

Section 3

Caregiving and Long-term Care Services and Supports Including Dementia Care

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In Mexico and the United States, the rapidly aging populations present both nations with major challenges related to the care of older adults. The old-age dependency ratio, which measures the number of older people to the number of working age people, is rising sharply in both countries. In the United States, by 2050, there will be 37 older adults for every 100 working-age adults, up from 22 in 2010 (Vincent and Velkoff, 2010), with Latinos representing an increasingly large portion of older and younger adults. The number of Latino older adults in the United States is projected to increase nearly five-fold between 2016 and 2060 from 9% to 21% of the total older adult population (U.S. Census Bureau, 2017).

In Mexico, the population is aging even faster due to rapid increases in life expectancy and decreases in fertility (Trujillo et al., 2012). By 2050, there will be 29 older adults for every 100 working-age adults up from 10 (Department of Economic and Social Affairs, 2015). The increases in these old-age dependency ratios pose several questions as to who will provide the needed support to older adults with limited cognitive and physical health. Given the demographic trends in smaller family sizes, increasing social and economic inequality, female paid workforce participation, family members living in two or more countries, and increasing rates of dementia, Latino caregivers in the United States and caregivers in Mexico face many challenges in providing the necessary care for older adults.

One option is formal, paid support or caregiving services. However, Latino caregivers in the United States have less access to and utilization of formal, paid caregiving support (National Academies of Sciences, Engineering, and Medicine, 2016). This trend is attributable to cultural norms that emphasize family care and support in late life as well as financial and social disparities in access to formal support options. Similarly, in Mexico, there are limited long-term care options

for older adults and low rates of nursing home use (Gutiérrez-Robledo, 2002). Taken together, families provide the largest share of support to older Latinos in the United States and Mexico.

In the United States, there are clear disparities in cognitive and functional health, which when coupled with extended longevity, result in longer caregiving durations for Latino caregivers. Latino caregivers, particularly of Mexican-origin, tend to report demanding and time-intensive caregiving careers (Rote and Moon, 2019). These demanding and time-intensive careers are not only due to living in the same household as the older care recipients but also from less help within and outside of the family (Rote et al., 2019). Caregiving oftentimes fall on one primary caregiver, usually a woman, with less sharing of care tasks across family members (Gelman, 2014; Mendez-Luck et al., 2016). While many Latino caregivers report positive aspects of caregiving, a lack of support especially under a cultural emphasis on family support may result in burden or poor physical health in Latino caregivers (Rote et al., 2019), as well as in limitations on future employment opportunities and economic well-being (Hoyman, 2014/2015).

In Mexico, there are similar patterns observed. There are gendered beliefs about who should provide care, with most responsibilities falling on women (Robles-Silva, 2000). While both positive and negative aspects of caregiving are reported by caregivers in Mexico, physical and emotional exhaustion are commonly reported (Mendez-Luck et al., 2008, 2016). The younger generation, particularly younger women, in Mexico are becoming more hesitant to take on the role of a caregiver due to the potential burden (Mendez-Luck et al., 2008; Varley and Blasco, 2000). A stronger support system is needed for caregivers in both countries to not only benefit caregiver well-being and future generations but also because more adept caregivers can delay disablement and mortality in older care recipients (Trujillo et al., 2012).

Caregiving under low levels of family support, low income, and low utilization of formal care can undermine family health and financial well-being. Given recent demographic shifts, caregivers' roles in Latino families are far more complex and demanding than they have been in the past. These changing dynamics along with limited research on dementia care in Mexican-origin families, brings to light many questions about the future care provision for this segment of the aging population. As important as the family has been and will continue to be in providing care to older Latinos in the United States and Mexico, those tasks will become increasingly "defamilized" or shifted from the family to the state (Esping-Andersen, 2009). How will families and governments accommodate the new changes and realities coming our way?

The three manuscripts in this chapter contribute to our understanding of ways to support Latino families in their caregiving careers. First, Andrade and López-Ortega using data from the Mexican Health and Aging Study (MHAS) find that over time there has been an increased need for ADL assistance for older adults in Mexico; however, there is a gap in these needs being met, especially regarding mobility assistance. Giving insight to how major cities, like Mexico City, can implement social services and programs to support older adults with mental health conditions, Ronald Angel and colleagues provide an overview of the existing literature and include recommendations for moving forward. Finally, Jacqueline L. Angel and Rote discuss the use of one specific formal care service, adult day centers, which funded through Medicaid, can be viable options to support Mexican American families in their need to provide care to aging family members with dementia.

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