



The Independent Effect of Care-Related Out-of-Pocket Expenses on Care-Related Economic, Social, and Health Consequences: Results from the General Social Survey (GSS)

Shahin Shooshtari¹, Karen A. Duncan¹, Kerstin Roger¹ and Janet Fast²

¹ Departments of Family Social Sciences & Community Health Sciences, University of Manitoba. ² Department of Human Ecology, University of Alberta

Canadian Research Data Centre Network (CRDCN) Conference
October 29-31, 2014



Research on Aging, Policies, and Practice
DEPARTMENT OF HUMAN ECOLOGY, UNIVERSITY OF ALBERTA



UNIVERSITY
OF MANITOBA

Context

- This research project is one of several in the Economic Costs of Care research program lead by Dr. J. Fast, University of Alberta
- The aim of the program was to examine the main sources of caregiving costs incurred by caregivers and employers

Caregiving is a normative experience

- In 2007, 29% of all Canadians age 45+ were caregivers of adults with long-term health problems
- 52% of all women and 40% of all men provided care at some point since age of 15
- Women spend more of their lifetimes (5.8 years) providing care than men (3.4 years)

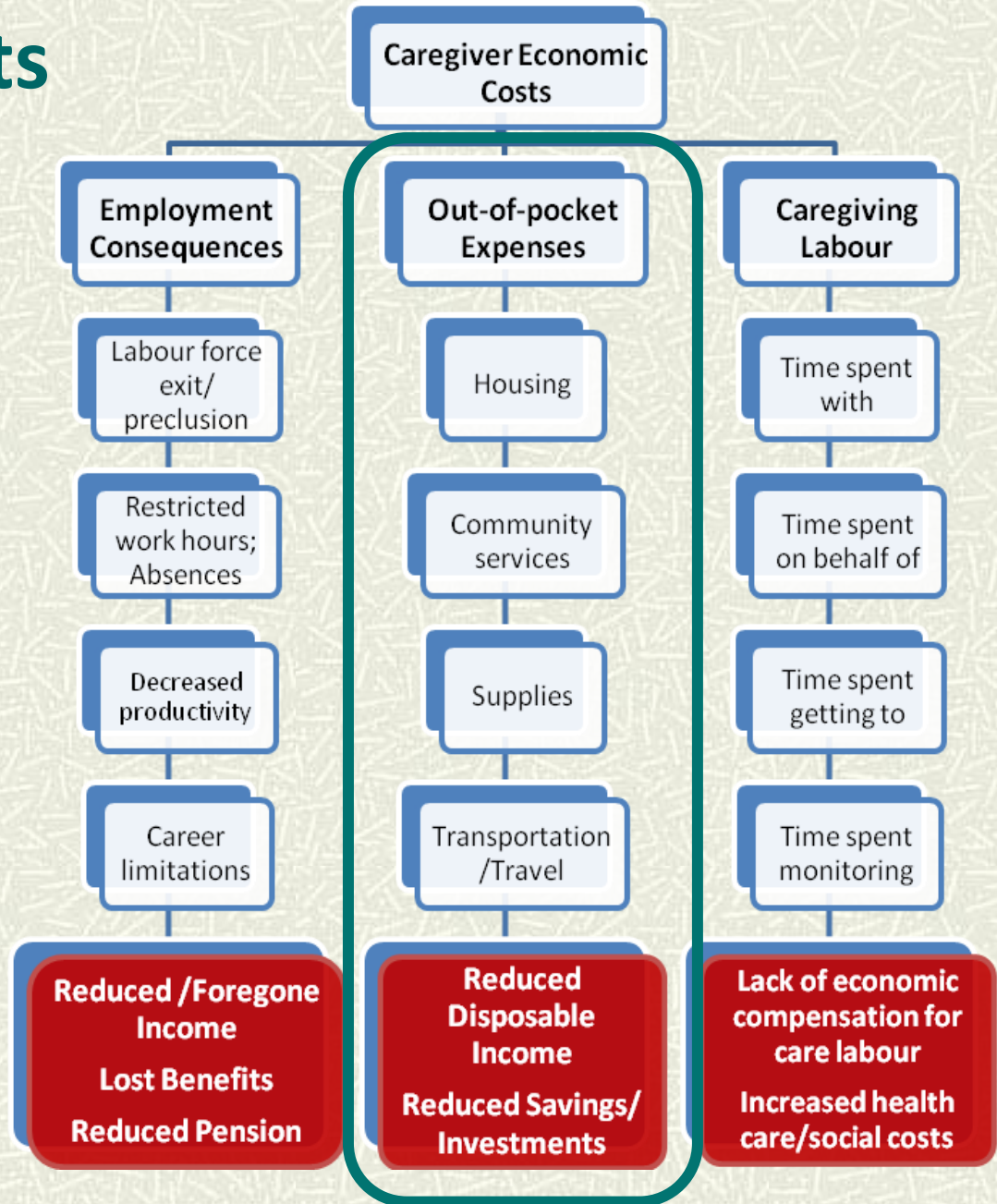
Care-related out-of-pocket spending

- ✦ Out-of-pocket expenses (OPE) are expenditures by caregivers for care, goods, and services for care receivers
- ✦ Evidence that a substantial proportion of caregivers incurred out-of-pocket expenses
- ✦ However, we know little about the amount incurred, the correlates, or the **outcomes**

Objectives

1. Explore the social, economic, and health consequences associated with caregiving to a family member, or a close friend, or neighbor.
2. Determine whether care-related out-of-pocket spending has a significant independent effect on social, economic, and health-related consequences of caregiving.

Typology of costs



Source:

Keating, N., Lero, D., Fast, J., & Lucas, S., & Eales, J. (2012). *A framework and literature review on the economic costs of care*. Final report to Human Resources and Skills Development Canada, Gatineau, PQ.

Methods

Study Design:

- ✦ Cross-sectional

Data Source:

- ✦ Statistics Canada's 2007 General Social Survey (Cycle 21) on Family, Social Support and Retirement

GSS Target Population:

- ✦ Non-institutional persons aged 45+, living in the ten provinces
- ✦ A total of 23,404 individuals participated
- ✦ A response rate of 57.7%
- ✦ Proxy interviews were permitted (2.6%)



Methods (cont'd)

Study Sample:

- ✦ 6,306 caregivers aged 45+, who reported providing care to family members, close friends and neighbours

Data Access:

- ✦ SSHRC/Statistics Canada approved the project
- ✦ Data were obtained from the master data file at Manitoba RDC

Methods (cont'd)

Study Variables:

- ✦ **Out-of-pocket expenses, binary variable:**
 - whether or not the caregiver had incurred care-related OPE in the previous twelve month period
- ✦ **Out-of-pocket expenses, ordinal variable:**
 - less than \$500 per month
 - \$500 to \$2,000 per month
 - more than \$2,000 per month
- ✦ **OPE consequences (binary variable):**
 - reducing time in social activities
 - cancelling holiday plans
 - postponing plans to enroll in an educational or training program
 - turning down a job offer or promotion
 - moving in with the care receiver
 - suffered health problems

Methods (cont'd)

Categories	Variables
Caregiver characteristics	Age, sex, marital status, education, place of birth, employment status, source of income, annual household income, annual personal income, health status, level of stress, daily limitations due to health
Care receiver characteristics	Age, sex, reason for care
Characteristics of the caregiver-care receiver dyad	Relationship to caregiver, proximity to care receiver
Caregiving context	Complementary sources of financial support, urban/rural indicator, ever provided end-of-life care, currently providing end-of-life care, years provided support, number of people caregiver has ever supported, hours spent on caregiving

Methods (cont'd)

Data Analysis:

- Frequencies (weighted and unweighted)
- Bivariate analyses
- Multivariate logistic regression analyses on total sample, men, women

Methodological Considerations:

- To fully account for the survey design effect, bootstrap weights in the master data file were used

Statistical Software:

- STATA

Characteristics of the sample

- ✦ Caregivers tended to be:
 - 45-64 years old (77.7%)
 - Female (57.0%)
 - Married or living-common law (75.6%)
 - Educated (55% had a post secondary degree or diploma)
 - Employed (59.1%) or retired (29.4%)
- ✦ Had personal income:

<30,000	(29.5%)	60,000-<100,000	(24.2%)
30,000-<60,000	(30.3%)	100,000 or +	(16.2%)
- ✦ Reported their health as good to excellent (88.6%) and experienced stress at least some of the time (69.2%)

Characteristics of the sample (cont'd)

★ Care receivers tended to be:

- 45-64 (17.9%) or 65 and older (67.6%)
- Female (66.7%)
- Needed care for:
 - 👁 a physical health problem (69.1%), or
 - 👁 a combination of physical and mental health problems (21.5%)

and were either co-resident with (21.6%) or lived in the same area as (63.2%) the caregiver

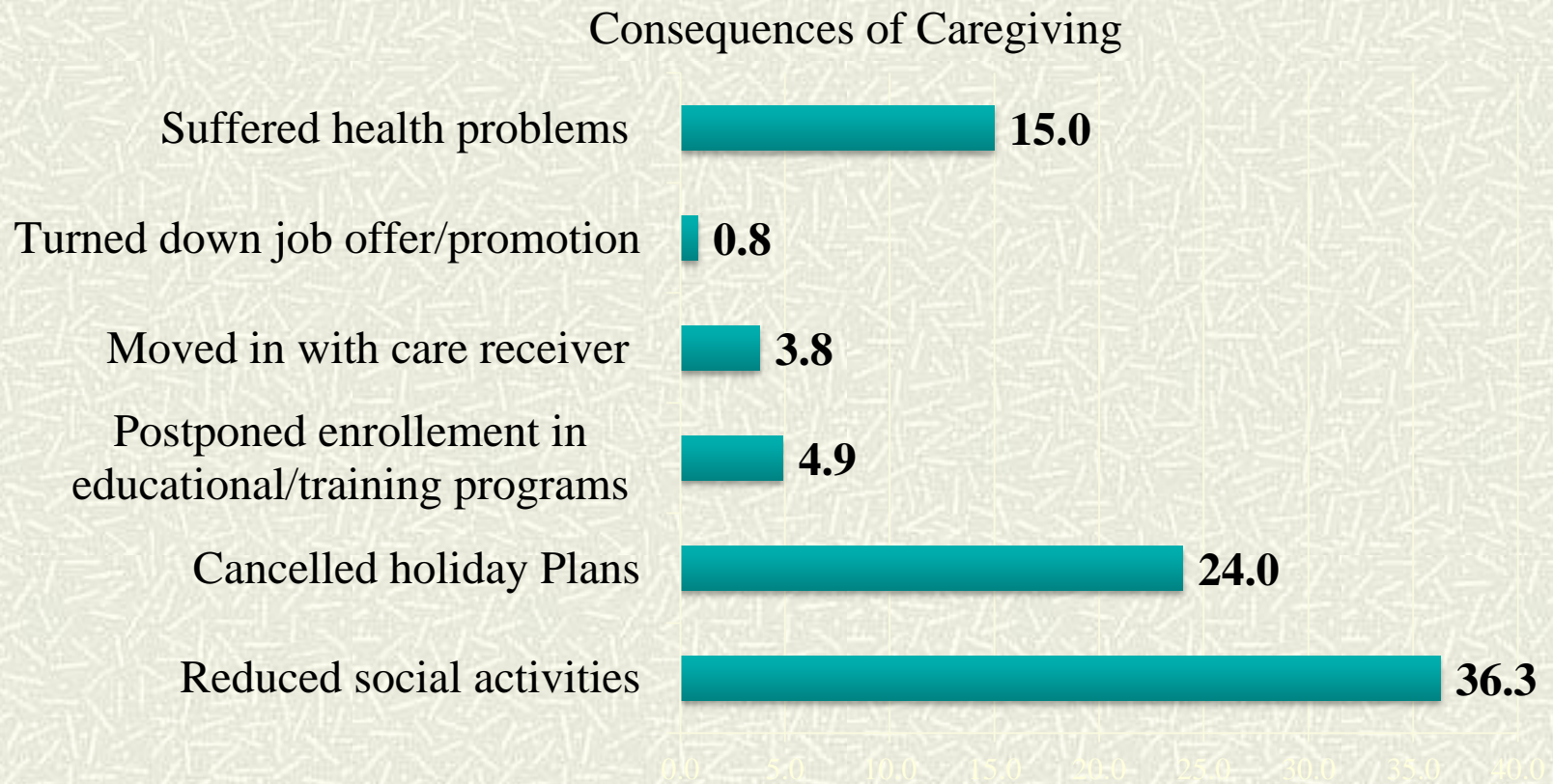
Prevalence of out-of-pocket spending and annual amount spent

- 35.1% of the sample reported out-of-pocket expenses
- Of this 35.1%:

Average Spending per Month	Percentage
Less than \$500	78.3
\$500 – 2,000	16.1
More than \$2,000	3.1

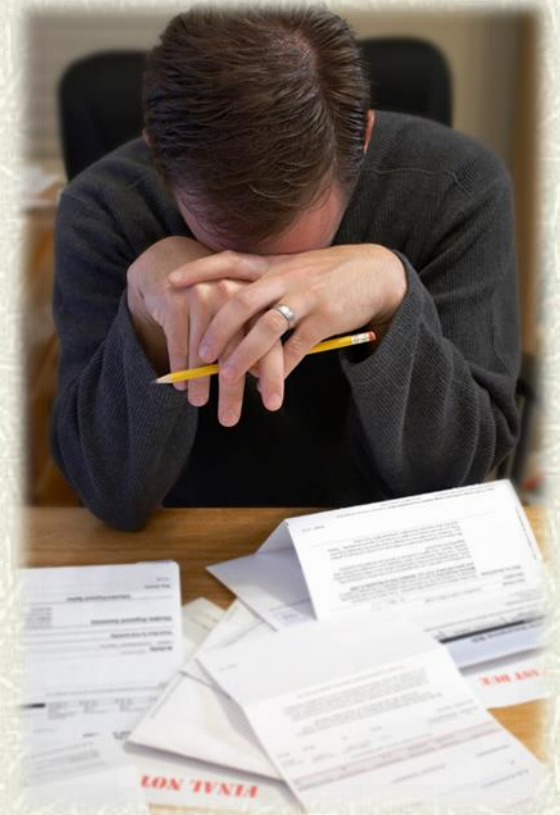
- Most respondents spend \$6,000 or less per year on out-of-pocket expenses; but 3% spend more than \$24,000 annually

Consequences of caregiving



Summary of results

- An estimated 35.1% of the respondents to the GSS, or over 1.2 million Canadians aged 45 years or older, reported incurring OPE
- In total, almost \$12.6 million in 2007



Summary of results (cont'd)

- ✦ For the total population, caregivers were more likely to report social and economic consequences if they were:
 - Women
 - More highly educated
 - Separated, divorced, widowed, or single
 - Reported stress sometimes, often, or always
 - Caring for a man
 - Caring for someone with both physical and mental health problems
 - Caring for a partner
 - Living with the care receiver
 - Receiving complementary sources of support
 - Living in an urban area
 - **Incurring out-of-pocket expenses**

Summary of results (cont'd)

➤ Compared to caregivers who did not incur OPE, those who did incur OPE were much more likely to report:

- Cutting back on social activities or holiday plans
- Postponing enrolment in an educational or training program
- Moving in with the care receiver
- Turning down a job offer or promotion
- Suffering health problems

Concluding points

- ✦ Given its high prevalence and negative consequences, more research on OPE is needed to inform policies to support Canadian caregivers
 - Federal and provincial tax credits?
 - Caregiver allowances?
 - Extension of drop out provision in CPP?
 - Publicly funded respite care?
- ✦ Next steps:
 - Analysis of out-of-pocket expenses in the 2012 GSS

Acknowledgements

Funding for this research from Human Resources and Skills Development Canada (HRSDC) is gratefully acknowledged. The views expressed in this presentation do not necessarily reflect the views of HRSDC or of the federal government.

We thank Jing Han and Dr. Syeed Khan for their technical contributions to this research.

Contacts

Shahin Shooshtari(Shahin.Shooshtari@umanitoba.ca)

Karen Duncan (Karen.Duncan@umanitoba.ca)

Departments of Family Social Sciences & Community
Health Sciences

Faculties of Human Ecology & Health Sciences

35 Chancellor's Circle

University of Manitoba

Winnipeg, MB CANADA R3T 2N2

www.umanitoba.ca/faculties/human_ecology/departments/fss