

Making caregivers' contributions visible, valued, and sustainable

Alberta Association on Gerontology Webinar,
January 18, 2023

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Implications of invisibility

- Family care is often viewed as “free” labour that helps contain costs in the formal care sector
- But it’s seen as “supplemental” to formal care (when really it’s formal care that’s supplemental)
- Care contributions are distributed inequitably; inequities are also invisible
- Reluctance to ‘account for’ the contributions of the family care sector

Caregiving is a normative life course experience



1 in 4 (nearly 1 million) Albertans are caregivers

- Provide care to others because of their chronic health conditions, disabilities, and/or functional limitations
- Have a personal connection to the family members (84%) and non-kin (16%) they support
- All ages, including young caregivers
- Have different patterns of moving in and out of providing care across their life courses

Caregivers' time is significant

Caregivers in Alberta spend **15.1 hr/wk** on average, providing care – equivalent to 2 days FTE!
Collectively:



647 million hours/year



345,067 FTEs

Care work has a monetary value

- Using generalist cost methods, Alberta caregivers' contributions is estimated *conservatively* at



\$12.0 billion per year

- Based on hiring replacement workers at **\$18.50** per hour, the provincial median hourly wage rate for home support workers.



Relative magnitude of caregivers' contributions

For Alberta: \$12 billion estimated replacement cost of family/friend care; equivalent to

32% of total health care spending in Alberta (projected for 2021 at \$37 billion)

For Canada: \$97 - \$112 billion, 4.2% of GDP, 32% of all spending on health care services and 3X all spending on continuing care services

Based on calculations from CIHI data (<https://www.cihi.ca/en/national-health-expenditure-trends>) as reported by CTV news

(<https://edmonton.ctvnews.ca/alberta-is-expected-to-spend-more-than-23b-on-health-in-2021-that-s-middle-of-the-pack-for-the-provinces-1.5651997>)



Some contribute more than others

There are inequities in the workload

Caregivers 'punching above their weight' are:

- Women
- Lowest income (< \$27,000 pa)
- Co-residential
- Baby boomers (1946-1964)



Why monetize unpaid care work?

Knowing the monetary value of unpaid care work

- Makes visible caregivers' contributions to their families, communities, the economy
 - Can make inequities in distribution of care visible
- Exposes the risks of shifting costs from the public to the private sphere



For more information

Funded by:

- AGE-WELL NCE
- Caregivers Alberta

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