

Employment consequences of family/friend caregiving in Canada

Summary

There are more than 2.3M employed family/friend caregivers in Canada. Their multiple competing demands come with the risk of such negative employment consequences as missing work days, reducing work hours or foregoing job opportunities. These care-related employment consequences have economic costs for caregivers, their families and their employers. Using Statistics Canada's 2007 General Social Survey (GSS), we describe the characteristics of employed family/friend caregivers age 45 and older in Canada and the impact caregiving has on their employment. We found that:

- Over 1/3 of employed women and 1/4 of employed men aged 45 and older provide care to a family member or friend with long term health conditions or physical limitations.
- Three-quarters of all caregivers aged 45+ combined paid work and family/friend care. Over half of employed caregivers were women and most worked full time.
- Employed caregivers were typically aged 45-54, married, and had completed post-secondary education. More than half were caring for parents, yet 1 in 5 cared for non-kin. Many lived in the same community as the care receiver, but 1 in 6 cared at a distance.
- Employed caregivers spent less time on care tasks than those without paid work, but still spent the equivalent of a full work day caring for others. Collectively, employed caregivers provided 893 million hours of care annually, equivalent to 476,281 full-time employees.
- Employed men and women both cared for 1.7 care recipients on average, yet employed women spent an additional 3.75 hours per week more providing care, compared to their male counterparts. Gender differences were also evident in the types of care provided.
- Employed women caregivers were much more likely to incur employment consequences because of their caregiving responsibilities than their male counterparts: 30% missed full day(s) of work, 6.4% retired early, quit, or lost their paid job, and 4.7% turned down a job offer or promotion.
- Over 520,000 employed caregivers missed at least one day of work per month to provide care—collectively they missed nearly 1.5 million work days per month due to caregiving responsibilities.
- Over 313,000 employed caregivers reduced their hours of paid work to provide care—collectively they reduced their work hours by 2.2 million hours per week.
- Close to 17% of women and 15% of men reported reducing their paid work hours because of caregiving responsibilities; however, among those who reduced their paid work hours, women give up an average of one full work day (8.3 hours) each week, compared to an average of 5.8 hours for men.
- Public and workplace policies (Family Responsibility Leaves, workplace flexibility) can reduce the extent of work-family conflict and its consequences for caregivers and employers.





More than three quarters of caregivers to individuals with a chronic health problem or limitation are employed and most work full time. Employed caregivers have many demands on their time — as employee, caregiver and for some, parent. Their competing demands come with the risk of such negative employment consequences as work interruptions, reduced productivity, missing work days, reducing work hours, or foregoing job opportunities. These consequences of care, in turn, can have negative economic consequences for caregivers and their families.

Employers also may accrue costs as a result of absenteeism, lost productivity, and recruitment and training of new personnel to replace talented, experienced employees. For these reasons it is important to better understand employed family/friend caregivers and the impact that caregiving has on their paid employment.

Research objectives

- To describe the characteristics of employed family/friend caregivers in Canada and the consequences caregiving can have for their employment
- To compare the care work of employed caregivers (E) and non-employed caregivers (NE)
- To identify gender differences between women (W) and men (M) employed caregivers and the employment consequences they incur.

Data source

We analyzed data from Statistics Canada's 2007 General Social Survey (GSS) on family, social support, and retirement. From the total sample of 23,404 respondents aged 45 and older, we drew a sub-sample of 3,896 people who were employed and had provided unpaid care to another adult with a long-term health condition or physical limitation during the 12 months prior to the survey. Care includes assistance with one or more of:

- indoor domestic tasks
- household maintenance or outdoor work
- transportation and errands

- personal care
- medical treatments or procedures
- care management; and
- emotional support.

Those who provided only emotional support were not included in our sample as no data were collected on time spent providing emotional support.

Analysis

We report proportions and averages to describe the characteristics of employed Canadians providing care to family members and friends and the ways in which caregiving affects their employment. Data were weighted to ensure that the findings are representative of the Canadian population.

2.3M employed caregivers in Canada

In 2007, 37% of employed women and 28% of employed men aged 45 and older provided care to a family member or friend with long term health conditions or physical limitations. Over 2.3M, or three-quarters of, Canadian caregivers aged 45+ were in the labour force. Women and men employed caregivers were almost equally represented (W 52.5%, M 47.5%), and most worked full time in the paid labour force (W 79%, M 90.1%).

Who are employed caregivers?

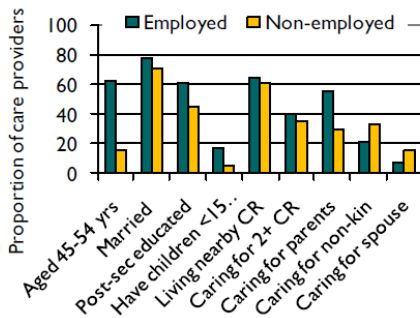
The majority of employed caregivers were aged 45-54, married or common-law, and held a college diploma or university degree (Figure 1). One in 6 was parenting a child(ren) under the age of 15 years, in addition to their caregiving and paid job responsibilities. Forty percent provided care to two or more people.

More than half of employed caregivers were caring for parents (or parents-in-law) (55%), yet 1 in 5 cared for friends and neighbours (19.7%). Fewer than 10% cared for spouses (7.3%) or siblings (6.2%).

Nearly two-thirds of employed caregivers lived in the same community as the primary person they cared for (65%); less than 20% co-resided with the care receiver (17.9%). One in six employed caregivers



Figure 1. Characteristics of Caregivers



Source: 2007 GSS

care at a distance, adding a half day or more travel time and expenses to their costs of caregiving.

In contrast to employed caregivers, non-employed caregivers are older, and are less likely to live with a spouse or partner. One in four non-employed caregivers lived in the same household as their primary care receiver. Non-employed caregivers were also more apt to care for friends and neighbours (31%), spouses (15.3%) and siblings (11.3%).

Employed caregivers spend 1 day/week providing care

While non-employed caregivers spent more time providing care than employed caregivers (13.2 hr/wk v. 8.0 hr/wk¹), employed caregivers still spent the equivalent of one full work day per week on care tasks in addition to the time spent at their (mostly full time) paid jobs. In fact, employed caregivers in Canada provided an estimated 893 million hours of care annually or the equivalent of 476,281 full time employees.

Employed and non-employed caregivers do similar care tasks, the main exception being indoor and outdoor home maintenance, which employed caregivers are more likely to do (53%) than their non-employed counterparts (40%).

¹ Hours of care relate only to primary care recipients.

Employed women spend more time caregiving

When we examined gender differences among employed caregivers, we saw that employed women spent significantly more time providing care overall than their male counterparts – on average an additional half work day per week (W 9.8, M 6 hrs/wk). Gender differences were also evident in the types of care provided. A significantly higher proportion of employed women than men caregivers assisted with emotional support (W 92.9%, M 81.1%), transportation, shopping and banking (W 85.5%, M 82.7%), indoor domestic tasks (W 62.5%, M 37.8%), care management (W 50.4%, M 39.8%), personal care (W 38.0%, M 16.7%), and medical treatments (W 29.7%, M 19.6%). The one exception to this pattern was that a higher proportion of employed men (64.6%) than women (42.4%) caregivers helped with home maintenance or outdoor work.

Women incur more employment consequences

Employed women caregivers also were much more likely to experience employment consequences related to caregiving than employed men caregivers (see Figure 2). Almost 21% of men and 30% of women had missed at least one full day of work to provide care within the previous 12 months. Women who missed days of work were also absent for more days than men (3.1 days per month on average compared to 2.4 days for men). In fact, over 520,000 employed caregivers missed one or more days of work per month to provide care; collectively they missed nearly 1.48 million days of work to provide care.

Women and men were almost equally likely to report reducing their paid work hours because of caregiving responsibilities (W 16.8%, M 15.3%). Among those who reduced hours, women cut back their work hours more, giving up the equivalent of one full work day (8.3 hours) each week, compared to an average of 5.8 hours for men. Over 313,000 employed caregivers reduced their work hours to accommodate care responsibilities; collectively reducing their paid employment by over 2.2 million hours.



Employment consequences of caregiving

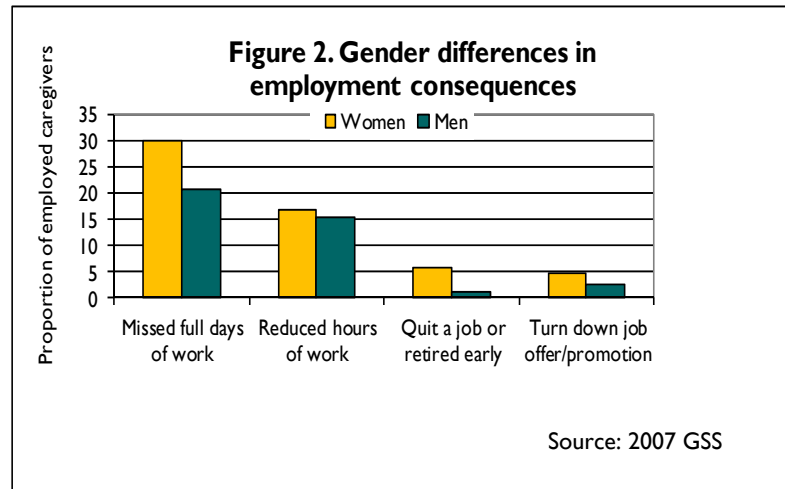
Together these consequences represent an enormous loss of productivity to employers and to the economy in general; the equivalent of 157,000 full time employees annually.

Less than 5% of employed women caregivers and 3% of their male counterparts turned down a job offer or promotion because of their caregiving responsibilities. Quitting or losing a job also were rare occurrences (W 2.0%, M 0.5%), as was retiring early to provide care to a family member or friend (W 4.4%, M 1.1%).

When we look at these consequences by employment status, we see that women who were employed full-time were more likely to be absent from work to provide care than those who worked part-time (FT 30.7%, PT 23.1%). However, women caregivers who were employed part-time were more likely to forego job offers or promotions (PT 5.2%, FT 4.3%), or to lose a job (PT 1.5%, FT 0.4%) because of their caregiving responsibilities.

Workplace supports available—theoretically

Employed caregivers find it helpful to have access to workplace supports such as flexible work arrangements and caregiving leaves. Many Canadian caregivers reported that such options were



available in their workplaces, including the option to: work part time (48%); work a flexible schedule (38%); take a leave to care for spouse/partner (86%) or other family member (80%); take extended personal leave (85%); or telework (19%). However, more than one third (38%) of those who reported having these options also reported that they didn't feel that they could use them without adversely affecting their careers.

Implications for public policy and business practice

Work-family conflict is a serious problem for many Canadians. Employed caregivers, especially those who provide more hours of care or those who work longer hours, face particular challenges balancing work and caregiving roles. Women make more employment-related accommodations to manage simultaneous paid work and care responsibilities, often at the cost of lost wages and benefits for themselves and their families, which translate into reduced economic security and lower pension benefits in the longer term. Public policies and workplace supports have been shown to reduce the extent of work-family conflict and the employment-related consequences that caregivers and employers might otherwise incur, but not when barriers to access prevent those in need from benefitting from them.

About the Policy Brief

Funding provided by the Population Change and Lifecourse Strategic Knowledge Cluster and Human Resources and Skills Development Canada. Views expressed are solely those of authors: Janet Fast (PI), Karen Duncan, Chelsea Dunlop, Jacque Eales, Norah Keating, Donna Lero, and Satomi Yoshino.

This policy brief is also a FACT sheet of the Research on Aging Policies and Practice.

