

American Medical Women's Association
Position Paper on Principals of Care of the Dependent Elderly

The American Medical Women's Association (AMWA), a national organization of women physicians and medical students, has as one of its major missions the advocacy of programs that will improve the physical and psychological health of women and their families. A Gallup survey done in March 1995 showed that 80% of American women aged 45 to 75 years did not know that heart disease is the number one cause of death in American women. Of 300 primary care physicians surveyed, 32% did not know this statistic either.

The Problem

The American population is aging. The fastest growing portion of this geriatric population is the over-75-yearold group. Many of these older Americans are frail and have multiple medical, financial and psychosocial problems.

Frequently the need for dependent care falls most heavily on family members as caregivers, many of whom are middle-aged children or elderly spouses.

Working women, in particular, are strained by the demands of their work, their families, and the need to assist in the care of elderly parents. This strain of care-giving is reflected by statistics from the American Association of Retired Persons. Fourteen percent (14%) of women caregivers changed from full to part-time employment because of care-giving responsibilities, while another 12% left the work force completely for this reason.

Spouses, often elderly themselves, experience monumental strain on their physical and mental health as they seek to care for failing partners. Frequently these situations result in the breakdown of the caregiver or institutionalization of the parent or partner.

AMWA's Position

AMWA recognizes that a disproportionately high number of women belong and will belong in the rapidly growing elderly population, will suffer the medical problems of this age group, and will require medical and ancillary care.

AMWA also recognizes that a disproportionately large number of women family members, usually middle-aged children, are involved in rendering care to the frail elderly.

Because of these considerations, AMWA advocates the following:

1. Encouraging employees to take advantage of the Family and Medical Leave Act, knowing that they can do so without putting their jobs at risk.

2. Better programs at the federal, state and local levels such as adult day care and respite care that will prevent or delay the need for institutionalization of elderly patients and decrease the necessity for workers to take long leaves from work or quit working altogether.

3. Increased study and certification for physicians in the field of geriatrics, with the result that:

- Physicians will become skilled in the comprehensive geriatric assessment, which identifies and addresses treatable causes of dependency.
- Physicians will become effective team leaders in allocating services and resources for their elderly patients.

4. Research and evaluation of innovative programs that improve the care of the elderly

5. Optimal management of funds for the care of the elderly that will insure that:

- Priority funding is given for programs and services that preserve the physical independence and personal dignity of the patient.
- Appropriate and equitable remuneration is paid to physicians, nurses, rehabilitation specialists, and other professionals rendering care to the elderly.
- Fraudulent practices in selling medical equipment or services to the elderly are promptly eliminated, so that resources can be used for needed and appropriate care.

REFERENCES

Seaward MR. The sandwich generation copes with elder care. *Benefits Q* 1999 2nd Quarter:15(2):41-8

Rachor MM. When worlds collide: elder caregiving poses new challenges for balancing work and life. *Empl Benefits J* 1998 Sep:23(3):20-3.

Dautzenberg MG et al. Women of a middle generation and parent care. *Int J Aging Hum Dev* 1998;47(4):241-62.

Lee JA. Balancing elder care responsibilities and work: two empirical studies. *J Occup Health Psychol* 1997 Jul;2(3):220-8.

Eubanks P. Hospitals face the challenges of 'sandwich generation' employees. *Hospitals* 1991 Apr 5;65(7):60, 62