



THE METLIFE STUDY *of*
SONS AT WORK
BALANCING
EMPLOYMENT AND
ELDERCARE

*Findings from a
National Study by the
National Alliance for Caregiving
and
The Center for Productive Aging at
Towson University
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The Center for Productive Aging at Towson University provides a focal point for aging-related academic, research and community outreach programs of the university. Academic programs at Towson include an undergraduate degree in Gerontology, a Graduate Certificate and Master's Degree in Applied Gerontology. Center faculty are involved in applied research related to the aging workforce, family caregiving and aging in the community. Towson University's Center for Applied Information Technology provides technological support for the research activities of the Center.

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The MetLife Study of Sons at Work: Balancing Employment and Eldercare

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Executive Summary

An increasing percentage of the workforce is actively involved in caring for a relative or friend age 50 or over, and studies have shown that nearly half of those caregivers are men¹. Through an on-line survey of nearly 1400 employed caregivers at three Fortune 500 companies, this study looks at how caregiving situations are different for employed men and women who are providing eldercare, and how gender makes a difference in balancing work and family.

Key findings include:

- Men are providing care and are just as likely to report that they are the primary caregiver
- Men are taking responsibility for the same everyday tasks (Instrumental Activities of Daily Living) as women, including managing medications, grocery shopping and transportation
- Women are reporting more involvement than men in personal care tasks (Activities of Daily Living) such as bathing, dressing and toileting
- More men than women are providing long-distance care
- The majority of both men and women reported that they needed to modify their work schedules and miss some work as a result of caregiving
- More men than women reported having to forego work-related travel. A surprisingly high percentage, one-quarter of respondents of both sexes, reported considering a job change as a result of caregiving
- Men are less likely than women to discuss caregiving with co-workers
- Two-thirds of men and women did not know about existing corporate eldercare benefits.

Introduction

It is estimated that 15% of the workforce may be actively involved in providing care for an older family member or friend.² As older adults continue to increase in both number and proportion of the American population, it is anticipated that increasing numbers of families will become involved in providing assistance to an older person. Since 1986, employers have been developing programs at work to better support those employees who are trying to juggle work and family care in order to minimize adverse workplace consequences of family care.

In some studies of working caregivers undertaken to guide the development of these support programs and to increase our understanding of how workers balance their often competing responsibilities, researchers have observed a relatively large number of males responding. This response pattern contradicts the “conventional wisdom” about family caregiving as a woman’s issue.

This study was designed to examine how men and women compare as they seek to balance their work and family responsibilities.

What We Know About Male Caregiving

Studies of caregiving in the general population suggest that approximately one out of three caregivers is male.³ In some caregiving situations, men are very well represented among caregivers; in spousal care, for example, or as caregivers for someone with AIDS. It has been assumed, however, that parent care typically falls upon the daughter and that involvement of sons is limited to providing

“I find it somewhat more difficult as a male caregiver than most women in similar situations.”



support for the sister whom is acting as a primary caregiver. Nonetheless, recent studies of caregivers for older adults have demonstrated that many men are the primary caregivers to an older parent. Spillman and Pezzin report that the percentage of men reporting they are the primary caregivers in the National Long Term Care Survey increased 50% between 1984 and 1994.⁴

Some researchers suggest that men have a more difficult time providing care because the caregiving role is so closely tied to gender. Men who provide care may have concerns about their own competency as a caregiver. Men may be less comfortable discussing their caregiving activities with others and may also be reticent or uncomfortable seeking support for the emotional aspects of caregiving.⁵ As more American families and the husbands and sons who make up these families undertake eldercare responsibilities, it is important that we learn more about how men balance work and family, how they are similar to women at work to the extent to which they make workplace accommodations for their caregiving, and how employers and service providers might better address their needs at work.

The importance of this research and subsequent work designed to expand our understanding of gender issues and caregiving derives from demographic shifts and concomitant family changes. Women are now almost as likely as men to be fully engaged in the world of work and there is a trend towards the redistribution of gender roles within the family.⁶ Nearly half of the workforce has eldercare and/or childcare responsibilities.⁷ And, finally, smaller family size coupled with an aging workforce and population aging suggests

that, in the future, the workforce will continue to struggle with competing demands of work and family and both men and women will be involved in balancing work and family responsibilities.⁸

Research Questions and Methodology

The current study, which focused on eldercare, was designed to address the following research questions:

- How are caregiving situations different for employed men and women?
- Does gender make a difference in workplace accommodations?
- Does gender make a difference in how work and family are balanced and perceived?
- Do men and women prefer different workplace programs?
- Can programs in the workplace better address gender differences?

To explore these questions, a web-based survey was designed for and distributed to employees of three Fortune 500 companies. Each of the companies involved has a work-life program available which helps and supports employees who are providing care to an older relative or friend. Each employer sent e-mail invitations to employees encouraging them to visit the Web site and complete the survey. The survey was maintained on the Towson University Web site to foster confidence in the confidentiality of the research and the privacy of the respondents. There were a total of 25,221 invitations distributed. A total of 1,386 employees completed the survey for a 5% response rate.

“It is extremely difficult to balance work and caregiving because people who do not know the daily complications of caring for an older relative cannot sympathize.”



The limitations of the current study are based upon the sample and the survey instrument. Since the survey was a web-based survey, only employees with access to and comfort with computers were likely to complete the survey. All employees in the participating companies had access to computers, but the sample is not representative of the U.S. workforce in general. The study was not

designed to examine the prevalence of caregiving within the workforce of the three participating companies nor the prevalence of male caregiving within the workforce. And finally, there were many areas that could not be explored in this study due to space limitations and sensitivity concerns of employers.

A Profile of a Male Caregiver

The following profile reflects the characteristics of many of the men who responded to the survey:

Jim, a 48-year-old accountant working for a large international corporation, has been helping his mother for two years. His mother, now 79 years of age, relies upon Jim to help with a range of tasks including transportation to and from doctors' appointments, grocery shopping, housework and medication management. Jim also occasionally prepares meals for his mom.

Jim spends about 12 hours a week taking care of things for his mother. He stops by her apartment every other evening on his way home from work, checks on the home health aide during the day, and phones her to make sure that the "meals-on-wheels" driver has shown up. One thing that Jim has become acutely aware of during his two years as a caregiver is that just when he thinks the care arrangements are working smoothly, something will change and require his attention. The home health aide quits, his mother's health changes, or his mother's physician decides not to accept Medicare assignment, requiring Jim to make other arrangements. It's a logistical and emotional roller coaster for Jim. He's grateful for the support of his wife who is there to pitch in when things get too complicated and takes too much time away from his work.

Jim has difficulty talking about his caregiving situation at work. He feels as if his boss might think he is not serious about his career if he

brings his personal life into the office. And he does not want to talk to his co-workers about his problems—having heard their complaints about having to carry the load of other workers with family distractions. Fortunately, Jim's employer has a flextime policy that has made it possible for Jim to miss work during the middle of the day providing he has planned for his absence in advance. This policy doesn't require him to share his reason for the absence. Jim's employer also has an eldercare program that provides caregiving employees with information and linkages with eldercare services and with other support services. However, Jim was not aware of this program when we spoke with him. He thought the program sounded like a good idea, but wouldn't use it if he had to let any of his co-workers or supervisors know about it.

Although Jim believes that he has done a good job keeping his work and caregiving separate and managing them both, he is finding it increasingly difficult and is considering a job change. He feels as if there might be a new job for him in a company that allows him more flexibility in scheduling and where he doesn't need to travel. And he frankly is concerned that his mother's deteriorating health condition might require more work accommodations and revelations to his supervisor and co-workers about his situation.



Key Findings of the Study

THE CAREGIVING SITUATION

Men and women reported doing similar caregiving tasks with the exception of personal care, or help with Activities of Daily Living, a set of activities that are more likely undertaken by women than men. Men are just as likely as women to report they are the primary caregiver. More men are providing long-distance care, but men are also just as likely as women to report they are sharing a household with the eldercare recipient. And an equal number of men and women reported that they had expected to become caregivers for a family member or friend.

Similarities Between Men and Women

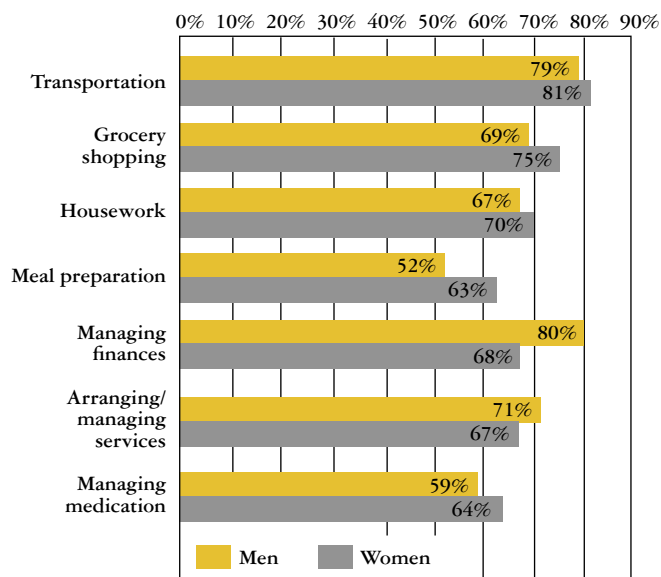
The findings of the study suggest that working men and working women have very similar patterns of caregiving for an older person. Most men and most women reported:

- Caring for a parent or parent-in law
- Being the primary caregiver
- Providing a full range of day-to-day help

Men and women were just as likely to report responsibilities for the day-to-day instrumental activities of daily living (IADLs) such as grocery shopping, transportation and housework, with the exception of meal preparation. Men were more likely to manage finances than women. (See Figure 1)

“I am running myself ragged trying to take care of my grandmother and do a good job here at work. The only person I am shortchanging is myself.”

Figure 1 Helping With Everyday Activities

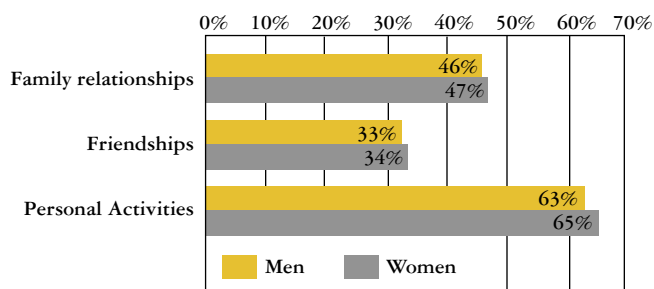


Almost half of both the men (48%) and women (42%) reported that they were contributing financial support—an average of \$273 per month in out-of-pocket expenses, or nearly \$3,300 per year.

“The biggest issue is the financial drain that caring for an older relative causes.”

Another area of similarity was that of the personal consequences of caregiving responsibilities. Men were just as likely as women to report that caregiving resulted in negative consequences. (See Figure 2)

Figure 2 Negative Consequences of Caregiving



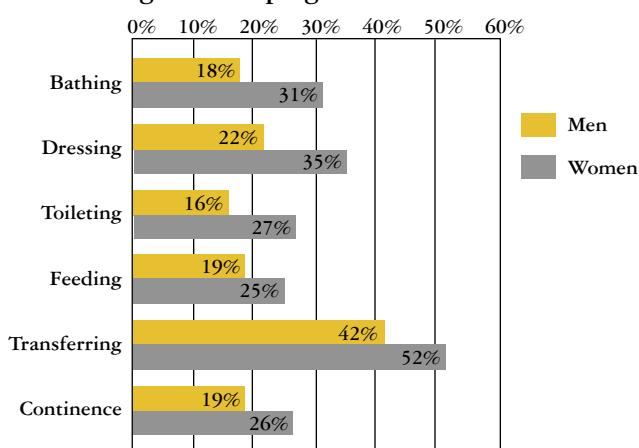
The majority of both men and women reported they had expected to provide care—64% of the men and 60% of the women.



Differences Between Men and Women

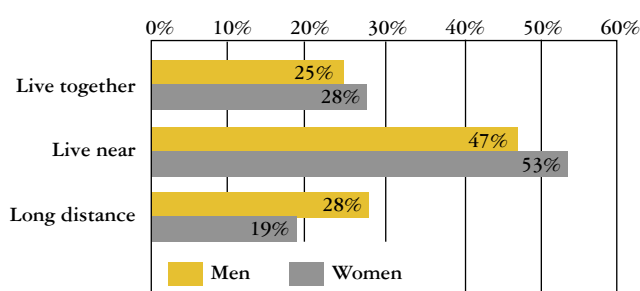
The primary difference between working men and women in their reported caregiving situation is in the area of personal care, or Activities of Daily Living (ADLs). Women were more likely than men to report that they were providing personal care services to the elder they were helping—tasks that include dressing, bathing, toileting, feeding, transferring and continence help (See Figure 3). In fact, the involvement of women in the often demanding personal care services, may explain, in part, the assessment of health effects of caregiving: women being more likely than men to report negative health effects.

Figure 3 Helping with Personal Care



Men and women were equally likely to report that they lived with or near the care recipient. Men, however, were more likely than women to report that they provided care at a distance. For the purposes of the study we used living more than an hour away as a proxy for long-distance caregiving. (See Figure 4)

Figure 4 Location of Caregivers and Recipients



A quarter of the men and 28% of the women reported they shared a residence with the elderly they were helping.

“Long-distance care is difficult because of the distance and the guilt of not being there for your parent. She was there for me when I was little. Will my kids be there for me?”

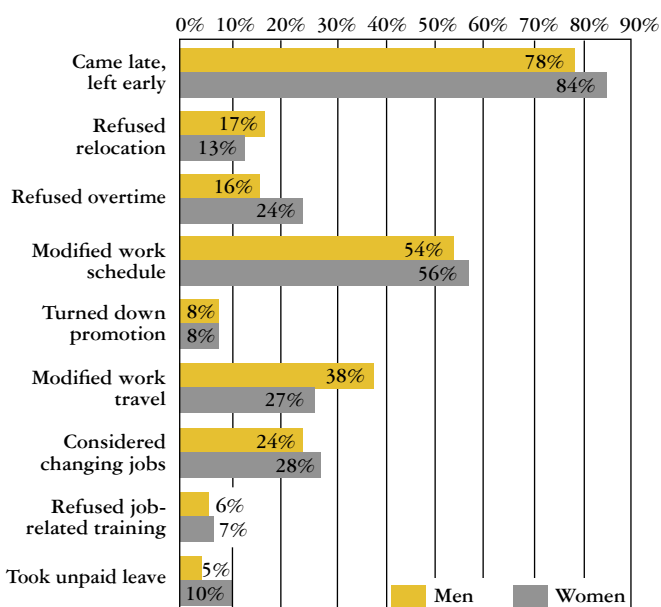
Workplace Effects

The vast majority of both men and women report the need to modify work schedules and miss some work as a result of their caregiving responsibilities.

For most working caregivers, time is a precious resource. Taking time off, coming in late to work or leaving early are common accommodations to caregiving responsibilities.

“Caregiving for an elder is viewed quite differently in the workplace than caring for a child.”

Figure 5 Workplace Accommodations



Nearly a quarter of the respondents reported that they had to refuse overtime work (21%), with women more likely reporting this effect than men. And nearly a third (31%) reported having to forego work-related travel, with more men reporting this effect than women.



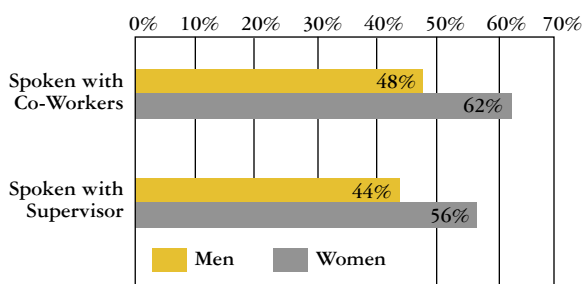
Managing the Effects of Caregiving at Work

Men are less likely than women to discuss caregiving with co-workers and supervisors or to report that their co-workers and supervisors are supportive of their family caregiving. This may explain why men are also more likely to report that neither their supervisor nor their co-workers know that they are providing care. A surprisingly high percentage (27%) of the respondents—men and women alike—report they are considering a job change as a result of their caregiving/work experiences.

Previous research suggests that, for some working caregivers, work may provide a respite from their caregiving⁹. Many caregivers also report that they are gratified that their supervisor and/or co-workers understand and support their caregiving activities.

In this study, men were less likely than women to report that they had spoken with co-workers and supervisors. And, they were more likely than women to report that neither their supervisor nor their co-workers know about their caregiving responsibilities. (See Figure 6)

Figure 6 Letting Co-Workers and Supervisors Know About Caregiving Responsibilities



“I think it hurts your career because you can’t talk about it.”

When asked whether eldercare responsibilities carried with it a stigma in the workplace, the majority of both men and women reported that there was no stigma (87% of the men and 76% of the women). Among those who did feel there was a stigma, women were more likely than men to report elder-

care carried a stigma at work. It is interesting to compare these responses to the statistically significant difference between men and women when it comes to their willingness to speak to co-workers or supervisors about eldercare. The reticence of some men to talk about caregiving at work may be more related to attitudes and beliefs about their responsibilities as men than a belief that eldercare carries a stigma. These same men, for example, may be just as hesitant to discuss childcare responsibilities as eldercare responsibilities.

“All I hear from my supervisor is that I need to stop letting my personal life affect my business life.”

Nationally, about 10% of the working caregivers take early retirement or leave work altogether as a result of their caregiving responsibilities.¹⁰ In our sample, women (20%) were more likely than men (11%) to report they were considering quitting work as a result of caregiving responsibilities. And, the study found that about one-quarter of all of the respondents were considering a job change.

Findings of Importance to Employers

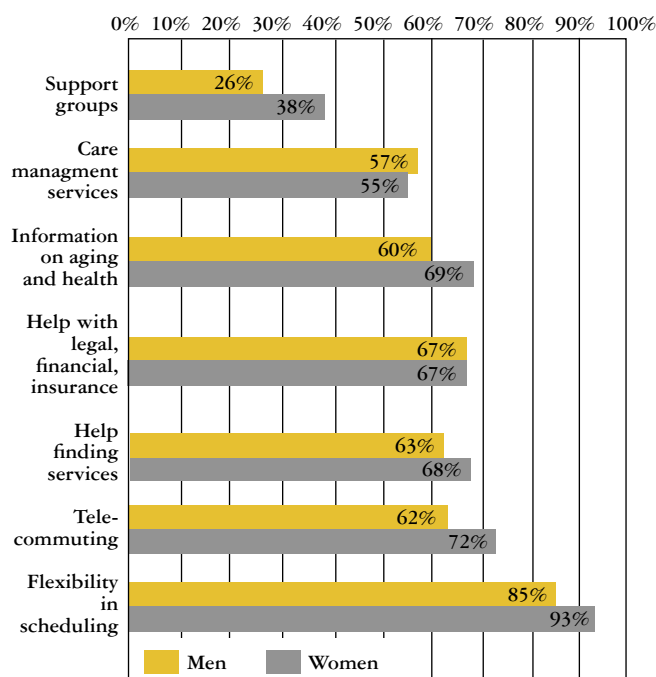
Employers have a stake in designing responsive and effective programs to support their caregiving employees. Research has demonstrated that the cost to employers of lost productivity and other factors related to caregiving employees’ difficulty in balancing work and family is high.¹¹ Employers may be unaware that caregiving affects their male employees in similar ways as it affects their female employees. Some of the key findings of our study with relevance to employers follow.

- Only about a third of our respondents reported that they knew about their company’s eldercare programs despite the fact that the programs in place were comprehensive and available to all employees.



- Men were less likely than women to discuss their caregiving with co-workers and supervisors and therefore may be more difficult to identify as in need of support or assistance from workplace program professionals.
- Men are just as likely as women to have expected to provide care.
- Those who had not expected to provide care had more difficulty balancing work and family obligations and were more likely to turn down promotions as a result of caregiving responsibilities.
- Men and women indicate that they value and would use a range of services (see Figure 7).

Figure 7 Services Employees Would Value and Use



- Men and women were just as likely to report considering a job change as a result of their caregiving responsibilities. Predictors of considering a job change are:

Being the primary caregiver, feeling that their supervisor was not supportive and believing that there was a stigma attached to eldercare in their workplace.

- Although modifying work schedules is a widespread situation among working caregivers, the predictors of doing so include:

Being a male, a primary caregiver, a younger worker, having to arrange and manage services, and providing some personal care.

- Nearly two-thirds of men and women reported that caregiving had at least some effect on their career. Predictors of reporting that caregiving has a negative effect on career include:

Co-workers who were not supportive, and believing that eldercare carried with it a stigma at work.¹²

Implications of the Study

“Managers should call the employee in and give them information about caregiving and alternatives.”

The current study findings have several important implications for employers seeking to support employees with family responsibilities. The first, and the most important, is the recognition that male employees are often involved in providing eldercare assistance to an aging relative, with many men displaying a reluctance to discuss their eldercare responsibilities with co-workers or supervisors. A significant body of literature now suggests that our assumptions about eldercare as a “women’s issue” needs to be challenged and certainly will be challenged in the future as more and more men become caregivers. And, although men and women have similarities in their caregiving patterns and in their work-related accommodations, they may differ in the ways they seek help at work. Other implications include the following:

- Both men and women, when faced with eldercare responsibilities, could benefit from assistance with assessment of family needs. While all three employers in this study sponsor comprehensive eldercare programs, two-thirds of the employed caregivers did not know about them.



One reason individuals may not be aware of them is that, when the programs were first announced, the employee was not a caregiver and did not need to know about the benefit at that time. With this in mind, employers with eldercare programs should inform their employees on a continuing basis and through a variety of channels about the availability of such services.

“Caring for a sick child is an acceptable reason to be off, caring for a sick older relative is not given the same priority.”

- Men, to a greater degree than women, are reluctant to discuss their personal lives with supervisors and co-workers. Since less than half of the men in this study had spoken to their supervisors about their eldercare responsibilities, it is likely that many of the supervisors were unaware of the employee’s caregiving situation. It is also possible that the men felt that their supervisors would not provide support. Employers should provide training and education to managers and supervisors at all levels to help them better understand caregiving issues, recognize that men as well as women are providing care, and be knowledgeable about company benefits and policies related to eldercare.
- The caregiver’s need for work schedule modification, having responsibility for managing and arranging services, providing some personal care, being a primary caregiver and being a younger male are risk factors for work-related negative outcomes of caregiving. This finding suggests that providing support to employees to help them manage and arrange services is a critical intervention. A geriatric care manager approach, currently being used in a number of large companies, may be the appropriate choice to reduce these risks.

- Often, employees who provide eldercare become aware of the need to plan for their own long-term care needs. Employers can assist them by providing education about long-term care options and costs, and by offering long-term care insurance as an employee benefit.

In conclusion, we are likely to see more male employees involved in caregiving for an older family member or friend in the future as a result of changing demographics. These male employees need support as much as their female counterparts. Both men and women are likely to respond positively to eldercare programs at work that are tailored and directed to their specific needs and are understood and embraced by all levels of management.

Footnotes

- ¹ Bond, J.T., Galinsky, E., & Swanberg, J.E. (1998). *The 1997 National Study of the Changing Workforce*. New York: Families and Work Institute.
- ² Wagner, D.L. (1997). *Comparative Analysis of Caregiver Data for Caregivers to the Elderly: 1987 and 1997*. Bethesda, MD: National Alliance for Caregiving.
- ³ Kramer, B.J. (2002). “Men Caregivers: An Overview”. In Kramer & Thompson (eds). *Men as Caregivers: Theory, Research, and Service Implications*. NY, NY: Springer Publishing Co.
- ⁴ Spillman, B.C. & Pezzin, L.E. (2000). Potential and Active Family Caregivers: Changing Networks and the “Sandwich Generation”. *The Milbank Quarterly*, Vol. 78, pp. 347-374.
- ⁵ Kramer, B.J. & Thompson, E.H. (2002). *Men as Caregivers: Theory, Research and Service Implications*. New York, NY: Springer Publishing.
- ⁶ Barnett, R.C. (1998). “Toward a Review and Reconceptualization of the Work/Family Literature.” *Genetic, Social and General Psychology Monographs*, 124, pp. 125-183.
- ⁷ Galinsky, E., Bond, J., & Friedman, D. (1993) *The Changing Workforce: Highlights of the National Study*. NY, NY: Families and Work Institute.
- ⁸ Neal, M. & Wagner, D. (2001). *Working Caregivers: Issues, Challenges, and Opportunities for the Aging Network*. An Issue Brief Prepared for the National Family Caregiver Support Program, Administration on Aging. www.aoa.gov.
- ⁹ Enright, R.B. & Friss, L. (1987). *Employed caregivers of brain-impaired adults: An assessment of the dual role*. Final report submitted to the Gerontological Society of American. San Francisco: Family Survival Project.
- ¹⁰ NAC/AARP (1997). *Family caregiving in the U.S.: Findings from a national study*. Bethesda, MD.
- ¹¹ Metropolitan Life Insurance Company (1997). *The MetLife Study of Employer Costs for Working Caregivers*. New York, NY.
- ¹² The findings that include predictors or risk factors of work-related outcomes are based upon analytical models developed to explore these factors; models were examined using multiple regression analysis.



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