

## **The Relevance of the Workplace for Combining Employment and Informal Care for the Aged. Results of a Systematic Literature Review.**

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### **Abstract**

The significance of formal and informal supports and barriers on the company level for combining employment and informal care for an aged relative has rarely been investigated. This is one of the main findings of a systematic literature review SLR. This SLR elucidates what can be learned from research on practices that have been developed to maintain a sustainable work-care balance. Research indicates that firms have rarely actively addressed the topic, and many seem unaware of the challenges employees are facing and the support they need. If firms offer support, they often favour individual, case-based solutions, whereas systematic approaches seem less likely to be put in place. In general, the findings show, that better support for companies and for carers would seem important, even urgent, but the knowledge base for offering this support is not well developed.

**Keywords:** employment, informal care, aged care, work-care balance, workplace

## 1. Introduction

Caring for dependent elderly can be a very time and energy consuming task. Yet it currently increasingly also affects people of working age. As Plaisier et al. note: "Population ageing and rising costs of long-term care mean that organizations will be confronted in the future with a growing number of employees who combine paid work with providing informal care to a relative or non-kin" (Plaisier et al., 2015, p. 267). International studies indicate that employees are increasingly involved in providing informal care, and that tensions between the demands of work and caregiving are growing, especially when the care required is intensive (Geyer and Schulz, 2014, Nowossadeck, 2016, Oldenkamp et al., 2018, Campéon and Le Bihan-Youinou, 2013). In 2006, combining employment and informal care for the aged was not considered very relevant to companies and institutions, though it was acknowledged that the problem would be increasingly important in the future (Schneider et al., 2006). The situation has since changed. In 2019, for example, in Switzerland one fifth of companies with more than five employees reported to have employees who had cared for aged relatives within the previous three years (Rudin et al., 2019).

Until the late 1990s, the question of how to combine employment and informal care for the aged was also neither a significant political nor a research topic (Beck, 1997, Reichert, 1999), whereas combining employment and childcare was an issue on both stages. However, in the last two decades, demographic change, pension reforms, lower marriage and higher divorce rates, inter alia, have led to efforts to increase womens' employment and to prolong the working lives of both women and men (Broese Van Groenou and De Boer, 2016, Nowossadeck, 2016, Auth et al., 2016). This has led to more attention being paid to the situation of informal caregivers in aged care, usually in the later stages of their working lives, who try to maintain their employment (Bouget, 2016, Sardadvar and Mairhuber, 2018). Recent research indicates that combining employment and care often involves heavy burdens and self-restriction, and that its feasibility strongly depends on the availability of supportive networks of private and professional carers (Nagl-Cupal et al., 2018, Berthod et al., 2017).

Research also shows, that maintaining employment can bring many benefits (income, social rights, social status, independence, recognition, etc.), which can facilitate or partially compensate

for the burdens of informal caregiving (Arksey, 2002). Thus research indicates that support is needed to reduce potential negative consequences such as health problems for the carers (Milne et al., 2013), and due to increased employee attrition a loss of social security contributions and hence to later social benefits (Nagl-Cupal et al., 2018, Geyer, 2016, Schneider et al., 2013). Research papers indicate that special attention should be paid to middle-aged caregivers whose fear of losing their job and perhaps ending up with a lower pension is a strong motive for staying at work (Franke, 2012, Kümmerling and Bäcker, 2012).

Attention is needed as research shows in detail, because many aspects that make combining working and caring roles challenging. Schmidt and Schneekloth (2011) found that in Germany, 34% of as the “principal caregivers” had to reduce their working hours, and a further 15% gave up their job entirely when they started informal caring. Geyer (2016) indicates a correlation between increased need for informal care and a reduction of working hours and an increased likelihood of having to leave the job completely (Milne et al., 2013, Schneider et al., 2013). Nagl-Cupal et al. (2018) note that in Austria, from a sample of informal caregivers, 18% reported having given up their job, about half of them reported having reduced their working hours to less than 50% (11 and 20 hours per week). Another important finding is that pressures to reduce or to leave work are vary between qualification groups. Carmichael et al. (2008) show that highly qualified employees are more likely to continue working while providing informal care.

Studies of family/household negotiations identify factors such as family culture, social policies and workplace culture as essential to understanding practices used in combining work and caring for the elderly (Pflegerl, 2012, Mairhuber and Sardadvar, 2017). These studies especially emphasise the scarcity of good quality professional services as a limiting factor. This includes dimensions like service capacities, cost, responsiveness to crisis and changing demand, and quality of co-ordination. Good professional services seem to make a particularly important contribution to buffering the impact of caregiving on employment (see also Carmichael et al., 2008, Milne et al., 2013).

So far, research in the field has focused principally on caregivers. Studies exploring perspectives of both caregivers and their employers are scarce (Franke, 2012, Radvanszky et al., 2016,

Berthod et al., 2017). In particular, the literature argues the more research is needed for a better understanding of company strategies, structures, and practices in this area. The SLR is part of a research project<sup>1</sup> which aims to improve this knowledge base. As a first step in the research, this systematic literature review (SLR) was conducted to describe the current state of research in this area. This paper starts with an outline of methodology and methods used in this review, before presenting the specific objectives and aims of the SLR, and then reporting selected results, especially about formal and informal practices undertaken by management and by employees themselves. We conclude with a discussion of the findings and concluding reflections.

## 2. Methodology and Methods

A systematic literature review “aims to comprehensively identify all relevant studies in order to answer a particular research question, and assesses the validity (or soundness) of each study, taking this into account when reaching conclusions” (Petticrew and Roberts, 2012). Between April 7 and May 31, 2021 this SLR was carried out following the 12-step review process outlined by Petticrew and Roberts (2012). The results were documented in a data extraction Excel file and qualitative assessment of the identified literature was conducted. Our focus here is on the findings about the practices on the level of organizations, in companies and institutions, relating to the combining of formal employment and informal care of the aged (see Figure 1). Inclusion criteria refer to (a) case studies of companies that examine the perspectives of both management and employees, (b) studies exploring the perspective of either management or employees on the issue, and (c) research into ways in which companies support employees to fulfil their informal care duties.

The review includes literature published in English and German. The studies were identified primarily by using electronic data bases (see Box 1) and they comprise literature published between January 2000 and April 2021 as public debate on the issue intensified. The relevance of

<sup>1</sup> The international research project “Combining employment with informal care for the aged. An analysis of the interplay among individual and organizational practices in companies in Switzerland and Austria (COMBECA)” is conducted by Thomas Geisen and Sibylle Nideröst, University of Applied Sciences and Arts Northwestern Switzerland, and Karl Krajic, Working Life Research Centre FORBA, Vienna, financially supported by the two most prominent research funds in Switzerland and Austria (SNF and FWF, Project ID I-4840-G).

the literature was established via a step-by-step approach, including a search for key terms in titles and abstracts. These data records with their abstracts were transferred to Endnote Web so that the entire review team could access them online. First, duplicate records were removed; second, all records were removed that were not directly related to the question of combining paid employment with informal elder care; and third, pairs of reviewers assessed the abstracts of those publications that had met the inclusion criteria thus far. The selected publications were analysed by newly composed pairs of reviewers on the basis of a data extraction plan. Any discrepancies regarding process and analysis of the SLR coming up between the pairs of reviewers during the review and data extraction process were discussed by the whole research team.

With reference to the research questions, a qualitative synthesis categorised the studies by country or region, sample size (number of companies, number of employees), type of company (sector), definition of care, characteristics of the caregiving situation, paid hours worked by the caregiver, age, gender, ethnicity, employee skill levels, information on use of support services, the specific problems faced by employers and employees and responses to them, information about what facilitates the combining of care and paid work, the effects of specific interventions and measures, instruments used to monitor such effects, and the need for further support.

The qualitative assessment of the selected literature was conducted by a generic appraisal tool developed using the CONSORT 2010 checklist (Schulz et al., 2011) and the Cochrane Collaboration Qualitative Methods Group guidelines (Chandler and Hopewell, 2013). This appraisal tool evaluates studies based on their objectives, sample sizes, methods of data collection and analysis, and description and interpretation of results. Each criterion was evaluated by assigning it points from 0 to 5 or 0 to 2; the maximum number of points obtainable was 40. The points were transformed into a grade (A to F) using a linear mathematical model. As in the process for data extraction, disagreements about the appraisal of the studies were discussed among the whole research team.

## **2 Results**

### ***2.1 Description and characteristics of the research sample***

The systematic literature search resulted in 7,734 identified records, including 27 study reports from institutional repositories and 44 papers already identified for the COMBECA research proposal. Nearly 56% (4,325 of 7,734) were removed as duplicates. The remaining 3,409 records were reviewed based on title and abstract, and 14% (477) were identified as relevant to the main research question of our review. The full texts of these 477 publications were assessed for eligibility and from that sample 208 were allocated to the three thematic sub-samples referring primary to the practises (a) of employees, (b) of companies, and (c) of state regulations. After another assessment stage, sub-sample (b) was reduced from 46 to 17 publications, focusing on company practises to address the problem of combining employment with care of the elderly. In addition, three publications that had been identified via other methods were added to sub-sample (in total 20 publications). Only publications that used empirical research were included. They include studies from Austria (4), Germany (6), Switzerland (2), UK (4), USA (3), and one comparing Canada, the US, the UK and Australia (1). Seven of the studies were published between 2000 and 2010, and 13 between 2010 and 2020, which points to the growing importance of the topic. This article refers primarily to the final sub-sample B (14 publications) which was received based on the qualitative assessment of the 20 publications. In the qualitative assessment of the initial 20 publications, fourteen studies received grades A to D, and these were included, six publications received a grade of E or F, and these were then excluded from the SLR. Table 1 provides a detailed overview of the characteristics of the fourteen studies included in the final SLR sub-sample B (14) (see Table 1 [[Appendix: separate download link](#)]).

In the following section, we describe the topics and questions treated by the studies, and their descriptions and analyses of management and employee perspectives on the workplace practices and organisational measures intended to support combining employment and informal care.

## **2.2 Research topics and questions**

Existing research on combining employment with informal elder care follows no clear pattern or systematic approach, thus also the empirical studies that we identified are only loosely related to each other. For example, the authors do not refer to each other nor take up research questions

not yet tackled in earlier studies. Moreover, they often take a very broad perspective on the situation in companies. For discussing the research topics and questions the studies are grouped according to the following criteria: evaluation, general research design, network, and target group.

Jimenez et al. (2019) focus on the implementation and *evaluation of a pilot project* that was conceived for employees who were also caregivers for relatives. The aim was to examine the feasibility, acceptability, and potential efficacy of a psychosocial, technologically based intervention for caregivers. This was a classical intervention study of companies, the only one of its kind in our SLR.

Bernard and Phillips (2007) use a *more general research design* in their study identifying strategies used by employers and employees to combine work and care tasks. They surveyed both care-giving employees and care-giving managers and investigated what workplace conditions and measures were considered helpful to the task. In contrast, Kümmerling and Bäcker (2012) conduct a survey of experts and employers but did not include employees. Their study investigated the extent to which companies are aware of the new question of combining elderly care and employment, and the older one of combining employment and caring for children, and how the companies as such are affected by tensions related to these questions. This survey examines differences in combining work and caregiving and seeks to determine differences in this connection in respect to companies and branches. Employers are also the focus of a study by Rudin et al. (2019) and Ramesh et al. (2017), while Schneider et al. (2006), Dawid et al. (2008) and Dörfler et al. (2020) try to look at the perspectives of both employers and employees. Auth et al. (2015) focus on experts and employees, and Arksey (2002) focuses solely on employees. Only the study by Dawid et al. (2008) investigates the internal ways of communication between employers and employees who are also caregivers. Focussing on time spent on work and caregiving, Bryan (2012) examines employee access to flexibility in the workplace. And Gaugler et al. (2018) looked at the relation of caregiving-work conflict and caregiver burden.

Further studies focus on *the company as an element in an extended network of support*. Thus, an enquiry by Yeandle et al. (2002) examines how support can be provided by employers, municipal and private service providers to caregivers, along with consultation and supervision in

their work-life balance. Ruppert et al. (2019) focus on small and medium enterprises (SME) in a peri-urban centre. The focus of the study by Swanberg et al. (2006) is on the outcome of measures taken by companies to support employees trying to balance informal elder care with their work.

*Target-group-specific aspects* of combining care and paid employment are also examined in several studies. Thus Kramer et al. (2019) investigate how the management see “distance caregiving”, asking what problems they identify and what action companies and workers should be taking. Auth et al. (2015) focus exclusively on men engaged in both paid work and caring for elders, while Dörfler et al. (2020) also focus on men, examining how male participation in the provision of caregiving might be increased.

This description of the research topics and questions shows that empirical work on combining employment and informal aged care so far is markedly focused on the needs of employees and employers and the measures they have taken to facilitate the combination. In the following section, we present the findings of these studies in more detail.

### **2.3 Workplace practices of the management and the employees**

#### ***The management perspective***

The very small number of companies that participated in the studies reviewed here all seem willing to explicitly deal with their employees’ problems in combining work and caregiving. They have developed measures, most prominently, flexible or reduced working hours, when needed. Yet, in most of the studies the issue is described as remaining challenging. Gaugler et al. (2018), for example, describe a multitude of internal organisational structures designed to support combining work with care that have already been implemented. Nonetheless, the situation remains difficult for both employees and line management, responsible for organizing everyday work. How to deal with problems related to the issue often seems to be insufficiently clear to management and employees alike, and further measures are often requested, e.g. establishment of the role of a negotiator, or initiatives for “community building” within the company, management training courses, and measures to safeguard the implementation of existing programs in all spheres and for all workers (Gaugler et al., 2018).

Already earlier, Bernard and Phillips (2007) had shown a rather similar picture: Managers are aware of the problem – “carers are overloaded” – but complain that it is becoming ever harder for them “simply to keep up-to-date with the latest policies and guidance on family-friendly issues” (ibid.). And even earlier, Yeandle et al. (2002) described problems at the management level, including inadequate information and “lack of training, guidance, consultation and communication concerning the implementation of the policies within the organizations”. The implementation of company policy that is family-friendly and care-friendly can be significantly influenced by “managerial discretion, service provision and delivery, concerns about the potential for abuse, training and guidance, and consultation and communication” (ibid.).

Other studies underline the importance of broader social change for raising awareness of the growing numbers of people who must combine employment and caregiving. In particular, awareness for demographic change – the ageing of the population – is seen as highly relevant to employers (Schneider et al., 2006, Kümmerling and Bäcker, 2012). Demographic change means not only an increasing demand for care but also an ageing of the workforce, especially felt as intensified competition for skilled workers. Scarcity of skilled workers is also considered one of the drivers of management efforts to make the workplace attractive to women (Kümmerling and Bäcker, 2012) which also draws attention to informal caregiving. In addition, there are pressures on companies to improve support for older employees from legal and social policy reforms, e.g. the 2008 care reform in Germany (Kümmerling and Bäcker, 2012). The kinds of organisational changes due to state provisions in order to facilitate the combining of employment and care pointed out in the study by Arksey (2002) include “leave policies, carer-friendly working arrangements, workplace facilities”.

Some studies draw attention to management perceptions of changing employee expectations of flexible work arrangements in general, their new awareness of the issues involved in combining work roles with other tasks in life, and their demands for a mix of formal and informal arrangements (see, for example, Ruppert et al., 2019). In another recent study, by Dörfler et al. (2020), management articulates company needs for better “information about family-friendly offers”, “rendering time and place of work more flexible”, being able to offer a “reduction in working

hours”, and better “information about changed life situation and circumstances” among employees. However, developing support structures that can meet the needs of both the company and the employees turns out to be highly complex, as the study with a specific focus on “distance caregiving” shows (Kramer et al., 2019). Above all, the development of formal measures to improve the combining of work and care is difficult first because the very topic of who is caring for relatives appears to be taboo within enterprises (Kramer et al., 2019, Reuyß et al., 2012). There seems to be little knowledge on numbers and intensity and circumstances, despite its obvious centrality for addressing the combining of employment and caregiving. Without such basic information it is hardly possible to make rational decisions about supports needed.

Kramer et al. (2019) and earlier, Arksey (2002), address tensions between different perspectives within management. According to Kramer et al., such tensions principally surface for company executives, who must combine attention for staff needs with responsibility for organizing the central operations and procedures. Some studies underline the relevance of the personal attitudes of the top executives towards the issue. (Arksey, 2002). Top executives’ perceptions and willingness to act become decisive factors in how employees are supported in combining care and work, and especially if management informs employees about the family-friendly options on offer and facilitates access to such offers.

A specific and perhaps unexpected obstacle to explicit management support is that such support can be seen by other staff as unfair or special treatment and thus as a violation of the norm of equal treatment (Dörfler et al., 2020). This is even more likely when practices of combining care and work have a negative impact on performance at the workplace. Already in the study by Dawid et al. (2008), it was noted that workers who must care for elderly relatives are often seen by management as easily distracted, inattentive, sloppy and unpunctual, incapable of completing tasks on time, having difficulties in structuring their work, no longer interacting well with clients, colleagues and fellow workers, and showing increased rates of absenteeism (Dawid et al., 2008).

### ***The employee perspective***

Research on the perspective of employees combining work and caregiving is included in most company studies. The issue becomes visible primarily as a problem for employees, when their new or changing needs related to providing care disrupts established work-life pattern. In a recent study, Jimenez et al. (2019) point to these practical problems, reporting that “all of the participants indicated that it was difficult to juggle work and caregiving responsibilities” (Jimenez et al., 2019). Lehner et al. (2012) emphasise mental/emotional and physical burdens and pressures (ibid.), and earlier research by Yeandle et al. (2002) also reported the difficulties people have in combining care and work, pointing to the variety of problems that arise from different care arrangements. Along with difficulties in achieving a balance between the demands of caregiving and company work, new challenges arise at work. Jimenez et al. (2019) stress that working caregivers often have difficulties to focus on their tasks at the workplace (see also Dawid 2008).

The literature analysed also identifies some specific needs for support of employees/caregivers. These needs comprise factors related to the work context but also to the family context. Non-work factors identified include dealing with difficult family dynamics (Gaugler et al., 2018, Bernard and Phillips, 2007), coping with lack of appreciation from family members and a lack of understanding for the caregiver’s interest to continue employment (Gaugler et al., 2018).

Various structural problems of the workplace are referred to as obstacles to combining the two roles. This obviously includes a general lack of personnel and frequent work overload; also several aspects of organisational culture are mentioned, including unsupportive colleagues and supervisors or – more general – a company culture that is on the whole tense and ridden by conflict (Bernard and Phillips, 2007).

Another issue is that time and energy involved in caregiving limits opportunities to participate in internal promotion at the workplace – e.g., by creating reluctance in applying for promotions etc. (Gaugler et al., 2018). Finally, research also addresses the consequences of two strong and competing main roles on other spheres of private life, including lack of time to meet friends or to pursue hobbies (Gaugler et al., 2018). Reuyß et al. (2012) also mention problems in and with the personal environment, such as the negative effects of the double burden on relationships

with partners and families, lack of time for themselves, with the overall quality of life of caregivers being reduced over extended periods of time as a result.

Thus, combining employment with caregiving is understood in the research above all as a double burden and a difficulty (Auth et al., 2015). Specifically, the reasons include the ongoing necessity to negotiate and adapt agreements, and the extra time and energy entailed. And the need for permanently negotiating/ adapting agreements occurs not only at the level of the company but in the “care system” as well (with other formal and informal carers) (Schneider et al., 2006).

On the other hand, Bernard and Phillips (2007) highlight that employment itself, which means the membership in a company or institution as well as the participation in the society, is an important resource for caregivers, despite all the associated challenges. The general picture drawn by most studies underline the various difficulties for employees who are trying to balance work with caring, in indicate that these situations tends to deteriorate over time. As a consequence, impacts on “health and wellbeing” (Arksey, 2002), on the carers’ mental or physical health or both are described (Schneider et al., 2006). At least in part, negative dynamics in the situation are blamed on a “lack of recognition, financial challenges and bureaucratic obstacles” (Schneider et al., 2006).

If work environments turn out too rigid and overall conditions too complex, it is likely that caregivers who need or want to continue employment, might search new, more flexible jobs. A strategy that often seems more promising than to attempt to render existing jobs more flexible in order to meet their needs (Bryan, 2012).

## **2.4 Support measures**

The studies covered by this systematic literature review rather stress the differences between combining employment with childcare and the situation in combining it with care for the elderly. This seems to be due to the increasing need for attention over time - in the initial stages of combining aged care and employment, management saw no essential difference between the two (Schneider et al., 2006), despite the significant dissimilarities between them (Dawid et al., 2008).

Current studies argue that combining work and care for the elderly should be regarded as a distinct problem (Kramer et al., 2019, Rudin et al., 2019, Dörfler et al., 2020, Kümmerling and Bäcker, 2012).

Several studies underline the need to change perception of the issue - “eliminating any taboos” and “destigmatizing” at the workplace are recommended as important prerequisites for improving chances (Bernard and Phillips, 2007, Ramesh et al., 2017, Kramer et al., 2019). This seems to be difficult - Dörfler et al. (2020) describe the provision of care for older relatives as being regarded as an “embarrassing topic” and recommend that hands-on supervisors and human resource management have to play a crucial role in developing acceptance and recognition of the issue (Auth et al., 2015). Already in an early study, Yeandle et al. (2002) had argued for the creation of more awareness for the difficulties to balance elder-care and work at all company levels. In line with these findings, more recent studies recommend that an overall care-sensitive and family-friendly company culture is required (Kramer et al., 2019, Dörfler et al., 2020, Ramesh et al., 2017).

These studies also draw attention to the importance of the attitudes of work colleagues and their willingness (or lack of willingness) to show solidarity. Yeandle et al. (2002) had shown that employees seem generally prepared to support fellow workers in their efforts to combine work and care, also stress the possible negative effects, arguing that companies should not take undue advantage of colleagues’ readiness to support care providers in the workplace and rely on informal support among members of the team. Research also indicates that managers consider necessary some sort of balancing attention or compensation also for those employees that are not involved in caregiving (Dörfler et al., 2020).

Improved communication about and information on the issue within companies is also seen as an important precondition (Yeandle et al., 2002, Kramer et al., 2019, Arksey, 2002, Auth et al., 2015, Dörfler et al., 2020). Studies indicate that information collected and distributed at company level should not include only the support currently offered by the company; but also include knowledge about welfare state regulations (Gaugler et al., 2018) and the local social services available (Yeandle et al., 2002). Thus, companies could provide support in a more comprehensive and inclusive way.

Yeandle et al. (2002) recommended already earlier a process in which local service providers and employers communicate and even collaborate in order to ensure the best possible support for employees. Training courses and seminars for management and employees were recommended as important tools for the creation of a care-sensitive company culture and for better communication, which will lead to a better use of existing measures (Kramer et al., 2019, Ramesh et al., 2017, Yeandle et al., 2002, Gaugler et al., 2018).

Concrete organisational measures often include increasing flexibility of working hours and the workplace (Gaugler et al., 2018, Dörfler et al., 2020, Reuyß et al., 2012). However, depending on the company, options for flexible work can also be severely limited, e.g. when the work is organised in shifts (Ramesh et al., 2017). Alongside options for more flexible working hours, a reorganisation of work is also mentioned, e.g., reduced contact with clients, and relief from shift work and duties that involve travel (Auth et al., 2015, Reuyß et al., 2012). In addition, studies refer to other forms of assistance, including self-help groups for employees involved in caring, perhaps with a focus on its especially difficult forms, like distance care. Studies also mention options for measures such as protected spaces for private phone calls, acceptance of internet browsing, e-mail, or other utilities for organising care during working hours (Kramer et al., 2019, Gaugler et al., 2018, Jimenez et al., 2019, Kümmerling and Bäcker, 2012).

In SMEs, there seems to be a particular need for more information on how to combine work and elderly care. Researchers argue that a lack of models that can be easily adapted for SMEs can be considered an important obstacle to introducing measures that facilitate a good work-care balance. So far, SMEs also often show insufficient interest in grappling with the topic systematically (Arksey, 2002, Reuyß et al., 2012)<sup>[10]</sup>. Potential for SMEs is seen particularly in the area of networking with other firms and service providers, (Auth et al., 2015)<sup>[11]</sup>. For SMEs, sometimes rather simple measures are applied, including short-term absences for caregivers, paid care leave provided by the company, and reductions in workloads. However, the last option is frequently associated with negative consequences for career advancement, salaries and pension schemes (Arksey, 2002)<sup>[12]</sup>. Many companies seem to assume that individual agreements between employers and employees offer better solutions than a set of entitlements for employees

who need to balance work with care duties (Rudin et al., 2019). At the same time, this topic has become relevant in recruitment processes; support for combining work with care of the elderly may soon become a criterion for choosing a job, as combining work with childcare already is (Bryan, 2012).

### 3 Discussion

The findings of this SLR indicate that organisational practices at the workplace in relation to the work–elder care balance have been inadequately studied to date. Only a small number of systematic empirical studies were identified, and these span two decades, are geographically widespread and not integrated in any kind of cohesive research program or scientific discourse. Sector-specific studies are missing, as are studies based on comprehensive research designs that allow analysis of the complexity of the interplay between informal and formal practices within organisations; studies explicitly targeting country-specific characteristics (culture, welfare state characteristics) and their influence on the issue are missing as well.

The studies analysed identify and discuss in detail challenges, needs and expectations of employers and employees in work and elder care balance. Further, they describe in some detail measures that managements have put in place to support employees in doing so, and they identify employee strategies for combining their paid work with their everyday care duties. And finally, they make recommendations for management on the basis of their findings. Interestingly, the available studies indicate that challenges for management and employees doing care, associated with the work–elder care balance, are not necessarily opposed. Rather, at least in the recommendations studies assume that management needs can be reconciled with workers' needs, at least where the latter are seen and then addressed (Rudin et al., 2019). Of course, the empirical basis of these conclusions and all the other findings is rather narrow, especially concerning sector/ specific type of work, size of the company and impact of different characteristics of the social environment.

Less explicitly considered in the studies we examined is the importance of the “team” and colleagues as important actors within a company. As members of the organisation and significant

contributors to the structure and culture of the workplace, and as participants in the lived reality of the workplace setting (Kotthoff and Reindl, 1990), they constitute an important resource for combining care and work duties. Non-cooperative behaviour can be a major obstacle to the implementation of measures aimed at supporting a good balance and to the development of carer-friendly organisational culture, solidarity is a major asset for all practices of combining work and care.

The studies included in this review demonstrate that all organizations have developed some strategies and some even a wide variety. This indicates that under favourable conditions, the topic can be tackled at the workplace level. However, there is no systematic knowledge on how often this happens, what the drivers are for the introduction of such measures what is the acceptance by different stakeholders or which impact they have on organizations, on the carers and on the team.

In this context, social expectation structures (Becke, 2008) of workforces are also changing in regard to support measures offered by the workplace, and support for combining paid work with elder care has started to become a topic of discussion in connection with staff recruitment, at least in some sectors/ companies (Bryan, 2012).

Nevertheless, despite the structural factors that will increase the importance of this issue, and some indications of slowly raising awareness about it at the company level, there is still very little systematic understanding and even less generalisable knowledge. This refers especially to systematic studies of the interplay between the different actors in companies, the communication processes and the interaction between company and external actors, e.g., ambulant care providers.

Another area where there is very little research so far is the impact of changing care needs, especially crises on combination practices. Only few studies have identified differential typical phase progressions and have tried to analyse impacts. Studies on the effect of combining work and care on employees' health are also missing. And, until now, there is a lack of systematic approaches/ instruments for evaluating company measures to support the work-elder care balance.

## 4 Conclusion

To date we lack differentiated knowledge about the connections between expectations, ongoing processes, processes of negotiation and the establishment of formal and informal structures within companies. The studies examined here identify the need for research on job-oriented and welfare-state related problems of the work-elder care balance, such as the changes that occur to the caregiving demands and the measures taken in response, workplace-related support measures, behaviour at work, and the caregiving activities, the economic consequences for the individual and society, and the consequences of employees' care responsibilities for companies.

The SLR findings show that employees and management must find a way between claim, necessity, and feasibility to manage jointly the difficulties inherent in combining employment duties with care duties. Unlike other issues that the enterprise manages, including health protection, prevention, and some aspects of support for disease management of their workforce, which companies have accepted over time, the issue of combining work and elder care is regarded by companies and institutions as an area where they are uncertain about their proper roles and responsibilities.

In conclusion, we can summarize that – although there is very little research on company-level practices of combining employment and care so far – not only the carers, also management will increasingly become confronted with various challenges. For management, this often means to have to deal with contradictory demands, which then have to be negotiated, resolved, perhaps also postponed or rendered invisible in the day-to-day running of the company. Employees trying to combine their employment with caregiving also face major, often unexpected, and often conflicting demands. In this situation, they need to develop new capacities and competences in order to balance or negotiate these demands, organize support and thus stabilize their work–care-life balances.

For these difficult tasks, better support for companies, also for carers would seem important, even urgent, but the knowledge base for offering this support is not well developed, several areas that would profit from further investment were pointed out in the discussion chapter above.

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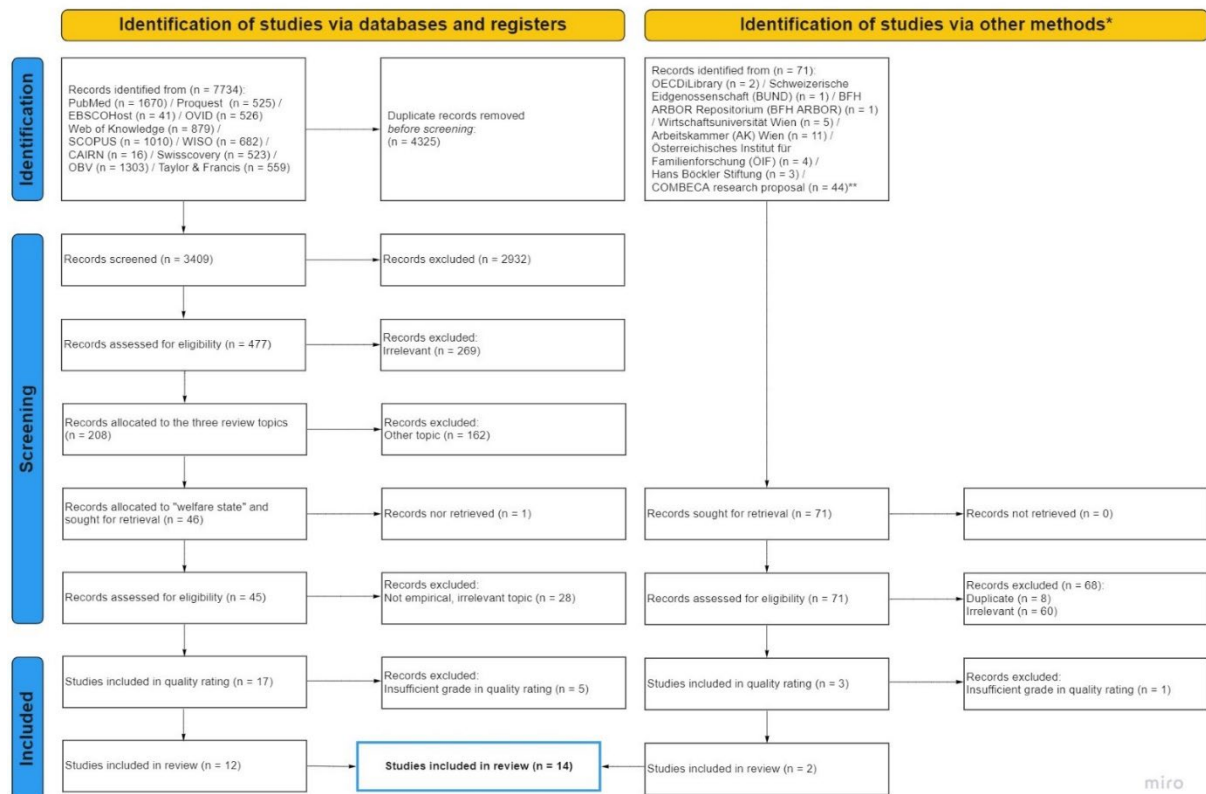
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**Box 1: Electronic Data Bases and Regions/Countries included in the SLR**

- **Electronic Data Bases:** PsyArticles, APA PsycArticles, APA PsychInfo, PSYINDEX-plus, ABI/INFORM Global, Ebook Central, EconLit, International Bibliography of the Social Sciences (IBSS), MEDLINE, ProQuest Dissertations & Theses, Publicly Available Content Database, Sociological Abstracts, Web of Science Core Collection, KCI-Korean Journal Database, Russian Science Citation Index, SciELO Citation Index, Business Source Premier, CINAHL Complete, CAIRN, Elsevier (SCOPUS), PubMed, Taylor & Francis Ebooks, Taylor & Francis Journals and Articles, WISO, Cambridge University Press, De Gruyter Online Journals, Oxford University Press, Springer Journals, Swisscovery, Schweizerisches Sozialarchiv, Österreichischer Bibliotheksverbund.
- **Electronic repositories of institutions:** SOFI, Arbeiterkammer Bibliothek Wien, Wirtschaftsuniversität Wien, ÖIF, OECD, were searched for study reports as was a “state of the art” review by the authors of this article conducted in 2017 and updated in 2019.
- **Regions or countries included:** Europe, Israel, USA, Canada, Australia, New Zealand, Japan, South Korea, Taiwan, Hongkong and Singapore.

Figure 1: SLR Flow-Chart



\*Institutions and organizations with a particular reputation for research related to combining employment with caregiving. They were examined separately to ensure that thematically relevant publications were included in the sample.

\*\* Publications used for the COMBECA research proposal were reviewed and included if they had not already been identified through the databases and directories.

From: Page MJ, McKenzie JE, Bossuyt PM, Boutron I, Hoffmann TC, Mulrow CD, et al. The PRISMA 2020 statement: an updated guideline for reporting systematic reviews. *BMJ* 2021;372:n71. doi: 10.1136/bmj.n71. For more information, visit: <http://www.prisma-statement.org/>

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**Appendix (to be published separate online)**

**Table 1: Overview of the SLR publications**

| Reference  | Description of study participants  | Region / Country | Sample size (N) / Number of employers (companies) | Sample size (N) / Number of participants                                   | Extent of care  | Workload  | Recipient of care                      | Study design   | Study period  |
|--|--|------------------|---|--|---|---|--|--|---|
| Arksey, H. (2002). Combining informal care and work: Supporting carers in the workplace. <i>Health and social care in the community</i> , 10(3), 151-161. doi:10.1046/j.1365-2524.2002.00353.x     | Retail and wholesale distribution (3), manufacturing (3), finance and business services (1), transport and distribution (1), other services (2), public sector (3) | United Kingdom   | 13 employers                                      | 51 carers; 27 of working age 12 employed                                   | Over 35 hours of care weekly for 10 of the 12 employed carers | Minimum of 16 hours weekly for all working carers; more than 30 hours for 4 of them | N / A                                  | Two different studies: 1: Carer study, model of support for working carers, review of each organisation's relevant employment policy documentation | Carer study: 1998, 12 months<br>Employer study: summer 2000 |
| Bernard, M., & Phillips, J. E. (2007). Working carers of older adults: What helps and what hinders in juggling work and care?: <i>Community, Work &amp; Family</i> . Vol.10(2), 2007, pp. 139-160. | Inclusion criteria: Working carers and managers of two public sector organisations. Sample characteristics: Carers in postal survey 92% women,                     | United Kingdom   | 2 public sector organisations                     | Postal survey: 204 working carers<br>Qualitative survey: 48 working carers | 4 to 9 hours a week 39% of NHS Trust and 32% of SSD           | On permanent contracts, two-thirds of them work full-time                           | Mostly parents or their parents-in-law | Postal survey and qualitative interviews   | 2000-2002   |

|   |   |               |                                 |  |       |  |   |  |           |
|---|---|---------------|---------------------------------|--|-------|--|---|--|-----------|
|   | 8% men; mean age = 48 years<br>Carers in interviews 83% women, 17% men; mean age = 51 years   |               |                                 |  |       |  |   |  |           |
| Dawid, E., Ludescher, M., Trukeschitz, B. (2008) ...weil das Leben besteht nicht nur aus jung und schön und gesund. Forschungsinstitut für Altersökonomie. Forschungsbericht 1/2008   | Inclusion criteria:<br>One group of respondents was made up of professionals who care for a 50+ year-old relative. The other group of respondents consisted of representatives from Viennese companies. | Vienna (AUT)  | 4 employers                     | 12 caregivers in different settings<br>5 manager interviews in 4 companies     | N / A | 20h, 60h, 24h, 20h, 23h, 40-50h, 40h, 20h, 50-60h, 40h, n/A, n/A | Mother: 7<br>Mother and Aunt: 2<br>Father: 1<br>Husband: 2      | Qualitative interviews with 12 nurses (in the second report, interviews with 4 managers from medium-sized and larger companies (450-7500 employees) were published)          | 2007-2008 |
| Dawid, E., Ludescher, M., & Trukeschitz, B. (2008). Was will man noch mehr machen als Arbeitszeit flexibilisieren, Telearbeitsplätze, Karenzierungen?“. Eine qualitative Studie über pflegereundliche Maßnahmen in Wiener Betrieben. Forschungsbericht (2). | 1 bank and 1 insurance company; 1 public sector 1 social services: care and care for the elderly (non-profit sector) (page 4)   | Vienna (AUT)  | 4 employers                     | 12 working carers in different settings<br>5 manager interviews in 4 companies | N / A | 20h, 60h, 24h, 20h, 23h, 40-50h, 40h, 20h, 50-60h, 40h, n/A, n/A | Mother: 7<br>Mother and Aunt: 2<br>Father: 1<br>Husband: 2      | Exploratory guideline interviews with care givers and employers' representatives<br>No company case studies, as the nursing staff and the client are not in the same company | N / A     |
| Gaugler, J. E., Pestka, D. L., Davila, H., Sales, R., Owen, G., Baumgartner, S. A., Kenney, M. (2018). The complexities of family caregiving at work: A mixed-  | Healthcare  | United States | 1 employer: Blue Cross and Blue | 880 employees: 380 caregivers = 43.2%  | N / A | Total sample: M = 43.14 / SD = 7.80; Caregivers:                 | Most recipients were either a spouse or a parent. Slightly over | Employees of a large "health care plan" (comparable in Europe to   | 2016      |

|  |   |                               |                                   |   |  |  |   |  |       |
|--|---|-------------------------------|-----------------------------------|---|--|--|---|--|-------|
| methods study. Int J Aging Hum Dev, 87(4), 347-376.<br>doi:10.1177/0091415017752936  |   |                               | Shield of Minnesota, or BCBS      | 5 Focus groups: 45 caregivers   |  | M = 43.21 / SD = 8.66; Not caregivers = 43.10 / SD = 7.12                                    | 26% of respondents indicated "other" when declaring their relationship to care recipient. Text responses indicated these individuals were often caring for an adult child (age > 18) or grandchild with a health problem. | insurance with their own of-tractual partners) online survey and focus groups with representatives from management |       |
| Jimenez, D. E., Schulz, R., Perdomo, D., Lee, C. C., & Czaja, S. J. (2019). Implementation of a psychosocial intervention program for working caregivers. J Appl Gerontol, 38(9), 1206-1227.<br>doi:10.1177/0733464817748777 | Inclusion criteria: Elder caregivers employed at a private, non-profit institution. | South Florida (United States) | 1 private, non-profit institution | Baseline: N = 71; intervention group (n = 35), control group (n = 36); Follow-up: 62 caregivers | Mean hours per day providing care: intervention group = 4.5 hours; control group = 6.3 hours | Mean hours spent at work per week: intervention group: 43.2 hours; control group: 39.4 hours | Intervention group: 68.6% (24) parents, mean age = 76.3 years; Control group: 77.8% (28) parents; mean age = 79.8 years   | Two group randomised controlled trial with follow-up after 5 months  | N / A |

|   |  |  |  |  |  |   |       |   |  |
|---|--|--|--|--|--|---|-------|---|--|
| Kramer, B., Engler, S., & Bischofberger, I. (2019). Distance caregiving – empirische Einblicke aus betrieblicher Perspektive. Zeitschrift für Gerontologie und Geriatrie, 52(6), 546-551.<br>doi:10.1007/s00391-019-01608-1 | Inclusion criteria: human resources managers, executive managers, members of the works council or employee representatives, and heads of the nursing departments in 5 economic and health care organizations | Germany  | 5 economic and health care organizations | N = 24   | N / A  | N / A   | N / A | Case study, qualitative expert interviews   | N / A  |
| Ramesh, S., Ireson, R., & Williams, A. (2017). International synthesis and case study examination of promising caregiver-friendly workplaces. Social Science & Medicine. Vol.177 2017, pp. 52-60.                           | Sample characteristics: 21 HR managers or in a similar position  | Canada (14), United States (4), UK (2) and Australia (1) | 21 workplaces (case studies)             | 21 HR managers or in a similar position  | N / A  | N / A   | N / A | Baxter's 2008 qualitative case study design.<br><br>Guided interviews with experts  | N / A  |
| Reuyß, S., Pfahl, S., & Rinderspacher, J. (2012). Pflegesensible Arbeitszeiten. Perspektiven der Vereinbarkeit von Beruf und Pflege.  | Various (e.g. chemical company, police, large bank, pharmaceutical company, automobile manufacturer, data processing company, public service)  | Germany  | 11 companies                             | 90 employees (44 interviewed employees are from large companies and 46 from SMEs) (22 men, 68 women);<br><br>Expert interviews: n = 17; "Workshop with experts" (internal and external actors), around 20; "Research | Different intensive care situations, classification of care levels on the legal basis according to SGB 11: 19 care cases with care level III, in 30 cases care level II, 27 cases without care level or care level 0 (especially dementia), 33 | Nursing employees: 11 male employees work more than 40 hours, 5 male employees work part-time, the rest full-time; 24 of the women surveyed work full-time, 16 more than 40 hours | N / A | Guideline interviews with caregivers, card query "sensible individual company measures", expert interviews with internal and external actors workshop and research workshop | No information on the start of the project; end of the project: June 2011) |

|  |   |                        |                               |   |  |                   |       |   |   |
|--|---|------------------------|-------------------------------|---|--|-------------------|-------|---|---|
|  |   |                        |                               | workshop" with caregivers: around 20 participants                                       | care level I (page 58, none information on the duration of the care) | and 28 part-time. |       |   |   |
| Rudin, M., Stutz, H., Jäggi, J., Guggenbühl, T., & Bischofberger, I. (2019). Massnahmen für eine bessere Vereinbarkeit von Erwerbstätigkeit und Angehörigenbetreuung in Unternehmen der Schweiz. Schlussbericht Forschungsmandat G12 im Förderprogramm «Entlastungsangebote für betreuende Angehörige 2017-2020» des Bundesamtes für Gesundheit (BAG). | Inclusion criteria: In companies with more than 5 employees, the persons were asked to complete the questionnaire who are responsible for the personnel on site.<br><br>Sample characteristics: management = 52% HR managers = 22% managers of a branch, a department or a team = 14% Administration or accounting = 7% | Switzerland            | Online survey: 2287 companies | Online survey: 2287 HR managers or similar<br><br>In-depth interviews: 27 companies     | N / A  | N / A             | N / A | Online survey based on expert interviews and subsequent in-depth interviews with a subsample of survey participants | Expert interviews: end of 2017<br><br>Online survey: February to March 2018<br><br>Validation workshop: November 2018 |
| Ruppert, S.-N., Heitmann-Möller, A., & Hasseler, M. (2019). Vereinbarkeit von Berufstätigkeit und Angehörigenpflege in kleinen und mittleren Unternehmen: Ergebnisse einer explorativen Studie in einem „rural-urbanen“ Zentrum im Osten Niedersachsens. Zeitschrift für Gerontologie und Geriatrie,   | Retail, services / technology, crafts, education, and healthcare  | Lower Saxony (Germany) | 9 companies                   | 9 persons in charge of reconciliation issues (4 f, 5 m)<br><br>12 employees (10 f, 2 m) | N / A  | N / A             | N / A | Exploratory, regional character guided interviews, photovoice method, workshops                                     | N / A   |

|  |   |                          |              |   |   |  |   |   |           |
|--|---|--------------------------|--------------|---|---|--|---|---|-----------|
| 52(6), 563-567.<br>doi:10.1007/s00391-018-1442-4   |   |                          |              |   |   |  |   |   |           |
| Schneider, N. F., Häuser, J. C., Ruppenthal, S. M., & Stengel, S. (2006). Familienpflege und Erwerbstätigkeit. Eine explorative Studie zur betrieblichen Unterstützung von Beschäftigten mit pflegebedürftigen Familienangehörigen. Mainz. | Various sectors and industries  | Germany                  | N / A        | 30 business owners, members of the management and human resources managers<br>25 working carers | min. 90 minutes: 5 min. 3 hours: 15 min. 5 hours: 5 | The working week averages 26.4 hours and ranges from 3 to 45 hours per week. | Mother: 10<br>mother-in-law: 2<br>father-in-law: 2<br>grandmother: 2<br>spouse/partner: 6 children: 5   | Exploratory / guided interviews   | N / A     |
| Swanberg, J. E., Kanatkar, T., Mendiondo, M., & McCoskey, M. (2006). Caring for our elders: A contemporary conundrum for working people. Families in Society. Vol.87(3), 2006, pp. 417-426.  | Inclusion criteria: Elder caregivers employed at the University of Kentucky using the Elder Care Program.<br><br>Sample characteristics: 73% women, 27% men | Kentucky (United States) | 1 University | Elder Care Program: N = 4297<br><br>Post-service utilization forms: N=213                       | N / A   | N / A  | 72% parents, 75% older than 70 years  | Secondary data analysis from the Elder Care Program user database   | 1990-2004 |
| Yeandle, S., Wigfield, A., Crompton, R., & Dennett, J. (2002). Employed carers and family-friendly markets and employment policies: Policy Press.  | Local government, supermarkets and retail banking   | United Kingdom           | 6 employees  | 945 employees   | N / A   | N / A  | Child (under 16): 323 disabled child/ren (under 16): 20 Disabled adult (16 -63): 23 Older people (65+): 130 (multiple carers: 71; sandwich generation (child/ren and older people): 37) | 6 company case studies in 2 regions (2 municipalities and 2 regional units of companies each); per-unit employee survey with FB (overall survey?), focus groups employees, management | 2000-2001 |

|  |  |  |  |  |  |  |  |  |
|--|--|--|--|--|--|--|--|--|
|  |  |  |  |  |  |  |  | interviews; in-<br>terviews with<br>trade union<br>representa-<br>tives, inter-<br>views with<br>care providers<br>in the respec-<br>tive region,<br>and compari-<br>son of the de-<br>scription of<br>care provision<br>in the respec-<br>tive region |
|--|--|--|--|--|--|--|--|--|

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