

## Division of Caregiving Responsibilities among Adult Children

Abstract for PAA 2014 Submission

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Adult children are an important source of caregiving for older adults. Whether or not adult children provide care to their parents depends not only on parents' needs but also on adult children's gender, resources, and relationships with their parents. Prior studies have shown that adult children who are women, who are unmarried, who do not have offspring under age 18, who live with parents, who are emotionally close to parents, and who receive financial support from parents are more likely to be caregivers than their respective counterparts (Pezzin, Pollak, & Schone, 2008; Pillemer & Suito, In press; Seltzer & Friedman, In press; Silverstein, Conroy, Wang, Giarrusso, & Bengtson, 2002).

Most of today's older adults have more than one child. Adult children's propensity to provide care to their parents is not only influenced by children's own characteristics but also by whether they have siblings who are of the same gender, who have similar resources, and who maintain similar relationships with their parents (Tolkacheva, van Groenou, & van Tilburg, In press). Having another sibling who shares the same characteristics may dilute caregiving responsibility or enhance sharing, resulting in a decrease or an increase in the likelihood of providing care.

When more than one adult child involves in caregiving, it is unclear how children divide caregiving responsibilities. Prior studies thus far provide conflicting evidence. On the one hand, some researchers found that the more care siblings give to parents, the more care the adult child gives (Tolkacheva, van Groenou, & van Tilburg, 2010). On the other hand, other researchers found that the propensity and amount of care decrease as siblings' care provision increases (Wolf, Freedman, & Soldo, 1997; Spitze, Ward, Deane, & Zhuo, 2012). These conflicting findings may arise because prior studies did not distinguish two types of care division: substitution versus complement. The presence of a sibling caregiver may increase the likelihood of sharing the same activity (i.e., substitution) and thus a positive association is observed. Alternatively, the presence of a sibling caregiver may decrease the likelihood of sharing the same activity, but increase the likelihood of sharing different activities (i.e., complement), and thus when researchers examine only one particular type of caregiving activities, they observe a negative association. Without distinguishing substitution from complement, we cannot get a better glimpse into how caregiving responsibilities are allocated among adult children.

Most existing national survey data do not allow researchers to examine whether adult children engage in substitute or complement care because these surveys often do not ask helpers specifically about each of caregiving activities. For instance, the Health and Retirement Study asked respondents whether they received help with Activities of Daily Living (ADL) or

Instrumental Activities of Daily Living (IADL), and if the respondents did, they were subsequently asked to list who *most often* helped with ADLs or IADLs without distinguishing who helped what activity. A new survey, the National Health of Aging Trends Study (NHATS), takes on an activity-by-activity approach by asking older adults whether they received assistance with each of 13 ADL and IADL activities in the last month and who provided help with each activity. This survey provides an excellent opportunity for researchers to examine the pattern of care division among adult children.

In this study, we used this unique data set to answer three questions. First, what is the pattern of the division of caregiving responsibilities among adult children? Second, does the presence of a sibling who shares the same characteristics increase the likelihood of providing no care or sharing care? Last, does the presence of a sibling caregiver who shares the same characteristics increase the likelihood of using a substitute or complement care division?

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