

## **An Enhanced Public Review of the Carer- Inclusive and Accommodating Organizations Standard\***

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Roughly 35% of employed Canadians are currently informal caregivers — defined as “an individual who provides care and/or support to a family member, friend or neighbour who has a physical or mental disability, is chronically ill or is frail” (Williams, Eby, Crooks, Stajduhar, Giesbrecht, Vuksan, Cohen, Brazil, & Allan, 2011). These worker-carers are mostly women and often experience negative impacts on their physical, mental, emotional, social, and economic well-being. The impact on employers is also staggering (Fast, Lero, DeMarco, Ferreira, & Eales, 2014). With the number of seniors requiring such care expected to double by 2031, this is a growing issue for Canadians (Williams, et al, 2011). The Canadian Standards Association is beginning the process of developing a standard for Caregiver Inclusive and Accommodating Workplaces. This research seeks to conduct an Enhanced Public Review of the Caregiver Inclusive and Accommodating Standard through the completion of interviews (n=17).

Semi-structured interviews were conducted from May to July 2017. After reading a draft of the Standard, interviewees were asked about the viability of implementation of the Standard, what they liked about it, and what they would change, as well as how it met with the mandate of their own organization. Interviewees represented the senior leadership of a wide variety of organizations including human resources, caregiver support, unions, white-collar industry, healthcare, and municipal governments. Following transcription and coding of the interviews, several themes emerged.

First, the Standard is a necessary tool in today’s world. Second, though it is an important tool, it is more likely to be used as an educational tool than to be actually implemented by most organizations. Third, organizations are not likely to implement the Standard for a variety of reasons — small to medium sized organizations do not have the resources or capacity to implement, and large organizations already have policies in place and will view the voluntary Standard as superfluous. Finally, organizations may be motivated to implement the Standard and/or use it as an educational tool in exchange for tax breaks or insurance incentives, awards and recognition, or grants to assist in developing and implementing policy related to the Standard.

We conclude that although there are many barriers to implementation of the Standard, it is a useful and timely tool for organizations to use to better support their employees who are engaged in carer roles. Incentivizing implementation may encourage more participation in this program and thus greater support for worker-carers. This is especially important as 75% of carers are women, meaning that this will keep more women engaged in the labour force, prevent burnout, and support better health outcomes.