Eldercare and employment - What is the problem?

The steady aging of the population in the United States is by now a well-known demographic trend. Today, approximately 40 million Americans are age 65 and older; by the year 2030, more than 70 million Americans will be in this age group. Particularly after age 75, disability stemming from the accumulation of chronic health conditions often leads older adults to require help from others in every-day activities of daily living. Most older adults receive such help - ranging from transportation to financial assistance to grooming and other personal care - from family members, including spouses, daughters or sons, and in-laws. Considerable time and effort is often required to provide and arrange for health and social services for disabled older relatives, and family members often have to juggle this time and effort with their own full-time or part-time employment and other responsibilities. From the viewpoint of an employer, the business's bottom line could be adversely affected as growing numbers of employees provide what is often termed “eldercare.”

How does eldercare affect workplace productivity?

A national study of family caregivers found that more than 60% of employed caregivers reported that their eldercare responsibilities affected some aspect of their working lives. Work-related changes due to eldercare included partial or full day absences; increased workday interruptions; increased requests for unpaid leave; movement from full-time to part-time employment; and leaving the workforce prematurely or taking early retirement. Not surprisingly, female employees who provide 20 or more hours per week of eldercare typically require major accommodations at work.

Economic costs associated with these work-related actions are substantial. The MetLife Mature Market Institute has calculated the cost of lost work productivity due to eldercare by employees and found that costs ranged from $17.1 billion to $33.6 billion nationally, depending on the amount of eldercare provided.

How does eldercare affect employee health?

Caring for an older disabled relative has been associated with numerous physical and emotional health problems, ranging from fatigue to pain symptoms to depression. Caring for a spouse with cognitive impairment was found in one study to predict a higher risk of mortality, independent of any other risk factors. Further, when employees who provide eldercare have physical or emotional health problems related to their caregiving responsibilities, these employees are more likely to seek and use health care services than other employees. Obviously this can have a direct effect on employers' and insurers' health care expenses.

Findings from a recent study of a very large multi-national manufacturing company are quite sobering in terms of differences in health between employees with and without eldercare responsibilities. A total of 17,000 U.S. employees from this company completed health risk appraisal forms, and 12% of them reported caring for one or more elders. Employees of any age or gender who provided eldercare were more likely to report: that their health was fair or poor; that they deferred getting preventive medical care; and higher prevalence of depression, diabetes, hypertension, and pulmonary disease. Female employees with eldercare...
responsibilities reported more stress at home than women without eldercare duties. The various negative impacts of eldercare on employee health were as apparent in younger workers (ages 18-39) as in older workers (age 50 or older), suggesting that eldercare consequences are not limited to an older workforce. Excess employee medical care costs associated with eldercare were highest among younger employees, men, and blue-collar workers. Finally, this study estimated that health care costs for employees providing eldercare were 8% higher than for employees who did not, amounting to an estimated excess of $13.4 billion per year for all U.S. employers.

What can employers do for employees providing eldercare?

Eldercare programs were first started in larger companies beginning in the 1980s, mostly based in employee assistance programs. Largely they consist of referrals to community resources, rather than in-house services. Recent challenging economic times have led to a reduction in the proportion of large corporations offering an eldercare referral service, from 26% in 2006 to 11% in 2009, according to the Society for Human Resource Management annual surveys. Given the high productivity losses associated with eldercare, it may not be cost-effective in the long run to eliminate eldercare assistance services in the workplace.

Employers might consider changing workplace arrangements and benefits packages in cost-neutral fashion to accommodate the needs of employees providing eldercare. Examples of such strategies include flexible work schedules, telecommuting arrangements, and integrated paid time off benefits to replace distinct vacation, sick, and personal time benefits. Additional strategies to address health-related consequences of eldercare include establishing wellness programs aimed at these employees, such as stress-reduction seminars, on-site exercise and yoga classes, and relaxation techniques, in-person or online support groups for employees providing eldercare, and health coaching services or immediate access to health professionals employed by companies.

The most useful single community resource for employees who take care of elders is the local Area Agency on Aging (AAA). These AAAs cover all regions of the country, and offer free information and referral regarding local health and social service providers for the older population and family caregivers. Employers' human resource departments or employee assistance programs should have available the name and contact information for the local AAA. The website of the U.S. Administration on Aging, which is the federal agency responsible for local AAAs, has an easy-to-use map for identifying any local AAA: [www.aoa.gov](http://www.aoa.gov).

Recommended references:


