The Caregiving Crisis and the Impact of an Aging Population on Workers and their Employers

Today, nearly one in five workers cares for an elderly spouse, family member or friend (AARP, 2015) and roughly 60% of working caregivers report that their eldercare responsibilities affects some part of their work experience (Fortinsky, 2011). Caregiving has been linked to adverse psychological and physiological health outcomes and several national studies of working caregivers suggest that organizations stand to lose billions of dollars per year to lost productivity, higher rates of tardiness, absenteeism, and turnover among employees with eldercare responsibilities. Despite the looming disruption to the employee-employer relationship as more employees take on caregiving roles, very little research in IO/HR/OB has addressed the experiences of working elder caregivers (Shoptaugh, Phelps & Visio, 2004).

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 20% of adults will be aged 65 and older and the percentage of U.S. workers caring for an elderly person is expected to triple (Knickman & Snell, 2012). Also, a recent Pew Study (Parker, 2012) publication titled “Boomerang Generation” suggests that nearly 29% of Americans aged 24-35 continue to live with their parents. Thus, many adult workers are likely to find themselves “sandwiched,” 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 health care services, the cost of formal care for most 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 work and demands from other life roles. Furthermore, this is not just an American phenomenon. Due to the aging of world populations, this is an issue of global relevance that may play out somewhat differently in other national and cultural settings.

Despite an abundance of research on work-family balance and the competing demands of work and childcare in the last several decades, very little research in the fields of IO/HR/OB has addressed the needs of workers who are providing eldercare to aging adults. This is surprising, given that eldercare appears to yield more psychological strain than childcare (Duxbury, Higgins, & Smart, 2011) and because caregivers are more likely to cut down on work, take a leave of absence or leave work altogether to perform caregiving duties for an elder. Indeed, child and elder caregiving experiences are likely to differ along multiple dimensions, including the financial, physical and psychological demands of caregiving, and resources and support available for these roles.

Outside of the IO/HR/OB literature, research on the effects of elder caregiving has a long history within the fields of gerontology and lifespan psychology. Empirical and meta-
analytic results from these areas consistently finds that engaging in eldercare increases the presence of financial strains, marital strain, and depression, while having negative effects on subjective well-being and physical health (e.g., Kramer & Kipnis, 1995; Pinquart & Sorensen, 2006). Research from a gerontological viewpoint has established many important themes concerning eldercare surrounding gender differences in burden and tasks and the beneficial role of resources, support, and coping strategies. However, this body of literature only indirectly and tangentially addresses the effect eldercare has on work outcomes. For example, an early paper in the Gerontologist by Kramer and Kipnis (1995) does examine gender differences in eldercare-work conflict; however, they highlight the need for future research on job characteristics, flexible schedules, and work demands. Within the organization psychology literature, Shoptaugh, Phelps, and Visio (2004) highlight the absence of research on eldercare in relation to job attitudes stating, “Surprisingly, especially in light of the growing interest in employer-sponsored eldercare assistance, we found few studies that explored eldercare responsibilities in relation to job attitudes.” (p. 182). While there have been a handful of articles within the IO/OB literature that examine eldercare in relation to constructs such as emotional health, engagement, and organizational support (e.g., Lee, Walker, & Shoup, 2001; Zacher & Winter, 2011), there is a substantial need for an increased focus on the processes and boundary conditions that surround the effects of eldercare on employees.

What the eldercare literature does consistently point to is the significant demands and resource use associated with caregiving roles. The presence of eldercare as a common and unique role among the population presents an important and noticeable gap in the work-family literature, which some organizational researchers have already begun to address. For example, caring for an older individual has been linked to deleterious mental and physical health outcomes, financial strain, and reduced work performance (Zacher & Winter, 2011).

Eldercare has been part of the discussion in much of the work-family literature, frequently measured as a demographic descriptor of study samples, or cited in the discussion as an important future consideration – but to date, very few empirical papers in our field directly address the outcomes of eldercare. However, the increased presence of work-focused eldercare research at SIOP, AOM, the National Institute for Occupational Safety and Health (NIOSH), the Society for Occupational Health Psychology (SOHP), and the Gerontological Society of America (GSA) suggest there are a number of researchers working on projects targeted at answering important questions within this domain.

This special issue at JBP is specifically targeted at research on eldercare and its effect on important individual and organizational outcomes. Our goal is to highlight the practical significance of this issue within modern organizations by bringing the topic of eldercare into the main stream of organizational psychology research. Our call will focus on papers that apply novel methodologies across diverse samples to deepen our understanding of how this emerging issue affects organizations as well as the employees within them.

Submission Process
Submissions will be first evaluated based on an initial proposal (see details below). Proposals will be reviewed by the guest editors. Authors will receive a response to their proposals with the potential for an invitation to submit a full manuscript. While we are hopeful that the proposal process will help authors align their papers with the goals of the special issue, acceptance of a proposal does not guarantee acceptance of the final manuscript. Proposals should be 750 words excluding tables, figures, references. Please submit proposals by email to Tracy Griggs (GriggsT@winthrop.edu) no later than August 31, 2017. Submissions should be saved as .pdf, or .doc and should be formatted using APA style.
Proposals for the special issue may be either inductive, deductive, or conceptual in nature. Proposal will be evaluated based on:

- Fit with special feature goals
- Theoretical, conceptual, and practical relevance to eldercare care issues in the context of work
- Importance of and incremental contribution of proposed study
- Methodological rigor
- Expectation that the project and/or manuscript can be completed by the established deadlines

Information to be highlighted in proposal:

- Authorship team
- Contributions to the area of eldercare research and practice
- Explicit hypotheses/propositions as warranted
- Sample description and data collection plan as warranted
- Rationale for timeliness of expected project completion
- Data analysis plan and power analysis as warranted

**Timeline**

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**Some potential topics that we are interested in, but not limited to include:**

*Defining and distinguishing eldercare from other caregiving experiences*
- *(e.g childcare, caring for an individual with special needs) and what implications that has for workers and employer support?*

*Impact of increasing caregiving demands on worker outcomes*
- Impact of eldercare on employee stress and wellbeing outcomes (e.g. Stress, anxiety, work-life conflicts, depression, physical health declines, neglect of self-care while caregiving, etc.)
- Extent to which eldercare may lead to work-life enrichment?
- Impact of eldercare on work outcomes (satisfaction, commitment, performance workplace/workforce withdrawal behaviors total workforce withdrawal)
- Career related “opportunity costs” associated with eldercare (lost wages, sacrifices to career or promotion, etc.)

*Processes by which effective eldercare leads to successful work outcomes*
- Profiles of successful working elder caregivers and work-related motives of caregivers
- Development of models of stress and coping for caregivers
- Models describing decision-making related to resource allocation, retirement planning, etc.
**Resources which may buffer stress or caregiving demands**

- Impact of formal workplace policies and or benefits on the eldercare experience, or, the extent to which eldercare leads to benefits use or benefits exhaustion
- Impact of informal support on the caregiving experience or caregiver outcomes (e.g. support from supervisors, coworkers, friends, church, neighbors, community)
- Outcomes of employer based benefits or support programs - stress management, family caregiving planning, eldercare referrals, eldercare subsidies, preventative health care, retirement planning, etc.

**Individual Differences in elder caregiving experiences and outcomes**

- The influence of culture on, or cultural expectations on, the experiences of working caregivers
- Gender differences in obligations to provide care, in the eldercare experience, or outcomes from eldercare experience
- Caregiving profiles (e.g. what variables influence the caregiving experience (e.g. degree of involvement in basic personal care, level of assistance with daily living, # of supportive siblings, financial resources, availability of one trusted caretaker, etc.))?

**REFERENCES**


