parent(s) and/or parent(s) - in-law into their own household and (d) they provide care services to the aged parent(s)/ parent(s)-in-law. The sample was selected using snowball technique. To this effect, one working mother that met the set criteria was identified and was requested to assist the researchers in identifying other working mothers who met the set out criteria. The sample for the study comprised two hundred and twenty-six working mothers made up of one hundred and thirty-six in-husband household women caregivers and ninety out-husband household women caregivers. In the in-husband household, sixty-seven of the women caregivers care for their aged mother/father. Still in this category, sixty-nine of women caregivers of the in-husband household type care for their mothers- in-law/fathers- in-law.

In the out of the husband household type, forty-eight women caregivers care for their mothers/fathers while forty-two of them care for their mothers- in-law/fathers- in-law. The caregivers' ages ranged from 38 years to 62 years, with a mean age of 51.21years. The official records of the exact age of the care recipients were not available but estimates made by them ranged from seventy-five years to eighty-two years, and above.

Instrument

The instrument used for the study was a 14-item caregiver stress questionnaire, which was developed by the researcher and designed to measure the stress women caregivers experience in providing care services to the aged in their respective homes. The questionnaire was divided into two sections, namely the demographic section (Section A) and the instrument section (Section B). Section A of the questionnaire contains demographic information of household type of the caregiver (i.e.; whether in-husband household or out-husband household) and the relationship of the care recipient to the caregiver (i.e.; whether father, father in-law, mother, mother in-law).

Section B of the questionnaire contains the 14-item caregiver stress used in this study. Sample questions in the caregiver stress instrument include: “Financial constraint is one problem that gives me overbearing concern in caring for the aged”; cleaning home environment for the aged, including messy toilets, gives me stress; I detest taking care of the aged personal hygiene; and “I often find myself caught up in cross-role demands of aged parent and children”. The 14-item questionnaire was rated in Likert scale ranging from 4 to 1 (Strongly Agree, Agree, Disagree and Strongly Disagree). A test-retest data of two weeks intervals collected from 38 women caregivers teaching in 10 secondary schools in Nsukka education zone yielded a coefficient value of 0.83.

Procedure

Data were collected with the help of two research assistants. Permission was obtained from Heads of various Departments of the University of Nigeria Nsukka and Enugu Campuses and the Chief Nursing Officers of Bishop Shanahan and Orthopedic hospitals, Nsukka and Enugu, respectively. All the sectional Heads were intimated with the main objective of the study. The researcher also solicited the willingness of the sectional Heads in the distribution of the questionnaire to the identified participants in their units. The sectional Heads were requested to do a census of all working women that co-reside and provide care services to their incapacitated aged parent(s)/parent(s)-in-law. Armed with accurate information regarding the number of working women living with their parent(s)/parent(s) -in-law in each department/unit, the researcher sent out a total of two hundred and fifty copies of questionnaire, which included a letter of introduction. The letter of introduction described the purpose of the study, emphasized voluntariness, anonymity and confidentiality. In each centre, a small plastic bucket with lead cover was installed. Participants were asked to deposit the completed questionnaire in those plastic buckets, which were later returned to the researcher.

Out of the two hundred and fifty copies of the questionnaire distributed, two hundred and twenty-eight copies representing (91%) were returned while two copies were discarded due to improper filling. In all, a total of two hundred and twenty-six copies were used for data processing.

Results

As stated previously, the primary goals of this analysis are to determine: (a) whether married caregivers who co-reside with their husbands (in-husband) household type differ significantly from married caregivers whose husbands visit only on weekends (out-husband) household type on caregiver stress, and (b) whether women caregivers differ significantly in care giving stress across who the care recipients are (mother, mother-in-law, father, father-in-law).

Table I shows the means of the independent variables used in this analysis that help explain why (if any) differences exist.

Table 1: Descriptive statistics reflecting the mean scores of household type and care recipients

Husband type	Care Recipient	Mean	Sd	N
In-husband	CM	30.58	6.15	53
	CMI	38.33	5.68	53
	CF	36.21	7.26	14

	CFI	37.75	7.23	16
	Total	35.03	7.14	136
Out-husband				
	CM	34.41	8.10	29
	CMI	43.43	3.51	30
	CF	35.05	9.72	19
	CFI	43.50	7.75	12
	Total	38.77	8.40	90

*CM – Mother, CMI – Mother-in-law, CF – Father, CFI – Father-in-law

Results show that married caregivers experience caregiver stress more when the care recipient is either mother-in-law or father-in-law than when the care recipient is mother or father, irrespective of the household type. In general, caregivers of in-husband household type experience less caregiver stress than caregivers of out-husband household type. Results also revealed that caregivers experience more stress when caring for mother-in-law/ father in-law than when caring for mother/ father.

Table 2: Analysis of variance exploring household type and care recipient as factors in care giving stress

Source	Sum of square	df	Mean square	F	Sig
Household type	486.211	1	486.211	10.97	0.001*
Type of care recipients	3095.584	3	1031.861	23.27	0.000*
Husband Type X					
Care recipient	256.556	3	85.519	1.929	.126
Error	9666.460	218	4.342		
Total	315303.00	226			

*P < 0.05

Results in Table 2 revealed that caregivers in out-husband household type differ significantly from caregivers in the in-husband household type on care giving stress, ($F(1, 218) = 10.97$, $MSE=486.211$, $P < 0.05$). This suggests that caregivers in out-husband household experience more caregiver stress than their counterparts in the in-husband household type. Results also showed that care givers who provide care services to their mother/father differ significantly from those who care for their mother-in-law/father-in-law on caregiver stress ($F(3,218) = 23.27$, $MSE=1031.861$, $P < 0.05$). Caregivers of mother-in-law/father-in-law experience more caregiver stress than their counterparts who care for mother/ father. In order to ascertain the group of care recipients that produce more care giving stress to the caregivers, a post-hoc analysis using Tukey (HSD) was carried out (see table 3).

Table 3: Tukey (HSD) multiple comparisons on care giving stress

(I) Care recipient	(J) care recipient	Mean difference (I –J)	Std error	sig	lower	Upper band
Mother (CM)	mother-in-law	-8.2417	1.03682	0.00	-10.9260	-5.5574
	Father (CF)	-3.6064	1.37275	0.045	-7.1604	-.0524
	Father-in-law (CFL)	-8.2753	1.45752	0.00	-12.0487	-4.5018
Mother-in-law	Father	4.6563	1.37037	0.005	1.0874	8.1831
	Father-in-law	-.0336	1.45529	1.00	-3.8012	3.7341
Father	Father-in-law	-4.6688	1.71094	0.034	-9.0984	-.2393

Results, as shown in Table 3 above, reveal that caregivers experience more care giving stress when caring for mother-in-law than when caring for mother. Similarly, results also revealed that caring for either father or father-in-law is more stressful than caring for the mother. On the other hand, caring for mother-in-law is more stressful than caring for father while caring for father-in-law is more stressful than caring for either mother-in-law or father.

Discussion

Caregivers in the out- of- the husband household type experience more caregiver stress than their counterparts in the in-husband household type. This suggests that caregivers whose husbands are not available on day-to-day basis experience more stress in caring for their parent(s)/ parent(s)- in- law than their counterparts whose husbands are available. This result is consistent with earlier suggestions by Brown (2001) and Osborne (2004) that single mothers or mothers in separated families experience more maternal stress than do mothers in the intact families. However, this result contradicts earlier assertion by Nerenberg (2002) and Ugwu (2006) who, in their separate papers, maintained that care giving is stress- laden, irrespective of household type. The present finding may be explained on the premise that the absence of caregiver's husband could be a source of insecurity, a threat to the caregiver's self-efficacy and a reduction in her stress coping skills. Caregivers in out-of-husband household type face a lot of mounting responsibilities as they care for their children's needs and perform the prescribed roles in their respective work organizations. The absence of their husbands in the face of mounting responsibilities may lead to lack of informational, emotional and/or instrumental support for the caregivers, especially when they encounter inter- role conflict and ambiguity in their relationship with the care recipients. The supports from their husbands are capable of providing buffering effects to the caregivers, especially when such supports are capable of masking the ill-feelings arising from caregiver-care recipient relationships. The importance of support was attested to by the response of one of the out of husband caregivers who, during the interview session, has this to say: "It has been very difficult for me to

reconcile all the conflicts emanating from home front since my mother-in-law joined us and this is even worse now than ever because my husband is not always around me to provide the much needed supports that would help ameliorate my sufferings''. Another respondent of the caregivers from the out-of husband household type also asserted that informational support from my husband, in the form of giving useful advice or empathizing at the peak of conflicting demands, is lacking.

Caregivers that provide care services to mother/father differed significantly from caregivers that provide care services to the mother-in-law/father-in-law in care giving stress. Caring for father-in-law/mother-in-law is more stressful than caring for mother/father. This result rejects the second hypothesis. However, the finding of this study supports the assertion of the earlier researchers that caregivers experience more stress caring for their mother-in-law than caring for their mother (Osborne, 2004, Brown & Shlosberg, 2006). The result of this study could be explained in line with the changing trends in our marriage institution. Marriage contract in many developing countries has undergone some changes in the past two and half decades. In the time past, except for conjugal affairs; maidens were married into families, lived and interacted with their parents-in-law before joining their husbands, and were wives to the entire family/community. Such circumstance afforded the new wives the opportunity of fostering and sustaining social integration with their parents-in-law and as well as internalizing the core values of their new found families. In contrast, the newly married wives in the contemporary African society usually join their husbands after marriage and may not even have the opportunity of interacting with parents-in-law until when the parents-in-law need care assistance. With the unfamiliar relationship with the parents-in-law right from the inception of marriage to the time of providing care assistance, the two parties perceive each other as "strange bed fellows with little or no emotional attachment". The bond between the daughters-in-law and the parents-in-law becomes secondary, which daughters-in-law/parents-in-law acquired through relationship with husband/son, respectively. This may explain why daughters-in-law feel more stressed caring for second-bonded attaché (parents-in-law) than caring for first-bonded attaché (father/mother) whom they lived with from infancy to maturity in a seemingly closer emotional attachment.

In addition, daughters have more past experiences to share with their parents than with their parents-in-law, such that they engage in more information exchange when staying with their parents than when they are staying with their mother-in-law or father-in-law. The information exchange helps to strengthen the daughter-parents bonds and provides a forum where both the caregiver and care recipient evaluate each other's shortcomings in their relationships. Such interaction closes the social and psychological distances between the caregiver and the care receiver in their give- and- take relationship.

Furthermore, the stereotypical belief that in-laws interfere with the affairs of the family of their adult children may generate stress to the caregivers even before the parent(s)- in -law is/are incorporated into the adult children's home. These negative feelings may impact negatively in their intergenerational relationships. Armed with such mental set, the daughters-in-law may indulge in extra- care activities in order to satisfy the desires and expectations of the parents-in-law and forestall all forms of conflicts that may emanate from their inter-relationship. The extra effort required to cater for and meet the needs and the expectations of the parent(s)-in-law and the desire to meet other social obligations, have the potency of exacerbating care giving stress in the daughter(s)-in-law.

In the present study, results also revealed that caregivers experience more stress caring for father-in-law than caring for mother-in-law. This suggests that caring for same-sex is less stressful than caring for opposite sex. Caring for opposite sex is likely to be more stressful to the female caregiver because it may require taking care of the care recipient's personal hygiene such as bathing, shaving and dressing. Caring for men is also likely to be more stressful to the caregiver given the position of men in the society. Men are the authority

figure, the head of the household or family executive in the traditional home arrangement and would feel frustrated when they lose their strengths and turn around to become dependent to their family members. Consequently, they may vent their anger and frustration on the caregiver, who in turn, may develop negative feelings towards the care receiver. On the contrary, when caregivers provide care services to their mothers-in-law, the invasion of the care receivers' privacy becomes less stressful than when they have to care for the opposite sex.

Conclusion

Based on the data presented above, one may be inclined to conclude that care giving stress is more when the husband is out of the household for caregivers than when their husbands cohabit with the caregivers. Caring for either mother-in-law or father-in-law is more stressful than caring for either mother or father. However, results revealed that caring for the father-in-law is more stressful than caring for the mother-in-law, which implies that caring for father-in-law is the most stress-laden.

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