

# Birth more, work more, care more

## The triple burden on women as Asia ages

A greying, shrinking Asia needs many more caregivers. That burden is mostly borne by women.



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Old age caught up with my spitefully grandparents as they reached their 90s. It came like a thief in the night and caught them by surprise, having lived decades in spectacular health. In the span of a year, my grandmother's lung cancer turned terminal, while her dementia progressed, and my grandfather broke his hip.

It was with great foresight of the hardship ahead and self-sacrifice that my mother had therefore planned to resign her job and move in with them.

Her presence had a calming effect on my grandparents, who had lived by themselves before that. Her company kept their spirits up, though dark days when being robbed of mobility and clarity of mind became soul-crushing.

For the four years she lived with them, this was a 24/7 responsibility with no breaks, no pay, and, after grandma passed on first, and as my grandmother's dementia progressed, discerning little attention from the remaining care recipient.

But what my mother remembers of that period were the slow morning walks around the neighbourhood they would take together and moments of clarity when grandma remembered who she was.

What helped was the daily assistance from a newly hired foreign domestic helper, who was trained by the palliative care department in the hospital that saw my grandparents come in and out over the years.

Nurses there stepped in when symptoms flared up or more morphine was required to manage pain. And when they came to grandma's funeral to pay their respects, they had tears in their eyes. Saying goodbye is never easy.

### CARE MORE

ALL ACROSS the world, countries are ageing. Seniors in their 60s today outnumber children below five. Asia, as the fastest-ageing region in the world, will see seniors aged 60 and above almost double from about 700 million to



There is no escaping the reality that care work can be labour intensive, with the burden falling most frequently on the shoulders of daughters of the elderly, says the writer. There is a large disparity in the care demanded by an ageing population and the actual supply of it, with one gender paying the price. © PHOTO: GUY W...

1.3 billion by 2060. A super-aged population will reorder society. Elder care is a manpower-intensive endeavour, where public policy, private sector providers and manpower supply still lag behind.

As a sign of what the future will mean, take China, on the start of its ageing journey where the chasm on this last matter is wide. There were reportedly just over 600,000 elderly care workers four years ago, compared with the demand for 25 million.

Shifting the workforce towards care work must be the priority as the smaller families don't shoulder the burden by themselves. Here, tapping migrant workers has its limits. Strengthening vocational training and tackling pay and working conditions in care work must be the way forward for the long term, at a time when foreign source countries – the Philippines and India – forecast huge birth rate declines.

Those who tout that automation, robots and artificial intelligence might arrive in time should get a reality check from Japan, decades long into its experiment in building friendly-looking robots that do everything from carrying seniors to their beds to providing companionship.

These robots themselves were

expensive and needed care – to be maintained, moved about, insulated and then stored away. Mr James Wright wrote in the MIT Review in 2023. They therefore do not feature in a major way in eldercare – only about 10 per cent of senior care facilities have adopted them, according to a 2019 survey despite major publicity, governmental support and a private sector push.

Japan's manpower challenge demonstrates how even the most advanced Asian society, steeped in dealing with aged care, is far away from having the ideal care infrastructure.

### BIRTH MORE AND WORK MORE TOO

What about minimising the care we need as we age?

At a panel at the inaugural Summit for Action on Gender Equality in Singapore on Sept 8, when I asked Agency for Integrated Care chief Director Yvan Dash whether he thought Singapore has got the balance of senior care right, he highlighted the importance of lifting the burden of ageing by keeping seniors employed, engaged and healthy so we can bring down the number of years people spend in ill health.

But he also acknowledged that as much as societal recognition

and government support have recently been given to parents of newborns, with additional parental leave growing by 20 weeks eventually, aged care could afford to mirror these developments.

There's no escaping the reality that care work can be labour intensive, with the burden falling most frequently on the shoulders of daughters of the elderly and mothers of young children.

And as people marry later, often the same woman must juggle both. Asian societies tend to be more patriarchal, with women assuming caregiving responsibilities – because of the lack of alternatives, a sense of duty and love.

Little wonder then that fewer women want kids, which requires juggling professional goals and personal aspirations.

Tellingly, a South Korea declaring a national emergency on population has rolled out a "comprehensive emergency response system", including expanding eldercare and doubling paternity leave.

At the heart of this is the conundrum that we need more people to work to maintain as large a workforce as possible and reduce the dependency ratio for an ageing population. But we also want the same folks to have children and care for seniors. Can

they really do this all? In the emotionally charged movie *How to Make Millions Before Grandma Dies*, a grandson moves into his grandmother's home to care for her until she passes on from Stage 4 cancer.

Forgoing work to do this, the journey changes him. While initially motivated by the prospect of inheriting her estate, he eventually does this completely out of love in her last days after she sells her house and ends up penniless in a nursing home. It is a labour of love for the old woman who dies happily and for the young man who grows closer to her.

Others are more fortunate. While my mother had planned to quit her job, in the end the onset of Covid-19 and the overnight leap into work-from-home changed all this.

It allowed my mum to remain employed and continue building her savings, even after she moved in with my grandparents to attend to their needs. An understanding supervisor did not insist the return to the office, as workplaces gradually reopened.

After my grandparents passed on, my mother moved back into her own home, relieved that she had done her duty to ease their departure. She had been their caregiver and source of comfort in their last days.

### ONE GENDER PAYS THE PRICE

There is a large disparity in the care demanded by an ageing population and the actual supply of it, with one gender paying the price.

"There is a sexual order to the political economy," Dr Jennifer Scubba, president of the Population Reference Bureau said in a keynote address at the same summit. "Birth more, work more, care more... In government plans to deal with the population crisis, women are also being asked to work more to boost labour-force participation and care for rising numbers of older people," she added.

Ageing in Asia is taking place at a time of rapid social change. The traditional extended-family structure in developed countries like Singapore, South Korea and Japan is fracturing into many pieces, from the nuclear family to couples with no kids and singles who live on their own – meaning fraying family ties to provide the needed care.

Developed nations in the West provide a clearer glimpse into what the future holds for Asia. "In contemporary societies, old age and infirmity have gone from being a shared, multigenerational responsibility to a more or less private state to something experienced largely alone or with the aid of distant and institutions," Dr Atul Gawande highlighted in the bestseller *Being Mortal: Medicine And What Matters In The End*.

But he warns against over-medicalising old age, and for countries to build care systems that will help people achieve what's most important to them at the end of their lives: a decent sense of autonomy, time with family, connection with loved ones – the stuff institutions-based care in nursing homes can't provide.

"We want women and men to have that choice to provide that valuable care (for family). The problem is the caregiving penalty when it leads to disadvantages later – evidence that such work is undervalued in society," Dr Scubba highlighted.

How do we square this circle? We have to see ageing not narrowly as a health challenge but as a larger issue around building societal resilience in the face of population ageing, Dr Scubba said.

"Our challenge isn't low births and the threat of economic stagnation from demographic shifts. Rather, it is how to maintain the tremendous gains in individual well-being we have seen over the last half-century, even as demographics shift," she concluded.

"The ultimate goal is to have a strong, prosperous society." That cannot happen if one gender continues to shoulder all the burden.

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