

Changing Elder Care in Taiwan Families: The Role of Gender Culture

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1. Introduction: The incorporation of migrant care workers and filial piety in the family

With the ever-increasing elderly population and the decline of three-generation households, elder care is becoming a pressing issue in Taiwan. In 1992, the government implemented a policy that allowed households with state-approved care need to hire foreign care workers; since then, the total number of foreign care workers in Taiwan has grown rapidly. As of 2013, there were nearly 200,000 foreign care workers in Taiwan (70% from Indonesia) and over 90% were working in households as opposed to institutional care facilities (Wang, 2006; Chen, 2008; Chiu, 2009; Ministry of the Interior, 2011; Ministry of Labor, 2014). In a society where filial piety is still highly valued, hiring foreign care workers may seem like an unorthodox arrangement for elder care. This study focuses on how adult children coordinate carework with foreign care workers and among themselves, thus uncovering the changing social mechanisms of practicing filial piety in Taiwan.

Traditionally in Taiwan, sons are expected to care for the elderly parents. Three-generation patriarchal cohabitation is considered an ideal living arrangement, where authority, power, and wealth are distributed patrilineally within the family (Barker, 1979; Fei, 1985; Hsiao, 1991). Once daughters are married, they no longer belong to their original family and should devote themselves to their husband's family (Zhan & Montgomery, 2003). Sons, until they divide their family fortune, should share their filial responsibilities equally (Hsieh, 1985).

The social structure has changed enormously in the last century, from an agricultural to an industrial economy, in addition to undergoing rapid urbanization. At the same time, the society's microstructure (i.e., familial and interpersonal relationships) has also changed. Thus, numerous studies have considered whether younger generations still believe in filial piety and how they practice their filial responsibilities. Previous research has demonstrated that even though the social context has changed, people still believe in traditional Taiwanese values and prefer adopting new social mechanisms to fulfill their expectations (Chuang, 1972; Li, 1982; Chen, 1994; Yeah, 1995, 1997a, 1997b).

During the 1960s and 1970s, the market economy provided several income-earning opportunities for the adult children in families, and many of them preferred to live in the city. To fulfill filial piety, despite having moved away from parents' homes, the practice of rotating elder care among sons, or *lun-hun-tou* (literally, taking turns cooking), became a common arrangement. *Lun-hun-tou* means that the parents take turns living with each of their adult, married sons. Thus, filial responsibilities can be shared among the sons as equally as possible. *Lun-hun-tou* as a care

arrangement provided evidence that the value of filial piety persisted in a changing society (Hsieh, 1985).

Although the sons bear the filial responsibilities in this arrangement, the daughters-in-law do the actual caring for their husbands' aging parents (Hu, 2004). The work is not viewed in an egalitarian manner; rather, the prevalent understanding of filial care connotes a servant's role (Liu, 1998), and carework is usually undervalued and perceived as women's work (Cancian & Oliker, 2000). Hence, under the influence of Han filial culture, the care responsibilities have already been transferred from the son to his wife. But, a further transfer of these responsibilities to someone outside the family, through the market economy, was a new development facilitated by the supply of foreign workers (Lan, 2006). Glenn (1992) observed that most of the live-in migrant care workers were female, and that the segregated migrant labor market further reinforced the devaluation of caregiving.

Recent studies have shown that younger generations can still meet the requirements of filial piety by hiring a care worker. Lan (2002) used the term "subcontracting filial piety" to characterize the immigrant Chinese families in the U.S. who, instead of performing the actual caregiving themselves, hired people from outside the family to care for their aging parents. Thus, the new social configuration was implanted on foreign soil to maintain the ideal filial care (Lan, 2002). Families in Taiwan can also accept hiring care worker as a way to fulfill filial piety. Liang (2010) found that Taiwanese families who hired a care worker still cared deeply about the elders and usually shared some of the caregiving responsibilities with the hired person.

2. Methods

The data presented in this study are taken from an ongoing research project involving fieldwork with 10 families employing migrant care workers. The data were collected from July to November 2014. All the families live in urban settings, seven in Zhongli and three in Taipei; all the migrant care workers are from Indonesia. Five of the 10 families have employed migrant care workers for less than four years; the others have employed a worker for more than seven years. Almost all the care recipients (the elders) are aged over 80 years, and six are over 85 years; three are male and seven are female; nine are widows or widowers; and one elder man still lives with his wife, who is aged 83 years. Three elders live alone with their migrant care workers, including one elder lady with no son; six elders live with their sons; and one elder with no son lives with her daughter. Table 1 provides more detailed information about my informants.

Family	City	Elders' Age range	Elders' Gender	Experience of the Family in Employing Migrant Care Workers	Elders' Living Arrangement
Wu	Zhongli	90–95	Male	1 year	Living with unmarried son
Hsu	Zhongli	85–90	Female	2 years	Living with married daughter
Wang	Zhongli	80–85	Female	Over 10 years	Living alone with her care worker
Huang	Zhongli	85–90	Female	Over 10 years	Living alone with her care worker
Hsieh	Zhongli	85–90	Male	7 years	Living with married son
Su	Zhongli	75–80	Female	3 years	Living with married son
Lin	Zhongli	85–90	Female	8 years	Living alone with her care worker
Yeah	Taipei	80–85	Male	1 year	Living with spouse and unmarried son
Chen	Taipei	85–90	Female	7 years	Living with unmarried son
Chang	Taipei	80–85	Female	1 year	Living with unmarried son

[Table 1: Details about the Informants]

I located these families through snowball sampling via personal referrals, and I have visited each of them nearly 5–10 times, during different hours of the day. On each visit I stayed with a family for 1.5–3 hours, to get firsthand knowledge about how they organized their daily lives, including activities outside the home, such as trips to parks, hospitals, barbershops, and temples. During my visits, I interviewed the elders' care workers using Chinese. During the interview, the care workers were encouraged to express themselves using Chinese and some Indonesian vocabularies. I used the translation software to translate Indonesian vocabularies into Chinese to better understand their response. I also interviewed a total of 15 elders' sons and daughters: in four

families I interviewed both the elder's son and daughter and in one family I also interviewed the daughter-in-law who lives with the elder. Fourteen of the informants consented on taping our conversation. To protect the informants' privacy, all names used in this study are pseudonyms.

3. Findings

The preliminary findings show that even after hiring migrant care workers to care for their elders, the younger generation does not totally relinquish the care work. Sons and daughters take on different roles in caring for the elder parents and manage the migrant care workers to ensure that their parents are well cared for; however, this does not imply that the daughters have equal authority as their brothers. In addition, the previously significant role of daughters-in-law is declining.

3-1. Living Arrangements and the Sons' Responsibilities

My preliminary findings indicate that six of the elders live with a son, which seems to correspond with the traditional expectation. But, the elders with more than one son currently live with only one of them; the practice of *lun-hun-tao* seems to have ceased. As Mr. Chen, the eldest son of Ms. Chen, who is almost 90 years of age, states:

I have heard of that kind of arrangement before. But moving around is exhausting! I don't think my mother would like to move around constantly. Our mother can hardly walk on her own. She needs to stay in a familiar place. If we make our mom constantly move around, it would seem as if we sons don't want to take care of her. ...Besides, now we have hired a live-in care worker. It's not rational to make my mom move from one place to another. The care worker is doing a good job.

Apparently, the responsibility is not shared equally among family members once a care worker is hired. Those children whose parents live with them take on more responsibilities as the parents' health conditions deteriorate. However, during the interviews with the adult sons, the ethic of sharing filial responsibilities remains. Most of my informants said that if their elder parent could not afford their medical bill or hire a migrant care worker, they would share the expense equally among those who can afford it. While 3 of the families' adult children split the bill, most of the care recipients' children use their elderly parents' savings to hire the migrant care worker. They say that once the parents pass away, they will inherit the family fortune, so using their parents' money to hire the care worker is reasonable. Either the adult children share the expenditure or using the elder parents' saving to cover the bill, in most of the cases the cohabiting son would not be the solo financial barer. Notably, several daughters said that if their parents had no savings, they would be more than happy to pay some of their parents' bills. "After all, we are the generation of working women. If my parents need my financial support, I can't see why I shouldn't do it," said Ms. Hsu. Linda, who is in her eighties, has six daughters, four of whom deposit 10,000 NT dollars monthly into a joint account to cover their mother's expenses. Ms. Wu, one of the four contributing daughters,

explained, “My other two sisters don’t make that much money. I am fine with it.”

Some of the informants said that living with the elder parent does provide additional pressure; for example, they are the ones responsible for assisting when their parents suddenly need medical attention. Yet, they said that the presence of a care worker does provide some kind of compensatory assistance for them. By this, they were referring not only to the physical work and emotional support that the care worker undertakes but also the household chores that the care worker performs. Even though it is against the law, most of the families asked the care worker to do some household chores, such as doing the laundry, mopping the floor, and taking the garbage out; most of the families were fully aware that such requests were illegal. Some informants told me that since their household chores were being performed by the care worker, they were actually benefiting from having their parents living with them. For the adult children, this arrangement seems to be the justification that somehow they still share equal responsibilities.

When the elders live with their married sons, the daughters-in-law still play an important role in caregiving, such as by preparing meals or by taking over the daily carework when the migrant care worker has a day off. Some elders who live with their unmarried sons rely on their care worker to take care of them, even though those elders may have other married sons (and therefore daughters-in-law) available to them. This kind of living arrangement may indicate that the role of daughters-in-law in elder care is not as significant as in the past.

3-2. The Transferred Carework at Home

Once the migrant care worker arrives, she takes over most of the daily care responsibilities. The care worker may take the elder for a walk, make sure that the elder has taken his/her medicine, cook proper meals, assist the elder in taking a bath, change diapers, and sometimes take the elder on trips outside the home, such as to a temple or barbershop. The physical care performed by each care worker varies, depending on the recipient’s health condition. The care workers told me that it did not take them much time to take over the duties and learn how to use the medical devices, such as the nasogastric tube.

In fact, care workers not only perform physical work but also provide emotional support for the care recipients, and sometimes even for the family members (Liang, 2010). Mr. Yeah, who is now in his fifties, has an 84-year-old father who has been extremely moody and restless recently. Mr. Yeah said, “Amy [the foreign care worker] knew how to calm my father. She has developed certain tricks. . . . I think she is better than my mother and me.” Mr. Hsieh, who is nearly 50 years of age and whose father suffered a stroke about 10 years ago, said:

It was always nerve-wracking every night, because my father wanted to go to bed, but my wife and I wanted him to stay awake until 8 or 9 in the evening. So that he would not wake everybody up in the middle of the night. My father was yelling and kicking. He was always upset. Emma [the care worker]

gradually learned how to keep my father awake and she calmed him down. It was a relief for us.

Most of the adult children asked their care worker to stay close to their elder parent all day. All the care worker informants sleep in the same room as the care recipients at night; one of them even sleeps in the same bed as her care recipient. The reason why the adult children hired a migrant care worker is mostly that they cannot stay with their parents 24/7, but they want somebody to be there for their parents around the clock. This is not just to assist the elders in navigating their daily life activities, but also to keep them safe, such as by preventing them from falling accidentally, or to have somebody available to react at once should the elder suddenly need immediate medical care.

Most of the adult sons and daughters-in-law whose elder parents live with them said that even though they did not have to care for their parents directly, they were still responsible for managing the care workers. Some said that they had to train the care worker in caring for the elder and assure that the care worker adhered to their parent's schedule. They said that though the care worker was like a family member, it was still just a job for her. As Mr. Chang said, "One of the merits of living with my mother is that I can make sure my mother is well taken care of. If the care worker did something inappropriate I could correct her immediately. ...I have to deal with the care worker's agency, buy the supplies, and schedule her hospital visits."

The use of fictive kinship terms is prevalent (Lan, 2006; Constable, 2007). Most of the adult children of the elders, who are aged 50–60 years, said that they treated the care workers like their own daughters, since the workers are roughly the same age as their children (20–30 years). The choice of kinship terms indicates what Ayalon's research (2009) demonstrated that the employers were using the term to signify that they were not abusive or bad employers. The employers also hoped to encourage their care worker to care for the elder as she would for her own family members, hence assuring a high quality of care. The care workers also called their care recipients "*a-gun*" or "*a-ma*" (meaning grandfather or grandmother in Chinese). Those who have been taking care of the same elder for many years described their relationship as "very genuine." Rachel, who has been taking care of the same elderly lady for seven years said, "*A-ma* treats me like one of her grandchildren. I feel like she's my grandmother in Taiwan. I want to take good care of her."

Despite this analogy with family members, the pressure on care workers is still obvious. They work around the clock and must stay alert all the time. Every care worker interviewed stated that she has not gotten one good night of sleep ever since she started working for the family, because the elder always needs assistance several times during the night. The elder may have a coughing spell, need to use the toilet, or simply be unable to sleep and want someone's company. Most care workers also complained about back pain, because they have to move their elder in and out of the wheelchair and bathtub.

The analogy with a family member may help the care workers to become more fully incorporated into their host families, but it also makes them more vulnerable to exploitation;

employers tend to assume that, if the care worker truly loves the care recipient, she will do anything that the elder needs (Lan, 2006).

3-3. Ways of Performing Family Care

Although hiring foreign workers helps the family with daily care, the children have not relinquished from carework totally. Many of the adult children informants stressed that preparing meals remained an important aspect; they regularly check in on their elderly parents, keeping them company and making sure that everything is alright.

Informants emphasized that in view of their elders' chronic diseases, such as diabetes, family members needed to monitor carefully the elders' diet. Moreover, preparing food is considered a way to show love in the family. *Fan-yong* (奉養), an expression for filial responsibility in Chinese, implies caring for elders' daily lives and providing them with sufficient food, in a respectful way (Ministry of Education, 2007). Many of the informants considered *fan-yong* and filial responsibility to be similar. In short, the cultural context with regard to providing elders with food is more profound than simply making sure the elders have enough to eat. The younger generation is expected to prepare food and drink for their elders with respect and love. Many adult daughters volunteered to teach the care worker to cook Chinese cuisine as a way to show their concern for their elderly parents. In some families, the family members still cook for the elder every day, even after the care worker's arrival.

One elderly man, nearly 90 years of age, who lives with his son and daughter-in-law can barely chew solid food, so he has porridge and a small portion of mashed solid food as his daily diet. His food must be prepared separately from the rest of the family's meals. The daughter-in-law, Mrs. Hsieh, stews the porridge every day and carefully chooses ingredients that the elder man likes, such as fish and special herbs. She still prepares his meals every day despite the presence of a migrant care worker. Mrs. Hsieh said, "I think preparing food for the elder is very important. I don't feel comfortable letting the migrant worker cook for my father-in-law." Even in families where care workers provide the elder's daily meals, the adult children still prepare special dishes for the elders on weekends or special family occasions.

Most of the adult children who do not live with their parents still visit them regularly. Liza Wang, age 87 years and living alone with her care worker in an old house, has two sons and two daughters. The two sons live on the opposite side of the city and visit her once a week. Her younger daughter, Rebecca Wang, comes to share lunch with Liza five days a week and purchases daily supplies for her and the care worker, even though she is not the employer of the care worker. Rebecca said, "I visit my mother almost every day, because I live nearby. When I visit my mother, I check on things. ... For example, I bought her a new pair of shoes yesterday, because the old ones have already worn out." What Rebecca meant by "checking on things" probably includes making

sure that the care worker is taking appropriate care of her mother. Rebecca's older brother stated, "I know Rebecca goes home and checks on my mother almost every day. It makes me feel secure. Even though my mother lives alone with the care worker, I won't worry that the care worker treats my mother badly." It is reasonable to assume that when the daughters drop by their elder parent's place, they are also checking on the care worker's performance.

Some other adult children visit their parents regularly to perform specific care duties. Ms. Huang is almost 90 years of age, and her son Peter Chen visits her every weekend. Peter said:

I take my mother out every weekend. My mom used to go everywhere on her own, but now if I don't come and take her, there's no way that she can leave this neighborhood in her condition. You know how elders keep repeating stories? I used to get very impatient about the repeated stories; I didn't feel like we were having a real conversation. But now I come home and listen to them. I realize that she needs someone to share her old memories.

Like Peter, many of the adult children mentioned that they visited their parents to support them emotionally. These visits could be described as emotional carework. Still, some adult children purposely visit their parents to do physical carework as well, such as massaging an elder parent with Parkinson's disease.

3-4. The Active Daughter and the Unbalanced Dynamics between Siblings

These examples of providing family care to elders show that adult children have not withdrawn from this role responsibility altogether. However, it is female members' duty to tend to these tasks. Whereas my study found that daughters-in-law are less significant in fulfilling a caring role than expected, daughters are still very firm supporters of their elderly parents.

"A married daughter is like splashed water," says an old Chinese proverb, implying that once daughters get married, they are not part of the original family anymore. In my fieldwork, however, I found married daughters playing an important role, especially in those families where the parent lives alone with a care worker. The daughters help integrate the care worker into the family and constantly drop by to check on their parent. In addition, when the care worker has a day off or returns to Indonesia for a vacation, the daughters often become the primary caregiver for the elderly parent.

Daughters train the care workers. Ms. Li is in her sixties and has one brother; their mother has been diagnosed with Alzheimer's disease for two years. Ms. Li said that during the first weeks after hiring the care worker, she went to her mother's place almost every day to train the new employee. She explained:

The first couple of weeks were the hardest. I showed her how I do everything, including how to clean the toilet, how to mop the floor, and when to take out the garbage. Besides, I cooked the meals for her and my mother. I taught her how to cook the dishes my mother likes. And, I also taught her how much

vegetables and protein my mother needs each day so that she can help to control my mother's diet.

Ms. Li is not the exception. Ms. Wu also asked her sister, who was her father's primary caregiver before they hired the migrant care worker, to show the migrant care worker how to bathe her father and cook Taiwanese cuisine. As already noted, daughters may also visit the elderly parent's to provide care when the hired care worker has a day off. Monica Chen, who is in her fifties, said, "Every other Sunday is the holiday for our care worker. I go to my brother's place before 8 and take care of my mother, like cooking for her, bathing her, that kind of thing. I leave around 8:00 p.m. when the care worker is back home." When the care worker needs a longer vacation, such as to return to Indonesia for several weeks, some families hire a Taiwanese care worker, but some families' adult daughters move in with the elder parent or have the elder parent move in with them temporarily. Ms. Lin, for example, is almost 90 years of age and has no son. When her care worker went back to Indonesia for a month, she took turns living with her adult daughters' families. Similarly, Abigail Chen, Monica's sister, took her mother to her own home when the care worker went back to Indonesia for two weeks. She said:

I didn't think too much about it. My mother needs her children to care for her, and I was available at that time so I volunteered. I took my mother to my place and she stayed with me for two weeks. I asked my mother to do some exercise, and to sew some buttons. It's not because I need her to do so, but I hoped that asking her to do this kind of thing would slow the deterioration of her cognitive abilities. ... This is the kind of stuff that you can hardly ask the care worker to do.

Daughters who take over the caregiving when the care worker is unavailable expect themselves to provide a higher quality of care for their parents. This kind of care arrangement is somewhat unorthodox for a society wherein a patriarchal family structure is embedded. It is typical in families where the elder's son is separated or widowed or where the elder has no son, since no daughter-in-law is available. But, it is notable that the elder's other married sons do not take over the care responsibilities. The situation that Abigail Chen shared shows that the younger generation may be more open to a different arrangement.

Although adult daughters participate in caring for elderly parents, this does not mean that they share equal power with adult sons when it comes to making medical decisions for the parents. Daughters may train the care worker and may care for their elderly parents, but in my fieldwork experience, sons are still responsible for the elders' medical arrangements and decisions. It is almost always the sons who take the parents to the hospital and to visit doctors specializing in the treatment of chronic diseases. Sons generally acknowledged that they are making most of their parents' medical decisions. As Mr. Huang said, "I guess sons still have more responsibilities in this kind of matter." Mrs. Wu is in her sixties and has two brothers; her mother moved in with her three years ago. She said:

When it came to major medical decisions, I just called my brothers and asked them to make the decision. When my mother fell on the floor and the ER doctor told us that she needed a joint replacement for her hip. I called my older brother and he decided that we should transfer her to another hospital. It's not as if we couldn't have the surgery in the original hospital, but I didn't want to argue this issue with him.

The fact that most of the elders' medical decisions are made by their sons shows that, even though adult sons and daughters seem to share filial responsibilities, the sons are still expected to take the lead in times of major decisions. The medical decisions are presumed to be very important, because the adult children whom I interviewed believed these decisions would significantly affect their parents' quality of life and even their life expectancy. Daughters' caregiving is more about day-to-day care arrangements.

But, sons do not always have full decision-making power in everything; in some cases, the daughters united together to bargain over care arrangements with their male siblings. Mr. Yeah has been living in his mother and father's house since his father needed intensive care last year. He hired a migrant care worker this year. Mr. Yeah convinced his mother to send her husband to a nursing facility three months ago, because it became very difficult to care for him as his health and mental condition deteriorated. He said that even though his mother and the care worker took turns as caregivers, the father would wake up at 3:00 or 4:00 a.m. and demand his wife's attention all day. Mr. Yeah said that his mother, who is 83 years of age, was exhausted. Thus, Mr. Yeah thought it would be in his father's best interest to move to a facility where he could get professional help and care. But, after residing there for two months, the father returned home. Mr. Yeah said:

My sisters were very upset that we moved our father to the facility. They kept calling my mother and saying that it was really unfair for my father. They said that it was as if we had abandoned our father, and that it was not filial at all. Finally, my mother gave in and we moved my father back.

In Mr. Yeah's family, his sisters united and convinced their mother to change her mind, and in the end they changed the whole care arrangement for their father. In other families, especially when daughters outnumber sons, it is not uncommon for the sons to feel pressure from their sisters regarding the parents' care arrangements.

4. Conclusion

The people whom I interviewed still referred to all elder care arrangements as part of filial responsibilities. My findings, nevertheless, reveal changes in care arrangements and in the practice of filial piety in Taiwan. The commodification of elder care allows the younger generation to be emancipated from the round-the-clock caregiving. It is also clear that family dynamics change profoundly in the context of hiring a care worker. Households in the Han tradition used to be strictly patriarchal, with authority being passed down from father to son. Now, married daughters are participating in caring for their parents, even though they still do not have equal decision-making

power with sons. Daughters normally take on direct care work and sometimes step up as the primary caregiver when the foreign care worker is unavailable. The sons are responsible for the living arrangements and making major medical decisions—in short, those aspects of care that are viewed as important or fundamental. The division of labor between daughters and sons not only differs in power position but also reflects cultural gender norms. The new care arrangement, in which families employ foreign care workers but still play a role in caregiving, clearly demonstrates that the intergenerational relationship is still guided by the logic of filial piety, but that as adult daughters join in caring for elder parents, the connotations of filial responsibilities are no longer limited to the sons.

English Language Review

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