

Family first—caring within UK Bangladeshi and Pakistani communities

June 18 2012

Over the next 20 years the proportion of older people living within the Bangladeshi and Pakistani communities in the UK will increase significantly. Most expect that their immediate family, particularly female family members, will provide the majority of care for them in their old age, according to new research funded by the Economic and Social Research Council (ESRC).

The research by Professor Christina Victor of Brunel University, found very few, at best five to ten per cent of the older people within these communities who were interviewed received any form of formal care, apart from [health services](#), from the wider community or government.

The [reliance](#) of older British minority [community members](#) upon their family for care and support has much in common with the general UK population. Some believed this was a right that they had earned from looking after their children through childhood, and that it was the duty of their children to provide care, while for others it was simply seen as the natural order of family life. Indeed some were reluctant to accept care from the wider community or state, as it implied a [failure](#) of their families to accept their responsibilities.

However, unlike the general population, [older men](#) in the Bangladeshi and Pakistani communities played a lesser role in the direct care of dependent wives. Women, particularly daughters, daughter-in-laws and wives, were the main carers in the family. Some wives were also concerned about having their spouses cared for by other women even if

they were qualified [nurses](#) or other [health care professionals](#). The research found there were high levels of isolation among female carers.

"For all older people, regardless of ethnicity, the family is central to the achievement of the Government's key objective of enabling them to live at home for as long as possible," says Professor Victor. "Social care-based services may be more appropriate and acceptable if they focus upon helping and supporting families to care rather than being viewed as substitutes or alternatives to family care."

Some concerns were expressed by the participants that things are changing within the South Asian community and that families will be less 'willing or able to care' in the future. Examples were given by participants of an acquaintance being put into an older people's home by his son. This concern is also seen among the wider UK population where there is also the recognition that in the future families may be less able to care because of decreasing family sizes, more complex family structures, and international migration in response to the economic downturn.

"Our research is important because it emphasises the continued importance of the family in caring for dependent older people and shows the similarities between UK minority communities and the wider population", said Professor Victor. "We also highlight the problems of [isolation](#) and loneliness faced by carers which are largely ignored by service providers. Should local authorities not address the needs of carers from minority communities then we may face increased demand for long-term care".

Provided by Economic & Social Research Council

Citation: Family first—caring within UK Bangladeshi and Pakistani communities (2012, June

18) retrieved 23 April 2024 from <https://medicalxpress.com/news/2012-06-family-ndash-uk-bangladeshi-pakistani.html>

This document is subject to copyright. Apart from any fair dealing for the purpose of private study or research, no part may be reproduced without the written permission. The content is provided for information purposes only.