Review of Facilitating and Constraining Influences on Family Caregiving in Long-Term Care

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Context

• Majority of seniors would like to live at home for as long as they can.
• Seniors relocate into long-term care (LTC) when their needs could no longer be supported by family caregivers and formal services.
• Yet, family caregivers continue to be involved after the transition of the older relative into long-term care.
• Regardless of the caregiver burden prior to the transition, family caregiving is carried into the context of LTC.
• With family as context, this review examines the mutually influencing dynamics of older adults in long-term care, their family caregivers and their environment, including the facility and staff.

Purpose

The aim of this narrative literature review was to study the facilitating and constraining influences on family caregiving in long-term care.

Method

• We searched 7 databases: Social Studies Abstracts, Family Studies Abstracts, Abstracts in Social Gerontology, Web of Science, Medline, PubMed, and CINAHL.
• A review of the content was undertaken using the structure: source type, author, year, study aim/findings and study design.
• The literature was divided into distinct themes and categories which allowed for integration of theoretical and empirical (research) literature.

Discussion

• The journey of family caregiving is very important as Canada’s population over 65 years doubles in the next 20 years.
• Several factors precipitate a move to LTC: Cognitive decline; Decline in physical health; Challenges with basic or instrumental activities of daily living; Lack of informal support; Increasing caregiver burden/distress.
• With the transition of older persons to LTC, family caregivers take on new responsibilities: ensuring quality of care, ensuring the wellbeing of the relative, and complying with financial costs and other obligations.
• Family caregivers need emotional and psychological supports at the times of transition.
• Family caregivers need to be recognized as partners in care in LTCs.
• A collaborative care for seniors in LTC is recommended, fostering partnership and exchange of expertise between family caregivers and LTC staff.

Results

Four major themes emerged:

1. The caregiving journey of families endures despite significant stress experienced by them before, during, and after transitions of their older relative into LTC.
   • Caregivers: Admission of senior to LTC is “more traumatic than death of a loved one.”
   • Caregivers: Feelings of guilt, loneliness, and regret.
2. The changing nature of interpersonal relationships with entry of a relative to long-term care is an underpinning of the caregiver journey.
   • Renewed closeness and strengthening of family ties.
   • A return to relating to each other as family members.
   • “Sharing the caring” between family caregivers and staff.
3. The mismatch of role expectations of family caregivers and staff in long-term care is a challenge to family caregiving.
   • Families and staff differ in types of care they expect of each other.
   • “Shared function and balanced coordination” needed between families and staff.
4. Family caregiving appears to be sustained by being preservative in nature at the time of and after transition to LTC.
   • Family member involvement underpins positive family consequences of institutionalization.
   • Family caregivers preserve the older relative’s self and dignity, monitors the care, and prevent negative consequences.

Conclusion

A better understanding of the facilitating and constraining influences on the family caregiving journey in long-term care could be instrumental in the ways in which older people, family caregivers and staff can help to forge a community and clarify roles and expectations and support each others’ wellbeing, and, furthermore, inform policy and practice.