# Unpaid Caregiving and Stress in Sweden, Canada and the UK

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#### Motivation

- Population ageing is increasing demand for health and caring services
- Political emphasis on longer working lives and in-home care → informal, i.e., unpaid care need is growing
  - → twin responsibilities of work and caregiving more common
- Providing care while working may be stressful due to coordination issues, time costs and tradeoffs
- Literature on unpaid care and stress is growing but comparative studies with time use focus lacking



### Background

- Caregiving a female activity, but more men (50+)
- → Conflicts arise from this as time in unpaid care must be traded off against time in paid work and leisure
- Similar demographic context across Europe, but policy contexts differ re private vs public spending, work/care compatibility, financial assistance to carers, carers' wellbeing, gender equality ambition
- → Distinction between WS regimes
- → Sweden-UK-Canada comparison provides distinct contexts for gender differences in caregiving tradeoffs and implications hereof (e.g., stress)

## Aim and research questions

- Investigate the relationship between unpaid caregiving, paid work, housework, leisure, sleep and self-reported stress in Sweden, Canada, and the UK in recent decades
- 1. Are (intensive) caregivers more stressed than non-caregivers?
- 2. Are there gender or country differences in these respects?
- 3. What mechanisms are at work? What are the associations btw time use and caregiver stress experience?



## Theory and previous research

- Neo-classical economic time allocation theory, extended to three (or more) time uses: PW + L + HW/CG = 24hrs
- Time allocation depends on options varying with individual, household, and contextual factors
- Gender differences in line with specialization
- Restricted choice, tradeoffs between caregiving and other activities; lack of autonomy → stress (Hamermesh & Lee 2007; Ucchedu et al. 2019)
- Work-family conflict, role strain, overload → stress (Pearlin et al. 1990; Stephens et al. 2001; Schulz et al. 2012; Penning & Wu 2016)

## Theory and previous research

- Unpaid care provision may negatively impact caregivers' mental and physical health (Pinquart & Sorensen 2003; Hirst 2005; Phillips et al. 2009; Bobinac et al. 2010; Hiel et al. 2015)
- Type of unpaid care, its intensity, and the relationship to the care recipient can impact caregiver stress (Penning & Wu 2016; Kaschowitz & Brandt 2017)
- Institutional factors may mediate the relationship btw unpaid caregiving, time use and stress (Spiess & Schneider 2003; Bolin et al. 2008; Kotsadam 2011; Wagner & Brandt 2018)

#### Data

- 5 time use surveys
  - Swedish Time Use Survey 2000/01 & 2010/11 (SCB)
  - Canada 2010 & 2015 (GSS Cycles 24 & 29)
  - UK 2014/15
- Sample: Men and women aged 45-74 (N=29,510)
  - n = 6,689 (SWE); 16,765 (CAN); 6,056 (UK)
  - Employed = 65% (SWE); 58% (CAN), 45% (UK)
  - Caregiver = 18% (SWE); 7% (CAN), 13% (UK)
  - Stressed = 13% (SWE); 17% (CAN), 10% (UK)
  - 우 more likely caregivers than ♂ in CAN & UK, but not SWE
  - ♀ more stressed than ♂ in all countries

#### Methods

- Descriptive + multivariate analysis (LPM models)
- Dependent variable: Everyday stress (binary)
- Independent variables: Gender and caregiver status
- Controls include individual factors (age, educ, work status), household factors (child in hh, presence of partner and partner 's work status, hh income), diary day
- Weights applied
- We test for caregiver stress and gender differences by using interactions

## Results (I)

Q1 Are (intensive) caregivers more stressed than non-caregivers?

- No caregiver effect for ♂ but ♀ caregivers are more stressed in SWE
- Caregiving intensity does not affect everyday stress for ♂ but ♀ are more stressed in SWE and CAN
- Results for SWE stable for all and those employed (significantly increases ♀ intensive caregiver stress)
- Results for CAN supported by increased stress among who provide within-hh caregiving

## Results (II)

Q2 Mechanisms at work? What are the associations btw time use and caregiver stress experience?

- association w less PW (♀+♂ in CAN, ♀ in UK)
- association w more RHW (♀+♂ SWE & UK)
- association w less leisure (all except ♂ in UK)
- association w less sleep (♀ all countries +♂ in CAN)
- Caregivers trade off time in leisure and sleep that support recovery and well-being
- Caregivers' stress experience vary across SWE-CAN-UK reflecting different time costs and conflicts

#### Conclusions

- Caregiving responsibilities, if unevenly distributed across gender, preserve or worsen gender inequality in income and health
- Where ♀ combine PW and caregiving (SWE), they provide different amounts and kinds of care than ♀ in other contexts, but they get stressed through lack of recovery
- Caregiving one activity among many, and, given time restrictions, it involves time costs and tradeoff
- Caregiving stress associated with less leisure and less sleep, both of which have restorative functions, especially challenging for ♀ in SWE
- Respite care and active caregiver policies needed to support caregivers' labor supply and well-being

## Thank you!



## Caregiving contexts

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	Sweden		UK		Canada	
	2000	2010	2000	2010	2000	2010
LFP, women aged 55-64 <sup>a</sup>	65.9	70.4	42.5	50.6	41.4	56.5
LFP, men aged 55-64 <sup>a</sup>	72.6	79.4	63.2	69.3	60.7	68.0
Women's share of part-time employment <sup>b</sup>	72.9	63.0	80.2	75.0	69.1	67.6
Life expectancy (e0), men <sup>c</sup>	77.4	79.6	75.5	78.6	76.3	78.8
Life expectancy (e0), women <sup>c</sup>	82.0	83.6	80.3	82.6	81.7	83.2
Share of population age 65+d	17.3	18.3	15.8	15.9	12.6	14.2
Dependency ratio, population 15-64/0- 14+65 and olderd	55.5	53.6	53.5	50.9	46.5	44.2
Public expenditure on health care as % of GDP <sup>9</sup>	7.4	8.5	6.3	8.5	8.3	10.6
Public expenditure on caring benefits in cash, services, and tax breaks as % of GDP <sup>h</sup>	26.8	26.3	17.7	22.8	15.8	17.5
Share of elderly in care facilities <sup>i,j</sup>	7.7	5.4	4.2	6.9 (2004)	na	7.1
Beds in nursing and care facilities per 1000 population aged 65+	98.5	78.9	57.7 (2003)	51.6	56.5 (2003)	54.1
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# Is the gender stress gap explained by unpaid caregiving?

	Model specified	Sweden 2000/01 & 2010/11	Canada 2010	UK 2014/15
Aged 50-74	Raw gender stress gap	0.054***	0.029**	0.035***
	Controls included	0.056***	0.053***	0.030***
	Controls included + hhincome	0.054***	0.052***	0.030***
	Controlling for caregiver status	0.056***	0.051***	0.030***
	Controlling for caregiver status (def 2)	0.056***	0.051***	0.030***
	Controlling for caregiver intensity	0.055***	0.052***	0.031***
	N	5,224	6,518	4,994