

Report

Support for Maintaining Balance between Work and Family Caregiving

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Abstract

As the number of the elderly who need care rises with the aging of society, the number of people who both work and provide care to family members has reached approximately three million. It is expected that there will be more and more such workers in coming years. Against this backdrop, Japan's plan for active participation by all people (Nippon Ichioku Sokatsuyo Puran) was approved by the Cabinet on June 2, 2016, and sets the goal of no person leaving his or her job because of family care responsibilities. The plan also calls for enhanced consultation and support services for families with care-related concerns as measures for achieving this goal. The level of anxiety among workers about providing care for family members has continued to rise. Many people are worried about maintaining balance between work and caregiving or about leaving their jobs. The number of people who left their jobs because of family care responsibilities reached five hundred thousand in the past five years. It seems that many people quit working before seeking help or, even if they do seek help, they do not receive sufficient support. There is a growing need for consultation on maintaining balance between work and family caregiving. Companies, local government offices providing care-related consultation, and care providers must devise ways to address the potential concerns of workers who provide care to family members. Expanding consultation services that facilitate comprehensive utilization of various resources, such as workplace programs, services covered by long-term care insurance, and services not covered by such insurance, would make it possible to prevent workers from leaving their jobs because of family care responsibilities or enable people to maintain balance between work and family caregiving.

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The original report is available at https://www.murc.jp/report/rc/journal/quarterly/2017_04/.

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Introduction

With the aging of Japanese society, the proportion of elderly adults (aged 65 or older) in the population has grown from 10.3 percent in 1985 to 20.2 percent in 2005 and then to 26.7 percent in 2015. Put simply, approximately one in four Japanese is elderly. This proportion is forecast to reach 39.9 percent in 2060.¹

As the number of elderly adults has risen, so has the number of those who need support or care. In 2000, when the Long-Term Care Insurance program was started, the number of people certified as needing care or support was 2.18 million, but the number rose roughly three-fold to 6.08 million as of 2015.²

As the number of the elderly needing care rises with the aging of society, an increasing number of people are expected to both work and provide care to a family member. According to the 2012 Basic Survey on Employment Structure, the number of people who both work and provide family care reached approximately three million (specifically, 2.91 million were employed and 2.40 million were company employees).

Against this backdrop, Japan's Plan for Dynamic Engagement of All Citizens (Nippon Ichioku Sokatsuyo Puran) was approved by the Cabinet on June 2, 2016, and sets the goal of no person leaving his or her job because of family care responsibilities ("zero care-related job resignations").³

The need for the goal is explained as follows.

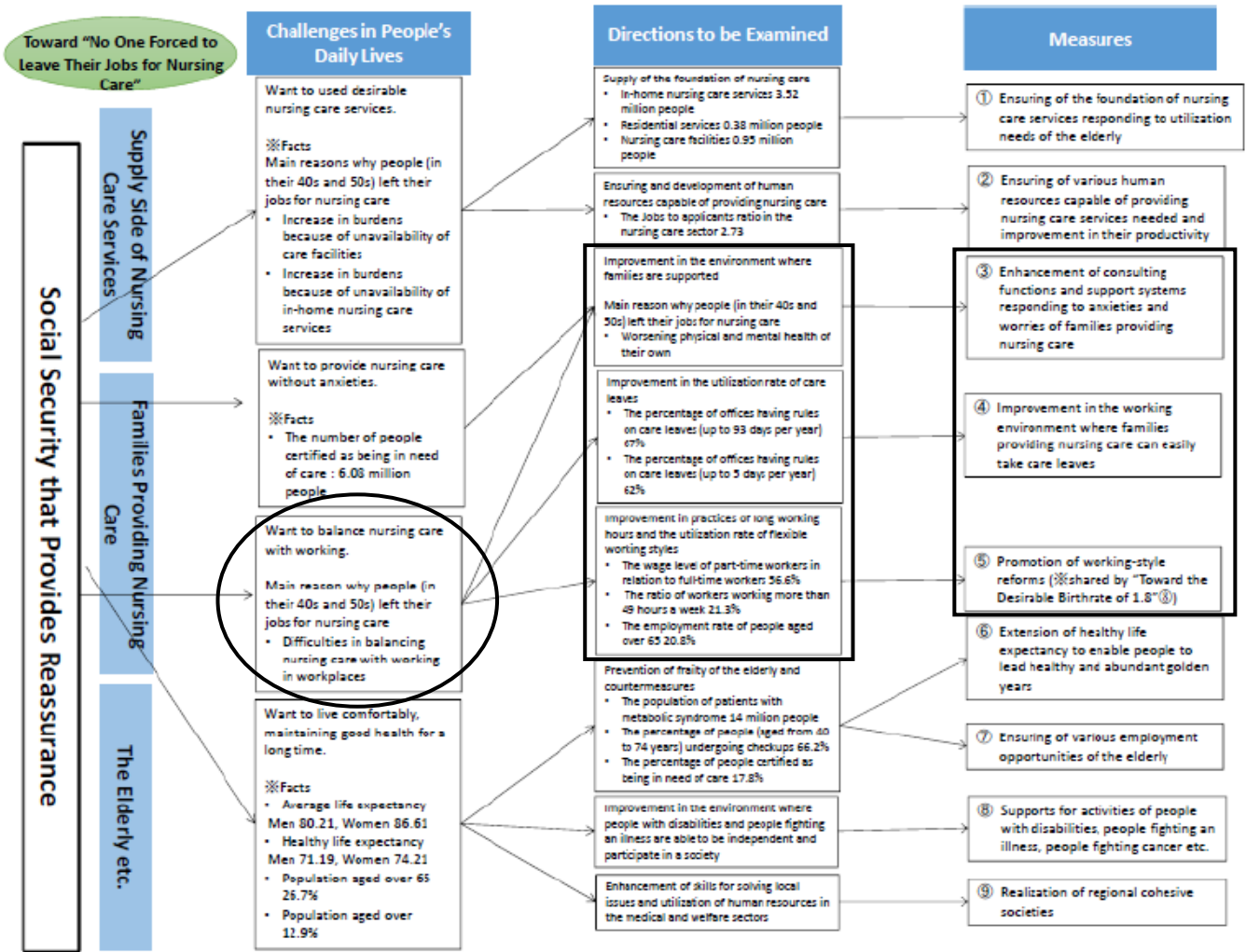
The number of people who leave their jobs because of family care responsibilities has surpassed 100,000 per year. The reality is that the elderly and the working generation are in a precarious situation. By 2020, when the Tokyo Olympic and Paralympic Games will be held, Japanese baby boomers will be over 70 years old. Their children constitute the central pillar of the Japanese economy, and if many of them leave their jobs, the economy will collapse. The government has set a clear goal of zero care-related job resignations (so that everyone can continue to work when he or she provides care for a family member) and will implement reforms to create a social security system that provides peace of mind to the working generation.

Source: Japan's Plan for Dynamic Engagement of All Citizens. Approved by the Cabinet on June 2, 2016.

The plan considers maintaining balance between work and family caregiving as an everyday issue relevant to the goal of zero care-related job resignations. For the policy directions to be examined and the associated measures to be taken, the plan proposes the following (see Figure 1): (1) creating an environment that enables people to support their family members (through enhancement of consultation and support services for families with care-related concerns), (2) increasing the use of family care leave and family sick days (through creation of a workplace environment where caregiving workers can easily take family care leave or family sick days), and (3) redressing the problem of long working hours and increasing the use of flexible ways of working (through work reform).

Various support services for family caregivers have been provided by local associations and elderly affairs departments or labor-related departments of companies and local governments. The first of the above proposals shows the government's intention to further promote consultation and support services for working family caregivers as part of support for work-care balance in order to reduce care-related job resignations.

Figure 1: Goal of zero care-related job resignations in Japan's Plan for Dynamic Engagement of All Citizens: a tree diagram



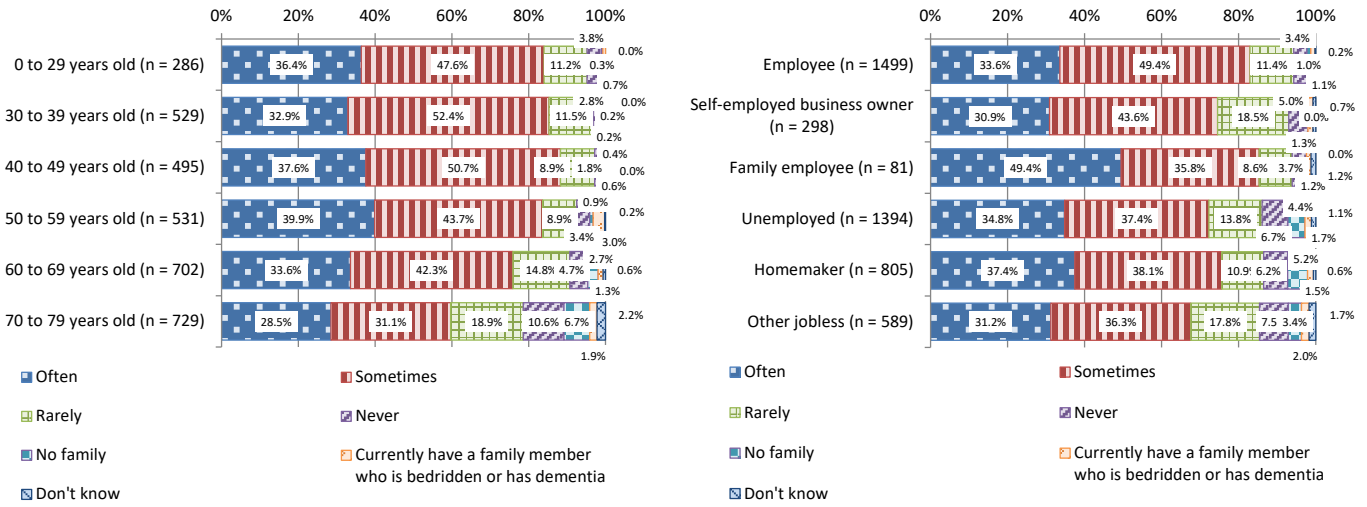
Source: Japan's Plan for Dynamic Engagement of All Citizens approved by the Cabinet on June 2, 2016 (with modification by the author)

1. Anxiety about Family Caregiving or Work-Care Balance

How worried are people about the possibility of having to provide care for a family member? According to the September 2010 survey of the Public Opinion Survey on the Long-Term Care Insurance Program conducted by the Cabinet Office, 77.6 percent of respondents indicated that they often or sometimes worried about the possibility of a family member becoming bedridden or developing dementia. This percentage is higher than when this survey was conducted in July 2003, with an especially large increase in the percentage of respondents who are often worried. This result shows that an increasing number of people are concerned about family caregiving.

The percentage of working-age respondents—those in their 20s to 50s—who are often or sometimes worried about the possibility of having to provide family care exceeds 80 percent, and the percentage of respondents who are company employees and are often or sometimes concerned about the possibility of having to provide family care also exceeds 80 percent (Figure 2). These results show that many workers have concerns about the possibility of a family member requiring care.

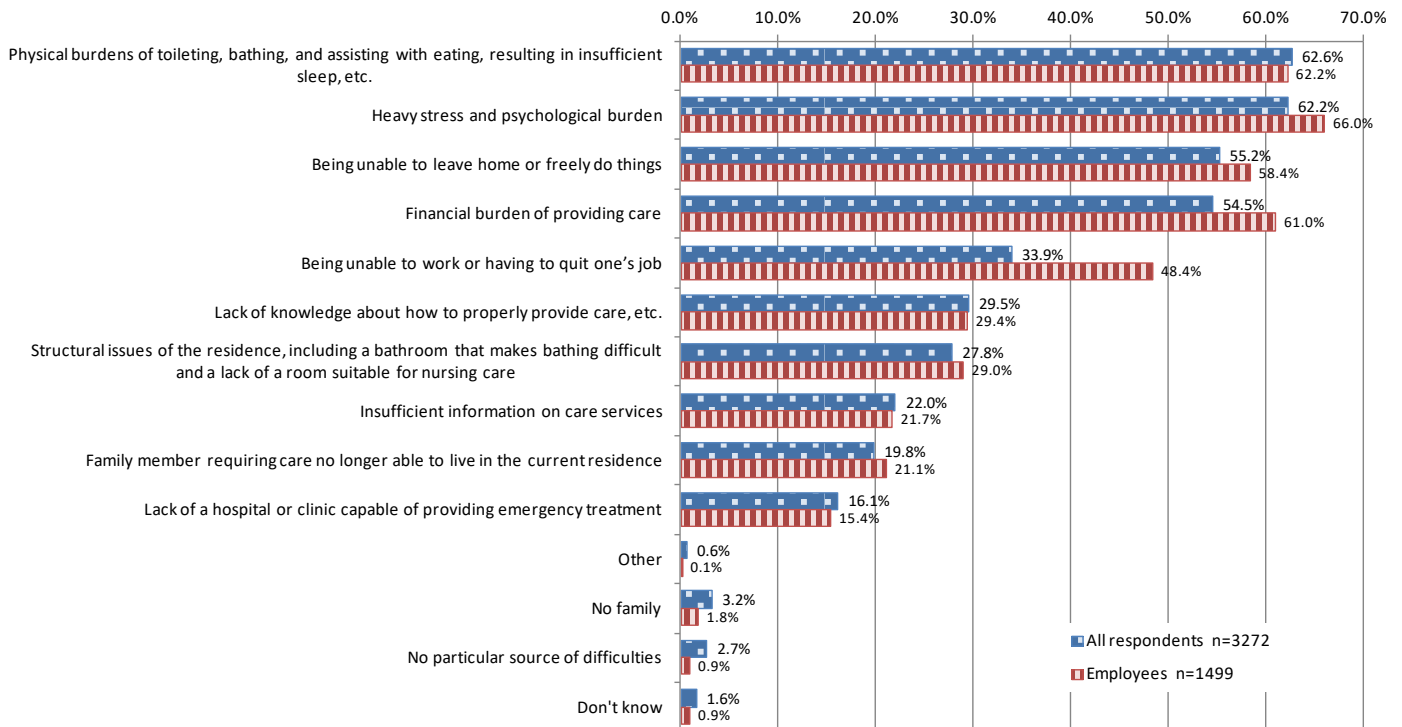
Figure 2: Worrying about the possibility of a family member requiring family care



Source: Cabinet Office (2010). Public Opinion Survey on Long-Term Care Insurance Program.

The survey also asked respondents what they thought would be sources of difficulties if an elderly family member became bedridden or developed dementia and needed family care; respondents with a family member who was bedridden or had dementia were asked to identify actual sources of difficulties. The result shows that 48.4 percent of employed respondents answered being unable to work or having to quit their job (Figure 3).

Figure 3: Potential sources of difficulties if it becomes necessary to provide care to an old family member

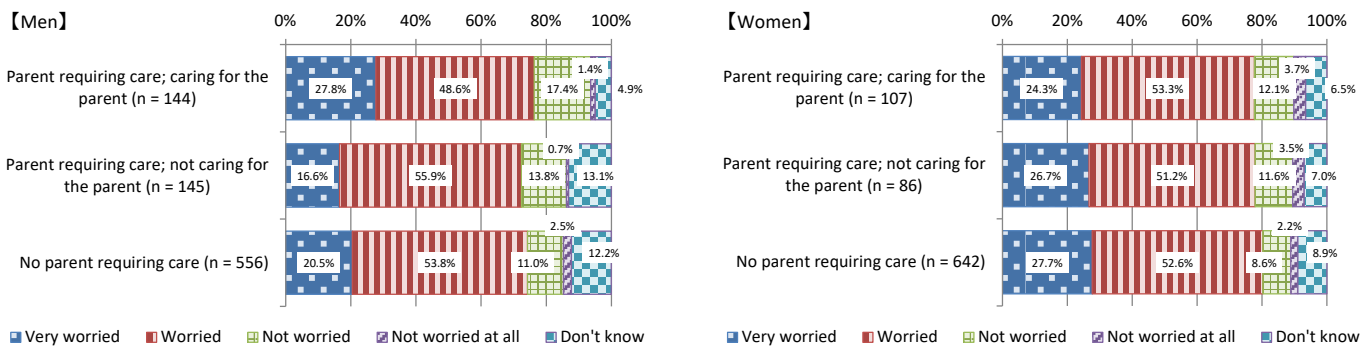


Source: Cabinet Office (2010). Public Opinion Survey on Long-Term Care Insurance Program.

Not only has the number of people with concerns about family care been increasing, but the extent of their concerns has also become greater. In addition, these concerns are widespread among workers, many of whom expect that they may have to quit their jobs when a family member requires care. It is therefore important that people who have not reached a life stage where they potentially have to provide family care receive support aimed at reducing their care-related concerns.

Let us now turn to the level of anxiety among workers about maintaining balance between work and family caregiving. According to the Questionnaire Survey of Workers on Maintaining Balance between Work and Family Caregiving (hereinafter, the Worker Survey) conducted by Mitsubishi UFJ Research and Consulting (MURC), more than 70 percent of both male and female employed workers who did not currently have a parent requiring care were "worried" or "very worried" about possible family caregiving (Figure 4).

Figure 4: Employed workers' level of concern about maintaining work-care balance



Source: Mitsubishi UFJ Research and Consulting. Questionnaire Survey of Workers on Maintaining Balance between Work and Family Caregiving (Commissioned by the Ministry of Health, Labour and Welfare in 2012).

With regard to specific concerns of those who were worried about maintaining work-care balance, the Worker Survey reveals differences among employed workers who care for a family member, people who left their jobs because of family care responsibilities, and employed workers who do not have a family member requiring care.

Employed workers providing care for a family member are more likely to worry about the absence of a replacement who can take over their job, which reflects their concerns about the workplace system that is intended to enable them to continue working. People who left their jobs because of family care responsibilities are more likely to worry about a lack of a support system for workers who try to maintain work-care balance, such as a family care leave program, and about superiors and colleagues wanting workers to quit if they must provide family care. This result implies that reasons why workers leave their jobs include the inability to utilize support programs and a lack of understanding at the workplace.

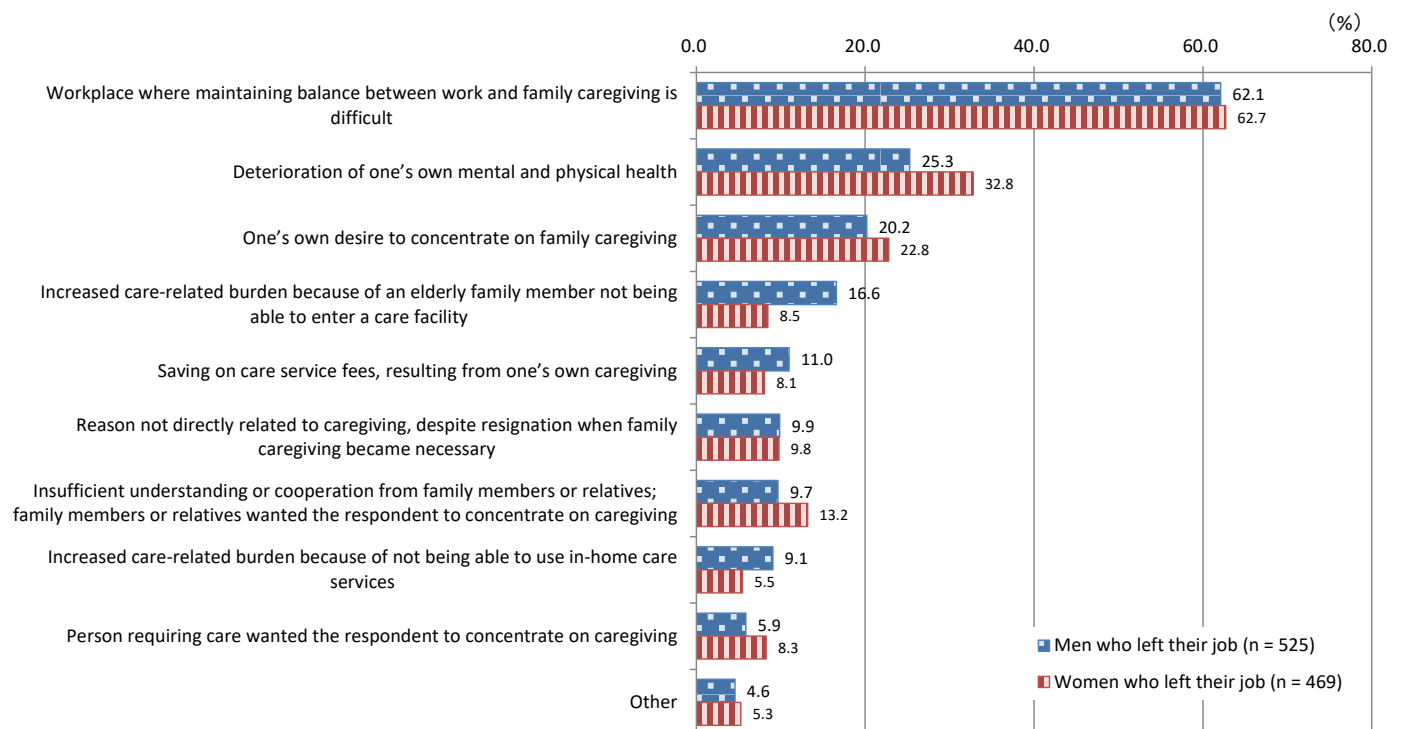
Employed workers who do not have a family member requiring care are more likely to worry about the fact that they do not know how to use care-related services and how to properly combine such services with support systems for workers who try to maintain work-care balance. In other words, they seem to be concerned about their lack of knowledge regarding services and systems that can be utilized when they provide family care.

2. Care-Related Job Resignations

According to the 2012 Basic Survey on Employment Structure published in July 2013 by the Ministry of Internal Affairs and Communications, approximately 500,000 people left their jobs to provide care for a family member during the five-year period from October 2007 to September 2012. The number of such people in previous five-year periods was 567,000 for October 2002 to September 2007 and 524,000 for October 1997 to September 2002. Therefore, the number seems to be declining in recent years, but has been around 500,000.

What are specific reasons for care-related job resignation? According to the Worker Survey, the top reason for both men and women was a workplace where maintaining work-care balance was difficult and exceeded 60 percent (Figure 5). This result implies that there are problems in terms of both the workplace environment and support programs, which is also related to the above discussion of people's concerns about maintaining work-care balance (especially, the result that people who left their jobs due to family care responsibilities are more likely to worry about a lack of a family care leave program and other support systems for workers who try to maintain work-care balance and about superiors and colleagues wanting workers to quit if they need to provide family care).

Figure 5: Reasons for care-related job resignation

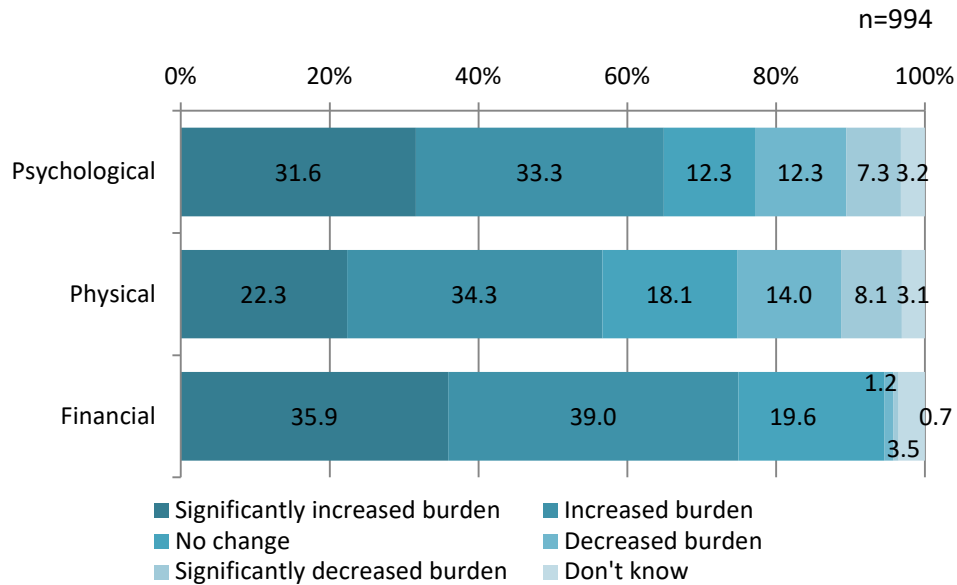


Source: Mitsubishi UFJ Research and Consulting. Questionnaire Survey of Workers on Maintaining Balance between Work and Family Caregiving (Commissioned by the Ministry of Health, Labour and Welfare in 2012).

The Worker Survey also provides data on changes in how people who left their jobs perceived psychological, physical, and financial burdens. For each type of burden, a majority of respondents (64.9% for psychological, 56.6% for physical, and 74.9% for financial) reported an "increased burden" or a "significantly increased burden"

(Figure 6). This result suggests that even when people leave their jobs, they feel burdened by work-care balance not only financially, but also psychologically and physically.

Figure 6: Changes after job resignation



Source: Mitsubishi UFJ Research and Consulting. Questionnaire Survey of Workers on Maintaining Balance between Work and Family Caregiving (Commissioned by the Ministry of Health, Labour and Welfare in 2012).

3. Family Caregiving

3.1 Factors Making Family Caregiving Necessary

The Comprehensive Survey of Living Conditions 2016 provides data on main factors that made family caregiving necessary for different Care Levels (Table 1). According to the data, joint disorders were identified as the main factor by the highest percentage of respondents (17.2%), followed by frailty due to old age (16.2%). Dementia was identified as the main factor in people requiring nursing care by the highest percentage of respondents (24.8%), followed by cerebrovascular disease (stroke) (18.4%). Dementia is likely to require daily observation, and cerebrovascular diseases are likely to require ongoing care and preparedness for sudden hospitalization. Both of these conditions therefore significantly impact work-care balance. The third main factor for people certified as requiring Care Level 4 or 5 was a bone fracture or fall, which can cause the elderly to become bedridden (Figure 7).

Figure 7: Top three factors that made family caregiving necessary

(Unit: %)

2016

Care Requirement Levels	First		Second		Third	
All	Dementia	18.0	Cerebrovascular disease (apoplexy)	16.6	Frailty due to old age	13.3
People requiring support	Joint disorders	17.2	Frailty due to old age	16.2	Bone fracture or fall	15.2
Requiring support 1	Joint disorders	20.0	Frailty due to old age	18.4	Cerebrovascular disease (apoplexy)	11.5
Requiring support 2	Bone fracture or fall	18.4	Joint disorders	14.7	Cerebrovascular disease (apoplexy)	14.6
People requiring long-term care	Dementia	24.8	Cerebrovascular disease (apoplexy)	18.4	Frailty due to old age	12.1
Requiring long-term care 1	Dementia	24.8	Frailty due to old age	13.6	Cerebrovascular disease (apoplexy)	11.9
Requiring long-term care 2	Dementia	22.8	Cerebrovascular disease (apoplexy)	17.9	Frailty due to old age	13.3
Requiring long-term care 3	Dementia	30.3	Cerebrovascular disease (apoplexy)	19.8	Frailty due to old age	12.8
Requiring long-term care 4	Dementia	25.4	Cerebrovascular disease (apoplexy)	23.1	Bone fracture or fall	12.0
Requiring long-term care 5	Cerebrovascular disease (apoplexy)	30.8	Dementia	20.4	Bone fracture or fall	10.2

Note: Kumamoto Prefecture is excluded

Source: Ministry of Health, Labour and Welfare (2017). Comprehensive Survey of Living Conditions 2016.

The report entitled "Important Points for Maintaining Balance between Work and Family Caregiving: Examples of Work-Care Balance" which the Ministry of Health, Labour and Welfare commissioned MURC to prepare (hereinafter, the MHLW report) discusses examples of how people maintain work-care balance based on interviews with nine working family caregivers (Box 1). These examples provide concrete reasons for family care. In some cases, a family member's hospitalization, fall, or bone fracture suddenly made it necessary for a worker to provide care. In another case, a worker was aware of a family member's slowly progressing dementia but started providing care once the condition had deteriorated.

Box 1: Factors that made family caregiving necessary

- My father had aspiration pneumonia and was hospitalized for two weeks. Since then, he has been bedridden. He is certified as requiring Care Level 5. (Case no. 1)
- My mother fell at home and was taken to the emergency room due to traumatic cerebral hemorrhage. This was the beginning of family caregiving. She did not regain consciousness for four days. My wife, two sisters, and I took turns, and one of us went to the hospital each day. (Case no. 3)
- About a year ago, my mother-in-law, who lived with me, had a compression fracture in her lumbar spine and was hospitalized for about a month. During her hospitalization, she needed help eating and moving around. We applied for Long-Term Care Insurance. She was certified as requiring Care Level 4. (Case no. 4)
- My father had long had a weak heart and underwent cardiac catheterization surgery ten years ago. But, the heart kept slowly getting weaker, and he had repeated hospitalizations due to worsening heart failure. During that period, he fell at home causing a brain hemorrhage, which resulted in another hospitalization. (Case no. 5)
- Both of my parents had worsening memory lapses, but I thought that it was not unusual because of their age. One day, when I went in their room, it was messy, and they both were wearing food-stained sweaters even though it was summer. I thought that their behavior was not normal and had them

examined at a hospital. I then talked with my supervisor and used paid holidays to take them to an acute-care hospital's outpatient department specialized in memory loss and had them tested for dementia. As a result, my father was diagnosed with Lewy body dementia and my mother was diagnosed with Alzheimer's dementia. (Case no. 7)

- About three years ago, my mother was hospitalized to undergo surgery for rectal cancer. My father frequently visited her at the hospital. A social worker at the hospital one day told me that my father might have dementia and recommended that he should be examined at an outpatient department specialized in dementia. My parents' home is in Aichi Prefecture. While my mother was in the hospital, my father was living at home alone. I talked with a social worker when I became aware of my father's abnormal behavior after seeing that his house was a complete mess. (Case no. 9)

Source: Ministry of Health, Labour and Welfare (2017). Important Points for Maintaining Balance between Work and Family Caregiving.

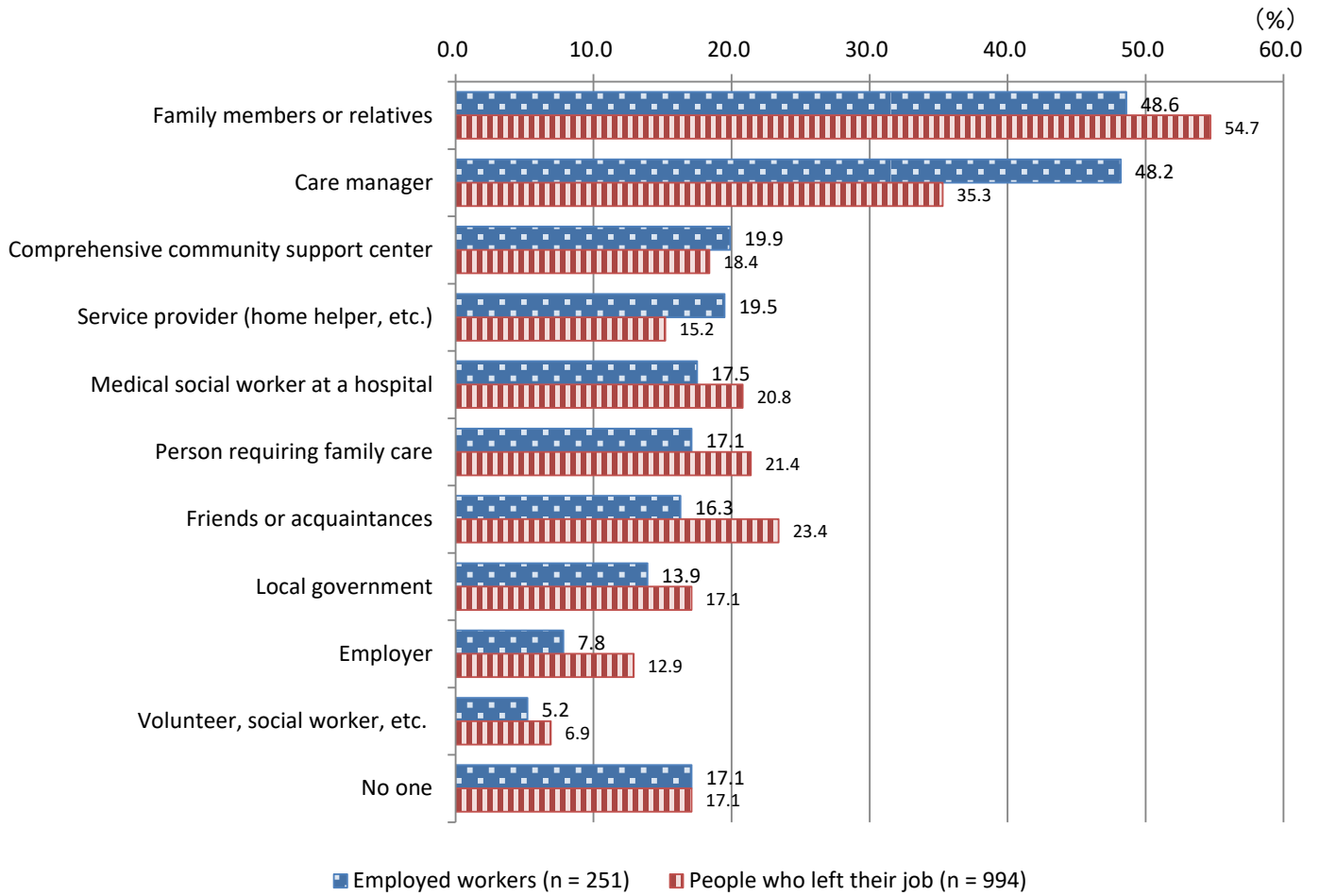
People's anxieties about providing family care arise from not only the heavy burdens associated with having to urgently respond to diseases and other disorders and providing necessary care, but also the fact that they do not always have sufficient knowledge of how to respond appropriately. Although people anticipate that they will have to provide family care at some point, the moment arrives rather unexpectedly and forces them to take various actions.

3.2 Consultations about Family Caregiving

The Worker Survey provides data about whom the respondents consulted regarding family caregiving (Figure 8). The data show that, for both employed workers and people who left their jobs, the highest proportion of respondents consulted with family members or relatives. A notable difference between the two groups is that the proportion who consulted with a care manager is higher for employed workers. This suggests that employed workers are more likely to consult with a specialist in nursing care and make necessary arrangements in order to maintain work-care balance with help from care services. In contrast, the percentage of employed workers who consulted with their employer is less than 10 percent, which is considered low.

The examples from the MHLW report shed light on how people seeking to maintain work-care balance consulted with their company when they started to provide family care (Box 2). Some people notified or consulted with the company as soon as caregiving became necessary, taking the first step toward work-care balance by gaining the company's understanding. They did so because they considered such prompt notification important in order to make proper arrangements with the company and maintain work-care balance.

Figure 8: People consulted with about family caregiving



Box 2: Consultation with the company at the time of starting family caregiving

- I notified my company after my father was discharged from the hospital and started receiving in-home care. (Case no. 1)
- I told my supervisor about my parent's care-related situation and discussed work-care balance and relevant issues. (Case no. 2)
- When my mother fell, I immediately notified my superior and subordinates. My superior had a parent who was ill and therefore was understanding about making work-related arrangements to provide care. (Case no. 3)
- Before caregiving became necessary, I had told my company that I was living with my elderly parents-in-law, and that they might start requiring care at any time. When they fell I immediately notified my company. (Case no. 5)
- When I was taking my parents to the hospital for the first time, I immediately contacted my then supervisor about my parents' condition. I did it because I thought that I would probably have to go to the hospital many times and wanted to inform the supervisor about the situation early. (Case no. 7)

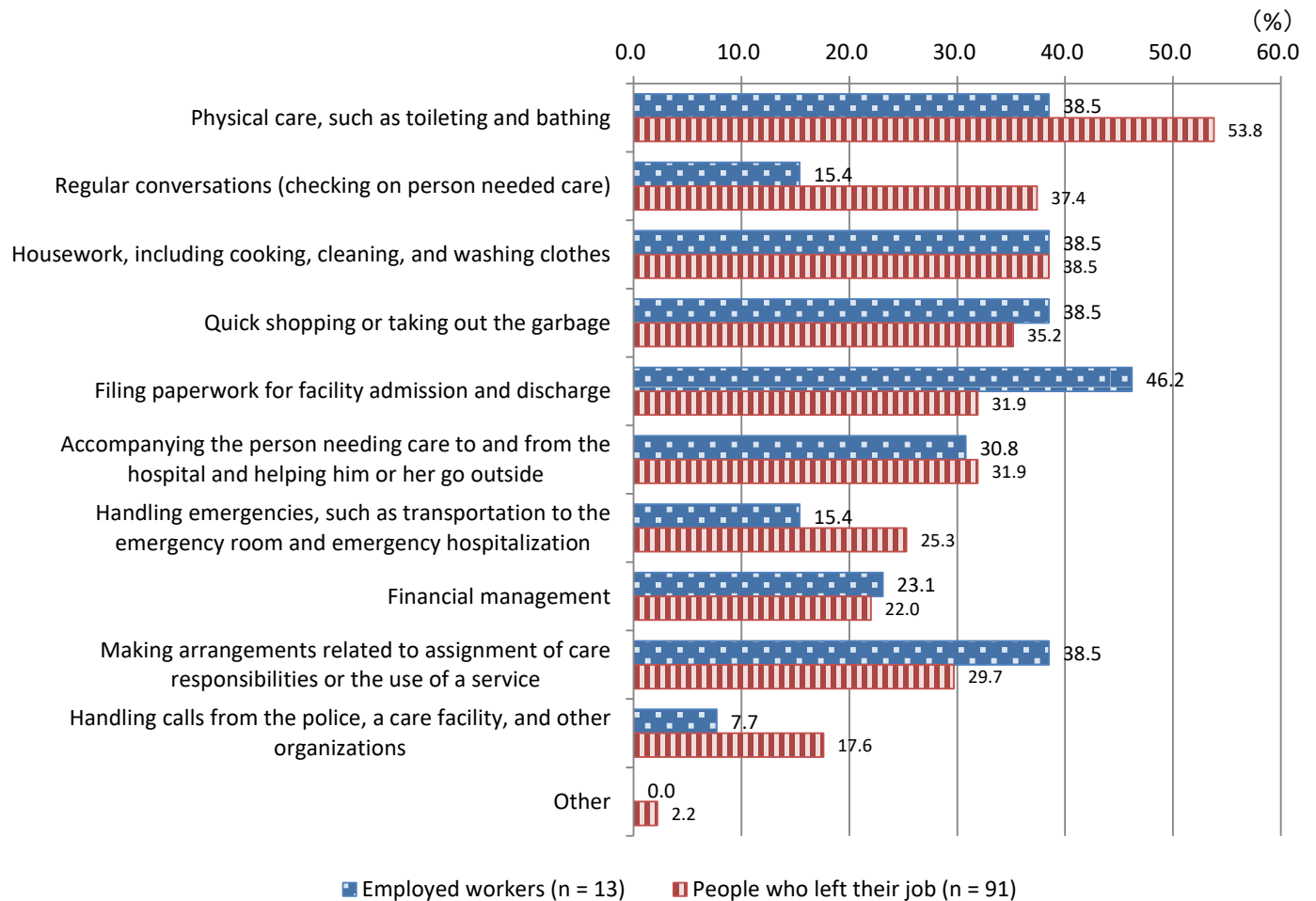
Source: Ministry of Health, Labour and Welfare (2017). Important Points for Maintaining Balance between Work and Family Caregiving.

3.3 Characteristics of Family Care Provided by Workers

The Worker Survey also provides information on how employed workers who provide family care and people who left their jobs but had provided family care before quitting their jobs look after a parent who needed care. In general, people who left their jobs were more likely than employed workers to provide care by themselves, bearing greater care-related burdens. In contrast, the proportion of employed workers who had a care provider handle physical care, such as toileting and bathing, was higher than the proportion who handle it by themselves, showing how employed workers take advantage of care services.

Employed workers' utilization of outside support is also evident in their reasons for using a family care leave program (Figure 9). Many employed workers use such programs to make arrangements for utilizing various services, which include filing paperwork for facility admission and discharge and making arrangements related to the assignment of care responsibilities or the use of a service. In comparison, many people who left their jobs had used the program to provide various types of care by themselves, including regular conversations to check on the person needing care and physical care (e.g., toileting and bathing).

Figure 9: Purposes of using a family care leave program



Source: Mitsubishi UFJ Research and Consulting. Questionnaire Survey of Workers on Maintaining Balance between Work and Family Caregiving (Commissioned by the Ministry of Health, Labour and Welfare in 2012).

Examples from the MHLW report reveal how people maintaining work-care balance provide family care or utilize care services (Box 3). As the aforementioned data from the Worker Survey show, by utilizing care services, they built a support system that enabled them to maintain work-care balance. In particular, it is important that some of them use services on non-working days to make time for resting themselves. If a worker goes to work on weekdays and provides family care on weekends, he or she cannot have time to rest and consequently would face difficulties in maintaining work-care balance. In one case, a care manager who understood this issue recommended the use of care services. Since workers may not be aware of this issue and fully engage in both work and caregiving or may not know how to take advantage of care services, it is important for them to receive consultations and support from care specialists.

Box 3: Use of care services

- My father currently goes to a rehabilitation facility twice a week, every Wednesday and Saturday. He goes on Saturdays, when I'm at my home, so that I can have time for myself to rest. Almost every day, a care worker visits his home in the morning, at noon, and in the evening to cook, help him change clothes and go to the toilet, and get ready for bed. In addition, for cleaning and washing clothes, I pay for housework assistance services provided by an NPO. (Case no. 1: living far from the person needing care)
- My parents-in-law currently go to the same elder day-care center five days a week, Monday to Friday. My father-in-law was initially reluctant to go there, but recently began to go. Since they go to the same place, they now seem to talk to each other more. My mother-in-law goes to the day-care center on Saturdays, too, because it seems stressful for her to stay home on both Saturday and Sunday. Apart from the day-care center, my parents-in-law have visiting care service from Monday to Thursday every week and visiting nurse service on Friday every other week. (Case no. 5)
- A few years after I started providing care, a care manager told me that it is OK not to do everything by myself and recommended that I employ a helper before I started hating my parents. The advice relieved me because I felt constrained by the idea that children must care for their parents. I had the helper assist my parents in going to and coming back from an elder day-care center, warm up dinner that I prepared in the morning, and set up the table for dinner. On days when they did not go to the day-care center, they used a food delivery service for lunch and dinner, and the helper came twice a day at meal time. (Case no. 7)

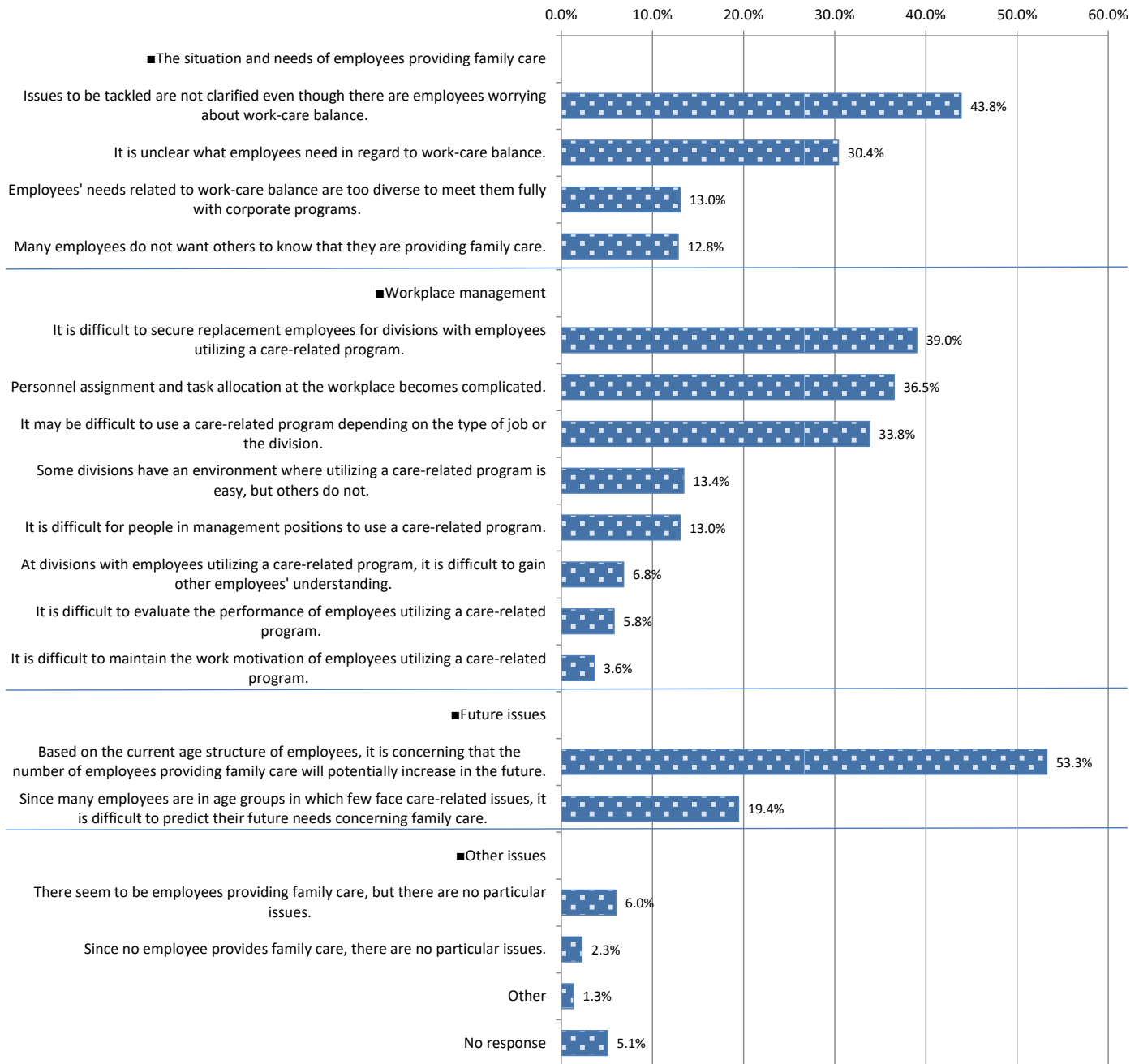
Source: Ministry of Health, Labour and Welfare (2017). Important Points for Maintaining Balance between Work and Family Caregiving.

4. Company Support for Employees' Work-Care Balance

4.1 Issues Related to Promoting Work-Care Balance

Let us now turn to the issues faced by companies and the measures that they take. The Questionnaire Survey of Companies on Maintaining Balance between Work and Family Caregiving (hereinafter, the Company Survey) conducted by MURC brings to light issues that are currently faced by companies in promoting support for workers who try to maintain balance between work and family caregiving (Figure 10). The most frequently mentioned issue was concern about the current age structure of employees leading to a future increase in the number of employees providing family care (53.3%), followed by issues to be addressed remaining unclear despite employees' concern about work-care balance (43.8%).

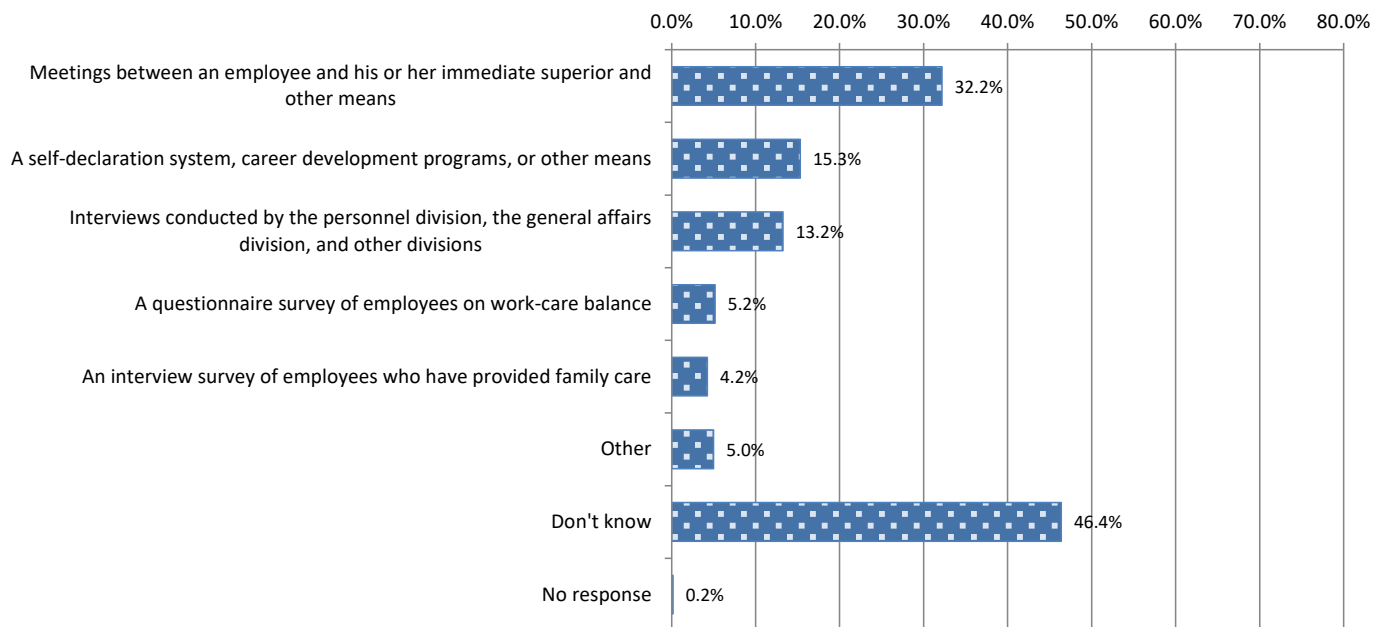
Figure 10: Issues faced by companies in promoting support for work-care balance (multiple responses allowed; n = 967)



Source: Mitsubishi UFJ Research and Consulting. Questionnaire Survey of Companies on Maintaining Balance between Work and Family Caregiving (Commissioned by the Ministry of Health, Labour and Welfare in 2012).

To what extent are companies making efforts to understand the situation of employees who provide family care? Figure 11 shows the result for questions asking, among other things, whether the company is aware of any employees who face the issue of family caregiving and whether it is aware of the types of support for work-care balance that employees seek. Among companies that are aware of the situation and needs of employees providing family care, 75.8 percent obtained relevant information when employees consulted with them, and 34.8 percent obtained information when employees applied for care-related programs. The result implies that these companies would not have known about employees' family caregiving or care-related needs without actions initiated by employees.

Figure 11: Ways of becoming aware of employees who face the issue of family caregiving (multiple responses allowed; n = 967)

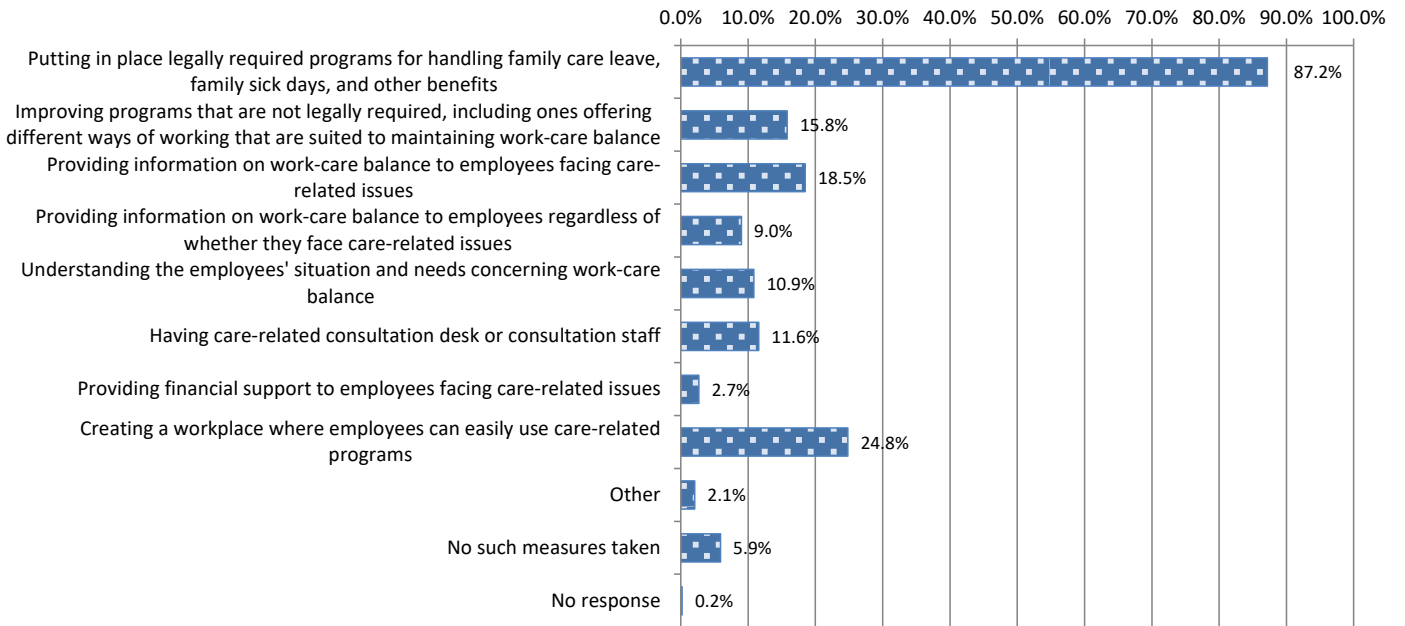


Source: Mitsubishi UFJ Research and Consulting. Questionnaire Survey of Companies on Maintaining Balance between Work and Family Caregiving (Commissioned by the Ministry of Health, Labour and Welfare in 2012).

4.2 Corporate Measures to Promote Work-Care Balance and Important Factors for Supporting It

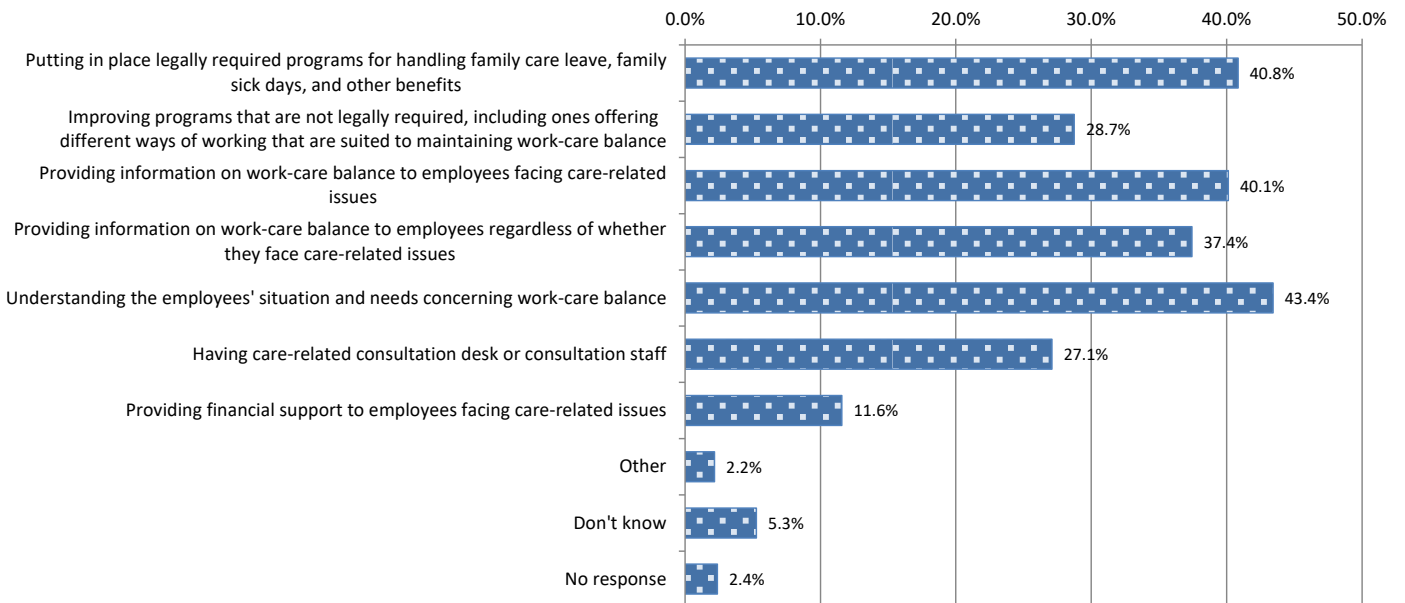
According to the Company Survey, companies do not seem to be currently making significant efforts to support employees' work-care balance, except for putting in place legally required programs for handling family care leave, family sick days, and other benefits (by explicitly describing them in employment rules; see Figure 12). With regard to important factors in supporting employees' work-care balance, 43.4 percent of companies point out understanding the situation and needs of employees concerning work-care balance; 40.8 percent point out putting in place legally required programs for handling family care leave, family sick days, and other benefits; and 40.1 percent point out providing information on work-care balance to employees facing care-related issues (Figure 13). These results imply that many companies do not sufficiently understand the situation surrounding their employees' family caregiving but recognize the need to understand the situation and needs of employees and to provide information on family caregiving.

Figure 12: Current efforts to support employees' work-care balance (multiple responses allowed; n = 967)



Source: Mitsubishi UFJ Research and Consulting. Questionnaire Survey of Companies on Maintaining Balance between Work and Family Caregiving (Commissioned by the Ministry of Health, Labour and Welfare in 2012).

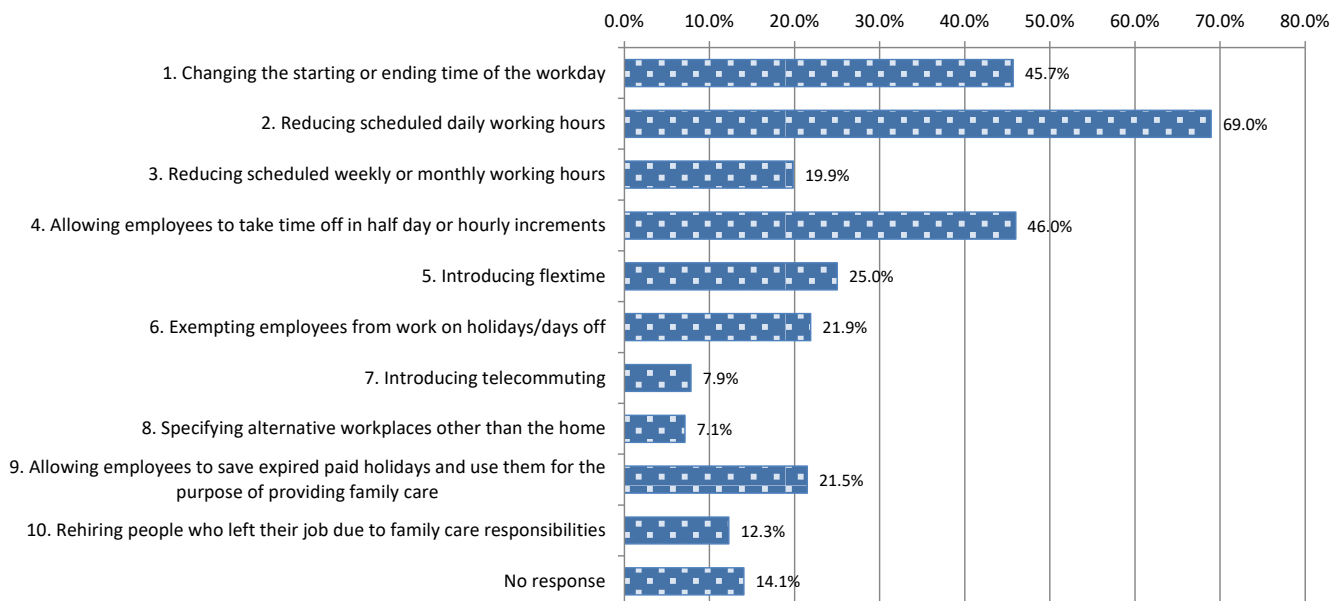
Figure 13: Important factors in providing corporate support for work-care balance (multiple responses allowed; n = 967)



Source: Mitsubishi UFJ Research and Consulting. Questionnaire Survey of Companies on Maintaining Balance between Work and Family Caregiving (Commissioned by the Ministry of Health, Labour and Welfare in 2012).

The Company Survey also provides data on programs in place for regular employees, such as a program for supporting flexible ways of working to promote work-care balance (Figure 14). Notable programs include a program that reduces scheduled daily working hours (implemented by 69.0 percent of companies), a program that allows employees to take time off in half day or hourly increments (46.0%), and a program that allows employees to change the starting or ending time of the workday (45.7%).

Figure 14: Programs in place for regular employees, such as support for flexible ways of working to promote work-care balance (multiple responses allowed; n = 967)



Source: Mitsubishi UFJ Research and Consulting. Questionnaire Survey of Companies on Maintaining Balance between Work and Family Caregiving (Commissioned by the Ministry of Health, Labour and Welfare in 2012).

Examples from the MHLW report show how companies support employees' work-care balance and how employees utilize support programs. It appears that employees who maintain work-care balance wisely take advantage of taking time off in half day or hourly increments and having a flexible work arrangement approved by the company. According to Yajima (2015), differences from the case of work-childcare balance are that employees need to be able to take short-term leave or arrange working hours as necessary instead of being able to take long-term leave like childcare leave, and that some employees need such flexibility for a long period of time.⁴ Companies should therefore set rules and put in place measures that offer employees flexible ways of working.

Examples from the MHLW report also suggest that employees' psychological burden is reduced when their work environment is one where people are willing to help one another and when the company understands the importance of work-care balance (Box 4).

Box 4: Company support for employees' work-care balance and employees' utilization of support programs

- I used up all my paid holidays (20 days a year) for family care and my daughter's school events. To visit care facilities, I took half-days off. I regularly accompanied my parents to the hospital, but did so on weekends and holidays. My focus was on how I could provide care by adjusting my working hours rather than on taking unpaid days off. (Case no. 7)
- I sometimes take paid hours off depending on my schedule for visiting my parents' house. For example, I take one hour off at the end of the workday, leave the company at 4 p.m., go to Osaka on the Shinkansen bullet train, get on a ferry for an overnight ride to Ehime, and arrive there next morning. Since I can sleep on the ferry, this travel pattern is easiest physically. Being able to take hours off is really useful because I can spend my days off more efficiently. (Case no. 9)
- I fully utilize telecommuting. My company allows me to work from not only home, but also similar

places. This really works for me. Even if I telecommute, I can concentrate on my work as effectively as I would do with regular commuting thanks to electronic documents and teleconferences. (Case no. 1)

- Sometimes, I have to start my workday late or leave the workplace for a while during the day because I need to accompany my mother-in-law to the hospital. In such cases, I don't officially take days off or hours off, but flexibly adjust my working hours by consulting with my superior. For example, since anything can suddenly happen to her, like a broken bone from a fall, I share information about her with my supervisor and colleagues so that they can understand my situation. (Case no. 4)
- I sometimes use my paid holidays when I suddenly need to go to the hospital. But I'm glad that people at my workplace understand my situation. Since there are many people at the workplace who have time constraints due to childrearing or family care, we support one another and share our concerns. Even if I experience difficulties in caregiving, I can talk about it at work, which has kept me from becoming pessimistic and has allowed me to relieve my stress. (Case no. 5)
- Since I may need to respond to care-related emergencies, I often talk to my colleagues about my caregiving. Things were really smooth when I was working with people who understood the demands of caregiving. But, not everyone is understanding, so people will feel care-related psychological burdens differently depending on the level of their colleagues' understanding.

Source: Ministry of Health, Labour and Welfare (2017). Important Points for Maintaining Balance between Work and Family Caregiving.

5. Important Points Raised by People Maintaining Work-Care Balance

The MHLW report presents interviewees' secrets for successful work-care balance and their advice for working caregivers (Box 5). A first important point in maintaining balance between work and caregiving is to proactively consult with family members, one's company, care specialists, and others about concerns, difficulties, and causes of stress. A second point is to act from the standpoint of managing a support system by working with a care specialist and wisely utilizing care services. This can be achieved based on the types of consultations discussed in the first point. A third point is to maintain local relationships as caregiving workers can be helped by neighbors (for example, they can casually keep an eye on an aging family member).

Box 5: Secrets for successful work-care balance and advice for working caregivers

Proactively consult with family members, colleagues, care specialists, etc.

- I have somehow overcome difficulties thanks to the understanding and cooperation of family, friends, company, colleagues, superiors, subordinates, and other people around me. Different people have different situations, but I feel that personal connections are important. Also, it's necessary to signal your concerns, communicate with others, and seek their understanding and, sometimes, their help before you feel that everything is pointless and suffer a breakdown. (Case no. 2)
- It's important to make friends with whom you can discuss your concerns and consult for advice so that you don't have to deal with problems all by yourself. In my case, I, for example, regularly talk with my workplace colleagues about my day, things interesting to me, my concerns, and other things. (Case no. 4)
- The secret to my work-care balance is to talk in any case. Talk and have others understand your situation. My care manager and visiting nurses kindly listened to me over the phone in a friendly manner even at night when I got to my parents' house from work. I have been very thankful for that. (Case no. 6)
- It's important to consult with someone and avoid dealing with care-related concerns and issues

all by yourself. In my case, no one around me was providing family care. I couldn't consult with anybody around me. So, I consulted with my care manager about everything. (Case no. 7)

- The most important thing is to have people who listen to you. In my case, I can talk to my aunt about anything. The idea of mutuality is also important. (Case no. 8)

Cooperate with care specialists and build a support system

- Since I can't always be with my father, I always remind myself to have arrangements that enable him to seamlessly receive care in my absence. It's important if you live far from the person needing care to make such care-related arrangements. I have built good relationships with my care manager and the heads of service providers by frequently contacting with them by phone and e-mail and by meeting them every time I go to my father's house, even for a short time. (Case no. 1)
- In maintaining work-care balance it's important to consult with a care manager and other care specialists about detailed care-related issues and wisely utilize various programs and services. Some people may equate getting professional help with running away from reality or making a poor decision, but people shouldn't bear too much of a burden by themselves. You may feel conflicted, but nothing good will happen if you overwork yourself and have a physical or psychological breakdown. (Case no. 2)
- If you regard caregiving as a project, you can see common elements between it and your regular work. It is important to think that you are not the sole caregiver, and that you are the leader who manages care-related activities, assigning tasks to various people such as family members, a care manager, helpers, and care facility employees. (Case no. 3)
- Caregiving was difficult for me until my weekly activity pattern was set. Once it is set, you live your life accordingly, and things suddenly get easier. (Case no. 7)

Maintain local relationships

- It's important to communicate with the care recipient's neighbors. Every time I go to my father's house I pay a visit to his neighbors and thank them for keeping an eye on him. (Case no. 1)
- I feel encouraged when my neighbors tell me that I work hard to care for family members. It is heartening that someone recognizes your hard work. (Case no. 5)
- I asked community members to keep an eye on my parents when they go outside. For example, I asked the owner of a small grocery store that my parents frequented to remind them if they were buying the same vegetable or prepared food that they bought the day before and to call my cell phone if anything happened. I built cooperative support in this way. (Case no. 7)

Make preparatory work arrangements

- After my mother had kidney failure and started dialysis, I always tried to be ahead of my work schedule because unexpected things could come up at any time. Doing so let me relax. (Case no. 6)
- Since I had to rush to the hospital or the care facility if I got a call, I regularly made sure to save my work documents and customer request data in shared folders on my company's system network so that my colleagues could take over my work if I was away from the office.

Have your own approach to caregiving and remain committed to continuing work

- Different families have their own approach to caregiving. No one can definitively say that care must be provided at home, or that care must be provided at a care facility. It is important to thoroughly consider your parents' wishes and find your own approach to caregiving while taking care of your own life. (Case no. 1)
- It's never the case that my way of caregiving is absolutely correct. Different families have different but appropriate approaches to caregiving. I hope that people provide care for their parents without getting stressed out, taking into account their and their parents' circumstances and wishes. Caregiving gives people a precious opportunity to spend time with their parents. If

you can approach it with well-thought-out plans, you may be able to provide the kind of care that will leave you with no regrets in the end. (Case no. 5)

- Some people may think that they have no regrets because they have worked hard to provide care. But, I think that different people have different attitudes toward caregiving and get different levels of satisfaction from it. (Case no. 6)
- Having financial resources is also very important. Since my sister and I were working, we had many options. Leaving your job is not a good strategy for either your current life or your retirement years. (Case no. 2)
- It's more important than anything else that you find a way to maintain work-care balance with the determination that you will not quit your job because of caregiving. I was saved by a helper's advice. The importance of that determination is my message to working caregivers. (Case no. 9)

Source: Ministry of Health, Labour and Welfare (2017). Important Points for Maintaining Balance between Work and Family Caregiving.

A fourth point is to make work arrangements with one's company in preparation for unexpected events. Such arrangements lead to peace of mind or gaining the company's understanding.

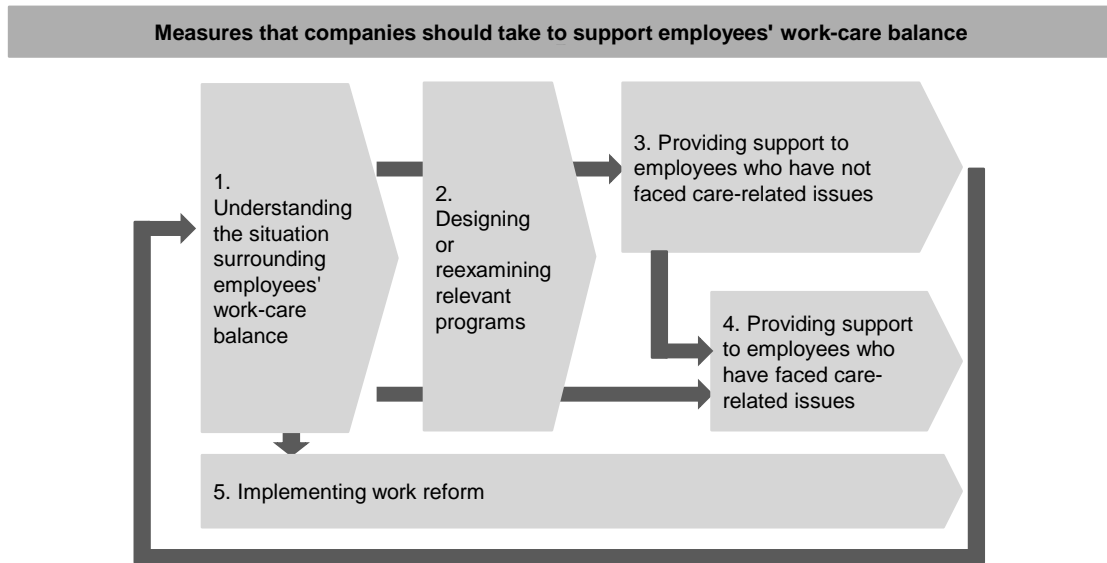
A fifth point is to remain committed to continuing to work[[The source says "remain committing to never quitting work" but this seems clearer in English as a positive statement.]] while taking an approach that suits one's own needs or the needs of one's family because people have different approaches to caregiving and because there is no one right way to provide care.

6. Conclusion

The level of anxiety among workers about providing care for family members has continued to rise. Many people are worried about maintaining balance between work and caregiving or about leaving their jobs. At the same time, many companies find it problematic that the issues needing to be addressed remain unclear, even though there are employees who worry about work-care balance. There are also many companies that have not proactively looked into whether they have employees facing care-related issues or what types of support are needed by such employees. Even if companies recognize the situation of employees who provide family care in a general sense, they often learn about it only when employees consult with them or apply for company support programs. Therefore, it seems that care-related situations are not discussed until employees raise the issue themselves.

In response to the problem described above, the Ministry of Health, Labour and Welfare has created a model for supporting work-care balance to prevent care-related job resignation, put forward a plan for supporting family caregiving, and encouraged companies to support the work-care balance of their employees. The model for supporting work-care balance focuses on five corporate actions, including understanding the situation involving employees' work-care balance and providing information and other support to employees before they face the issue of family caregiving (Figure 14).

Figure 14: A model for supporting work-care balance



Source: Ministry of Health, Labour and Welfare (2015). A practical manual for companies supporting employees' work-care balance.

The plan for supporting family caregiving applies to one of the five actions considered in the model, namely, providing support to employees facing the issue of family caregiving. This support is provided by managers or human resources employees who, together with the employees, consider how work-care balance can be achieved and maintained (Figure 15). Utilizing various mechanisms and tools suggested by the model and the plan would be effective for companies that are not sure what actions they should initiate as part of efforts to prevent care-related job resignation. In particular, if a company is not aware of the situation of caregiving employees, it needs to not only investigate the situation, but also create a workplace environment or system that enables employees to voice their concerns.

Heavy care-related burdens appear to cause workers to quit their jobs: caregiving workers who later leave their jobs tend to provide care by themselves to a greater extent than those who continue to work. For people who need care-related consultations, there are comprehensive community support centers (chiiki hokatsu shien senta). These are government offices that provide consultations on a wide range of issues to the elderly and their family and connect them with appropriate health, medical, and welfare services as well as relevant agencies and programs. In its opinion on reexamination of the Long-Term Care Insurance program, the Committee on Long-Term Care Insurance of the Council on Social Security (2016) calls for enhancing consultation support provided by comprehensive community support centers from the standpoint of preventing care-related job resignation (Box 6). In response, the support centers have improved their consultation services for working caregivers. The support centers and other organizations that provide care-related consultation services need to listen to not only the elderly who require care, but also their family members who provide care and have concerns about work-care balance. Furthermore, these support centers and organizations should consider how to support family caregivers in utilizing care services and various other social resources.

For workers, their concerns about family caregiving often stem from their lack of knowledge on care services and programs for supporting work-care balance. Therefore, it is important for them to learn about family caregiving and the programs available before a family member requires care and to be ready to voice their concerns to their company or care consultants when a family member needs care.

Many people who have concerns about family caregiving or work-care balance quit their jobs before seeking help or quit because they cannot receive sufficient support even if they do seek help. Therefore, companies, local government offices providing care-related consultation, and care providers must devise ways to address the potential concerns of workers who provide care to family members. Expanding consultation services that facilitate comprehensive utilization of various resources, including workplace programs, services covered by long-term care insurance, and services not covered by such insurance, would make it possible to prevent workers from leaving their jobs because of family care responsibilities and would enable people to maintain balance between work and family caregiving.

Endnotes

1. See Ministry of Health, Labour and Welfare (2016), Figure 1-1-2 "Population for three age categories and the proportion of elderly adults" (p. 6).
2. See Ministry of Health, Labour and Welfare (2016), Figure 1-1-14 "Number of people certified as needing care or support" (p. 16).
3. This goal is one of three goals set forth in the plan. The other two are achieving the largest postwar nominal GDP of 600 trillion yen and the target birth rate of 1.8.
4. Yajima, Y. (2015). Shigoto to kaigo ni okeru ryoritsu no katachi to kigyo ni motomerareru ryoritsu shien [The Types of Balance between Work and Family Caregiving and Support for Work-Care Balance That Companies Should Provide]. *Nihon Rodo Kenkyu Zasshi*, 658, 47-65.
5. Sato, H. (2015). Teigen ryoritsu shien care manager no ikusei wo [A Proposal to Train Care Managers Who Support Work-Care Balance]. *Nihon Rodo Kenkyu Zasshi*, 658, 3.
6. Matsuura, T., Takeishi, E., Asai, Y. (2015). Care manager ni yoru shigoto to kaigo no ryoritsu shien no genjo [The State of Care Managers' Support for Work-Care Balance]. *Nihon Rodo Kenkyu Zasshi*, 658, 66-79.

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