



Eldercare and the Psychology of Work Behavior in the Twenty-First Century

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Abstract

Over the next two decades, many countries, including the USA, will experience an unprecedented and seismic demographic transition as their older adult populations grow, both in number and as a proportion of the overall population. During this time, the number of working adults with eldercare responsibilities will grow substantially, posing a threat to the well-being and economic stability of both workers and their organizations. This phenomenon is a long anticipated symptom of the greater “eldercare crisis,” yet the response of organizations to this impending change has been relatively slow, and the experiences of working caregivers remain an almost entirely neglected area of research in the organizational sciences. In this special issue, we begin a conversation with the IO/OB community regarding the importance of studying the experiences of caregivers and their employing organizations. We introduce six original research papers, which highlight various issues facing eldercarers and the implications of these findings for employees and their employers. We also summarize themes from across these and other published papers on eldercare, providing an overview and directions for future research on eldercare with the intention of springboarding more research on this critical and timely topic. We end with next steps for researchers and practitioners who wish to collaborate to bring about meaningful innovative solutions to this problem.

Today, nearly one in five employees is engaged in caregiving for an elderly spouse, family member, or friend (AARP, 2015) and as many as 60% of employed caregivers report that their eldercare responsibilities affect some part of their work experience (Fortinsky, 2011). Caregiving has been linked to adverse psychological and physiological health outcomes as well as declining attitudes and performance at work, and national studies of working caregivers suggest that organizations stand to lose billions of dollars per year to productivity declines, tardiness, absenteeism, and turnover among employees with eldercare responsibilities.

Silver Tsunami is the term used to describe the seismic wave of retiring baby boomers who will both need care and need to provide care for loved ones in the coming years. By the year

2030, nearly one in five (20%) adults will be aged 65 and older and the percentage of US workers caring for an elderly person is expected to triple (Knickman & Snell, 2002). Adding to this, a recent Pew Study (Parker, 2012) titled “Boomerang Generation” suggests that nearly 30% of Americans aged 24–35 continue to live with their parents. Thus, many adult workers are likely to find themselves “sandwiched” between, simultaneously caring for both children and their aging parents. Because of increasing life expectancies, as well as growing demands for an increasingly short supply of quality healthcare services, the cost of formal care for many families is likely to be prohibitive. Working adults, especially women, are likely to bear the brunt of informally caring for their aging parents while trying to successfully manage demands from work and other life roles (Bott, Sheckter, & Milstein, 2017). Despite the looming disruption to the employee–employer relationship as more employees take on caregiving roles, very little research in Industrial-Organizational Psychology/Organizational Behavior (IO/OB) has addressed the experiences of working elder caregivers.

Our symposium, “Caring for elders while working: Initial findings and future directions” (Griggs & Lance, 2017), was the only scheduled event on eldercare in the program at the 2017 conference for the Society for Industrial Organizational Psychology (SIOP). Based on a search of programs dating back to 2003, we believe it to be the only symposium in the history of SIOP to directly address the topic of informal eldercare in relation

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to working caregivers and caregivers' employing organizations. In fact, our search revealed only one SIOP poster (i.e., Agosta, Ford, & Fei Jin, 2015), in the last 15 years to specifically address the topic of eldercare. Similarly, a search of the past 10 years of Academy of Management conference proceedings reveals only a handful of papers (i.e., Adkins & Premeauz, 2017; Bainbridge & Broady, 2017; Ferraris & Perry, 2016; and Greller, 2009) that directly explore topics related to informal eldercare. How did this widespread and apparently important topic come to be almost entirely neglected in mainstream IO/OB literature? This void is one that we sought to fill with our 2017 SIOP symposium.

Our symposium highlighted the increasing prevalence and importance of eldercare in contemporary society and the potential effects that providing eldercare may have on employed caregivers and their employing organizations (Griggs & Lance, 2017). Within this broad context, Thrasher, Bramble, Zabel, Wynne, and Baltes (2017) used latent profile analysis to identify four different forms (types) of caregiving relationships, each with its own set of contributing factors, structural characteristics, and implications for the eldercare recipients, their caregivers, and the caregivers' employing organizations, thus demonstrating that elder caregiving is not a unitary phenomenon. Dugan, Barnes-Farrell, Fortinsky, and Cherniak (2017) provided an initial review of the effects of various aspects of the caregiving role on employee well-being (e.g., anxiety, depression, resentment). Griggs, Lance, and Baranik (2017) examined how elements of social support and coping serve to buffer the effects of compromised physical and emotional health brought on by elder caregiving on subsequent non-participation in the workforce (i.e., turnover). And Jean and Bergman (2017) examined in detail how childcare and eldercare are very different phenomena along several important dimensions of caregiving responsibilities. This represented a first step toward our larger goal of introducing the topic of eldercare to the mainstream IO/OB community and stimulating additional research on this largely unexplored area of work–non-work relations.

While attendance was good and the SIOP symposium led to valuable insights and discussion, we realized that we had a long way to go in reaching in the larger IO/OB community. So, most of the symposium participants and some of the audience members repaired to one of the conference hotel's fine restaurants to continue our discussion on next steps over nachos, burritos, and other Mexican delicacies. One option that was proposed was for some of us to form an editorial team that would develop and eventually publish a special issue on eldercare for one of our IO/OB journals. Given their focus on organizational sciences and their reputation as a top journal in the field, with consistent upward momentum in popularity among IO/OB researchers (Landers, 2018), *Journal of Business and Psychology* (JBP) was identified as a potentially receptive option. We pitched this idea at SIOP to JBP Editor, Steven Rogelberg, whose initial interest was piqued by the idea, and we were off.

Method

In early May 2017, we submitted a formal proposal to JBP for a special issue on eldercare, which included a strong case for research in this area, including the relevance of eldercare to JBP readership, important questions that need to be answered related to eldercare, a list of known researchers and research centers conducting research on eldercare, a plan for our editorial process, and a list of qualified reviewers from whom we would solicit help. The Editor circulated it among several JBP Editorial Board members for review and evaluation. Responses were overwhelmingly and almost uniformly positive, e.g., “Fantastic topic.... Great set of editors. Love the pairing of junior and senior editors,” “a timely and understudied topic,” and “highly relevant to our aging workforce.” As a result, we were given a green light to proceed and we did so by formulating a timeline with major milestones and their corresponding deadlines.

In early July 2017, we circulated our formal Call for Proposals in outlets that reflect the interdisciplinary nature of elder care research (e.g., Work Family Researchers Network, Gerontological Society of American, Sloan Center for Age and Work, SIOP, Academy of Management Careers Division, and others). By the proposal deadline in late August, we had received twenty-six, 750-word proposals that we considered for development into full-fledged submissions for peer review. Using criteria such as (a) fit with the mission of the special issue; (b) theoretical, conceptual, and practical relevance to eldercare issues in the context of work; (c) importance and incremental contribution; (d) methodological rigor, and (e) expectation that the project could be completed within our established timelines, we extended invitations to 13 (sets of) authors from 8 countries, ranging from Australia, to Hong Kong, to Finland, to Spain, Canada, and the USA, to develop their proposals into papers subject to JBP's normal peer review process. In the meantime, we assembled our international ad hoc Editorial Review Board, consisting of many of the world's top work–family and eldercare researchers, which are listed below.

Complete papers were received from all 13 author teams in mid-March 2018. After initial peer review, authors of seven of these papers were offered invitations to revise their papers based on the reviewers' and action editors' comments (one of which was later withdrawn by the authors for logistical reasons). Revised papers were received in September 2018 and in December 2018, we communicated our decisions to accept the six papers that follow for publication in our special issue.

What Is in This Special Issue?

In what follows, you will find a diverse set of studies, researchers, and approaches to answer important questions concerning eldercare. The first paper by Clancy, Fisher, Daigle, Henle, McCarthy, and Fruhauf provides a conceptual

model and state-of-the-science review of the literature on eldercare and work. Next, Bramble, Duerk, and Baltes apply latent-profile analysis to identify sub-groups (i.e., types) of eldercare givers and the effect of group membership on work outcomes. Peng, Jex, Zhang, Ma, and Matthews use daily diary data to examine spillover effects of eldercare demands on the work–life interface, including time theft, at the week level. In a multistudy paper, Henle, Fisher, McCarthy, Prince, Mattingly, and Clancy investigate discrimination against job applicants due to the presence of eldercare responsibilities. Cheng, Jepsen, and Wang investigate the effect of eldercare on subjective well-being using a ten-wave sample of Australian national data. Finally, Halinski, Duxbury, and Stevenson (Halinski et al., [Special Issue: Eldercare](#)) apply role theory to examine the effects of objective and subjective metrics of caregiver burden on employee work and life outcomes.

While these papers are all very different, several themes related to the state of eldercare research can be drawn from them. First, the near absence of research on eldercare in IO/OB research is widely acknowledged, as is the growing prevalence of eldercare responsibilities among today’s workforce. Second, the need for an expanded operationalization of eldercare in IO/OB research is also noted. Third, implications for both employees and organizations are plainly highlighted, although a review of these papers will reveal that we have only scratched the surface in validating the full nomological network of individual difference and organizational predictors and organizational and individual physical and psychological health outcomes related to eldercare. However, these papers do provide clear and compelling reasons, including some ethical, some legal, and some related to organizational performance, for investigating the impact of eldercare on both individual and organizational outcomes.

Where Do We Go from Here?

There is still much work to be done. In 2013, Calvano provided a review of the population of 31 studies relating to eldercare responsibilities and work outcomes, only five of which were published in what could be traditionally considered “mainstream” IO/OB journals. The six papers in this special issue of JBP more than doubles that total. The importance of eldercare issues as they relate to the IO/OB literature and the (perhaps surprising) absence of studies addressing them will ring clear as you read the articles in this special issue. It is our goal and hope to open up this frontier subfield of IO/OB literature and to stimulate additional scholarly work on this too-long ignored topic.

IO/OB researchers can contribute to our growing knowledge on the topic of eldercare in several critical areas. However, perhaps the biggest challenge facing an IO/OB researcher who may be interested in eldercare issues is the fact that “eldercare” is not a single coherent unified field of study; one will not properly enfold eldercare research into the psychology of work behavior by

Table 1 Disciplines that study eldercare

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| Clinical psychology |
| Community psychology |
| Education and counseling |
| Epidemiology |
| Family studies |
| Gerontology (psychology of aging) |
| Happiness/quality of life studies |
| Health psychology and social behavior |
| Industrial/employment relations |
| IO/OB/HR |
| Management |
| Medicine |
| Mental (dis)abilities (dementia) |
| Nursing |
| Palliative medicine |
| Physical medicine and rehabilitation |
| Popular news outlets (e.g., magazines, newspapers, blogs, TV and radio broadcasts) |
| Psychiatry, geriatric |
| Public policy |
| Sociology and social work |
| Women’s studies |

merely marrying the applied psychology and gerontology literatures. One needs to only examine the literature cited by Calvano (2013), Van Durme, Macq, Jeanmart, and Gobert (2012); Burch, Dugan, and Barnes-Farrell (2019); and Clancy et al. ([Special Issue: Eldercare](#)) to see that the “eldercare literature” is scattered throughout the diverse disciplines listed in Table 1, among others. A successful eldercare researcher cannot be parochial.

With this in mind, we present the following directions for IO/OB/HR newcomers who wish to pursue inquiry scholarship on eldercare:

Operationalizing and Measuring Eldercare

First, and perhaps most important, is that we become clearer and more refined when operationalizing and measuring the construct of eldercare. It has been generally established in the literature that informal eldercare, also known as caregiving or eldercaring, applies when a person provides unskilled, uncompensated care to a “senior” who needs assistance (most commonly a family member such as a spouse or parent or to a friend or a neighbor; Shoptaugh, Phelps, & Visio, 2004; Smith, 2004). This care may entail meeting both the psychological and physiological needs of the recipient. For instance, the specific duties of caregiving may entail assistance with daily living (ADLs) such as bathing, grooming, toileting, preparing meals, and feeding, or, instrumental activities of daily living (IADLs; e.g., shopping for groceries and medications,

managing money, doing laundry, managing finances) which aid a recipient with independent living. While some of the literature operationalizes eldercare demands by the degree to which carers engage in ADLs and IADLs, much of previous research in IO/OB has simply treated eldercare as a binary and unidimensional variable (i.e., someone either provides care or they do not) (Calvano, 2013). When measuring eldercare demands, IO/OB research should consider the intensity (e.g., number of hours engaged in ADLs/IADLs), frequency (e.g., number of times per day/week), and duration (time in caregiving role) as these are likely to define boundary conditions for caregiving outcomes. For instance, Cheng et al. ([Special Issue: Eldercare](#)) finds that the binary distinction of providing care seems to yield a positive impact on caregiver well-being, but when number of hours is considered, the relationship to well-being is negative.

Caregivers' subjective experiences in caregiving may play as important a role as do objective caregiving demands. In a review of published tools used to measure the impact of eldercare, Van Durme et al. (2012) reveal nearly two dozen specific dimensions which might be used to operationalize subjective perceptions related to the eldercare experience, including perceived burdens (e.g., caregiving task difficulty, overload), rewards (e.g., caregiving uplifts, satisfaction, meaning and mastery) coping strategies (e.g., caregiving social support, self-efficacy), and outcomes (e.g., caregiver well-being, grief).

The development of multidimensional caregiver/caregiving profiles such as those identified by Bramble et al. ([Special Issue: Eldercare](#)) is also promising and helps us to better understand how various constellations of variables may characterize and influence typical caregiver experiences. We still know relatively little about potentially meaningful differences in caretaking for different types of care recipients (e.g., the chronically or terminally ill vs. those with relatively short-term or acute healthcare needs) or how the types of needs being met by caregivers (e.g., physical, social/emotional, managerial, and spiritual) may differentially affect caregiver outcomes. This limits the validity with which we measure and generalize findings about caregiver experiences as well as what we can learn about alleviating the burdens or increasing rewards associated with these experiences.

Methodological Approaches

Next, like much of the research in our field, most research on eldercare has been conducted using cross-sectional surveys. While these studies contribute to our understanding of individual differences in caregiver experiences, longitudinal and cross-lagged studies such as the study presented by Peng et al. ([Special Issue: Eldercare](#)) would be beneficial in understanding the evolution of individual caregiving experiences and the potential for changing needs of caregivers over time (Calvano, 2013). Studies which test feedback loops wherein outcomes of eldercare reciprocally impact predictors may provide greater

context around resource loss spirals or gains such as those highlighted by current theoretical models like Conservation of Resources model (Hobfoll, 1989, 2001) and Job Demands-Resources (JD-R) model (Demerouti, Bakker, Nachreiner, & Schaufeli, 2001). Likewise, qualitative studies which focus on better understanding the critical decision-making processes or which help us understand the dyadic experiences of caregiver-care recipient relationships would be helpful in determining the types of resources working caregivers need to remain healthy and be successful as they balance work with caregiving.

Work-Related Outcomes

Papers published in this special issue and previous eldercare research highlight the impact of eldercare on employee stress and well-being outcomes (e.g., stress, role overload, work-life conflicts, depression; Pinquart & Sörensen, 2003) and workplace outcomes (e.g., time theft, maladaptive behavior changes at work, work engagement, performance; Peng et al., [Special Issue: Eldercare](#); Calvano, 2013). But there are other outcomes that may be of interest to organizational researchers, such as the neglect of self-care while caregiving, physical and mental health declines, and other subjective and objective work outcomes (e.g., commitment, OCBs, benefits exhaustion, absenteeism, lost career opportunities, and workplace or workforce withdrawal behaviors) which may translate into decipherable financial losses to both individuals and their employers. Total workforce withdrawal also has major economic implications for individuals. For example, adults who opt out of work to perform eldercare experience an estimated \$303,000 in lost wages, pensions, and social security benefits. When this number is multiplied by the 9.7 million adults aged 50+ who are caring for the elderly, the economic impact to society is nearly \$3 trillion. This may be even greater if workers draw from public benefits due to unemployment (MetLife, 2011).

Positive Outcomes from Eldercare

The extent to which eldercare may lead to positive outcomes, perceived benefits or rewards and work-life enrichment should also be explored. Work-family enrichment (Greenhaus & Powell, 2006), or positive spillover, occurs when experiences in the work domain enhance or improve experiences in the family domain. Family-work enrichment occurs when involvement in a family role provides enhanced mood, feelings of support, or increased skills or competence, which helps an individual recharge, cope with stress, or increases confidence in one's role at work. Although eldercare has unique characteristics that distinguish it psychologically from other forms of family caregiving, studies of work-family enrichment suggest that positive experiences at home may spill over to work, influencing job satisfaction, affective commitment, and performance (McNall, Nicklin, & Masuda, 2009). These studies provide a starting point

for thinking about why and under what conditions eldercare can produce positive work outcomes for caregivers and for designing studies to examine these questions empirically. Studies should include mediation models to explore the specific processes (e.g., social support, improved self-efficacy, flexibility) by which eldercare leads to enhanced work outcomes and by which work experiences lead to enhanced caregiving outcomes.

Individual Differences in Elder Caregiving Experiences and Outcomes

Research on individual differences in caregiver experiences has focused predominantly on gender and cultural differences, with strong evidence that despite the growing number of men helping with managerial tasks related to eldercare, across many cultures, women bear greater burden for eldercare, even for their in-laws. Cultural expectations regarding the burdens associated with caregiving may disproportionately affect female employees. Henle, et al. ([Special Issue: Eldercare](#)) suggests that female caretakers may be at a disadvantage in employment decisions, particularly when being evaluated for traditionally male-dominated jobs. Gender differences in perceived obligations to provide care, or in work and career outcomes from caregiving, should be further explored.

Finally, personality has been linked to coping and health in response to caregiving, explaining as much as a quarter of the variance in caregivers' mental health and about 10% of the variance in their physical health (Löckenhoff, Duberstein, Friedman, & Costa Jr., 2011). Personality has also been linked with how effectively workers may transition into and out of the caregiving role. But more can be done to explore the degree to which individual differences in core self-evaluations and coping styles may contribute to caregiver experiences.

Resources Which May Buffer Stress of Caregiving Demands

Personal, occupational, and social resources should be further examined as means by which to reduce the demands or the effects of eldercare demands. For example, financial resources, occupational type, and job flexibility may represent job characteristics which help individuals manage the competing demands of work and caregiving. We know that compared to their white collar counterparts, blue collar workers are more likely to work physically demanding jobs and are less likely to be offered formal workplace benefits, which means they are more likely to take unpaid leave to handle eldercare demands (Peng et al., [Special Issue: Eldercare](#)).

Much of the work–family research in recent years has explored the impact of informal support on work–family conflict. We suggest that research further explore the impact of eldercare-specific social support from work (e.g., eldercare-supportive supervisor behavior, eldercare support from coworkers, and

eldercare-supportive organizational culture) as well as eldercare-specific support from family (spouse/partner, children, extended family) and community (e.g., neighbors, friends, church, community) on caregiver experiences and outcomes.

What Formal Organizational Interventions Will Work?

Perhaps one of the most important questions for organizational researchers is how organizations can help. Few studies have examined the efficacy of organizational interventions for employed caregivers. While we know researchers are working in this area, we do not yet have a clear picture about how organizations can or should proceed. Researchers should examine the impact of informal (e.g., family supportive supervisory behaviors) and formal workplace policies and or benefits (e.g., stress management, family caregiving information, education and planning, eldercare referrals, workplace affinity groups for caregivers, eldercare subsidies, preventative healthcare, retirement planning) on individual and work outcomes for caregivers. One approach that may help in this area is for researchers to develop models of stress and coping for caregivers, and to describe decision-making related to employee resource allocation, caregiving choices (e.g., Kossek, Colquitt, & Noe, 2001), and financial/retirement planning, which could be used to inform and educate caregivers and their employers.

Research and Practice Should Take a Wide Lens

Like other topics at the work–family interface, a broad conceptual approach to scholarship and practice for elder caregivers will almost certainly require us to examine the influence of factors from various life domains (i.e., work, family, community) and to consider the impact and interests of various stakeholders (organizations, individuals, families, society).

Taking lessons from other countries about how they are handling the eldercare crisis may prove beneficial. A 2016 special section in *Ageing International* on eldercare in Asia (Hinton & Chen, 2016) suggests that at least in Asian countries, ownership for support of working elder-caregivers is not yet determined. Government organizations, families, community religious and social organizations, healthcare organizations, and workplaces may all bear some burden in supporting employed caregivers. These researchers call for a more collaborative and integrative societal approach to supporting family-based informal eldercare in Asia and abroad.

We urge employers not to sit and wait before determining their role in helping employees manage their eldercare responsibilities. The time has come. The business case has long been made for helping employees to manage work and family responsibilities, to reduce conflict and stress, and to improve engagement and performance at work. Creative, innovative, and collaborative investments in eldercare interventions are likely to reap

great benefits for employees and employers. We encourage practitioners to join conversations about best practices, to develop partnerships with government and community organizations, and to create avenues for research on interventions and organizational support for eldercarers. One way to do this is to collaborate with researchers in conference symposia related to workplace interventions. Intervention research stands to greatly improve the contributions of applied psychologists and OB practitioners in the field of work–family research (see Kossek, Baltes, & Matthews, 2011), and it will be in working together that we can have the greatest positive influence on the lives of working caregivers.

Thanks to Our Reviewers

As a final note, we wish to extend our sincere gratitude to the ad hoc Editorial Board for their invaluable support of our efforts toward producing this special issue. We could never have done it without you!

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