



Patient Home Advantage
Giving families a voice.

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Caregiver Stress; A Summary of Costs

Fifty-nine percent of informal caregivers have jobs in addition to caring for another person. Because of time spent caregiving, more than half of employed women caregivers have made changes at work, such as going in late, leaving early, or working fewer hours <https://www.womenshealth.gov/publications/our-publications/fact-sheet/caregiver-stress.html>

The MetLife Study on Caregiving Costs

http://www.caregiving.org/data/Caregiver_Costs_Study_Web_FINAL_2-12-10.pdf

The research with over 17,000 persons indicates that those engaged in caring for an elderly person averages 8% additional costs to an employer compared to a non-caregiver. This has can add over 13 Billion Dollars to overhead. Medical costs were 11% for blue-collar caregivers and 18% for male caregivers. Additionally, Employees providing eldercare were more:

Likely to report fair or poor health in general. For example, among female employees ages 50 and older, 17% of caregivers reported fair or poor health compared to 9% of non-caregivers.

Among men ages 18 to 39 and women ages 40 to 49, caregivers were also marginally more likely than non-caregivers to report lower health ratings.

Employees providing eldercare were significantly more likely to report depression, diabetes, hypertension, or pulmonary disease regardless of age, gender, and work type. Female employees with eldercare responsibilities reported more stress at home than non-caregivers in every age group. Stress at home appears to affect younger female caregivers most frequently. Caregivers were more likely to report negative influences of personal life on their work.

Eldercare was associated with greater health risk behaviors. Smoking is higher among male caregivers, especially younger males and white-collar caregivers relative to non-caregivers. Alcohol use is higher among blue-collar caregivers.

Employees with eldercare responsibilities were more likely to report missed days of work with much higher absenteeism among ages 18 to 39. Overall, 9% of non-caregivers missed at least one day of work over the past two weeks because of health issues compared to 10% of caregivers.

Excess employee medical care costs associated with eldercare were highest among younger employees, males, and blue-collar workers. Caregivers 18 to 39 demonstrated significantly higher rates of cholesterol, hypertension, chronic obstructive pulmonary disease (COPD), depression, kidney disease, and heart disease.

Demographic trends indicate that a greater number of employees of all ages will assume the role of family caregiver with an increasingly older population. The results demonstrate a clear impact of eldercare burdens on the health issues facing employees ages 18 to 39, as much as those ages 50 and older.

Together, these results suggest that caregiving for an older relative is an important factor in the health, medical care expense, and productivity of employees across all age groups, and therefore in the health costs for employers. The results demonstrate a clear impact of eldercare burdens on the health issues facing employees ages 18 to 39, as much as those ages 50 and older.

Together, these results suggest that caregiving for an older relative is an important factor in the health, medical care expense, and productivity of employees across all age groups, and therefore in the health costs for employers.

Employers can serve employees best interests as well as those of the corporation by anticipating and responding to the challenges of eldercare. In combination, eldercare benefits and wellness programs can provide not only the needed support to working caregivers, but also a vehicle to directly reduce employee health care costs, with resulting bottom-line benefits to the employer

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Always treat others the ways you want to be treated. *Jesus*