



110-054 서울시 종로구 사직동 208 전화 02-3702-2100, 팩스 02-3702-2655, 한국갤럽 홈페이지 www.gallup.co.kr, 갤럽패널홈 panel.gallup.co.kr

한국갤럽 GALLUP KOREA affiliated with GALLUP INTERNATIONAL

Gallup 2018-166-007-01

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## 2018 South Korea Paid Carework 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. Daejeon
	7. Ulsan	8. Sejong	9. Gyeonggi	10. Gangweon	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 (eup, myeon)	
Type of Carework	1. Home-visit		2. Institution		3. Informal personal contract	

Principal Research Institution



서울대학교

Investigating Agency



■ Gallup Korea || Eunji Lee / Eunhye Jang || ☎ 02-3702-2686 / 2119

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

Eldercare

※ I will ask about the type, intensity, and time spent on carework. In this survey, "carework" refers to paid work related to caring for a person who needs help with daily activities.

Q 1) Over the past month, how many **days per week** did you do paid carework on average? Please respond separately for weekdays and weekend.

\* Please record '0' if you did not engage in paid carework.

days during the week

days during the weekend

Q 2) Over the past month, how many **hours per day** did you do carework on average? Please record separately for a weekday and a day of the weekend.

\* Please record '0' if you did not engage in paid carework.

hours  minutes on a weekday

hours  minutes on a weekend day

Q 3) Have you done any **night shift carework** over the past month?

※ **Night shift** refers to work between the hours of 6pm-6am the next day.

1. Yes

2. No →

Q 3-1) (Only if responded 1 in Q3) How many **days per week** do you work night shifts on average?

days per week

Q 3-2) (Only if responded 1 in Q3) What time does your **night shift carework** start and end usually? If the time slot changes frequently, please respond regarding the most recent night shift.

(E.g.: Work from 7:30pm to 2:30am the next day

= Record as 19:30, 02:30)

Start time:  :

End time:  :

Q 4) Where do you do your paid carework most of the time? Please respond regarding your current workplace. Select all that apply.

1. Commute to and from care recipient's house
2. Reside and work at care recipient's house
3. Care for recipient at respondent's own house
4. Work at an institution or care center

Q 4-1) (Only if responded 1 in Q4) Over the past week, how many **houses** did you visit in a day on average?

houses

Q 5) How many care recipients have you taken care of over the past week?

1. 1 person
2. 2 people
3. 3 people
4. 4 people
5. 5 people or more

※ Now I will ask you about the elderly people to whom you are providing care. If you're taking care of more than 5 people, please select 5 people that require the most care hours or are the most strenuous to care for.

- Q 6-1) How old is the elderly person you're currently taking care of?
- Q 6-2) What is the sex of the elderly person you're currently taking care of?
- Q 6-3) Has she/he been diagnosed with dementia by a doctor?
- Q 6-4) What is his/her Long-term Care Insurance rating?
- Q 6-5) Where do you take care of the elderly person?
- Q 6-6) How long have you taken care of him/her?
- Q 6-7) How many times a week do you visit his/her house? If you take care of him/her in an institution, please select '0. Don't visit'.
- Q 6-8) (For home visits) How many hours do you take care of him/her in one visit?

ID	Q6-1) Age	Q6-2) Sex		Q6-3) Dementia Diagnosis		Q6-4) Long-term Care Insurance Grade Code 1. Grade 1 6. Cognitive support 2. Grade 2 7. Other: Type A 3. Grade 3 8. Other: Type B 4. Grade 4 9. Other: Type C 5. Grade 5 98. Not applicable	Q6-5) Carework Place					Q6-6) Years and months of care given		Q6-7) Number of visits per week						Q6-8) Average hours and minutes spent on 1 visit		
		Male	Female	Yes	No		Care recipient's house	Respondent's house	Other person's house	Institution/center	Other	years	months	Don't visit	1time	2times	3times	4times	5times	6times or more	hours	minutes
1		1	2	1	2		1	2	3	4	5			0	1	2	3	4	5	6		
2		1	2	1	2		1	2	3	4	5			0	1	2	3	4	5	6		
3		1	2	1	2		1	2	3	4	5			0	1	2	3	4	5	6		
4		1	2	1	2		1	2	3	4	5			0	1	2	3	4	5	6		
5		1	2	1	2		1	2	3	4	5			0	1	2	3	4	5	6		

Q 7) This is a question on specific care activities you engage in your carework. Over the past month, how many times have you done the following care activities and how difficult were they? If you work at an institution, please respond regarding one of the care recipients from Q 6). If you don't work at an institution and you're taking care of more than 1 person, please choose the care recipient you take care of the most (or with the highest carework intensity).

List	Elderly Care Recipient (ID: )										
	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 difficult 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 postures 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
14) 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

※ Now I will ask about the background and current work conditions of your carework. Carework refers to work related to caring for people who need help conducting daily activities.

Q 8) Are you the head of your household (main financial provider of your household)?

1. Yes                      2. No

Q 9) There are many jobs out there. What is the main reason you chose to do carework?

1. Satisfactory income
2. Work stability
3. Have work experience or majored in nursery, social work, or other care related work
4. Flexible work hours
5. Can't find work in other desired fields
6. Can't find work in fields related to work experience or major
7. Carework is the only type of work I'm capable of doing
8. Other (Specify: \_\_\_\_\_)

Q 10) When did you first start as a paid care worker?

Year:  :  :

Q 11) How did you start carework? Please choose all that apply.

1. Through taking care of a family member or an acquaintance
2. An acquaintance was doing carework
3. By introduction or recommendation from a friend or an acquaintance
4. Because I enjoy taking care of other people
5. Through volunteer work or a training opportunity
6. Saw an advertisement from a public institution, association, or private organization
7. Through a government campaign
8. Simply by coincidence
9. Other (Specify: \_\_\_\_\_)

Q 12) How long have you engaged in paid carework since the first time you started?

:  years       :  months

Q 13) Did you have any other jobs before you started carework?

1. Yes  
2. No →

Q 13-1)(Only if responded 1 in Q 13)

If yes, in what occupation did you work?

\* If you had multiple jobs, please respond regarding the job you had **immediately before** your care job.

1. Administrative/managerial
2. Professional
3. Clerical
4. Service
5. Sales
6. Farming, fishing, forestry
7. Technician
8. Machinery, Engineer
9. Simple laborer
10. Military
11. Other (Specify: \_\_\_\_\_)

Q 14) How did you meet the care recipient to whom you're currently providing care?

\* If currently taking care of multiple people, please respond regarding the care recipient you've taken care of for the **longest period**.

1. Assigned by workplace/care institution
2. Through an offline classified ad
3. Through an online classified ad
4. Met through volunteer work or training
5. Was introduced by a family member or an acquaintance
6. Was introduced by an HR company, organization, or association
7. From a religious organization
8. Other (Specify: \_\_\_\_\_)

Q 15) Have you signed an official written labor contract related to your current carework?

1. Yes → Skip to Q15-1)

2. No

3. Don't know → Skip to Q16)

Q 15-1) (Only if responded 1 in Q15) If yes, who did you sign a contract with?

1. The institution/center that the respondent commutes to and work for (e.g. nursing home)

2. The center/company that hired and dispatched the respondent to the care recipient

3. The household that the respondent visits and works for

4. Other (Specify: \_\_\_\_\_)

Q 15-2) (Only if responded 1 in Q15) Does the labor contract indicate the wage, work hours, and other working conditions?

1. Indicates them all

2. Indicates some items

3. Indicates none

Q 16) Are you expected to quit whenever the employer requests it even before the end of the contract?

1. Yes

2. No

3. Working period is not indicated in the contract

Q 17) Do you have regular holidays at your current workplace?

1. Yes

2. No → Skip to Q18-1)

Q 17-1) (Only if responded 1 in Q17) How many holidays do you have?

1. 1 day per week

2. 2 days per week

3. 3 days per week

4. 1 day every 2 weeks

5. Irregular holidays

6. Other (Specify: \_\_\_\_\_)

Q 17-2) (Only if responded 1 in Q17) Are your holidays paid?

1. Yes

2. No

Q 18-1) What is your main mode of transportation for commuting to and from work?

1. Bus

2. Subway

3. Car

4. Walk

5. Other (Specify: \_\_\_\_\_)

Q 18-2) How much time does it take to commute to work from your home on average?

hours minutes

Q 19) What type of employment do you have at your current workplace?

Employment Status

Regular employee

Either have 1 or more contracted years or continuous work without a set contracted period (Is subject to the employer's HR regulations or receives pension and bonus payments)

Temporary employee

Contract period between 1 month and 1 year (Including the case of extending the contract annually for the same employer)

Daily employee

Contract period of less than 1 month (Someone who is employed on a daily basis and receives daily payments)

1. Regular employee

2. Contract (up to 2 years) or dispatched employee

3. Temporary employee

4. Daily employee

Q 20) What is your wage schedule?

Please respond based on how wage is paid, now how it is received.

For example, a caregiver's wage that is calculated hourly is considered an hourly wage regardless of when the wage is received.

Monthly rates refer to cases where the wage is decided on a monthly level.

Wage contracted on a yearly level is considered a yearly rate even if you receive monthly wages.

1. Hourly

2. Daily

3. Weekly

4. Biweekly

5. Monthly

6. Yearly

7. Other (Specify: \_\_\_\_\_)

Q 21) What was your average monthly wage for caregiving over the past 3 months? (in ₩10,000)

- |                  |             |
|------------------|-------------|
| 1. Less than 50  | 2. 50-100   |
| 3. 100-150       | 4. 150-200  |
| 5. 200-250       | 6. 250-300  |
| 7. 300-350       | 8. 350-400  |
| 9. 400-450       | 10. 450-500 |
| 11. 500 or above |             |

Q 22) Are you satisfied with your current wage?

1. Yes  
2. No

Q 22-1) (Only if responded 2 in Q22)

If not, how much more income is appropriate? Please respond in terms of your wage schedule.

My current income + (monthly / weekly / hourly)

(₩10,000) more is appropriate.

Eg.

For monthly wage, monthly ₩\_\_\_\_\_0,000

For weekly wage, weekly ₩\_\_\_\_\_0,000

For hourly wage, hourly ₩\_\_\_\_\_0,000

※ This is a question regarding your work environment.

Q 23) The following statements pertain to your work environment. Please select the response that most accurately describes your work environment.

List	Strongly disagree	Somewhat disagree	Neutral	Somewhat agree	Strongly agree
1) I work more hours than the standard number of hours.	1	2	3	4	5
2) I can apply for holidays when I want to.	1	2	3	4	5
3) It's easy to change my work place to another institution or house.	1	2	3	4	5
4) My experience in carework is helpful for finding employment in a field outside of carework.	1	2	3	4	5
5) I have received enough training for my work.	1	2	3	4	5
6) My employer, the government, or HR company provides or finances training related to my work.	1	2	3	4	5
7) My experience in carework is helpful for finding employment in a field outside of carework.	1	2	3	4	5
8) It is very difficult to deal with the care recipient's family members.	1	2	3	4	5
9) (Eg.: I only do laundry for my care recipient and not for his/her family members.) The scope of my carework is very clear.	1	2	3	4	5
10) There are times when my work schedule gets cancelled without notice.	1	2	3	4	5
11) I am usually alone with my care recipient.	1	2	3	4	5
12) I need to watch my care recipient at all times.	1	2	3	4	5
13) I can take a rest when I want to.	1	2	3	4	5
14) I can use the bathroom freely.	1	2	3	4	5
15) I can eat my meals at work without disruption.	1	2	3	4	5
16) I am satisfied with my current work.	1	2	3	4	5
17) My current work is rewarding.	1	2	3	4	5
18) Carework allows for personal improvement.	1	2	3	4	5
19) I am proud of working as a careworker.	1	2	3	4	5

Q 24) How much time do you think it takes to get skilled at your work tasks?

1. Less than 1 month
2. 1 to 3 months
3. 4 to 6 months
4. 7 months to 1 year
5. 1 year or more

Q 25) Do you have any intention of changing jobs or occupation in the next year?

1. No, I want to continue to do carework.
2. Yes, I want to switch to a job outside of carework.
3. I'm not sure.

Skip to Q26)

Q 25-1) (Only if responded 2 in Q25) What is the reason you want to change to a job outside of carework? Choose two main reasons.

1 <sup>st</sup> reason		2 <sup>nd</sup> reason	
---------------------------	--	---------------------------	--

1. Not enough pay
2. Unstable employment
3. Unflexible work hours
4. Too much overtime
5. Carework is too physically demanding
6. Carework is too mentally demanding
7. My family doesn't like me doing carework
8. Because carework is not socially respected
9. Because the work is not enjoyable
10. Other (Specify: \_\_\_\_\_)

Q 26) How much responsibility do you feel for the health and safety of your care recipient(s)?

I feel  % responsibility for the health and safety of my care recipient(s).

Code

Not my responsibility at all      Neutral      Entirely my responsibility

0 10 20 30 40 50 60 70 80 90 100

Q 27) 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 28) 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

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

Q 29) 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 30) 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 31) How's your own health in general?

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



Q 32) Has your health changed since starting carework? 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 33) 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 34) Since July 1 of this year, a regulation mandating 30 minutes of rest for every 4 hours of work and 1 hour of rest for every 8 hours of work has been implemented I will ask about this new policy.

Are you currently using rest time between work hours?

1. Yes

2. No → Skip to Q36

Q 35) (Only if responded 1 in Q34)

Please respond regarding the following statements.

List	Yes	No
1) The rest time has helped relieve my fatigue.	1	2
2) The rest time has helped me take care of the elderly.	1	2
3) My income/wages have decreased due to the rest time.	1	2
4) I finish work later because of the rest time.	1	2

※ The following are general questions for statistical use.

Q 36) What is your sex?

1. Female

2. Male

Q 37) What is your age?

:  
:

Q 38) What is your education level?

(Currently enrolled and on leave don't count as graduate.)

1. No schooling

2. Primary school graduate

3. Middle school graduate

4. High school graduate

5. College graduate

6. Graduate school graduate

Q38-1) (Only if responded 5 or 6 in Q38) What did you major in your most recent degree?

1. Child welfare

2. Early childhood education

3. Social welfare

4. Child care and education

5. Special education

6. Home management

7. Nutrition

8. Nursing

9. Education

10. Other (\_\_\_\_\_)

Q 39) What kind of carework license do you hold? Please select all that apply.

1. Caregiver for the sick

2. Physical therapist

3 Nurse's aide

4. Nursing teacher

5. Kindergarten teacher

6. Social worker

7. Nurse

8. Eldercare social worker

9. Elder care giver

10. Babysitter

11. Other (Specify: \_\_\_\_\_)

98. No license → Skip to Q40

Q 39-1) When did you obtain your first care license?

Year: 
 : : :

Q 40) What is your current marital status?

1. Never married → Skip to Q41)

2. Currently married

3. Divorced

4. Widowed → Skip to Q40-3)

Q 40-1) (Only if responded 2 in Q40) What is your spouse's employment status?

1. Full-time employment

2. Part-time employment

3. Unemployed, looking for work

4. Unemployed, not looking for work

5. On leave from work

Q 40-2) (Only if responded 1 or 2 in Q40-1) What is the average monthly income of your spouse? (in ₩10,000)

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 or above

Q 40-3) (Only if responded 2-4 in Q40) How many children do you have in total?

□

Q 40-4) (Only if responded 2-4 in Q40) Do you have any children under the age of 10?

1. Yes

2. No → Skip to Q41)

Q 40-5) (Only if responded 1 in Q40-4) If yes, how old is he/she? If you have more than 1 child under the age of 10, please record the youngest child's age.

□

Q 40-6) (Only if responded 1 in Q40-4) Who takes care of your child(ren) while you work? Please select all that apply.

1. Spouse

2. Parents/parents-in-law

3. Siblings or other relatives

4. Neighbor, friend, acquaintance

5. Institution/center (e.g. daycare center, kindergarten, etc)

6. Home-visit service (e.g. babysitter, visiting child caregiver)

7. Other (Specify: \_\_\_\_\_)

Q 41) Do you live with an elderly person (aged 65 or above) who needs help physically or mentally?

1. Yes

2. No → Skip to Q42)

Q 41-1) (Only if responded 1 in Q41) Who takes care of the elderly person while you work? Please select all that apply.

1. Elderly person's spouse

2. Respondent's spouse

3. Respondent's children

4. Siblings or other relatives

5. Neighbor, friend, or acquaintance

6. Institution/center (e.g. senior daycare center, etc)

7. Home-visit service (e.g. babysitter, visiting child caregiver)

8. Other (Specify: \_\_\_\_\_)

Q 42) Who usually does the housework at your home?

1. Respondent

2. Spouse

3. Respondent and spouse together

4. Respondent and child(ren) together

5. Child/child-in-law

6. Parents/parents-in-law

7. Other (Specify: \_\_\_\_\_)

Q 43) Do you have someone who can take care of you or your family when you're sick or in need of help?

1. Yes →

2. No →

Q 43-1) (Only if responded 1 in Q43) If yes, who is it?

1. Spouse
2. Parent/parent-in-law
3. Child
4. Other relative
5. Friend, neighbor, or acquaintance
6. Other (\_\_\_\_\_)

Q 44) What is the current tenure of your 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 45) Over the past year, what was 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 with a pre-tax amount. (Amount in ₩10,000)

Q 45-1) Average monthly household income	Q 45-2) Average monthly household expenditure

- |             |                  |
|-------------|------------------|
| 1. Below100 | 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 |

Thank you very much for responding.

To Record After Investigation

Respondent's Name	
Respondent's Phone Number	
Interview Date	<input type="text" value="m"/> : <input type="text" value="m"/> / <input type="text" value="d"/> : <input type="text" value="d"/> / 2018
Interview Time	Start time: <input type="text"/> : <input type="text"/> End time: <input type="text"/> : <input type="text"/> Total response time: <input type="text"/> minutes

Investigator	Name	
	ID	<input type="text"/>
Data Validator	Name	
	ID	<input type="text"/>
	Validation	1. Complete 2. Incomplete (Signature)



110-054 서울시 종로구 사직동 208 전화 02-3702-2100, 팩스 02-3702-2655, 한국갤럽 홈페이지 www.gallup.co.kr, 갤럽패널홈 panel.gallup.co.kr

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Gallup 2018-166-007-01

I D		
D	:	:

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### Introduction

Greetings!

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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. Daejeon
	7. Ulsan	8. Sejong	9. Gyeonggi	10. Gangweon	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 (eup, myeon)	
Type of Carework	1-1. Public home-visit childcare			1-2. Private home-visit childcare		
	2-1. Daycare center (public/corporate)			2-2. Daycare center (private/family)		

Principal Research Institution



서울대학교

Investigating Agency



■ Gallup Korea || Eunji Lee / Eunhye Jang || ☎ 02-3702-2686 / 2119

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

## Childcare

\* I will ask about the type, intensity, and time spent on carework. In this survey, "carework" refers to paid work related to caring for a person who needs help with daily activities.

Q 1) Over the past month, how many **days per week** did you do paid carework on average? Please respond separately for weekdays and weekend.

\* Please record '0' if you did not engage in paid carework.

days during the week

days during the weekend

Q 2) Over the past month, how many **hours per day** did you do carework on average? Please record separately for a weekday and a day of the weekend.

\* Please record '0' if you did not engage in paid carework.

hours  minutes on a weekday

hours  minutes on a weekend day

Q 3) Have you done any **night shift carework** over the past month?

\* **Night shift** refers to work between the hours of 6pm-6am the next day.

1. Yes

2. No

Q 3-1) (Only if responded 1 in Q3) How many **days per week** do you work night shifts on average?

days per week

Q 3-2) (Only if responded 1 in Q3) What time does your **night shift carework** start and end usually? If the time slot changes frequently, please respond regarding the most recent night shift.

Start time:  :  End time:  :

Q 4) Where do you do your paid carework most of the time? Please respond regarding your current workplace. Select all that apply.

\* In the case of home-based daycare center, please select '4. Work at an institution or care center' even if carework is done at respondent's own house.

1. Commute to and from care recipient's house
2. Reside and work at care recipient's house
3. Care for recipient at respondent's own house
4. Work at an institution or care center

Q 4-1) (Only if responded 1 in Q4) Over the past week, how many **houses** did you visit in a day on average?

houses

Q 5) How many care recipients have you taken care of over the past week?

1. 1 person
2. 2 people
3. 3 people
4. 4 people
5. 5 people or more

\* Now I will ask about up to 5 children to whom you're currently providing care. If you work at a childcare center, please choose one child you take care of the most and respond only regarding this child.

Q 6-1) How old is the child you're currently take care of?

Q 6-2) What is his/her sex?

Q 6-3) Where do you take care of this child?

Q 6-4) How long have you taken care of him/her?

Q 6-5) How many times a week do you visit his/her house?

Q 6-6) (For home visits) How many hours do you take care of this child in one visit?

ID	Q6-1) Age		Q6-2) Sex		Q6-3) Carework Place					Q6-4) Years and months of care given		Q6-5) Number of visits per week						Q6-6) Average hours and minutes spent on 1 visit	
	Male	Female	Care recipient's house	Respondent's house	Other person's house	Institution/center	Other	years	months	Don't visit	1 time	2 times	3 times	4 times	5 times	6 times or more	hours	minutes	
1	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	
2	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	
3	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	
4	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	
5	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	

Q 7) This is a question on specific care activities you engage in your carework. Over the past month, how many times have you done the following care activities and how difficult were they? If you work at a daycare center, please respond regarding the child chosen in Q6; if you don't work at a daycare center, please respond regarding the child you take care of the most.

List	Care Recipient Child (Child ID: <input type="text"/> )										
	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 difficult 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, washing their hands, 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) Holding child, carrying child on back, helping child move around	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)	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 outdoor playgrounds)	0	1	2	3	4	5	1	2	3	4	5
14) Help with transportation (using public transportation, giving a ride in the car, commuting to/from daycare/school, etc.)	0	1	2	3	4	5	1	2	3	4	5

Q 7-7) (Respond only if you work at a daycare center) Which age group classes are you in charge of? Please select all that apply.

- 1. 0 year old      2. 1 year old      3. 2 years old      4. 3 years old      5. 4 years old
- 6. 5 years old      7. Disabled children      8. Short-term care      9. Extended hour care
- 10. Other (Specify: \_\_\_\_\_)



Q 15) Have you signed an official written **labor contract** related to your current carework?

- 1. Yes → Skip to Q15-1)
- 2. No
- 3. Don't know → Skip to Q16)

Q 15-1) (Only if responded 1 in Q15) If yes, who did you sign a contract with?

- 1. The institution/center that the respondent commutes to and work for (e.g. elementary school, daycare center, etc)
- 2. The center/company that hired and dispatched the respondent to the care recipient
- 3. The household that the respondent visits and works for
- 4. Other (Specify: \_\_\_\_\_)

Q 15-2) (Only if responded 1 in Q15) Does the labor contract indicate the **wage, work hours, and other working conditions?**

- 1. Indicates them all
- 2. Indicates some items
- 3. Indicates none

Q 16) Are you expected to quit whenever the employer requests it even before the end of the contract?

- 1. Yes
- 2. No
- 3. Working period is not indicated in the contract

Q 17) Do you have **regular holidays** at your current workplace?

- 1. Yes
- 2. No → Skip to Q18-1)

Q 17-1) (Only if responded 1 in Q17) How many holidays do you have?

- 1. 1 day per week
- 2. 2 days per week
- 3. 3 days per week
- 4. 1 day every 2 weeks
- 5. Irregular holidays
- 6. Other (Specify: \_\_\_\_\_)

Q 17-2) (Only if responded 1 in Q17) Are your holidays paid?

- 1. Yes
- 2. No

Q 18-1) What is your **main** mode of transportation for commuting to and from work?

- 1. Bus
- 2. Subway
- 3. Car
- 4. Walk
- 5. Other (Specify: \_\_\_\_\_)

Q 18-2) How much time does it take to commute to work from your home on average?

hours 
  minutes

Q 19) What type of employment do you have at your current workplace?

**Employment Status**

•Regular employee	Either have 1 or more contracted years or continuously work without a set contracted period (Is subject to the employer's HR regulations or receives pension and bonus payments)
•Temporary employee	Contract period between 1 month and 1 year (Including the case of extending the contract annually for the same employer)
•Daily employee	Contract period of less than 1 month (Someone who is employed on a daily basis and receives daily payments)

- 1. Regular employee
- 2. Contract (up to 2 years) or dispatched employee
- 3. Temporary employee
- 4. Daily employee

Q 20) What is your wage schedule?

**Please respond based on how wage is paid, now how it is received.**

- For example, a caregiver's wage that is calculated hourly is considered an hourly wage regardless of when the wage is received.
- Monthly rates refer to cases where the wage is decided on a monthly level.
- Wage contracted on a yearly level is considered a yearly rate even if you receive monthly wages.

- 1. Hourly
- 2. Daily
- 3. Weekly
- 4. Biweekly
- 5. Monthly
- 6. Yearly
- 7. Other (Specify: \_\_\_\_\_)



Q 21) What was your average monthly wage for caregiving over past 3 months? (in ₩10,000)

- |                  |             |
|------------------|-------------|
| 1. Less than 50  | 2. 50-100   |
| 3. 100-150       | 4. 150-200  |
| 5. 200-250       | 6. 250-300  |
| 7. 300-350       | 8. 350-400  |
| 9. 400-450       | 10. 450-500 |
| 11. 500 or above |             |

Q 22) Are you satisfied with your current wage?

1. Yes  
2. No

Q 22-1) (Only if responded 2 in Q22)

If not, how much more income is appropriate? Please respond in terms of your wage schedule.

My current income + (monthly / weekly / hourly)

(₩10,000) more is appropriate.

Eg.

For monthly wage, monthly ₩\_\_\_\_\_0,000

For weekly wage, weekly ₩\_\_\_\_\_0,000

For hourly wage, hourly ₩\_\_\_\_\_0,000

※ This is a question regarding your work environment.

Q 23) The following statements pertain to your work environment. Please select the response that most accurately describes your work environment.

List	Strongly disagree	Somewhat disagree	Neutral	Somewhat agree	Strongly agree
1) I work more hours than the standard number of hours.	1	2	3	4	5
2) I can apply for holidays when I want to.	1	2	3	4	5
3) It's easy to change my work place to another institution or house.	1	2	3	4	5
4) My experience in carework is helpful for finding employment in a field outside of carework.	1	2	3	4	5
5) I have received enough training for my work.	1	2	3	4	5
6) My employer, the government, or HR company provides or finances training related to my work.	1	2	3	4	5
7) It is very difficult to deal with the care recipient's family members.	1	2	3	4	5
8) (E.g.: I only do laundry for my care recipient and not for his/her family members.) The scope of my carework is very clear.	1	2	3	4	5
9) There are times when my work schedule gets cancelled without notice.	1	2	3	4	5
10) I am usually alone with my care recipient.	1	2	3	4	5
11) I need to watch my care recipient at all times.	1	2	3	4	5
12) I can take a rest when I want to.	1	2	3	4	5
13) I can use the bathroom freely.	1	2	3	4	5
14) I can eat my meals at work without disruption.	1	2	3	4	5
15) I am satisfied with my current work.	1	2	3	4	5
16) My current work is rewarding.	1	2	3	4	5
17) Carework allows for personal improvement.	1	2	3	4	5
18) I am proud of working as a careworker.	1	2	3	4	5

Q 24) How much time do you think it takes to get skilled at your work tasks?

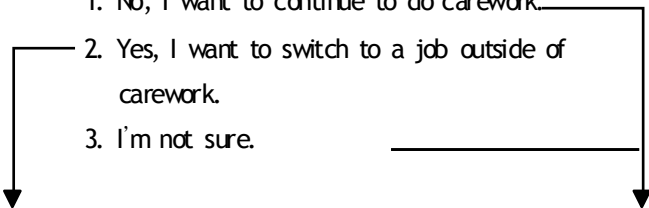
1. Less than 1 month
2. 1 to 3 months
3. 4 to 6 months
4. 7 months to 1 year
5. 1 year or more

Q 25) Do you have any intention of changing jobs or occupation in the next year?

1. No, I want to continue to do carework.

2. Yes, I want to switch to a job outside of carework.

3. I'm not sure.



Skip to Q26)

Q 25-1) (Only if responded 2 in Q25) What is the reason you want to change jobs to a job outside of carework? Choose two main reasons.

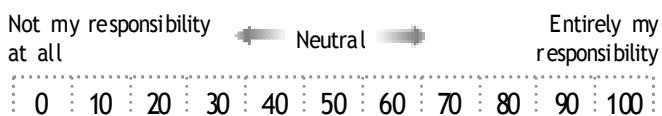
1 <sup>st</sup> reason		2 <sup>nd</sup> reason	
---------------------------	--	---------------------------	--

1. Not enough pay
2. Unstable employment
3. Unflexible work hours
4. Too much overtime
5. Carework is too physically demanding
6. Carework is too mentally demanding
7. My family doesn't like me doing carework
8. Because carework is not socially respected
9. Because the work is not enjoyable
10. Other (Specify: \_\_\_\_\_)

Q 26) How much responsibility do you feel for the health and safety of your care recipient(s)?

I feel  % responsibility for the health and safety of my care recipient(s).

Code



Q 27) 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 28) 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

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

Q 29) 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 30) 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 31) How's your own health in general?

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

Q 32) Has your health changed since starting carework?

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 33) 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 34) Since July 1 of this year, a regulation mandating 30 minutes of rest for every 4 hours of work and 1 hour of rest for every 8 hours of work has been implemented I will ask about this new policy.  
Are you currently using rest time between work hours?

1. Yes
2. No

→ Skip to Q36)

Q 35) (Only if responded 1 in Q34)

Please respond regarding the following statements.

List	Yes	No
1) The rest time has helped relieve my fatigue.	1	2
2) The rest time has helped me take care of the elderly.	1	2
3) My income/wages have decreased due to the rest time.	1	2
4) I finish work later because of the rest time.	1	2

\* The following are general questions for statistical use.

Q 36) What is your sex?

1. Female
2. Male

Q 37) What is your age?

:  
:

Q 38) What is your education level?

(Currently enrolled and on leave don't count as graduate.)

1. No schooling
2. Primary school graduate
3. Middle school graduate
4. High school graduate
5. College graduate
6. Graduate school graduate

Q38-1) (Only if responded 5 or 6 in Q38) What did you major in your most recent degree?

1. Child welfare
2. Early childhood education
3. Social welfare
4. Child care and education
5. Special education
6. Home management
7. Nutrition
8. Nursing
9. Education
10. Other (\_\_\_\_\_)

Q 39) What kind of carework license do you hold? Please select all that apply.

1. Caregiver for the sick
2. Physical therapist
3. Nurse's aide
4. Nursing teacher
5. Kindergarten teacher
6. Social worker
7. Nurse
8. Eldercare social worker
9. Elder care giver
10. Babysitter
11. Other (Specify: \_\_\_\_\_)

98. No license → Skip to Q40)

Q 39-1) When did you obtain your first care license?

Year: 

: : :

Q 40) What is your current marital status?

1. Never married → Skip to Q41)

2. Currently married

3. Divorced

4. Widowed → Skip to Q40-3)

Q 40-1) (Only if responded 2 in Q40) What is your spouse's employment status?

1. Full-time employment

2. Part-time employment

3. Unemployed, looking for work

4. Unemployed, not looking for work

5. On leave from work

Q 40-2) (Only if responded 1 or 2 in Q40-1) What is the average monthly income of your spouse? (in ₩10,000)

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 or above

Q 40-3) (Only if responded 2-4 in Q40) How many children do you have in total?

Q 40-4) (Only if responded 2-4 in Q40) Do you have any children under the age of 10?

1. Yes

2. No → Skip to Q41)

Q 40-5) (Only if responded 1 in Q40-4) If yes, how old is he/she? If you have more than 1 child under age 10, please record the youngest child's age.

Q 40-6) (Only if responded 1 in Q40-4) Who takes care of your child(ren) while you work? Please select all that apply.

1. Spouse

2. Parents/parents-in-law

3. Siblings or other relatives

4. Neighbor, friend, acquaintance

5. Institution/center (e.g. daycare center, kindergarten, etc)

6. Home-visit service (e.g. babysitter, visiting child caregiver)

7. Other (Specify: \_\_\_\_\_)

Q 41) Do you live with an elderly person (aged 65 or above) who needs help physically or mentally?

1. Yes

2. No → Skip to Q42)

Q 41-1) (Only if responded 1 in Q41) Who takes care of the elderly person while you work? Please select all that apply.

1. Elderly person's spouse

2. Respondent's spouse

3. Respondent's children

4. Siblings or other relatives

5. Neighbor, friend, or acquaintance

6. Institution/center (e.g. daycare center, kindergarten, etc)

7. Home-visit service (e.g. babysitter, home-visit child caregiver, etc)

8. Other (Specify: \_\_\_\_\_)

Q 42) Who usually does the housework at your home?

1. Respondent

2. Spouse

3. Respondent and spouse together

4. Respondent and child(ren) together

5. Child/child-in-law

6. Parents/parents-in-law

7. Other (Specify: \_\_\_\_\_)

Q 43) Do you have someone who can take care of you or your family when you're sick or in need of help?

- 1. Yes →
- 2. No →

Q 43-1) (Only if responded 1 in Q43) If yes, who is it?

- 1. Spouse
- 2. Parent/parent-in-law
- 3. Child
- 4. Other relative
- 5. Friend, neighbor, or acquaintance
- 6. Other (\_\_\_\_\_)

Q 44) What is the current tenure of your 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 45) Over the past year, what was 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 with a pre-tax amount. (Amount in ₩10,000)

Q 45-1) Average monthly household income	Q 45-2) Average monthly household expenditure

- 1. Below100      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

Thank you very much for responding.

To Record After Investigation

Respondent's Name	
Respondent's Phone Number	
Interview Date	<input type="text" value="m"/> / <input type="text" value="d"/> / 2018
Interview Time	Start time: <input type="text"/> : <input type="text"/>
	End time: <input type="text"/> : <input type="text"/>
	Total response time: <input type="text"/> minutes

Investigator	Name			
	ID	<input type="text"/>	<input type="text"/>	<input type="text"/>
Data Validator	Name			
	ID	<input type="text"/>	<input type="text"/>	<input type="text"/>
	Validation	1. Complete	2. Incomplete	(Signature)