

Do Men Deserve More Credit? A Study on Gender and Caregiving

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Abstract

Care for the elderly population in the United States is fast becoming an issue many families are facing. This study investigated the relationship between gender and willingness of college students to care for aging parents by surveying 24 male and female undergraduate and graduate students at the University of Wisconsin-Stout. It was hypothesized that female college students would be more willing than men to care for aging parents in the assistance categories of personal hygiene and housework. Survey data was statistically analyzed using cross-tabulations, and mean comparisons. Results indicated that males are more willing to provide care in the categories of personal hygiene and housework. These findings did not support the hypothesis of females being more willing to provide care; the implications are that the traditional roles and stereotypes need to be reassessed.

Introduction

With the increasing numbers of the elderly, it has become an issue as to who will care for all of these aging people. There have been numerous studies dating back to the 1960s that have reported and researched that it is family members who care for the majority of assistance related to medical and personal care for the elderly (Datwyler & Montgomery, 1990). Although it is clearly noted that women outnumber men in all caregiver categories which include financial support, personal hygiene care, and help with the housework, there is a concern regarding the amount of willingness or support of care that comes from males and females (Stone, Cafferata, & Sangl, 1987). Willingness is defined as “an act or voluntarily ready to act gladly” (Agnes, 2000, p. 1683). Care can be

defined as giving assistance in any of the following categories: financial support such as living arrangements, medical payments, and everyday living expenses; personal hygiene care which includes bathing, giving medication, and facilitating therapy/exercise sessions; and housework including cleaning, laundry, and meal preparation (Eriksen & Gerstel, 2002). Our hypothesis is that female college students will be more willing to care for aging parents in the majority of the assistance categories which consist of personal hygiene and housework.

Literature Review

The increasing numbers of elders has raised concern about caring for the elderly, so it isn't surprising that caregiving has become a hot topic both in families and the greater society. Many recent studies have examined the role of age and gender in caregiving. It is imperative to understand important concepts that are relevant to studies done regarding gender and caregiving.

Socialization is an important concept in understanding the differences between genders. When examining males and females, it is crucial to understand the socialization process that occurs in the family and society, and how that shapes gender roles. Caregiving in this study refers to an adult child taking on responsibilities of helping a parent with daily living activities. Caregiving can include but is not limited to: cooking, personal hygiene care, household work, emotional support, and financial support (Eriksen & Gerstel, 2002).

In a study comparing adult sons and daughters, Ada C. Mui (1995) found that there are specific gender differences in the approach to caregiving. Consistent with prior research, she found women make up the majority of caregivers. The article also discussed the division of labor differences between sons and daughters when it comes to caregiving for their parents. Mui's research found that females are more likely to experience higher levels of emotional strain and provide more domestic and personal care while men provide more home repair and financial assistance. Mui believed these differences occur because men and women are socialized differently. Women are socialized to feel an obligation toward parents. Also, women put an emphasis on the relationships with family members and place a high level of importance on the quality of the interaction, which could be the reason they experience more emotional stress than male caregivers.

According to research done on intergenerational differences where children felt obligation to care for aging parents, there are differences

between young adults and their middle-aged parents (Freeberg, et al. 1998). The study included a sample of college students and their parents. The purpose was to see who felt a higher level of obligation toward their parents, the younger group or the middle aged individuals. The results were that young adults felt a higher level of obligation. An analysis concluded that the students from the study were likely to still be dependent on their parents, which could account for the findings. Also, the study's results found that in both groups women reported higher levels of felt obligation than men.

According to Eriksen and Gerstel (2002), gender is a central basis of care giving. In this particular study it suggested that women give more care than men do and that women give different kinds of care. The kinds of care women are more likely to give are: practical care (i.e. doing the laundry, meal preparation, child care, and cleaning), personal help (i.e. talking about problems and advice giving), and maternal help (i.e. money and gifts). The study also revealed that if a sister is in the family, she is more likely to support the care giving duties between the family members. Although the study did prove that it is not just gender that care giving is based around. Age is also a consideration (Eriksen & Gerstel, 2002).

Gallagher and Gerstel's (2001) research on gender and care suggested that women who are caregivers are more willing to give care because they are internalized to give nurturance through their early socialization. Many times, men are characterized to separate themselves with individuality, competition, and detachment from early socialization. This article stated that men who are married and have children, especially who have girls, are more likely to be more supportive of feminine roles. This study concurred with Eriksen and Gerstel (2002) by verifying women are more likely to do the "feminine jobs" such as cooking and providing child care, but men and women are both likely to support their parents with neutral projects such as money and advice.

From reading the research, it is evident that women are more likely to provide the role of caregiver. There are other factors that also relate to whether or not an individual will be a caregiver including, age, family background and felt obligation. Although there has been extensive research on who is providing current care, less is known about potential caregivers. By looking at the willingness of an individual to care for an aging parent, we bridged a gap in the research. Although one study looked at the obligation individuals feel toward become a caregiver for their parent(s), we wanted to understand and compare the willingness of a demographic that hasn't been studied much—college students.

In order to bridge the gap in previous research, our study focused on the willingness of college students to be caregivers to their adult parents. Our research aimed to answer the question “Is there a relationship between gender and the willingness of college students to care for aging parents?”

Theoretical Framework

The theory that we used in this study is Feminist Theory (Ingoldsby, Miller, & Smith, 2003). Feminism was a movement started by women in the mid 1800s. After the first wave of Feminism came the modern feminist movement, which began in the 1960s. Issues of this movement were for equal pay on the job, maternity leave, abortion and birth control, and child care. Today, Feminists continue to fight for equal rights of oppressed groups. Feminist theory indicates that gender is socially constructed, that history and society play key roles in understanding women and families, and that Feminism focuses on social change. As applied to our study, this theory would predict that female college students would be more willing to care for aging parents than male college students because women are socialized to be caregivers. Starting out from birth, male and females are treated and viewed differently according to their gender. Females are socialized by their parents and society to believe that caring for others is “women’s work” (Ingoldsby, Miller, & Smith, 2003). Feminist theory helped us decipher why there are gender differences in our research findings.

Methods

Participants

The site of this study was at the University of Wisconsin-Stout in Menomonie, WI. The participants in the study were 12 female and 12 male students currently enrolled at Stout.

Research design

We used the cross-sectional design because it allowed one-time contact with the participants and was economical and easy to analyze. We chose to collect our data at the UW-Stout Johnson Fieldhouse because it is used by students attending the university. Due to the small sample size and lack of randomization, the results will not be able to be generalized to the larger population. Participants were given self-administered questionnaires, which allowed us to ensure anonymity. By using the questionnaires we were guaranteed a high rate of returned sur-

veys. Quota sampling was the best fit because it allowed us to identify visible characteristics of gender. This design also allowed us to pick a convenient location on campus. In order to protect all participants' rights, we completed the online Human Subjects Training through the University of Wisconsin-Stout.

Instrument

We designed the survey to study the willingness of college students to care for aging parents. The questionnaire included a cover letter that explained to participants the purpose of the study and also ensured them that their responses would be held in confidence. It explained that all participation was voluntary. The questions included on the survey were generated from literature in the field about this topic; specifically, we modeled the questions after categories created by Eriksen & Gerstel (2002). We started with the general question asking if participants would be willing to care for their parents, and then broke it down into specific type of support they would be willing to give, including, financial support, personal hygiene care, housework, and if they would be willing to take on sole responsibility for a parent. We used the Likert scale to measure the participants' answers. This allowed participants to answer the questions by a scale of 1 to 5, with varying degrees of agreement, 1 being strongly disagree, and 5 equaling strongly agree. In order to ensure the validity of the survey we piloted it on two students before giving it out to our participants. After piloting, we found no changes were needed to be made in order to clarify any of the concepts.

Procedure

The procedure involved distributing the surveys at the Johnson Fieldhouse at UW-Stout on Wednesday March 23, 2005. The surveys were handed out to students entering the multi-purpose room. Students who were identified according to their gender were asked to complete the survey. The surveys were handed out until we had 30 surveys completed: 12 male and 12 female. We chose not to attempt to randomize, since our only variable was gender. The surveys included a cover letter that explained to participants who we were and the purpose of our study. The instructions asked participants to answer the statements by circling the best answer that reflects their attitudes. The participants completed the questionnaire in our presence and returned it to us upon completion.

Data analysis plan

We cleaned the data by checking questionnaires for completeness and removing all incomplete questionnaires. We created a codebook by assigning numerical values to answers we obtained from our participants. We assigned variable names to each of our questions and a numerical value for each response.

Our variables included gender (GEN), willingness to care for an aging parent in general (WIL), financially (FIN), with personal hygiene care (PER), housework duties (HW), and take on sole responsibility for a parents care (SOLE). We conducted frequencies on each variable to detect missing data. To do this we used the SPSS statistical computer package to analyze the data. Our level of analysis is on the individual.

Results

We hypothesized that females would score higher in HW (housework) and PER (personal hygiene). After conducting our analysis, our statistical findings demonstrated mixed support for our original hypothesis.

The Statistical Package for Social Sciences (SPSS) program was used to analyze our data. The statistical analysis performed on each variable included: means comparison and cross-tabulations. Cross-tabulations were conducted on variables. The independent variable in our study was gender; the dependent variables were WILL, FIN, PER, HW, and SOLE.

The results for (WILL) supported our hypothesis; in that 75% of males agreed or strongly agreed that they would be willing to provide care to aging parents, whereas 83.4% of females responded the same.

The responses for (HW) indicated that all male respondents either strongly agreed or agreed, whereas 8.3% of females disagreed that they would be willing to provide housework support for their aging parents. This does not support our hypothesis, as females were less willing to provide housework support.

The responses to the financial question (FIN) did not support our hypothesis, because females were more likely than males to be willing to provide financial care for aging parents. Overall, 58.4% of males agreed or strongly agreed, while 83.4% of females responded positively.

Answers for (PER) did not support our hypothesis either. Male respondents had a combined 66.7% for agreement categories in personal hygiene care, while females total for the two was 41.6%. Females also disagreed at 25% compared to 8.3% of males.

The responses for (SOLE) indicated that although more males agreed to take sole responsibility for care (33.3%), compared to 25% of

females, they also were the only ones to responded “strongly disagree” to the question. Therefore, this neither supported nor countered our hypothesis.

Means comparisons were conducted on WILL, FIN, PER, HW, and SOLE (Refer to Table 1). Mean comparison results indicate that means for variables were higher for males in PER and HW, indicating our hypothesis was incorrect. For WILL, FIN and SOLE, means for variables were higher for females, which supported our general hypothesis, which stated that females are more likely to care for aging parents.

A reliability analysis was conducted to indicate if our five variables, WILL, FIN, PER, HW and SOLE, were a reliable index to measure attitudes college students have on caring for aging parents. Cronbach’s Alpha is a measure of reliability, and in our analysis was .7748. This value indicates that our survey items were a reliable index of our major concept of attitudes college students have about caring for aging parents.

Discussion

Our findings that more females would be willing to care for aging parents supported our original hypothesis. The idea that female college students would be more willing to care in the categories of PER and HW was not supported by our results.

The literature we reviewed found that women compose the majority of caregivers and provide more domestic and personal care (Mui, 1995). A reason behind this is the socialization of women to be nurturers (Eriksen & Gerstel, 2002). Our results provided mixed support for the literature. We found that females were more likely in the category of WILL, but that more males would be willing to provide care in the categories of PER and HW, which we considered domestic and personal care like Mui.

One possible explanation as to why this occurred could be that females and males are socialized differently than in past generations. Traditional gender roles could be more flexible now, which would help explain our findings. Males could be becoming socialized to be nurturing, therefore more willing to be caregivers. Another explanation for why so many males stated they would provide personal hygiene care could be because the terms in our survey did not provide examples defining personal hygiene care, which may have provided different results if defined.

Our findings have implications for family practitioners. Practitioners should be sensitive to the issue of gender in caregiving. Previous stereo-

types that put women in nurturing roles, and not men, need to be challenged. Men need to be identified and supported in their caregiving roles. Because the findings support the idea of males in caregiving roles, more research and data should be collected in order to study if there really is a social change occurring.

Limitations

The limitations in our study include a small, non-random sample size. Because of the small sample size we were not able to generalize to the larger population. Although race was not assessed in our survey, the majority of our participants were of Caucasian background. The results might have differed with a sample of non-educated individuals in that more traditional gender roles would have been reflected in the answers.

Implications for Future Research

One conclusion is the possibility that males might have not understood the full extent of care within the personal hygiene category. For future research we recommend that personal hygiene be defined for participants. Personal hygiene care could be defined as bathing, medicating, and bathroom assistance.

Studies on socialization may contribute to furthering knowledge on this topic. If more males are responding with answers that reflect care and nurturance, it could be that males are being socialized differently than in the past.

Conclusion

This study challenged previous assumptions we had regarding gender in relationship to caregiving. Although our results did not support our hypothesis, we are excited about the results because they could be reflecting changes occurring in the socialization of males and females. We are hoping that as a result of our research, individuals will challenge their stereotypes about males and females.

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Table 1

Means

	<u>WILL</u>	<u>FIN</u>	<u>HW</u>	<u>PER</u>	<u>SOLE</u>
Male:					
Mean:	4.083	3.5	4.83	3.67	2.58
SD:	.996	1.62	.389	1.23	1.56
Range:	3.0	4.0	1.0	4.0	4.0
Female:					
Mean:	4.17	3.83	4.25	3.08	3.0
SD:	.937	1.03	.866	1.16	1.04
Range:	3.0	4.0	3.0	4.0	3.0

Note. (GEN)=Gender; (WIL)= Willingness to care for an aging parent in general; (FIN)= Financially; (PER)= Personal hygiene care; (HW)= Housework duties; (SOLE)= Take on sole responsibility for a parents care.