

Looking after seniors: Who does what for whom?

by Susan Stobert and Kelly Cranswick

Surveys show the continuing willingness of Canadians to assist their older family and friends who need help because of illness or frailty. However, the growing size of the senior population, and particularly the rapidly increasing number of those in their eighties and nineties, raises the question of families' and volunteers' ability to provide the care needed to maintain a senior population independent in their own homes.

Recognizing the challenge of caring for seniors with long-term health problems, governments are searching for ways to support those Canadians who juggle many demands in order to provide care to their loved ones. It is necessary to establish who provides

care to our aging population in order to better understand the consequences of caregiving and how best to assist caregivers. And the findings are important: for example, we often think of seniors as the receivers of care, but in fact older Canadians are also actively involved in caregiving.

This article will examine middle-aged (aged 45 to 64) and older (aged 65 and over) caregivers separately because the issues involved are quite different for each group. Generally speaking, the younger caregivers are working, in good health, have children of their own, and are providing care to someone who is older than themselves. As such, the psychological as well as practical dimensions of the relationship are quite different than those of a caregiving relationship between contemporaries.

Most middle-aged caregivers are looking after their parents

Over 1.7 million Canadian adults aged 45 to 64 — 16% of this age group — are providing informal care to almost 2.3 million seniors with a long-term

disability or physical limitation. Most are looking after their own parents (67%) and their spouse's parents (24%). Many (24%) are providing help to close friends and neighbours.¹

Although these middle-aged caregivers are just as likely to be men as women, the women dedicate almost twice as much time to their tasks — 29.6 hours per month, compared with 16.1 hours for men. Working outside the home does not significantly reduce the amount of time middle-aged people spend providing care; employed women still spend 26.4 hours a month and employed men 14.5 hours.²

One of the main reasons for the male-female disparity in care-hours is due to the nature of the tasks women

1. Each caregiver is providing help to an average of 1.3 seniors.
2. Three-quarters (77%) of male caregivers aged 45 to 64 reported that their main activity was working at a job or business; almost all (93%) worked 30 or more hours per week. The majority of female caregivers aged 45 to 64 years were also working (63%), most full-time (72%).

CST What you should know about this study

This article is based on Cycle 16 of the General Social Survey (GSS), "Aging and Social Support". The GSS is an annual telephone sample covering the population living in private homes in the 10 provinces. Approximately 25,000 respondents were randomly selected from a list of individuals aged 45 years and over, based on the sample frame of the Canadian Community Health Survey. Data were collected over an 11-month period from February to December 2002.

The 2002 GSS is the first time Statistics Canada has devoted an entire survey to the collection of detailed information on care provided to people aged 65 years and over. While the main objective of the 2002 GSS was to provide data on the aging population, the survey will also allow detailed analysis of characteristics of family and friends who provide care to seniors, characteristics of seniors receiving informal and formal care; links to broader determinants of health (such as income, education and social networks); and people's retirement plans and experiences.

Senior, older: aged 65 and over.

Middle-aged: aged 45 to 64.

Care receiver: Canadians 65 years and over who reported receiving assistance, in the past 12 months, with at least one task because of a long-term health problem.

Care provider: Canadians 45 years and over who reported providing assistance, in the past 12 months, with at least one task because of a long-term health problem of the care receiver.

Caregiving tasks: include duties inside the house (meal preparation and clean-up, house cleaning or laundry and sewing); duties outside the house (house maintenance and outside work); transportation (shopping for groceries or other necessities, providing transportation for banking and bill paying); or personal care (bathing, toileting, care of toe/fingernails, brushing teeth, shampooing and hair care or dressing).

are performing. They have more often adopted responsibility for keeping the household running smoothly; that is, they are doing housekeeping and helping with personal care. While men also help with these kinds of activities, they devote the majority of their time to tasks like household maintenance and transportation. In other words, the caregiving labour is divided along traditional gender lines, which may reflect the providers' level of comfort performing tasks that mirror their areas of competence in their own homes.

Less than one in five of these care providers (17%, or 305,000 of more than 1.7 million) reported that they received help themselves if they needed a break from their responsibilities. Since most were taking care of their parents or parents-in-law, the lion's share of the extra assistance (82%) came from inside the family — a sibling, spouse or child. However, 16% of respondents relied on paid help (either

CST Middle-aged women spend almost twice as much time as men providing care to a senior

Average time spent on providing informal care (hours per month)

	Caregivers aged 45 to 64			Caregivers aged 65 and over		
	Total	Men	Women	Total	Men	Women
Average age	53	53	53	72	72	72
Average time by persons						
<i>Total hours</i>	22.9	16.1	29.6	27.9	20.9	32.9
Inside activities (housekeeping, etc.)	13.2	6.4	19.9	16.1	9.4	20.8
Outside activities (house maintenance, etc.)	3.8	5.3	2.3	1.1	2.3	0.3
Transportation, etc.	2.8	3.1	2.6	5.6	6.1	5.2
Personal care	3.1	1.3	4.8	5.1	3.1	6.6
Average time by persons whose main activity is working						
<i>Total hours</i>	19.9	14.5	26.4	--	--	--
Inside activities (housekeeping, meal preparation, etc.)	11.4	5.2	18.8	--	--	--
Outside activities (house maintenance, yard work, etc.)	3.7	5.1	2.0	--	--	--
Transportation	2.4	2.8	2.0	--	--	--
Personal care	2.4	1.4	3.6	--	--	--

-- Small sample size; estimates not calculated.
Source: Statistics Canada, General Social Survey, 2002.

	Caregivers aged 45 to 64		Caregivers aged 65 and over	
	'000	%	'000	%
Informal care provided to seniors because of long-term disability				
People providing informal care to seniors	1,748	16	321	8
Male	861	49	133	41
Female	886	51	188	59
Marital status of caregivers				
Living common law	108	6	F	F
Married	1,255	72	218	68
Widowed	45	3	67	21
Divorced	158	9	17 ^E	5 ^E
Separated	45	3	F	F
Single (never married)	132	8	11 ^E	3 ^E
<i>Total</i>	<i>1,744</i>	<i>100</i>	<i>320</i>	<i>100</i>
Main activity of respondent in the past 12 months				
Working at a paid job or business	1,221	70	20 ^E	6 ^E
Looking for paid work	35 ^E	2 ^E	0	0
Going to school	F	F	F	F
Caring for children	23 ^E	1 ^E	F	F
Household work	116	7	34	11
Retired	247	14	245	77
Long-term illness	57	3	F	F
Other	38 ^E	2 ^E	16 ^E	5 ^E
<i>Total</i>	<i>1,745</i>	<i>100</i>	<i>319</i>	<i>100</i>
Person gets assistance if he/she needs a break	305	17	58	18
From whom does he/she receive assistance?				
Sister	83	27	F	F
Brother	63	21	F	F
Spouse	56	18	F	F
Daughter	26 ^E	9	18 ^E	31 ^E
Son	22 ^E	7	8 ^E	14 ^E
Friend or neighbour	36 ^E	12	6 ^E	11 ^E
Formal help (paid or government)	50	16	12 ^E	20 ^E
Other family (includes in-laws)	41	13	7 ^E	13 ^E

^E Use with caution.

F Too unreliable to be published.

Source: Statistics Canada, General Social Survey Cycle 16, 2002.

private or government) for back-up when they needed a respite.

Only a small minority of care providers describe their lives as very stressful — 13%, the same as their counterparts with no responsibilities to a senior. The proportion who believed that life was somewhat stressful was just about the same as well — 49% versus 46% of other 45- to 64-year-olds.

Over one third (34%) were also very satisfied with their lives in general, a slightly higher rate than that recorded by middle-aged Canadians who provided no informal care to seniors with long-term health problems. This may be linked to feeling that they control all of the decisions affecting their day-to-day lives (25%). Social science researchers have shown that “mastery” is an important factor in contributing to a person’s positive outlook on life.

Although they seem to be coping quite well with their responsibilities, caregivers really want some help themselves. When they were asked to identify the most useful thing to allow them to continue providing help, the most common answer (51% of care providers aged 45 to 64) was “occasional relief or sharing of responsibilities.” Given that less than one fifth of them are getting this kind of help now, this response seems quite heartfelt. Other types of help — such as information to improve their skills or about the nature of long-term illnesses, more flexible work arrangements and financial compensation — were also suggested by a substantial proportion of caregivers.

Most senior caregivers are looking after their spouses, friends and neighbours

Over one in 12 Canadian seniors — 321,000 — is looking after at least one of their contemporaries whose day-to-day activities are restricted by long-term disabilities or physical limitations. They are most often providing care to a spouse (25%), close friend (33%) or

neighbour (19%). The majority of them are women (59%), as one would expect of a population in which women outnumber men.

Senior women devote more time to caregiving activities than their male counterparts — 32.9 versus 20.9 hours per month — a gap greater than that between middle-aged caregivers. Being retired, men in this age group are now able to dedicate more time to these efforts than when they were working. They also spend a larger proportion of their caregiving hours on indoor tasks, perhaps because they are less vigorous than before, but women still dedicate most of their time to household tasks and personal care.

Few of these senior caregivers can rely on getting help if they need a break. Only 18% said someone else could take over their responsibilities to the care receiver should they themselves need, or want, some time off. For those who could call on someone else to relieve them, the help most often came from their own children, formal sources of help, or other family.



Care providers report the same stress levels as people who provide no care

	Persons aged 45 to 64 providing...		Persons aged 65 and over providing...	
	Informal care only	No care	Informal care only	No care
			%	
Would you describe your life as...				
Very stressful?	13	13	5 ^E	6
Somewhat stressful?	49	46	29	25
Not very stressful?	27	28	37	37
Not at all stressful?	11	12	27	29
How satisfied are you with your life in general?				
Very satisfied	34	30	32	30
Satisfied	61	63	62	64
Dissatisfied, very dissatisfied	5	6	5 ^E	4
Do you feel you have control in making decisions that affect your everyday activities?				
Control no or only a few decisions	10	12	6 ^E	8
Control most decisions	65	58	48	45
Control all decisions	25	30	46	47

^E Use with caution.
Source: Statistics Canada, General Social Survey, 2002.



Compassionate care benefits

The federal government expanded the Employment Insurance (EI) program to extend compassionate care benefits to a person who must be absent from work to provide care or support to a gravely ill family member. Benefits may be paid up to a maximum of six weeks to an employee looking after a loved one who is at risk of dying within 26 weeks. Unemployed persons on EI can also ask for this type of benefit. Benefits can be shared with other members of the applicant's family, but they also must be eligible and must apply for them.

Under the new program, a family member is defined as: your child or the child of your spouse or common-law partner; your wife/husband or common-law partner; your father/mother; your father's wife/mother's husband; the common-law partner of your father/mother.

Providing care or support to a family member means providing psychological or emotional support; arranging for care by a third party; or directly providing or participating in the care.

More information is available on the Social Development Canada Web site, at www.sdc.gc.ca.

Caregiver tax credit

Canada Revenue Agency (CRA) allows Canadians to claim deductions and credits for individuals supporting people with disabilities. For example, care could have been provided to parents, parents-in-law and grandparents. The caregiver amount is a non-refundable tax credit which reduces the amount of federal income tax paid.

For more information, consult the CRA Web site at www.cra-adrc.gc.ca.

Their lifestyle seems no more stressful than that of seniors who are not providing informal care. Only one third (34%) described their lives as very or somewhat stressful, and one third (32%) said they were very satisfied with their life in general, rates that are effectively no different than those of seniors with no care-providing responsibilities. Almost half (46%) reported that they felt they controlled all the decisions that affect their daily activities. This rate is much higher than that for middle-aged caregivers, and may indicate that seniors were more often living in circumstances that obliged them to take decisions on their own.

The rewards and demands of caregiving

It is well-documented that caregiving can provide benefits not only for the receiver but also for those providing care. Asked about the intrinsic rewards associated with their duties, the vast majority of care providers responded positively. Between 80% and 90% feel that helping others strengthens their relationships with the care receiver, and repays some of what they themselves have received from others and from life. It is encouraging to learn that Canadians look upon these duties in a positive light, especially since looking after a frail senior can affect the caregiver in more negative ways.

For example, many middle-aged caregivers have had to change arrangements for social activities and for holidays in order to discharge their caregiving responsibilities. More than one third incurred extra expenses. In addition, a substantial number of middle-aged caregivers reported changing their work patterns, including working split shifts and reducing hours of work.

A caregiver's duties can also have physical consequences, which were twice as likely to be felt by women, regardless of their age. One in 10 middle-aged men reported that their sleep patterns had been disrupted

because of their caregiving activities, compared to two in 10 women; similar proportions of men and women indicated that their health had been affected. The same gender differences were recorded among caregivers 65 years and over, as 13% of women and 7%^{E3} of men reported disrupted sleep, and 16% of women and 7%^E of men felt that caregiving had affected their health.

Summary

The results of GSS 2002 show that there are two main sources of unpaid, informal care for seniors with long-term disabilities or physical limitations: the first is middle-aged children helping to care for their parents, and the second is seniors who are looking after each other.

The average middle-aged caregiver is 54 years old and is looking after a parent or parent-in-law with a long-term disability or physical limitation. In contrast, the average older caregiver is 73 years old and is looking after a spouse, close friend or neighbour.

The impact of caregiving on those looking after seniors with long-term health problems is not inconsequential. The challenge is to offer support for the growing numbers of seniors who require both informal and formal services to remain autonomous.

3. ^E Use with caution.



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