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2018 South Korea Eldercare and Childcare Household Survey - Eldercare Introduction

Greetings!

This survey is part of the work of the Center for Transnational Migration and Social Inclusion at the Graduate School of International Studies, Seoul National University. Korea today confronts many challenges arising from the demographic changes related to low fertility and population aging. Amid this context, the provision of care for children and the elderly has ceased to be a matter of private concern for individuals and families and has now become a serious social issue. Nonetheless, there is insufficient understanding of by whom and how care is being provided for the young and the elderly.

Our research team endeavors to systematically survey how childcare and eldercare are currently being arranged in Korea so to search for ways to socially redistribute the care burdens primarily shouldered by individuals and families. After successfully administrating and analyzing the 2018 Eldercare and Childcare Survey, it is our goal to provide policy recommendations based on our research findings and thereby contribute to resolving the difficulties associated with childcare and eldercare.

All information provided will be coded and your personal information kept strictly confidential and completely erased upon termination of the survey period. We kindly request your participation in this survey, which will be invaluable for developing solutions to the provision of care in Korea. Thank you.

September 2018

Ki-Soo Eun

Professor, Graduate School of International Studies, Seoul National University

* I agree.

(Please check in the box if you agree to participate in the survey based on the introduction above.)

* The investigator fills out the boxes below.

Location	1. Seoul	2. Busan	3. Daegu	4. Incheon	5. Gwangju	6. Daejon
	7. Ulsan	8. Sejong	9. Gyeonggi	10. Gangwon	11. Chungbuk	12. Chungnam
	13. Jeonbuk	14. Jeonnam	15. Gyeongbuk	16. Gyeongnam		
Size of location	1. Metropolis			2. Small and Medium Sized City		3. County (<i>eup, myeon</i>)
Sex	1. Male	2. Female				

Principal Research Institution



서울대학교

Investigating Agency



■ Gallup Korea || 이은지 / 장은혜 || ☎ 02-3702-2686 / 2119

■ Seoul National University Graduate School of International Studies || ☎ 02-880-9220

This survey is only for “Eldercare Eligible Households” as defined below.

A respondent who lives with an elderly person (age 65 or above) that has received a NLTCI grade (including Types A-C and grade for dementia) or needs regular ADL/IADL related help due to geriatric/chronic disease; or the main caregiver of such an elderly person even if they don't live together.

Screening Questions

SQ1) Are you the main caregiver of an elderly who needs help with daily activities due to senility or disease?

1. Yes _____

2. No → End Survey

Main Caregiver

Someone who lives with an elderly person (age 65 or above) who needs help with daily activities, is the person who most often takes care of the elderly person, and takes responsibility for the elderly person's overall care situation among household members.

Someone who does not live with an elderly person (age 65 or above) who needs help with daily activities, but regularly visits at least 3 times a week on average over the last 6 months to take care of the elderly person for at least 2 hours on average per visit, and takes responsibility for the elderly person's overall care situation.

SQ2) I will ask about the elderly person you're taking care of as the main caregiver. Please indicate all of the items that apply to the elderly person's situation.

The elderly person you are taking care of..	Yes	No
1) Can prepare and eat meals and drinks.	1	2
2) Can take care of personal hygiene, such as brushing their teeth, washing their face, and washing their hair.	1	2
3) Can use the bathroom by him/herself.	1	2
4) Can dress appropriately.	1	2
5) Can keep his/her house clean and safe.	1	2
6) Can get around inside and outside the house by him/herself.	1	2
7) Can go to places like the hospital or bank by him/herself.	1	2
8) Can use public transportation.	1	2

→ End survey if there are 6 or more '1. Yes'.

Q 1) Please respond regarding the situation of the elderly person you are taking care of as the main caregiver over the past 6 months. If you are taking care of more than 1 elderly person, please respond regarding the person that needs the most help (main care recipient).

Q1-1) General Health	Q1-2) Chronic Disease (Select all that apply)	Q1-3) Long Term Care Insurance Grade	Q1-4) Dementia Rating
1. Healthy	1. Grade 1 3. Grade 3 5. Grade 5 7. Other: Type A 9. Other: Type C	2. Grade 2 4. Grade 4 6. Cognitive Support 8. Other: Type B 10. Not applicable
2. Unhealthy		1. Mild 2. Moderate 3. Severe 4. Not applicable

Q1-2) Code

Classification	Name of Disease	No.	Classification	Name of Disease	No.
Circulatory	High blood pressure	11	Digestive	Cancer	61
	Stroke, cerebral infarction	12		Gastroduodenal ulceration	71
	Hyperlipidemia	13		Hepatitis	72
	Angina, myocardial infarction	14		Liver lesion	73
	Other cardiac disorder	15			
Endocrine	Diabetes	21	Urinary	Chronic renal failure	81
	Thyroid disease	22		Prostatism	82
Musculoskeletal	Osteoarthritis or rheumatoid arthritis	31		Urinary incontinence	83
	Osteoporosis	32		Sexually transmitted disease	84
	Backache, sciatic neuralgia	33			
Respiratory	Chronic bronchitis	41	Other	Anemia	91
	Asthma	42		Skin disease	92
	Tuberculosis	43		Depression	93
Sensory	Cataract	51		Bone fracture or dislocation	95
	Glaucoma	52		Other (Specify: _____)	96
	Chronic otitis media	53			

Q 2) What is your relationship with the elderly person you're currently taking care of as the main caregiver?

1. Elderly care recipient's spouse
2. Elderly care recipient's daughter
3. Elderly care recipient's son
4. Elderly care recipient's daughter-in-law
5. Elderly care recipient's son-in-law
6. Elderly care recipient's grandchild
7. Elderly care recipient's sibling
8. Elderly care recipient's other relative
9. Other (Specify: _____)

Q 3) Do you live with the elderly care recipient?

1. Yes
2. No → Skip to Q4-2

Q 4-1) (Only if responded 1 in Q3)

How long have you lived with the elderly care recipient?

Years Months

→ Skip to Q5) after responding

Q 4-2) (Only if responded 2 in Q3) What is the main mode of transportation you use to visit the elderly care recipient?

1. Bus
2. Subway
3. Car
4. Walk
5. Other (Specify: _____)

Q 4-3) (Only if responded 2 in Q3) How long does it take to get to the elderly care recipient's residence on average?

hours minutes

Q 5) Have there been any changes to the living arrangements of you or the elderly care recipient from the time you started taking care of him/her?

1. Yes
2. No → Skip to Q5-2

Q 5-1) (Only if responded 1 in Q5) If there were any changes, what was it?

1. We were living separately, but now live together.
2. We were living separately, and recently I moved to be closer to the elder.
3. We were living separately, and recently the elder moved closer to my house.
4. We were originally living together, but recently I moved out.
5. We were originally living together, but recently the elder moved out.
6. Other (Specify: _____)
→ Skip to Q6-1-1) after responding

Q 5-2) (Only if responded 2 in Q5) If there were no changes, which of the following is true?

1. I have been living with the elder since before I started taking care of him/her.
2. I have been living near the elder since before I started taking care of him/her.
3. I don't live near the elder, but I did not move since starting to take care of him/her.
4. Other (Specify: _____)

* Please tell me about the people who are currently living in your household, including yourself.

Q 6-1-1) What are the genders of the head of your household (the person responsible for the household) and household members?

Q 6-1-2) How old are they? (E.g. : For those born in 1978, age is 2018 - 1978 = 40)

Q 6-1-3) What are the relationships of the household members to the household head? Please record a corresponding number from the code below.

Q 6-1-4) Which household member is the respondent (you)?

Q 6-1-5) Which household member is the elderly care recipient? If there are multiple elderly persons, please choose the one who needs the most care.

Household Member ID	List	Q6-1-1) Sex		Q6-1-2) Age 2018 - Birth year	Q6-1-3) Relationship with household head	Q6-1-4) Respondent	Q6-1-5) Main Elderly Care Recipient
		Male	Female				
01	Head	1	2		0	1	1
02	Member2	1	2			2	2
03	Member3	1	2			3	3
04	Member4	1	2			4	4
05	Member5	1	2			5	5
06	Member6	1	2			6	6
07	Member7	1	2			7	7
08	Member8	1	2			8	8
09	Member9	1	2			9	9
10	Member10	1	2			10	10

→ Skip to Q7-1) if living with care recipient

Q6-1-3) Code

- | | | | |
|--------------------------|-----------------------|-----------------------------|-----------------------|
| 00. Head of household | 04. Parent | 08. Unmarried child | 12. Other relative |
| 01. Spouse | 05. Parent of spouse | 09. Married child | 13. Non-relative |
| 02. Paternal grandparent | 06. Sibling | 10. Spouse of married child | (Friend/Acquaintance) |
| 03. Maternal grandparent | 07. Sibling of spouse | 11. Grandchild | |

* (Only respond if living separately with the care recipient) Please tell me about the household members of the elderly person you care for, including the elderly.

Q 6-2-1) What are the genders of the head of the household (the person responsible for the household) and household members?

Q 6-2-2) How old are they?

Q 6-2-3) What are the relationships of the household members to the household head? Please record a corresponding number from the code below.

Q 6-2-4) Which household member is the elderly care recipient?

Household Member ID	List	Q6-2-1) Sex		Q6-2-2) Age 2018 - Birth year	Q6-2-3) Relationship with household head	Q6-2-4) Respondent	Q6-2-5) Main Elderly Care Recipient
		Male	Female				
01	Head	1	2		0	1	1
02	Member2	1	2			2	2
03	Member3	1	2			3	3
04	Member4	1	2			4	4
05	Member5	1	2			5	5
06	Member6	1	2			6	6
07	Member7	1	2			7	7
08	Member8	1	2			8	8
09	Member9	1	2			9	9
10	Member10	1	2			10	10

Q6-2-3) Code

- | | | | |
|--------------------------|-----------------------|-----------------------------|-----------------------|
| 00. Head of household | 04. Parent | 08. Unmarried child | 12. Other relative |
| 01. Spouse | 05. Parent of spouse | 09. Married child | 13. Non-relative |
| 02. Paternal grandparent | 06. Sibling | 10. Spouse of married child | (Friend/Acquaintance) |
| 03. Maternal grandparent | 07. Sibling of spouse | 11. Grandchild | |

* I will ask about the general care situation of the main elderly care recipient.

Q 7) Please record how frequently you did the care activities listed in the following cards over the past month, and record how difficult the activities were.

List	Q7-1) Frequency						Q7-2) Difficulty				
	None	Many times a day	Once a day	3+ times a week	1-2 times a week	1-2 times a month	Very difficult	Somewhat difficult	Neutral	Not too difficult	Not at all
1) Help put on/take off clothes or undergarments	0	1	2	3	4	5	1	2	3	4	5
2) Help with washing their face, brushing their teeth, shaving, trimming finger/toenails, etc.	0	1	2	3	4	5	1	2	3	4	5
3) Help enter/exit the bathroom, clean and dress after toilet use (including changing diapers)	0	1	2	3	4	5	1	2	3	4	5
4) Help bathe or shower	0	1	2	3	4	5	1	2	3	4	5
5) Change posture in bed or chair, help move around indoors	0	1	2	3	4	5	1	2	3	4	5
6) Help eat or drink	0	1	2	3	4	5	1	2	3	4	5
7) Prepare food and clean dishes	0	1	2	3	4	5	1	2	3	4	5
8) Housework (cleaning, laundry, organizing)	0	1	2	3	4	5	1	2	3	4	5
9) Help taking the right dosage of medication at set times	0	1	2	3	4	5	1	2	3	4	5
10) Going to the hospital together, picking up prescriptions	0	1	2	3	4	5	1	2	3	4	5
11) Having a conversation or playing indoors (including reading books/newspapers)	0	1	2	3	4	5	1	2	3	4	5
12) Watching TV or other media together	0	1	2	3	4	5	1	2	3	4	5
13) Taking a walk (including using wheelchair)	0	1	2	3	4	5	1	2	3	4	5
Help with transportation (using public transportation, giving a ride in the car, commuting to/from nursing home, etc.)	0	1	2	3	4	5	1	2	3	4	5

Q 7-3) If you were provided with financial assistance to use a care service, what type of care activity would you like to be done by a care worker or a care institution?
Please choose up to 3 care activities from the list above.

1st	2nd	3rd	
-----	-----	-----	--

Q 7-4) If you yourself were able to do more carework (given more time, etc), what types of care activity would you like to do yourself?
Please choose up to 3 care activities from the list above.

1st	2nd	3rd	
-----	-----	-----	--

Q 7-5) Over the past 3 months, has anyone shared or engaged in care activities other than you? Who was it? If there were multiple people, please choose one person who engaged the most frequently in the activity.

Care Activity	Q7-5-1) Anyone else contributed to the activity?	Q7-5-2) Who shared or did activity
1) Giving the elder a bath		
2) Taking the elder to the hospital (when sick, for vaccinations, emergency room, dentist, etc.) and consulting with the doctor		
3) Looking into elderly care/treatment services and scheduling		
4) Taking the elder to an institution or waiting during home-visit care services		
5) Attending the elder's care service related events or counseling (at institutions, etc)		

Q7-5-1) Code

- 1. Solely done by myself
- 2. Sometimes shared or done by someone else
- 8. Not applicable (Elder doesn't need the care activity)

Q7-5-2) Code

- 1. Elder's spouse
- 2. Elder's daughter
- 3. Elder's daughter-in-law
- 4. Elder's son
- 5. Elder's son-in-law
- 6. Elder's sibling
- 7. Elder's other relative
- 8. Friend, neighbor, or acquaintance
- 9. Paid care worker/caregiver
- 10. Other (Specify: _____)
- 98. No one helped

Q 8) Were you the main caregiver of this elderly person from the time he/she first needed care to today?

- 1. Yes → Skip to Q9-1)
- 2. No → Skip to Q8-1)

Q 8-1) (Only if responded 2 in Q8) If you were not the main caregiver from the beginning, who were the main caregivers of this elderly person from the time he/she needed care to the time you became the main caregiver? Please list them in order.

Q 8-2) If there were multiple caregivers, who was the main caregiver for the longest time?

Q 8-3) Were they living with the elderly person at the time of giving care?

Order	Q8-1) Main caregiver at the time	Q8-2) Who took care of elder for the longest time	Q8-3) Whether lived together with elder at the time	
	[Use code below]		Yes	No
1		1	1	2
2		2	1	2
3		3	1	2
4		4	1	2
5		5	1	2

Code

- 1. Elder's spouse
- 2. Elder's first son (or his wife)
- 3. Elder's first daughter (or her husband)
- 4. Elder's second or other son (or his wife)
- 5. Elder's second or other daughter (or her husband)
- 6. Elder's sibling
- 7. Elder's grandchild
- 8. Elder's friend, acquaintance, or neighbor
- 9. Nursing home, nursing hospital, hospital, or institution
- 10. Other (Specify: _____)

Q 9-1) When did the elderly person you're taking care of start to need help with daily activities?

- Q 9-1) When elder started receiving care

Year: Month:

Q 9-2) When did you start to take care of the elderly person as the main caregiver?

- Q 9-2) When respondent started taking care of elderly

Year: Month:

Q 10) Why did you become the elderly person's main caregiver? Please choose 2 reasons in order of relevance.

1st		2nd	
-----	--	-----	--

1. I am the elder's only family member.
2. I have been living with the elder.
3. I live the nearest to the elder.
4. I (or my spouse) am the first child of the elder.
5. The elder wants me to take care of him/her.
6. All other family members work, so I am the only available person to take care of the elder.
7. In order to not bother other family members.
8. Because I love him/her.
9. Because I feel the most comfortable giving care myself.
10. Because I am able to provide the best care for him/her.
11. Other (Specify: _____)

Q 11) Below is a timetable of the elderly person's day. Please indicate who mainly took care of the elder at each hour of yesterday.
(If you're not sure about yesterday, please respond regarding the most recent day you can recall. If the elderly was sleeping, please record who was in the house. Please select '5. Elderly person alone' only if the elderly was in the house by him/herself.)

Code

- | | |
|-------------------------|---------------------------|
| 1. Respondent | 4. Institution |
| 2. Other family member | 5. Elderly person alone |
| 3. Paid home-visit care | 6. Other (Specify: _____) |

6am	7am	8am	9am	10am	11am	12pm	1pm	2pm	3pm	4pm	5pm
6pm	7pm	8pm	9pm	10pm	11pm	12am	1am	2am	3am	4am	5am

Q 12) In the past 1 month, did the elderly person ever stay at home by him/herself for more than 1 hour in a day?

1. Yes → Skip to Q12-1
2. No → Skip to Q13-1

Q 12-1) (Only if responded 1 in Q 12)

If yes, how long does the elderly person stay home by him/herself on average?

days in a week hours in a day

Q 13-1) Over the past month, how much time did you spend caring for the elderly person every week on average?

- days during the week

hours minutes on a weekday

- days during the weekend

hours minutes on a weekend day

Time Spent on Care

Refers to time spent on caring for elderly person while he/she was not sleeping and was awake. Time spent on care includes time spent on not only direct care (helping with food consumption, dressing, etc) but also indirect care (supervising, accompanying, scheduling care services, etc).

Q 13-2) If you could choose, how much time would you like to spend caring for the elderly person on average?

- days during the week

hours minutes on a weekday

- days during the weekend

hours minutes on a weekend day

Q 14) Do you use any public or private **external care services/institutions** to care for the elderly person?

1. Yes → Skip to Q14-1

2. No → Skip to Q14-2

Q14-1) (Only if responded 1 in Q14) What is the main reason you use external services to take care of the elderly person?

1. Taking care of the elderly person is too difficult physically and/or mentally.
2. It's not too expensive to use external services.
3. To gain more time to do other activities like work or studies.
4. To gain some private time for leisure or rest
5. To receive professional care service
6. To allow the elderly person to socialize with other elderly people.
7. Other (Specify: _____)

→ Skip to Q15-1) after responding

Q14-2) (Only if responded 2 in Q14) What is the main reason your family takes care of the elderly person without using any external services?

1. We don't feel the need to use the services.
2. We think family should take direct care of the elderly person.
3. The services are too expensive.
4. The services are not trustworthy.
5. There are no services that I can use.
6. I didn't know there are services I can use.
7. The elderly person doesn't want to use services.
8. Other (Specify: _____)

→ Skip to Q20-1) after responding

Q15-1) What are the care services the elderly care recipient has used in the past 1 month? Please select all services in order of usage frequency from the code below.

Q15-2) What is the type of the care service that you use?

Q15-3) How many days a week do you use this service on average?

Q15-4) How many hours a day do you use this service on average?

Q15-5) How much do you spend monthly to use this service on average? Please record the amount excluding subsidies.

Q15-6) Do you receive subsidies or vouchers to use this service?

Q15-7) How satisfied are you with this service?

Q15-1) Care service	Q15-2) Type of service	Q15-3) Days of use on average	Q15-4) Time of use per day on average (Cannot exceed 24 hours)		Q15-5) Monthly fees for service use on average (in ₩10,000)	Q15-6) Whether receive subsidy	Q15-7) Satisfaction of service use						
			Weekdays	Weekend			Yes	No	Very dissatisfied	Somewhat dissatisfied	Neutral	Some what satisfied	Very satisfied
[Code below]		:days :days	:hours :hours	:hours :hours			1	2	1	2	3	4	5
		:days :days	:hours :hours	:hours :hours			1	2	1	2	3	4	5
		:days :days	:hours :hours	:hours :hours			1	2	1	2	3	4	5
		:days :days	:hours :hours	:hours :hours			1	2	1	2	3	4	5
		:days :days	:hours :hours	:hours :hours			1	2	1	2	3	4	5

Q15-1) Code

[In-Home Care Services]

1. Elderly-elderly care service
2. Elderly daycare service
3. In-home bathing service
4. In-home nursing service
5. In-home housework service
6. In-home care service
7. Cognitive training service
8. Elder Caregiver (for person with dementia)
9. Domestic worker
10. Caregiver

[Institutions]

11. Temporary respite care service
12. Senior center, school for elderly
13. Senior day/night care center
14. Specialized dementia day/night care center

Q15-2) Code

1. Long-term Care Insurance
2. Public Voucher Service (Eldercare service)
3. Private service

- Q 16) Who controlled the decision that the elderly person would use the care services/institutions that the elderly person mainly uses?
1. Elderly person him/herself → Skip to Q17
 2. Elder's spouse
 3. Respondent
 4. Elder's son
 5. Elder's daughter
 6. Elder's daughter-in-law
 7. Elder's son-in-law
 8. Elder's sibling
 9. Elder's grandchild
 10. Elder's relative
 11. Other (Specify: _____)

- Q 16-1) Did you ask the elderly person's opinion when deciding to use the care service?
1. Yes
 2. No
- Q 16-2) Did the elderly person agree to use the care service?
1. Yes
 2. No

- Q 17) How closely do the following statements describe the care institutions or services that the elderly person mainly uses? Please respond regarding the care service the elder uses most frequently.

Statements about the care service	Strongly disagree	Some what disagree	Neutral	Some what agree	Strongly agree
1) I can usually influence the time for receiving care.	1	2	3	4	5
2) The staff usually informs me beforehand about changes in schedule or care activities.	1	2	3	4	5
3) I can freely discuss with the caregiver or institution about my questions or requests.	1	2	3	4	5
4) I receive enough information about the care from the caregiver or institution.	1	2	3	4	5

- Q 18) How financially helpful are the care subsidies you currently receive from the Long-term Care Insurance and/or public institutions in caring for this elder?
1. Not helpful at all
 2. Not too helpful
 3. Neutral
 4. Somewhat helpful
 5. Very helpful
-
8. Not applicable (don't receive subsidy)

- Q 19) Does the elderly pay the fees of using paid care services?

1. Yes, he/she covers all costs. → Skip to Q19-2
2. Yes, he/she contributes to the costs.
3. No

- Q 19-1) (Only if responded 2 or 3 in Q19) Does any other family member pay the fees for elderly person's care services? Please select all.

1. Elder him/herself or his/her spouse
 2. Elder's child/child-in-law
 3. Elder's grandchild
 4. Other (Specify: _____)
 5. None
-
8. The subsidies cover all costs.

- Q 19-2) (Only if responded 1 in Q19) Based on your household's standard of living, how do you feel about your family's expenditures on the elder's care services every month?

1. Very expensive
 2. Somewhat expensive
 3. Reasonable
 4. Not too expensive
 5. Very affordable
-
8. Not applicable (don't have expenses on care services)

Q 20-1) Over the past year, how much additional monthly fees did you spend on average to take care of the elderly excluding fees on paid care services?

Additional Fees

Fees spent on expendable medicine (prescriptions, gauze, antiseptics, etc), medical appliances (wheelchair, etc), special food like nutritional food for tube feeding, excluding expenses on paid care services.

(in ₩10,000) on average per month

Q 20-2) Over the past year, how much did you spend monthly on the elderly care recipient's medical fees on average?

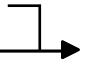
(in ₩10,000) on average per month

Q 20-3) Have you ever given a paid caregiver extra money or gifts?

1. Yes
2. No

Q 21) Do you receive any financial help from family members that you don't live with for taking care of the elderly person?

1. Yes, regularly
2. Yes, irregularly
3. No



Skip to Q21-2

8. Not applicable (No other family) → Skip to Q22

Q 21-1) (Only if responded 1 in Q21) How much financial help do you receive from other family members?

(in ₩10,000) on average per month

Q 21-2) (Only if responded 2 or 3 in Q21) How satisfied are you with the division of costs to take care of the elderly person among your family members?

1. Very dissatisfied
2. Somewhat dissatisfied
3. Neither dissatisfied or satisfied
4. Somewhat satisfied
5. Very satisfied

Q 22) How is your household's current financial situation compared to when you started taking care of the elderly person?

1. Our financial situation **worsened a lot** compared to when I first started taking care of the elderly.
2. Our financial situation **slightly worsened** compared to when I first started taking care of the elderly.
3. There **isn't much difference** in our financial situation.
4. Our financial situation **slightly improved** compared to when I first started taking care of the elderly.
5. Our financial situation **improved a lot** compared to when I first started taking care of the elderly.

Q 23) Are you currently a 'family elderly care worker'?

1. Yes
2. No → Skip to Q24

Q 23-1) (Only if responded 1 in Q23) If you are a family elderly care worker, which of the following applies to you?

1. Only take care of my family member(s) as a family elderly care worker
2. Work other jobs in addition to taking care of my family member(s) as a family elderly care worker

Q 24) In the past 1 year, have you ever used a **vacation subsidy** or care service to take a rest from care responsibilities for awhile?

1. Yes → Skip to Q25
2. No

Q 24-1) (Only if responded 2 in Q24) If not, why not?

1. I did not know about such systems or services .
2. I knew about the systems or services, but I wasn't eligible to use them.
3. I didn't want someone else to take care of the elderly person.
4. I didn't feel the need to use the service.
5. Other (Specify: _____)

Q 25) I will ask about different scenarios that may happen while you take care of the elderly person. What do you think about the following statements based on your general experience of taking care of the elderly person?

Scenarios of taking care of the elderly person	Strongly disagree	Somewhat disagree	Neutral	Somewhat agree	Strongly agree
1) I usually take care of the elderly person by myself (alone with the elderly).	1	2	3	4	5
2) I have time to eat my meals without distraction.	1	2	3	4	5
3) There are times when I have to take care of multiple tasks at once while taking care of the elder.	1	2	3	4	5
4) There are times when I need to help the elderly to move/walk or carry something heavy.	1	2	3	4	5
5) I need to watch the elder at all times.	1	2	3	4	5

Q 26) Below is a list of experiences you could have as you take care of the elderly person. What are your thoughts?

List	Strongly disagree	Somewhat disagree	Neutral	Somewhat agree	Strongly disagree
1) Taking care of the elderly is meaningful work for me.	1	2	3	4	5
2) Taking care of the elderly allows personal improvements.	1	2	3	4	5
3) Taking care of the elderly allows me to feel proud.	1	2	3	4	5
5) Taking care of the elderly is complicated by unrealistic expectations and demands from family members.	1	2	3	4	5
8) I feel like I'm losing my life by taking care of the elder.	1	2	3	4	5
9) I want to be free from this situation.	1	2	3	4	5

* The following are questions regarding relationships between you and the elderly person, and between you and other family members.

Q 27) What are your thoughts on the following statements regarding relationships between you and the elderly person and between you and other family members?

List	Strongly disagree	Somewhat disagree	Neutral	Somewhat agree	Strongly agree
1) I have a good relationship with the elderly person.	1	2	3	4	5
2) The elderly person does not agree with my opinions very often.	1	2	3	4	5
3) I feel angry at other family members who don't provide direct care for the elderly.	1	2	3	4	5

Q 28) How grateful are the elder's other family members that don't live with you about the fact that you're taking care of the elderly person?

- 1. Not grateful at all
- 2. Only express superficial gratitude
- 3. Truly grateful

-
- 8. Not applicable (No other family)

Q 28-1) Only respond if you're living with your parents-in-law. How grateful is your spouse about the fact that you're taking care of his (grand)parents?

- 1. Not grateful at all
- 2. Only express superficial gratitude
- 3. Truly grateful

-

- 8. Not applicable (No spouse; don't care for spouse's (grand)parents)

Q 29) How did your relationships with other family members as listed below change compared to before taking care of the elder?

Q29-1) Based on relationship with elderly person	Q29-2) Relationship List	Improved a lot	Slightly improved	Same as before	Slightly worsened	Worsened a lot	Not applicable
1. If respondent is elderly person's spouse	1) The elderly and respondent	1	2	3	4	5	X
	2) The elderly and respondent's children	1	2	3	4	5	8
	3) Respondent's children and respondent	1	2	3	4	5	8
2. If respondent is not elderly person's spouse	1) The elderly and respondent	1	2	3	4	5	X
	2) The elderly and respondent's spouse	1	2	3	4	5	8
	3) The elderly and respondent's children	1	2	3	4	5	8
	4) Respondent and respondent's spouse	1	2	3	4	5	8
	5) Respondent and respondent's children	1	2	3	4	5	8

Q 30) In your opinion, how much of eldercare is the government's responsibility? Record within the range of 0~100%.

	%
--	---

Code

Government has no responsibility at all. Neutral Government is responsible for all eldercare.

0	10	20	30	40	50	60	70	80	90	100
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Q 31) If you or someone else who was scheduled to take care of the elderly person has an emergency and cannot take care of the elderly person, who do you usually call for help?

1. Elderly's spouse
2. Elderly's son
3. Elderly's daughter-in-law
4. Elderly's daughter
5. Elderly's son-in-law
6. Elderly's grandchild
7. Elderly's sibling or other relative
8. Elderly's neighbor or friend
9. Use outside paid services
10. Other (Specify: _____)

98. Nowhere to ask for help

Q 32) Are you interested in using a live-in care facility for the elder in the future?

1. I will consider the live-in care facility if the elderly's health deteriorates.
2. I will most likely not use the live-in care facility even if the elder's health deteriorates. → Skip to Q32-1)
3. I don't know.

→ Skip to Q33)

Q 32-1) (Only if responded 2 in Q32) If not, why not?

1. Because the elder's feelings might get hurt
2. To avoid conflicts with other family members (siblings, etc)
3. To save the family's honor or social reputation
4. To avoid the elder's health from deteriorating due to change of environment
5. Because that is not doing one's duty by the elderly
6. Because the institution might not provide proper care to the elder
7. Because the elderly might not want to socialize with other people in the institution
8. Other (Specify: _____)

* Now I will ask about how much your family members contribute to taking care of the elderly person.

Q 33 How much time does your spouse spend taking care of the elderly person on average? Please respond regarding the past month.

(If spouse did not take care of elderly person at all, please record '0')

- days during the weekdays
 hours minutes on a weekday
- days during the weekend
 hours minutes on a weekend day

8. No spouse or taking care of spouse

→ Skip to Q34)

Q 33-1) If you could choose, how much time would you like to care for the elderly person on average?

(If you don't want to care for the elderly person at all, please record '0')

- days during the weekdays
 hours minutes on a weekday
- days during the weekend
 hours minutes on a weekend day

Q 34) Do you have family members that don't live with you but visits the elderly person at least once a week to care for him/her? If so, please select them all.

Family members that visit and care for elderly person	Yes	No	Not applicable (or respondent him/herself)
1) Elderly's son	1	2	8
2) Elderly's daughter-in-law	1	2	8
3) Elderly's daughter	1	2	8
4) Elderly's son-in-law	1	2	8
5) Elderly's sibling	1	2	8
6) Elderly's other relative (Specify: _____)	1	2	8

Q 35) In your opinion, how much do your family members participate in taking care of the elderly person? If entire eldercare work is 100%, please record what % of the total work is done by other family members.

 %

Code

No participation at all
(You do all of the Neutral All of the carework is
carework)

0	10	20	30	40	50	60	70	80	90	100
---	----	----	----	----	----	----	----	----	----	-----

Q 36) How satisfied are you with the division of care time for the elderly person among your family members?

1. Very satisfied
2. Somewhat satisfied
3. Neither satisfied nor dissatisfied
4. Somewhat dissatisfied
5. Very dissatisfied

Q 37) Overall, how satisfied are you regarding the care arrangement of the elderly person?

1. Very satisfied
2. Somewhat satisfied
3. Neither satisfied nor dissatisfied
4. Somewhat dissatisfied
5. Very dissatisfied

Q 38) Overall, how satisfied is the elderly person with his/her care in your opinion?

1. Very satisfied
2. Somewhat satisfied
3. Neither satisfied nor dissatisfied
4. Somewhat dissatisfied
5. Very dissatisfied

* Now I will ask about any additional elderly people you're currently taking care of other than the elderly person about whom you've responded up to now.

Q 39) Are there any other elderly people who need care living with you in your household, other than the elderly person you've been responding about?

1. Yes

2. No → Skip to Q40)

ID	Q39-1) Relationship with Respondent Code	Q39-2) Long-term Care Insurance Grade Code	Q39-3) Dementia Diagnosis			Q39-4) Living in institution or hospital Yes	Q39-5) Average monthly care expenses (in past 3 months, in ₩10,000)
			Mild	Moderate	Severe		
1			1	2	3	8	1 2
2			1	2	3	8	1 2

Reference

Care expenses refer to total expenses on paid care services, expendable medicine (prescriptions, gauze, antiseptics, etc), medical appliances (wheelchair, etc), and special food like nutritional food for tube feeding.

Q 40) Are there any other elderly people who you don't live with but visit at least once a month regularly or help financially? Please exclude the elderly person you've been responding about or elderly people living with you.

1. Yes

2. No → Skip to Q41)

ID	Q40-1) Relationship with respondent	Q40-2) Long-term Care Insurance Grade	Q40-3) Dementia Diagnosis			Q40-4) Living in institution or hospital		Q40-5) Average monthly financial support (in past 3 months, in ₩10,000)	Q40-6) Visit Frequency						
	[See code below]		Mild	Modera te	Severe	Not applica ble	Yes	No	Multiple times a day	Once a day	3+ times a week	1-2 times a week	1-2 times a month		
1			1	2	3	8	1	2			1	2	3	4	5
2			1	2	3	8	1	2			1	2	3	4	5

Q40-1) Code

- 1. Father
- 2. Mother
- 3. Father of spouse
- 4. Mother of spouse
- 5. Grandparent
- 6. Other relative

Q40-2) Code

- 1. Grade 1
- 2. Grade 2
- 3. Grade 3
- 4. Grade 4
- 5. Grade 5
- 6. Cognitive support
- 7. Other: Type A
- 8. Other: Type B
- 9. Other: Type C
- 98. Not applicable

* I will now ask about the quality of your life in general.

Q 41) How satisfied are you with your life in general?

- 1. Very satisfied
- 2. Somewhat satisfied
- 3. Neither satisfied nor dissatisfied
- 4. Somewhat dissatisfied
- 5. Very dissatisfied

Q 42) How much responsibility do you feel for the health and safety of the elderly person you take care of?

I feel % responsibility for the health and safety of the elderly person I take care of.

Code

Not my responsibility at all ← Neutral → Entirely my responsibility



Q 43) In general, how much physical difficulty do you have taking care of the elderly person?

- 1. Not difficult at all
- 2. Not too difficult
- 3. Normal
- 4. Slightly difficult
- 5. Very difficult

Q 44) In general, how much stress do you have taking care of the elderly person?

- 1. Not stressful at all
- 2. Not too stressful
- 3. Normal
- 4. Slightly stressful
- 5. Very stressful

Q 45) Do you feel that you are short on time?

- 1. Always feel short on time
- 2. Sometimes feel short on time
- 3. Don't usually feel short on time
- 4. Never feel short on time

Q 46) Do you have the following experiences related to taking care of the elderly person? Please respond for every item.

List	Strongly disagree	Somewhat disagree	Neutral	Somewhat agree	Strongly agree
1) I don't get enough sleep because I need to take care of the elder.	1	2	3	4	5
2) I don't have enough time to take care of other family members because I need to take care of the elder.	1	2	3	4	5
3) I don't have enough time to do necessary housework because I need to take care of the elderly.	1	2	3	4	5
4) I don't have enough time to socialize like meeting friends or attending meetings because I need to take care of the elder.	1	2	3	4	5
5) I don't have enough leisure time because I need to take care of the elderly.	1	2	3	4	5

Q 47) How much fatigue do you usually feel after a normal workday?

1. Very tired
2. Slightly tired
3. Not very tired
4. Not tired at all

Q 48) How's your own health in general?

1. Very unhealthy
2. Somewhat unhealthy
3. Normal
4. Somewhat healthy
5. Very healthy

Q 49) Has your health changed in the past 1 year due to taking care of the elderly person? Please select all that apply.

1. I feel more tired.
2. I feel more depressed.
3. I experienced a loss in appetite.
4. It's hard to fall asleep.
5. I feel stressed.
6. I feel physically strained.
7. My health has deteriorated (developed an illness, etc.).
8. My pre-existing illness has been exacerbated.
9. Other (Specify: _____)
98. Not applicable (No changes in health)

Q 50) How much free time for leisure, exercise, and/or rest do you have each day on average?

Leisure Time

Time that can be used to do leisure activities, exercise, rest, etc. excluding the time that is used for work, housework, sleeping at night, having meals, and time spent with the elderly person.

[] minutes per day

* Lastly, I will ask you about some general characteristics.

Q 51) Have your employment or job-seeking activities been affected by your current elder carework?

1. Yes
2. No → **Skip to Q52)**

Q 51-1) If yes, please select all that apply.

1. I quit my job or business. → **Skip to Q51-2)**
2. I switched to a less demanding job.
3. I reduced my work hours.
4. I reduced my work tasks and responsibilities.
5. I adjusted my work hours for flexibility.
6. I switched to working from home.
7. I moved.
8. I gave up/declined better work opportunities.
9. Other (Specify: _____)

→ For those who responded 2-9, skip to Q52
after responding

Q 51-2) (Only if responded 1 in Q51-1) What year did you quit your job?

Year: []

Q 51-3) (Only if responded 1 in Q51-1) What was your monthly income before you quit your job? If possible, tell us the pre-tax amount on average.

(Amount in ₩10,000)

- | | |
|--------------|------------------|
| 1. Below 100 | 6. 300-350 |
| 2. 100-150 | 7. 350-400 |
| 3. 150-200 | 8. 400-450 |
| 4. 200-250 | 9. 450-500 |
| 5. 250-300 | 10. 500 or above |
| 6. 250-300 | |

Q 52) What do you think about the following statements?

	Strongly disagree	Somewhat disagree	Somewhat agree	Strongly agree
1) Employment is critical/needed for my personal growth and satisfaction.	1	2	3	4
2) A married couple should manage income/wages separately.	1	2	3	4
3) It is ideal for a man to have a job and for a woman to look after the household.	1	2	3	4
4) A married couple becomes equal if the woman also works.	1	2	3	4

Q 53) For the following items, please record the code that applies to you and your spouse.

If you've never been married, or are separated/divorced/widowed, please only respond to Q53-1) 'Respondent'.

	List	Q 53-1) Respondent	Q 53-2) Spouse
1) Education Level	1. No schooling 2. Primary school graduate 3. Middle school graduate 4. High school graduate 5. College graduate 6. Graduate school graduate * Currently enrolled and drop out do not count as graduate.		
2) Employment Status	1. Employed 2. On leave 3. Unemployed, looking for work 4. Unemployed, not looking for work		
3) Employment Type	1. Regular employee 2. Temporary employee 3. Daily employee 4. Self-employed with employees 5. Self-employed with no employees 6. Unpaid family work		
4) Occupation	1. Administrative/managerial 2. Professional 3. Clerical 4. Service 5. Sales 6. Farming, fishing, forestry 7. Technician 8. Machinery, Engineer 9. Simple laborer 10. Soldier 11. Other (Specify: _____)		
5) Employment Contract	1. Full-time 2. Part-time		
6) Average Monthly Income (Amount in ₩10,000)	1. Below 100 2. Between 100-150 3. Between 150-200 4. Between 200-250 5. Between 250-300 6. Between 300-350 7. Between 350-400 8. Between 400-450 9. Between 450-500 10. 500 or above		
7) Average weekly work hours	_____ hours		
8) Commute Time	Time leave house for work <input type="text"/> : <input type="text"/> Time arrive at house from work <input type="text"/> : <input type="text"/>		
9) Work on weekends	1. Work regularly on weekends 2. Work irregularly on weekends 3. Don't work on weekends		

Q 54) What is the current tenure of your (respondent's) household?

1. Owner-occupied
2. Key money deposit (*jeonse*, no monthly rent)
3. Monthly rent with security deposit
4. Monthly rent with no security deposit
5. Free of charge (includes company housing and official residence)

Q 55) What is the average monthly income and expenses of your household? Household income includes wage income, financial income, pension income and transfer income. If possible, please respond in pre-tax amount. (Amount in ₩10,000)

Q55-1) Average monthly household income	<input type="text"/>
Q55-2) Average monthly household expenditure	<input type="text"/>

1. Below 100
2. 100-150
3. 150-200
4. 200-250
5. 250-300
6. 300-350
7. 350-400
8. 400-450
9. 450-500
10. 500-550
11. 550-600
12. 600-650
13. 650-700
14. 700-750
15. 750-800
16. 800 or above

* Please respond only if you're currently employed.

Q 56) Do you think that your job and carework for the elderly are well balanced?

My job negatively affects my care for the elderly. Well balanced My care for the elderly negatively affects my job.

-2 -1 0 1 2

Q 57) How much time would you like to spend working in your job in order to take good care of the elderly?

days in a week

hours and minutes in a day

Q 58) If you were guaranteed a monthly income of ₩1,500,000 for the next 3 years, would you quit your job and take care of the elderly person yourself?

1. Yes
2. No

Q 58-1) (Only if responded 2 in Q58) How much guaranteed monthly income for the next 3 years would make you quit your job and take care of the elderly person yourself?

(in ₩10,000) monthly

998. I will not quit my job and take care of the elderly myself even if I have guaranteed income.

Thank you very much for responding.

To Record After Investigation

Respondent's Name			
Respondent's Phone Number			
Interview Date	Year: 2018 Month: <input type="text"/> Day: <input type="text"/>		
Interview Time	Start time: <input type="text"/> : <input type="text"/> End time: <input type="text"/> : <input type="text"/> Total: <input type="text"/> minutes		

Investigator	Name			
	ID			
Data Validator	Name			
	ID			
Validation	1. Complete 2. Incomplete		(Signature)	