Eldercare and Caregiver Impact

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There are only four kinds of people in the world;
Those who have been caregivers
Those who are currently caregivers
Those who will be caregivers
Those who will need caregivers.

--Roslyn Carter, *Helping Yourself Help Others*
ELDER CAREGIVING CONTEXT:
Past Vs Future (Smith, 2004)

20th Century

- Life expectancy = 40
- In 1900 4% ≥ 65
- 1960-1999: 20-64% increase in women with children ≤ 6 in the workforce (↑ childcare support demands)

21st Century

- Life expectancy = 77
- 12% ≥ 65
- 1960-1994: >274% increase in old-old (≥85)
- 2011, 1st Babyboomers hit retirement age of 65
- By 2020, 40% of the workforce expects to care for an elder
- Predictions are that eldercare will equal/surpass childcare work/life concerns
**Childcare (CC) and ElderCare (EC)**

**Similarities**
- Primarily female caregivers
- Gendered nature of care
- Personal, professional, emotional and financial implications

**Differences**
- Care reversals
  - In/Dependence
  - Maturity/Death
  - Parent/Child role reversals
- Proximity concerns
  - In-home caregivers ≥ negative consequences
- Timing and Planning
  - EC precipitated by crisis;
  - EC not eagerly awaited
  - Not openly discussed
CAREGIVERS PROFILE: AMERICAN FEDERATION OF STATE COUNTY AND MUNICIPAL EMPLOYEES (AFSCME.)

- Women outnumber men (3:4).
- Most are middle-aged (35-64 years old—average age 46 years old.)
- She is married & employed full-time
- Most (83%) are relatives of the care recipient—typically wives, daughters, daughters-in-laws...
- She spends an average of 21 hours/week providing care
- 20-40% are also caring for children

The typical situation is a 46 year old daughter caring for her widowed mother who does not live with her.
Shaw (2006):
• Wives are approximately 60% of spouse caregivers.
• Nearly all spouse caregivers are $55 \geq$ or older; 33% are 55-69 range; 45% of spouse caregivers are in their seventies and some are in their 80’s (Johnson & Weiner, 2006)
Table 1. Percent Married, Probability of Surviving to Next Age, and Percent Female by Age

<table>
<thead>
<tr>
<th>Ages</th>
<th>Percent Married</th>
<th>Probability of Surviving to the Next Age</th>
<th>Percent Female</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Men</td>
<td>Women</td>
<td>Men</td>
</tr>
<tr>
<td>65-74</td>
<td>77.6</td>
<td>56.1</td>
<td>0.747</td>
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<tr>
<td>75-84</td>
<td>72.8</td>
<td>36.6</td>
<td>0.485</td>
</tr>
<tr>
<td>85 and over</td>
<td>59.4</td>
<td>13.9</td>
<td>N/A</td>
</tr>
</tbody>
</table>


*b Calculated from Life Tables for Males and Life Tables for Females, National Vital Statistics Reports, 2002.

*c Calculated from Current Population Survey, 2004; excludes population in nursing homes.

### Disabilities and Age

#### Table 2. Disabilities and Nursing Home Residence by Age and Gender

<table>
<thead>
<tr>
<th>Ages</th>
<th>Trouble Seeing&lt;sup&gt;a&lt;/sup&gt;</th>
<th>Impaired Mobility&lt;sup&gt;b&lt;/sup&gt;</th>
<th>Nursing Home Residence&lt;sup&gt;c&lt;/sup&gt;</th>
</tr>
</thead>
<tbody>
<tr>
<td>65-74</td>
<td>13.3</td>
<td>13.0</td>
<td>1.0</td>
</tr>
<tr>
<td>75-84</td>
<td>16.2</td>
<td>21.3</td>
<td>3.1</td>
</tr>
<tr>
<td>85 and over</td>
<td>29.2</td>
<td>35.1</td>
<td>11.7</td>
</tr>
<tr>
<td><strong>MEN</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>65-74</td>
<td>15.5</td>
<td>26.0</td>
<td>1.1</td>
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<tr>
<td>75-84</td>
<td>19.1</td>
<td>32.9</td>
<td>5.1</td>
</tr>
<tr>
<td>85 and over</td>
<td>34.7</td>
<td>59.5</td>
<td>21.1</td>
</tr>
<tr>
<td><strong>WOMEN</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<sup>a</sup> Source: Federal Interagency Forum on Aging Related Statistics. Older Americans 2004: Key Indicators of Well-Being. Table 16a, Non-institutionalized civilian populations, 2002.

<sup>b</sup> Table 19c, Medicare enrollees, 2002.

<sup>c</sup> Table 35a, Percent of age group, 1999

“Women are more likely than men to be disabled because of arthritis or osteoporosis or after a fall, conditions that are usually not fatal, but can lead to long periods of disability.” (Shaw, L. 2006, pg. 8.)
WHO ARE THE CARE RECIPIENTS?
The majority of Women 75+ are not married and nearly ½ live alone.

Although women have less assets than men, they rely on paid care (usually, low-paid, high turn-over) more than men.

11% men vs. 20% women 85+ live in nursing homes; 75% of nursing home residents are women.

72% of nursing homes are operated for profit and offer poor quality care (Eaton, 2005.)

Average cost of nursing home care is 70,000.00/year; median 65+ married couple net worth is $170,000 (2000); females 65+ net worth is $75,275. (Metlife Mature Market Institute, 2004)
ELDERCARE AS AN ISSUE ESPECIALLY FOR FEMALE WORKERS (SMITH 2004)

- Professional Impact of Eldercare includes:
  - Work productivity loss
    - Increased absenteeism (38% take time off,) tardiness, “presenteeism”
    - 30% rearrange their work schedule
    - Reduction of work hours; shift from full-time to part-time work (21% work fewer hours)
    - Quit working (16% quit their job)/Early retirement
    - Prolonged departures from work
  - Economic loss
    - Work disruptions lead to substantial adverse economic consequences (women typically have lower income then men)
  - Emotional and Physical Health costs
    - Women report greater stress then men
Economic loss (Smith 2004)
- Elder Caregivers suffer a loss of $659,139 over a lifetime (1999 MetLife survey)—lost wages, lost security benefits, and lost pension benefits.
- Add to this increased out-of-pocket expense 2-6 years at $20,000.00/year
2009 WSU ElderCare Impact Survey Results:

- 83.6% were women (n=313)
- 89% were full time employees
- 88.2% live with spouses/domestic partners
- 86% were between the ages of 36-65
- 28% dealt with elder and child care concurrently
- 60% anticipate dealing with elder care in the next 5 years (41% currently dealing with eldercare responsibilities)
- 44% had their elder living with them or in a home nearby
- 14% reported spending more than 30 hours/week caring for an elderly family member
- 45% reported physical and/or emotional strain
2009 WSU Survey Results (Continued)

- 37% are or have cared for elderly members 81 years of age and older
- 32% indicated that due to elder care responsibilities they had missed 1-3 days of work in the last 3 months
- 43% indicated elder care duties caused them to leave work early 1-3 days in the last 3 months
- 47% indicated productivity loss
- 39% said caring for elders had a mildly negative impact on their relationships with friends and family
- 19.4% indicated they seriously considered leaving WSU because of their eldercare responsibilities
- 15.3% indicated they considered seeking a different position at WSU because of their eldercare responsibilities
2009 WSU ElderCare Impact Interviews
WSU In-Depth Faculty Interview Themes

- Culture of silence
- Increased STRESS
- Negative impact on relationships with family and friends
- Females are primarily responsible for elder care
- Faculty members are unaware of resources
- Financial concerns
- Need for emotional/informational support
TRADITIONAL EMPLOYER SUPPORT (SMITH 2004)

- Social Security (1935) and Pensions (both depend on attachment to labor market)
  - Neither are enough to support typical needs of the elderly
  - Elderly women are less likely to have private pensions/social security benefits
    - Women less likely to be employed than men
    - Women (who will need more care than men) have less retirement money than men
      - Receive less benefits and live longer
  - Numerous caregiving activities do not lend themselves to outsource
  - Need to reorient to provide support for the swelling ranks of presently employed workers who care for aging adults.
- Family Medical Leave Act (1993)
Similar to childcare, support for elder care is good for the bottom line

- What do we know about loss of work productivity?
  - Cost of eldercare related workplace disruptions to employers = 11 billion to 29 billion (1997)—the largest cost associated with replacing employees.

Voluntary Employer Benefits

- Information benefits (least costly, most common)
- Financial benefits (e.g., Dependent Care spending accounts, most common; Long-term health insurance)
- Flexibility benefits (i.e., policies that offer greater workplace flexibility: flextime, compressed workweeks, job sharing, telecommuting)

Other?
Planning for Caregiving

Become familiar with:

- Insurance plans
- Living Wills
- POLST—Physicians Orders for Life-Sustaining Treatment—forms
- Written tools such as “5 Wishes”
- Assistive devices & products designed to help frail elders
- Physicians, Nurses, Therapists & Case Managers that specialize in geriatrics
- Federal & local agencies
- Legal & financial documents
- People or groups to turn to for Caregiver help and support
LOCAL CAREGIVER RESOURCES

- Council on Aging & Human Services/COAST
- Pullman Senior Center
- Bishop Place
- Whitman Senior Living
- Gritman Adult Day Health
- Local Caregiver Website: http://caregiver.wsu.edu/
- WSU Work-Life Comprehensive Caregiver website: http://www.worklife.wsu.edu/Elder%20Care
REFERENCES:

 American Association of State, County, and Municipal Employees: Eldercare Fact Sheet: http://www.afscme.org/issues/1761.cfm
THANK YOU

Especially to those of you who have been caregivers, are caregivers, and/or will be caregivers. You are valued and the work you do is important, especially to those of us receiving your care...