

# When Caring is Not Enough:

## Supporting the Needs of Employers and Employees with Aging Parents

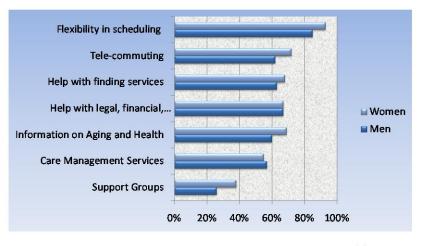
Janet Bullard March 2009 Revised January 2010 www.proactivehealthadvisor.com

This document discusses the impact on caregiving of Aging Parents for Employers, Employees and their Family. With increasing longevity we are also experiencing longer periods of disability and the need for care from family and other service providers. The impact of aging is soon to be seen at a greater level with the tsunami of the Baby Boomers moving into their senior years. This represents not only a loss in the workforce but an increasing demand for caregivers. Currently, the annual cost to Corporations is in the billions and the impact on employee-caregivers can be physically, mentally and financially draining. Caregiving crisis is very costly to everyone and can be avoided by having education and benefits available to intervene in the early stages of Parent Care. Companies that support employees through increased knowledge and early intervention as well as having specific benefits designed to address the concerns and needs of aging parents will reduce the loss of work time and also the stability of their work force and the work environment. Workplace Benefits Programs designed to assist employees directly with personal consultations that address comprehensive assessment, planning and implementation for managing Elder Care issues see a financial return to the company of between 4:1 and 13:1.

Canada is now experiencing an issue that the United Sates has been experiencing for 20 years. We have the opportunity to leverage off their experience to institute proactive Eldercare Programs in the workplace to the benefit of the employers, employees and families.

### Services Employees Would Value and Use

Met Life Study 2003: Balancing Employment and Eldercare



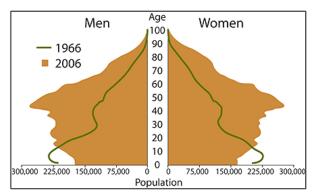
Managers of Corporations would benefit not only by more knowledge about services and programs that can support their employees but also what they can do to reduce the impact on the workplace. Here are 7 questions that managers can review annually to optimize employee stability and presence:

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- 1. How many of my employees are caregiving?
- 2. What impact is caregiving having on employee presence and productivity?
- 3. What characteristics do I, as a manager, need to effectively support the employees?
- 4. What strategies have we, as a Company ,developed to support our caregiving-employees?
- 5. How are the Benefits we currently use meeting both the short and long term needs of the company and employees? Do these support longer term planning for the company?
- 6. Do we have access to a team of professionals to assist with the varied and complex issues in Parent Care?
- 7. Do we need to adapt or modify our Program to the changing needs of our workforce?

The way we are aging has changed dramatically over the last Century. Longevity into the 80's is becoming "normal". The size, location, and availability of the family are having a significant impact on the care of our aging population, the workplace and the family itself. This paper will explore the implications of the care needs for our aging society and how the workplace and family are impacted

In 1900 the average lifespan was 47 years. By 2000 the average age is closer to 80 with increasing numbers of people living into their 90's. Families may need to provide care for aging relatives for months or even up to 20 years with an escalating time and energy commitment. A typical family giver will spend an average of 18 hours per week for 4.5 years in caring for an aging relative (1). Caregiving for older adults is now much more complex, unpredictable and often intermittent with periods of intensity' (2 p. 8) related to episodes of acute illness and an increasing incidence of chronic conditions. Add in the development of new drugs



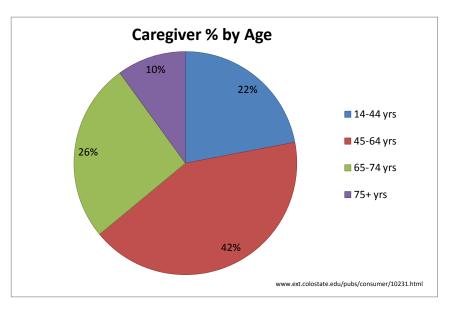
and life-sustaining technologies, the course of aging and dying has altered significantly in the last 75 years. The

caregiving journey is progressive and requires individualized problem solving that can be modified and adapted to the changing circumstances in the aging process.

It is expected that the formal and informal senior caregiving needs will increase by 200% between 2001- 2031(3). The largest growth in the senior population is seen in the over 80 age group, i.e. those with the highest care needs. It has been identified that 49.5% of those over 85 years of age require assistance with everyday activities (1). Not only are care needs related to declining physical health, but the incidence of cognitive impairment is up to 66% in the over 85 year age group. This often requires 24 hour care or supervision (4).

Currently only 7% of elder care is provided in government funded institutions and this is unlikely to change in the future with the emphasis on *Aging in Place* (3). The shift away from institutional care is one that our seniors wish for and which the government publically endorses (5). Homecare (a branch of our public health care system) currently supports our community residents but it is <u>not</u> considered an essential service under the *Canada Health Act*. The implications for caring for our aging society in Canada are economic, social and health related. **We need to attend to the early warnings signs of increasing demands for limited health resources by approaching care for our aging society proactively** (3).

The average caregiver in Canada is female, age 46, married and working fulltime (6; 7). With our current trends of delayed marriage and childbirth it often means that both children and aging parents require support at the same time, thus the Sandwich generation. A 2002 Report from Statistics Canada identified that 1/5 Canadians over 45 years of age provide care to a senior (8) and most worked fulltime; 93% for men and 72% for women. Caregiving challenges are predicted to increase with more women entering the workforce, decreasing family size and the proportion of aging persons increasing (2; 9; 10).



One of the important changes seen recently is the shift in the number of males (1 in 3)

providing care, often as the primary caregiver to their aging parents (11). Male caregiving in the general population is only 25% but in the workplace is represented by 45% (1).



The MetLife Study on Balancing Employment and Eldercare (2003) found that almost 2/3 of the caregivers in the study said that caregiving had some affect on their career. The personal financial impact is represented by decreased income from absenteeism, reduced work hours, or lower wages based on their impaired ability to advance. Caregiving requirements often occur at a time when the employee's career advancement, productivity and income potential are nearing their peaks. The impact is most acutely felt in Senior Management and Executive positions with their far-reaching responsibilities and

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influence in the workplace. The primary short term effects felt by the employer and the workplace are related to absenteeism, decreased work hours and productivity, as well as changes from full-time to part-time status. Early retirement or quitting work all together may occur when the ability to balance work and caregiving responsibilities becomes too much for the employee (11). Longer term impact is with career advancement and contributions to savings, pensions and CPP.

Over the adult years, women generally spend less time in the workforce, resulting in lower corporate and public pensions, and savings. Caregiving creates an even greater impact on this issue as women also have greater Long Term Care needs related to longevity. In the year 2000, women who reach the age of 65 years can expect to live another 19 years to the age of 84 years (7). Not only do women outlive men and have lower lifetime earnings, they also have decreased access to funds in retirement (7; 4).

Patty Randall cites the 2005 economic cost of informal caregiving to Canadian employers at \$16 billion (6). To determine how employee caregiver costs could impact your business, go to <u>www.eldercarecalculator.org</u> (12) to obtain an estimate. The impact on Employers and their company is not only economic but also related to loss of leadership, knowledge and experience that caregiving employees provide to the workplace in accordance with their age and stage of career.

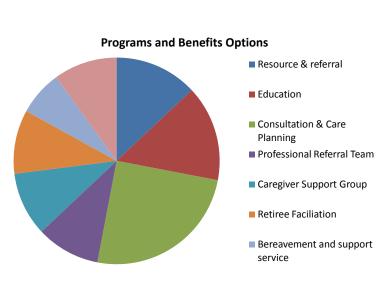
A new research study out in 2009 by the University of Guelph is the *Cost-Benefit Review of Work-Life Balance Practices-2009.* The 123 page report looks at the factors that influence the workplace and how it impacts employers. They looked at Canada, as well as internationally to evaluate organizational factors, effectiveness of Work Life Practices and Return on Investment. (For more details see the resource section.)

It is often assumed that the costs for caregiving for our aging relatives are covered by our public health care system. Approximately 1/3 of caregivers incur costs related to financial assistance for care and living expenses for the care recipient of approximately \$300 per month (8; 13). Additional costs include medical equipment and services, mortgage or rent, transportation, medications, food and required travel. These costs may be partially funded by government programs or not at all. Caregivers can find themselves paying into the thousands per month depending on the needs of their loved one. Caregivers who travel to loved ones will experience greater stress, financial costs and lost work time.

The cost of caregiving is also felt by the caregiver's own family. This is usually related to decreased quantity and quality of time spent at home while balancing the needs of a parent or loved one, and work. With delayed marriage or child birth and second marriages, many caregivers are still raising children at home while caring for elders, thus stretching their time even further. Caregivers frequently suffer from 'role overload', 'caregiver strain', and strained relationships with their ensures and children (14, 45, 46, 22). The

with their spouse and children (14; 15; 16, 22). The impact at home is often increased responsibilities and workload for the non-caregiving spouse. Family resources get depleted as demands to assist the aging parents increase.

From the macro-economic perspective, caregiving represents an invisible source of lost income with almost 75% of elder caregiving provided by friends and family (10). The Canadian Caregiver Coalition agrees with Randall that these costs are in the billions and increasing annually. In contrast, Homecare funding for all of Canada was \$3.4 Billion in 2003(3). The invisible loss from informal caregiving reduces contributions to federal taxes,



private and public pensions, and personal savings that all support the growth of a healthy economy (13; 17). A variety of options currently exist that provide varying levels of support and intervention for the employee and their family. Some of these include: a *simple seniors resource and referral service, education sessions and information, individual and family consultation with personalized planning and recommendations*. Positive outcomes from Eldercare Programs that incorporate *consultation and personalized planning* include increased 'presenteeism', maintaining the caregiver's health and an increased appreciation for the employer who recognizes and supports their concerns (17; 2) **Simple resource and referral services only partially met the needs of the working caregiver and do not protect the health of the caregiver over time.** The need to support caregiving employees is increasing. Forward thinking companies should be early adopters to increase employee well being, work presence and retention.

Corporations and their managers will be looking at ways to maintain stability in the workplace with competing caregiving needs and also the upcoming movement of Baby Boomers into retirement. In order to retain, recruit and attract new employees companies that have comprehensive Elder Care Programs will be one step ahead of their competitors.

The benefits of Eldercare programs for employees and employers become evident after the discussions in this paper. Cost savings to the employer, employee and society can be significant. One study states that there is a \$1.50 return for each \$1.00 invested in supporting working caregivers in *simple resource services* for eldercare (1). With more *comprehensive consultation and planning services* for Eldercare Programs, the AARP (American Association of Retired Persons) says that 'companies realize a \$3 - \$14 return on every \$1 they invest in eldercare benefits' (18). Beyond the financial benefits are the stability in the workplace, reduction in crisis management and increased loyalty and retention of valued employees. **Proactively implementing programs with education, consultation and other resources is less costly and stressful than reacting to a crisis.** What is needed is support, guidance and advocacy provided by professionals trained in the needs of seniors, families, chronic illness and the complexities of our health care system. This service can save time, energy and money by objective and experienced assessment, planning and the implementation of strategies designed to minimize crisis and put control and choice back in the hands of the family. All plans need to be flexible and modify to changing health and circumstances.

The intent of the paper was to bring to light the current concerns for aging parents and working children as well as the future implications if left unaddressed. **The costs to the employer, employee , family and society are significant unless we develop meaningful solutions to reduce crisis.** We must approach problem solving strategies collaboratively as this is a shared responsibility of the individual, families, employers and governments.

Failure to act decisively will result in widespread caregiver burnout and risk of decreased dignity and quality of life for aging parents.

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### Bibliography

1. Rubin, Rose M. The economic costs of informal elder caregiving. *Business Perspectives*. Fall 2002.

2. Wagner, Donna L. Workplace Programs for Family Caregivers: Good Business and Good Practice. San Francisco : Family Caregiver Alliance, National Center of Caregiving, 2003.

3. **CARP.** A National Caregiver Strategy: Submission to the House of Commons Standing Committee on Finance. Toronto : CARP Canadian Association of Retired Persons, 2008.

4. Housing, Family and Social Statistics Division. General Social Survey cycle 16: caring for an aging society. Ottawa : Statistics Canada, 2002.

5. National Alliance for Caregiving & The Center for Productive Aging at Towson University. *The Metlife Study of Sons at Work, Balancing Employment and Eldercare.* Westport : Mature Market Institute, 2003.

6. Balancing Career and Care. Pyper, Wendy. 2006, Perspectives, pp. 5-15.

7. Randall, Patty. Lets Talk-The Care Years. 2007.

8. Alberta Health and Wellness. Continuing Care Strategy Aging in the Right Place. Edmonton : Alberta Heath and Wellness Communications, 2008.

9. Family Caregiver Alliance. Fact Sheet: Women and caregiving: Facts and Figures. San Francisco : National Center on Caregiving, 2003.

10. National Alliance for Caregiving & National Center on Women and Aging at Brandeis University. *The MetLife Juggling Act Study; Balancing Caregiving and Work and the Costs Involved.* New York : Mature Market Institute, 1999.

11. **Health Canada: Appendix I.** *Summary of Key Findings with Respect to Work-to-Family Interference.* Ottawa : http://www.hc-sc.gc.ca/ewh-semt/pubs/occup-travail/balancing-equilibre/app-i-eng.php, 2001.

12. National Alliance for Caregiving and Center for Productive Aging. *Corporate Eldercare Programs: Their Impact, Effectiveness and the Implications for Employers.* Towson University : LifeCare, 2008.

13. Adult Children and Their Parents Expectations of Future Elder Care Needs. Walz, Helga S., Mitchell, Thomas E. 2007, Journal of Aging and Health, pp. 482-499.

14. The Aging Population and Its Needs. Mann, William C. 2004, Pervasive Computing, pp. 12-14.

15. Advisors, Society of Certified Seniors. Working with Seniors; Health, Financial and Social Issues. USA : CSA, 2005.

16. **Knowledge@Wharton.** *The 'Eldercare Generation'' Cares About Continuing to Work: Are Companies Interested in Keeping Them?* University of Pennsylvania : http://knowledge.wharton.upenn.edu/article.cfm?articleid=1822, 2007.

17. Health Canada: Appendix H. Reducing Work-Life Conflict: What Works? What Doesn't? Role Overload. Ottawa : http://www.hc-sc.gc.ca/ewh-semt/pubs/occup-travail/balancing-equilibre/app-h-eng.php, 2001.

18. Young, Laurie. Newman, Sandra. *Caregiving and Retirement Planning: What Happens to Family Caregivers Who Leave the Work Force.* San Francisco : Family Caregiver Alliance, 2003.

19. Eldercare Costs in the Workplace. *Met Life Mature Market Institute*. [Online] National Alliance for Caregiving. [Cited: February 5, 2009.] http://www.eldercarecalculator.org.

20. Gross, Jane. As Parents Age, Baby Boomers and Business Struggle to Cope. New York Times. March 35, 2006.

21. **Health Canada Appendix K.** Reducing Work-Life Conflict: What works? Waht Doesn't? *Environmental and Workplace Health.* [Online] [Cited: 02 06, 2009.] http://www.hc-sc.gc.ca/ewh-semt/pubs/occup-travail/balancing-equilibre/app-j-eng.php.

22. *The Impact of Parent Care on Marital Quality and Well-Being in Adult Daughters and Sons*. **Bookwala, Jamila**. April 2009, pp 339-347.

#### **Recommended Reading:**

- Name: The New Old Author: David Cravit ISBN: 978-1-55022-843-4 Description: How baby boomers are changing aging
- The Mature Mind Author: Gene Cohen ISBN: 978-0-465-01204-6 Description: The positive aspects of the maturing brain
- The Complete Eldercare Guide Author: Caroline Tapp-Dougall ISBN: 978-0-470-83449-7 Description: Guide to looking at all of the issues for aging parents

#### Resources

- 1. AARP <u>http://assets.aarp.org/external\_sites/caregiving/planAhead/long\_distance\_issues.html</u>
- 2. Aging and Seniors Publications <a href="http://www.phac-aspc.gc.ca/seniors-aines/index\_pages/publications\_e.htm">http://www.phac-aspc.gc.ca/seniors-aines/index\_pages/publications\_e.htm</a>
- 3. Alberta Health and Wellness Documents http://www.health.alberta.ca/newsroom/pub-continuing-care.html
- 4. Compassionate Care Benefit <u>http://www.hrsdc.gc.ca/eng/ei/types/compassionate\_care.shtml#Who</u>
- 5. Eldercare Calculator http://www.eldercarecalculator.org
- 6. Patty Randall http://www.longtermcarecanada.com/
- 7. Zoomers (formerly known as CARP) http://www.50plus.com/index.cfm
- 8. Graph on Page 1 from website: <u>http://www.cihr-irsc.gc.ca/images/population\_pyramid\_e.gif</u>
- Cost-Benefit Review of Work Life Balance Practices 2009. Submitted to The Canadian Association of Administrators of Labour Legislation (CAALL). *Donna S Lero, University of Guelph. Julia Richardson, York University Karen Korabik, University of Guelph,* Centre for Families, work and Well-Being.