**TUG OF WAR: CARING FOR OUR ELDERS WHILE REMAINING PRODUCTIVE AT WORK**

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TUG OF WAR: CARING FOR OUR ELDERS
WHILE REMAINING PRODUCTIVE AT WORK

The Idea:

On January 1, 2011, 10,000 baby boomers a day began turning 65 in the United States and will continue to do so for the next nineteen years (O’Connor, Prusiner and Dychtwald, 2010). These individuals will enjoy greater longevity than previous generations, but as life expectancy increases so does the likelihood of experiencing disability and disease (Crimmins and Beltrán-Sánchez, 2010). For example, approximately five million Americans currently have Alzheimer’s disease, with the number projected to increase to 16 million by 2050 (Alzheimer’s Association, 2011). Although this data pertains to the United States, aging populations are a worldwide phenomenon (Kotsadam, 2011; Liu, Dong and Zheng, 2010; Zacher, Jinnieson and Winter, 2012).

Almost a third of the population in the United States is presently engaged in some form of eldercare, spending an average of 20 hours per week over a span of roughly five to 18 years (Smith, 2004). This burden falls most heavily on women (Bookman and Harrington, 2007), although responsibilities seem to be increasing for men (Barrah, Baltes, Shultz and Stolz, 2004). In addition to their eldercare duties, two-thirds of caregivers are employed, which may create conflict between the two roles. Indeed, surveys by MetLife (1997; 2006) indicate that productivity losses in the workplace due to eldercare responsibilities seem to be significant and growing.

Although eldercare is a source of work-family conflict and demographic trends point to increasing conflict, scholarly research on the topic is limited compared to other work-family issues such as childcare (Lee, Foos and Clow, 2010; Zacher, Zimmieson and Winter 2012). In addition, eldercare is often bundled together with childcare under the umbrella of caregiving, even though its challenges are distinct (Halpern, 2005; Koerin, Harrigan and Secret, 2008). Even more significantly, with a few notable exceptions (e.g., Bainbridge, Cregan and Kulik, 2006; Kossek, Colquitt and Noe, 2001), the relationship between eldercare responsibilities and work outcomes is largely absent from the management literature despite its importance as an emerging issue for organizations and their employees.

Given the demographic trends that point toward increasing conflict between eldercare and work responsibilities and the limited existing research on the topic, an opportunity exists for management and organization scholars to make a major contribution to understanding the phenomenon. As a springboard, this paper examines the relationship between eldercare responsibilities and work outcomes

To Whom the Article is Speaking:

This article is primarily aimed at scholars in the fields of general management, human resource management and organizational behavior. However, the societal implications of the growing need for eldercare and its potential conflict with work also make this article of interest to business and society scholars. Finally, since eldercare has long been perceived as a gendered issue because most caregivers have been women, this article may also be of interest to gender and diversity scholars.

The Importance of the Idea:
This importance of my idea is straightforward. Demographic trends point to increasing conflict between eldercare and work, yet academic research – especially in business and management – is limited. My paper will examine recent cross-disciplinary research on the relationship between eldercare responsibilities and work outcomes, identify key issues and findings and present them to readers with the goal of introducing an emerging topic that has major implications for individuals, organizations and society.

How I am Going to Communicate My Idea:

In my examination of the question “what is the relationship between eldercare responsibilities and work outcomes”, I will present evidence for 21 empirical articles published from 1995 to 2012 across several disciplines including management, economics, sociology and psychology. An earlier wave of research on the relationship between eldercare responsibilities and outcomes occurred in the late 1980s and early 1990s, but focused on the narrow question of estimating the prevalence of the duel caregiver/employee role. This research was summarized in a review article (Tennstedt and Gonyea,1994) and meta-analysis (Gorey, Rice, and Brice, 1992) (published in the same gerontology journal. Following are some key findings from my investigation:

- **Defining eldercare** - The most basic definition of eldercare is informal, uncompensated care provided by family and friends (Smith, 2004). Unpacking this definition reveals a complex phenomenon that typically varies over time (Kossek, Colquitt and Noe, 2001) and often entails meeting physical needs and psychological needs simultaneously (Singleton, 2000). As a research construct, eldercare is similarly complex and also problematic (Lee, 1999).

- **Identifying the caregivers** - While elderly individuals may live less frequently in multigenerational households, family members are more likely to be involved in coordinating and delivering care due to shifting demographic trends and then changing nature of the healthcare industry (Gross, 2011).

- **Impact of eldercare on work** - Eldercare can be so time consuming that it becomes an “unexpected career” (Aneshensel, 1995) with informal caregivers serving as a “shadow workforce” (Bookman and Harrington, 2007). Workplace surveys (MetLife, 1997; 2006; 2010) and popular perception seem to support this view. On the other hand, some research indicates that the relationship between eldercare responsibilities and work outcomes is more ambiguous (Barrah, et al., 2004).

- **Conflation of individual and organizational outcomes** - An assumption is often made that caregivers experience more stress than non-caregivers and thus are likely to be less productive. However, this conclusion is based more on popular perception than empirical verification (Zacher, Jimmieson and Winter, 2012).

- **Hierarchy of disruption** - Not all eldercare is created equally in terms of assessing work outcomes. For example, co-residing with care recipients has a greater negative impact on work outcomes (Kossek, Colquitt and Noe, 2001). If care recipients have mental disabilities, disruption to work is greater (Ettner; 1995). Combining co-residence with a mental disability is the most disruptive type of eldercare (Bainbridge, Cregan and Kulik, 2006).
• **Organizational response** - The efficacy of organizational response to employee eldercare needs differs for men and women. Women benefit most from the supportive supervisors while men prefer the availability of benefits such as flextime (Barrah et al., 2004). However, women and part-time workers are less likely to have access to support programs (Zetinoglu, Cooke and Mann, 2010).

• **The mitigating effect of work** - While organizations may perceive eldercare as a drain on productivity (Robinson, et al., 2003), employed caregivers appear to benefit from their work roles (Keene and Prokos, 2007) because work serves as a refuge from caregiving (Shoptaugh, Phelps and Visio, 2004). Evidence suggests that stay-at-home caregivers experience more stress than those who work (Keene and Prokos, 2007) and individuals caring for someone with a mental disability experience less stress if they spend more hours working outside the home (Bainbridge, Cregan and Kulik, 2006).

• **The “silencing” of eldercare concerns** - The dearth of academic research on the relationship between eldercare and work may be because the issue is not highly visible in the workplace. Eldercare has been described as a “silent productivity killer” because it is infrequently discussed openly in the workplace compared to childcare (Bookman and Harrington, 2007; Smith, 2004). Employees may choose not to divulge eldercare issues at work or they may manage the demands covertly as a coping strategy and/or out of concern for their careers (Bookman and Harrington, 2007; McGowan, 2009). The desire for privacy and the “silencing” of eldercare concerns is especially true for women (Drago, et al., 2006).

**REFERENCES**


