

# THE UNIQUE EXPERIENCES OF THE SANDWICH GENERATION

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## ABSTRACT

Due to the changing age structure of society, along with increased costs of living, a trend is emerging where some adults in the United States are providing care for their elderly parents at the same time they are providing care for their dependent children. This simultaneous caregiving for children and elderly parents is referred to as the *sandwich generation*. Adults in the sandwich generation must balance the responsibilities between work, home, the double-duty caregiving of children and elderly family members, and various family relationships. Utilizing a qualitative research design, this research focuses on identifying and contextualizing specific experiences of caregiver stress that are directly related to a structural position in the sandwich generation. In total, 12 in-depth interviews were completed and the qualitative findings suggest that sandwiched caregivers experience specific stress-inducing situations, unique to their caregiving roles, that influence their relationships with their children and their spouse. Interestingly, the experiences of the sandwich caregivers in this study support both role strain and role enhancement theories and further contextualize how symbolic interactionists might interpret the influences of social role expectations within the American family.

**KEYWORDS:** sandwich generation, gender roles, caregiving, double-duty caregiving, multigenerational caregiving, work-family spillover, work-family conflict, role conflict, role strain theory, role enhancement theory

## INTRODUCTION

The current age structure of society is changing as a result of both increased life expectancy and the size of the Baby Boomer generation (those born between 1946 and 1964) (Smith and Tasman 2005) reaching retirement age. Due to the increasing average age for the first child, contemporary age gaps between parents and their children are different than they were 20 years ago, leading to middle-aged persons having young children and older parents, simultaneously (Pierret 2006). These changing demographic trends have created social situations in which middle-aged adults, disproportionately women (Tebes and Irish 2000; Hammer and Neal 2008), find themselves caring for both children and their elderly parents.

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Miller (1981) originally designated this group of double-caregivers as the *sandwich generation*. Friedman, Park and Wiemers (2017) estimate that this label currently applies to 30% of individuals who have living parents and children in the United States.

Providing outside care for elderly parents is expensive, and for many families, financially unrealistic. In 2016 The U.S. Department of Health and Human Services reported the national average cost of an in-home health aide was \$20.50 per hour. This equates to \$164 for eight hours of elder care per day, and approximately \$60,000 per year. In a society where dual-income households are the norm (Pierret 2006), it is often financially unrealistic for an adult child living within a dual-income household to quit work in order to provide care full-time for an aging parent. All of these factors contribute to conflicts among work and caregiving responsibilities.

Recent demographic trends related to increases in dual-earning households and the growing need for elder-care have created unique work-family stressors for members of the sandwich generation. The existing literature on sandwich generation stressors would benefit from a contemporary analysis. The current qualitative research intends to address this gap in the current literature by contributing a sociological analysis of specific caregiver stress-inducing situations, as well as an analysis of the effects that this environment has on developing children. This research extends the current literature in the following ways: 1. It examines a new generation of sandwiched caregivers (SCG) in the United States; 2. It contributes to the current body of sandwich caregiver research by identifying that many SCGs felt isolated from their own families, in addition to their friends; 3. It extends the concept of double-duty caregiving to include two types of uncompensated caregiving, elder care and childcare; 4. The findings suggest that growing up with a SCG parent(s) may be associated with the likelihood of choosing a caregiving field career path. These findings have the potential to help families who find themselves living in this unique “sandwiched” experience, as well as benefit family counselors and policymakers.

## LITERATURE REVIEW

### Mental and Physical Costs of Double-Duty Caregiving

Symbolic interactionism, as a sociological paradigm, focuses on the process of interpreting meaning in social situations. Social scientists explain that a person’s perceptions of their social roles and associated role performances, influences their perceived quality of life (Chapman 2018; Pearson 2008; Turner 1978). Members of the sandwich generation face a variety of psychological and work-family challenges. The psychological burden of caring for both an elderly parent and children simultaneously can negatively affect the caregiver’s mental health, possibly leading to depression and anxiety (Cattanach and Tebes 1991). Byrd, Grant-Vallone, and Hamill (2002) note in their research that approximately 50% of sandwich generation caregivers suffer from anxiety and depression; however, there is disagreement on the role of gender.

Some researchers find that both men and women experience increased depression similarly (Cattanach and Tebes 1991), while others find that women experience more depression than men due to the fact that women disproportionately take on the caregiver

role (Tebes and Irish 2000; Hammer and Neal 2008). *Gender role theory* explains that women are socialized, from a young age, to be more “nurturant and relationship-oriented” than young boys (Umberson, Chen, House, Hopkins and Slaten 1996: 838). Building on gender role theory, Ergeneli and colleagues (2009) find that women place more significance on their family roles than men. Additionally, Offer (2014) highlights that women continue to bear a disproportionate amount of mental labor in family settings. Working from a symbolic interactionist perspective, these aspects of gender role theory suggest that gender may influence how individuals experience their sandwich generation caregiving roles.

Structural aspects of the multi-generational caregiving relationships have also been shown to influence caregiver stress. For example, researchers, such as Coe and Van Houtven (2009) explain that the length and duration of the double caregiving situation is associated with an increased risk of depression for both men and women. In a study of female sandwiched caregivers in Italy, Brenna (2021) found that the presence of children under age fifteen was associated with higher depression outcomes for caregivers. These structural aspects further exemplify the complexities of the double-duty caregiving experience.

Several studies have also found a correlation between sandwiched caregiving and unhealthy behaviors. Multigenerational caregivers are more likely to exercise less, smoke cigarettes, and eat unhealthy foods than non-caregiver adults or adults who only care for their children (Chassin, Macy, Seo, Presson, and Sherman 2010). This is likely due to less available time to exercise or cook healthy foods; these individuals have double the caregiving duties, which takes up more time. It is possible that they prioritize the health of their children and parents over their own. Son, Erno, Shea, Femia, Zarit, and Stephens (2007) found this health disparity to be exaggerated in situations where caregivers were providing care for elderly parents or children suffering from exacerbated health or behavioral issues, such as those often present with dementia in the elderly, or those present among children with chronic illnesses. These increased stressors in the caregiving environments were associated with a lack of self-reported health care, increased negative health behaviors, and increased use of healthcare services. The caregivers in this study attributed the decline in personal health to feeling overwhelmed with the high demands of time and energy associated with double caregiving (Son et al. 2007).

Sandwich generation caregivers also often experience conflict within their personal lives. The effects of caregiver stress leak into their lifestyle, limiting their personal time (Riley and Bowen 2005) and their ability to nurture various relationships. Spouses in this generation have been found to experience increased marital conflict (Tebes and Irish 2000). Roots (1998) explains that increased marital conflict is linked to the lack of ability to put time and effort into marriages. Loomis and Booth (1995) argue that caregiving negatively impacts the marital relationship because it disturbs daily family life, limiting the time spent with other family members, and it interrupts privacy. When only one partner in a married couple takes on the role of sandwich caregiver for elderly family member, the other partner may feel neglected, leading to increased marital conflict (Bengston 2001; Pnina 2006). Overall, researchers agree that the stressors associated with double-duty caregiving increase marital strain in the sandwich generation.

The location of middle-aged adults in their career trajectory further complicates the struggle to care for both their children and parents. Career opportunities that are often associated with middle-aged adults are complicated by caregiving responsibilities (Riley and Bowen 2005). Goode (1960) originally developed *role strain theory* to explain the increased negative stressors that people may feel when they take on additional social roles. Additionally, Steiner and Fletcher (2017) embrace a symbolic interactionist approach when they explain that the stress associated with a new role is potentially higher in unanticipated situations. Essentially, middle-aged working adults are likely to experience negative stressors in situations where they unexpectedly take on the role of multigenerational caregiver.

Multigenerational caregiving also makes career goals harder to achieve and employer expectations harder to meet – especially in the United States, which lacks family-oriented employment policies; including, but not limited to, no standardized paid family leave and a lack of flexibility in work schedules (Ciabattari 2017:174-176). Adults in the sandwich generation often have to take time off of work to complete caregiving tasks, which further exacerbates their caregiving stress (Starrels, Ingersoll-Dayton, Dowler, and Neal 1997). Chapman, Ingersoll-Dayton and Neal (1994) find that employees who maintain multiple caregiving roles are more likely to leave work than those with only one caregiving role. It is clear that work life and family life are often in contention with one another for caregivers, and this phenomenon is amplified for members of the sandwich generation.

The literature illustrates that double-duty caregiving is not only emotionally and physically taxing, but also financially challenging. The National Family Caregivers Association (2006) reports that family members who are caring for their children and parents simultaneously have 2.5 times higher out of pocket medical costs than non-caregivers. The financial burden is not just due to medical costs, but also personal and household costs, as well as paying part time caregivers to come during the work day. This reason may explain findings by Chisholm (1999), that families with higher incomes are more likely to support their aging parents in addition to their own children. A higher income provides the means to support additional family members, especially in the cases where the elderly parents cannot offer financial support. Ingersoll-Dayton, Neal and Hammer (2001) found that some adult caregiver-elderly parent relationships experienced increased conflict in situations where aging parents were able to offer financial assistance as compensation for care. It is possible that accepting money might make the adult feel as though caring for his/her parent is a job, minimizing the action as one driven by love and respect. As Roots (1998) described the motivation for his sandwich generation experience: “You take care of your own.”

#### Effects on the Sandwich Generation’s Children

While most research concerning the sandwich generation primarily focuses on caregiver stress effects on the adult caregiver-elderly parent relationship or marriage relationships, it is important to explore the effects of double caregiving by parents on the sandwich generation’s own children. Studies have shown that difficulties experienced by sandwich-generation caregivers result in their children experiencing increased depression, problematic behaviors, and diminished functioning (Tebes and Irish 2000). In a study

completed by Szinovacz (2003), children of the sandwich generation reported that they noticed a spillover of caregiver stress into their family's relationships and felt that their parents showed more attention towards their grandparent than themselves. Children also complained about their family's limited abilities to do activities and travel (Szinovacz 2003), echoing Loomis and Booth's (1995) argument that caregiving negatively impacts the marital relationship because it limits the time spent with other family members. Szinovacz's (2003) study compared how sandwich generation parents and their children viewed their unique family situation. The adult caregivers viewed the situation as a positive opportunity and environment for their children to grow more so than the children did. The parents seemed to be aware that their double caregiving role changed their relationship with their children but did not experience it as negatively as their children (Szinovacz 2003). It is also possible, as Brody (1989) explained, that children in sandwich caregiving households often take on some form of a caregiving role to help out, leading to further disruption of social life and increased family conflicts. Interestingly, while children of the sandwich generation can be negatively impacted, many researchers have found positive outcomes associated with growing up with multigenerational caregiver parents.

#### Positive Outcomes of the Sandwich Generation

In some cases, the positive outcomes of growing up with multigenerational caregiver parents seem to outweigh the negatives. The experience of caregiving as a child positively impacts their views of elderly people and caregiving roles long-term (Szinovacz 2003). Children were found to show greater empathy towards their grandparents and more respect towards their sandwich generation parents (Szinovacz 2003; Beach 1997). Beach (1997) conducted a study on the positive impacts that children experience with double-caregiving parents and noted that these children had more productive sibling interactions, increased empathy towards older adults throughout their lives, more positive relationships with ill relatives, and greater maturity than their peers. Another interesting finding in Beach's research (1997) was that children growing up with sandwich generation parents and close relationships with ill grandparents were more careful about choosing friends. These children looked for friends who would similarly demonstrate compassion towards their ill relatives and have an understanding for the unique situation their family was in; these children avoided friends who were insensitive to the situation (Beach 1997).

Children who helped their parents with caregiving responsibilities were found to have stronger relationships with their parents (Szinovacz 2003), specifically with their mothers – who are typically the primary care provider in a sandwich generation household – because the children grew up watching their mothers juggle multiple roles and provide care their whole lives; this caused most children to gain genuine respect for their mothers (Beach 1997). Beach (1997) also noted that families in this caregiving context tended to have tighter family bonds and cohesion, which she conceptualized as “family fusion.” Greater family fusion can, superficially, seem like a positive thing. However, when it comes to adolescents finding their own identities, increased family fusion can inhibit the teen's ability to explore their sense of self apart from the family, due to their identities being rooted so deeply in their family relationships (Beach 1997).

The potential positive impacts of providing sandwiched caregiving is not limited to children. In some cases, it also positively effects the marital relationship. This positive influence might be related to the *role enhancement hypothesis*, or the claim that multiple roles can be beneficial for a person (Pearson 2008). A study by Ward and Spitze (1998) found that spouses in the sandwich generation experienced increased marital happiness when their relationships with their aging parent and their children were strengthened. Another study found that these adults experienced *role satisfaction* from providing care to their elderly parent; supporting the idea that the double caregiving role can be experienced positively (Stephens, Franks, and Townsend 1994). For some caregivers, sandwich caregiving might be experienced as a unique opportunity for adults to “give back” to their parents.

Additionally, as mentioned above, there are cases where the elderly parent provides financial support, but there are also times when the aging parent can offer childcare, emotional support, and help with household tasks, all of which potentially help alleviate caregiver stress and burden and benefit the sandwich generation members (Ingersoll-Dayton, Neal, and Hammer 2001; Greenberg and Becker 1988). One study noted that in situations where the elderly parents are in a position to help their children and grandchildren, the elderly are no longer seen as passive recipients (Ingersoll-Dayton, Neal, and Hammer 2001). The majority of multigenerational caregivers in Ingersoll-Dayton et al.’s (2001) study reported great appreciation for their parents’ help with childcare as well as improved relationships between their elderly parents and their children. They also perceived that their elderly parents experienced personal satisfaction from their helpful role in the family (Ingersoll-Dayton, Neal, and Hammer 2001).

Reciprocity in the adult caregiver-elderly parent relationship has been widely studied to determine if the presence of reciprocity lessens caregiver stress for the caregiver and/or increases the satisfaction of the elderly parent. Reciprocal action by the elderly family members can be defined as appreciation for the care their child is providing. Studies show that when reciprocal action and gratitude are present in adult-elderly parent relationships, the adult caregiver reported less caregiver stress (Starrels et al. 1997). Exchange within the caregiving relationship was found to decrease stress levels and burnout in caregiving daughters (Dwyer, Lee, and Jankowski 1994). However, reciprocity was not found to significantly affect the satisfaction of the elderly parent being cared for (Dwyer et al. 1994).

Adults in the sandwich generation experience unique stressors for a period of time in which they occupy a double caregiving role—caring for their children and their aging parents simultaneously. This caregiver role can negatively impact one’s psychological health, physical health, career success, finances, and social relationships. However, it can also have positive benefits, including strengthening family bonds, creating an environment that fosters positive qualities and maturity for their children, as well as providing an opportunity to teach them to live selflessly. Much research among American sandwiched caregivers is quite dated, stemming mostly from the 1990s and early 2000s. Contemporary analysis will extend the original work in this area by examining a new generation of sandwiched caregivers.

## METHODS

### Sample

The goals of the current study were two-fold: to analyze how double-duty caregivers perceive and experience caregiver stress related to their structural positions in society, as well as to examine how sandwich generation caregivers perceive their double-duty caregiver role to influence their children. Study participants were recruited through convenience sampling. To be eligible for the study, participants had to actively be part of or previously been part of the sandwich generation. The participants in this study included 12 females residing in the United States. Six of the participants were actively performing double caregiving roles at the time of the interviews and the remaining six had prior experiences as multigenerational caregivers.

Characteristics of sandwich caregivers (SCGs) and the elderly care recipients (ECRs) are shown in *Table 1*. The average age of SCGs and ECRs were 42 and 79, respectively, at the time of caregiving. All SCGs interviewed were female and Caucasian. The average length of time for the sandwiched caregiving relationship was 5.6 years (this includes participants who are still currently providing care). The average number of children of the SCG was 2.7. Fifty-eight percent of SCGs interviewed provided care for more than one elderly family member. While the presence of dementia in the ECRs was not a requirement to participate in this study, 75% of SCGs interviewed were providing care for an ECR who was diagnosed with dementia.

**Table 1. Characteristics of the Sample (n=12)**

<b>Characteristics</b>	<b>Sandwich Caregiver (SCG)</b>	<b>Elderly Care Recipient (ECR)</b>
Average Age at the start of caregiving (years; M [SD])	42 [9.57]	79 [11.17]
Time Spent in Double-Duty Caregiving Role (years; M [SD])*	5.6 [3.70]	
Gender (female; %)	100	55
Race (White; %)	100	100
Providing Care for Multiple ECR (%)	58	
<b>Kin Relationship of CG to ECR</b>		
Daughter (%)	75	
Daughter-in-law (%)	25	
Granddaughter (%)	17	
Presence of Dementia (%)	75	
Number of children (M [SD])	2.7 [1.15]	

\*indicate that the sandwich caregiving was currently taking place at the time of the interview

### Research Design

This qualitative study of sandwiched caregivers utilized an inductive approach to identify specific caregiver stress-inducing situations, as well as the effects that this environment had on their dependent children. Interviews were utilized for data collection to contextualize this unique experience (Carcary 2009:12). Additionally, interviews are a common method used to investigate caregiver stress in the sandwich generation; the majority of the studies cited in the literature utilized interviews in their methodologies (Beach 1997; Son et al. 2007). In total, 12 semi-structured in-depth interviews were conducted remotely over the phone or through a video call using FaceTime or Skype, and were approximately 30 minutes in length. Following data collection, pseudonyms were assigned to each participant in order to maintain confidentiality for the participants.

## Analysis

Each interview, approximately 30 minutes in length, was tape recorded and subsequently transcribed verbatim. Following transcription, a loose color-coded coding system was developed in Microsoft Word to guide analysis, and was expanded as additional themes emerged during subsequent reviews of the transcripts. After the coding process was complete, individual codes that emerged were grouped into four overarching themes for analysis: specific stress-inducing situations for sandwich generation caregivers, the impacts of double-duty caregiving on relationships with children, work-family conflict and positive outcomes of sandwiched caregiving.

In an effort to preserve the validity of the study, field notes and an audit trail were utilized during the course of data collection and analysis (Carcary 2009:15). Field notes were recorded directly following each interview and consisted of the researcher's personal reflections on the interviews. Audit trails help to document the analytical process (Koch 2006) and were updated continuously throughout the coding and analysis stages.

## FINDINGS

Four distinct themes emerged from this qualitative project focused on investigating the lived experiences of sandwiched caregivers. The first theme includes specific areas of the sandwich caregiving lifestyle that increased caregiver stress. These specific stress-inducing situations included the presence of parental dementia, role conflict, feelings of isolation, marital strain, and strained sibling relationships. The second theme focuses on the perceived negative impacts of double-duty caregiving on the caregiver-child relationships, while the third theme unpacks experiences of work-family conflict, including both career conflicts and caregivers becoming neglectful of personal health. The fourth and final theme highlights the positive experiences that participants reported to be directly associated with their double-duty caregiving roles. This final theme helps to fill a gap in the broader work-family spillover literature related to the absence of positive experiences. Together, these themes contextualize our understanding of the lived experiences of double-duty caregivers that are simultaneously providing care to both aging parents and their own children.

### Theme 1: Specific Stress-Inducing Situations

#### *Presence of dementia*

The participants in this study identified several specific stress-inducing situations that are unique to their sandwich caregiving role. The first major theme to emerge included the stress that SCG's felt when the behaviors of their aging parent adversely impacted the SCG's children. Because the majority of participants provided care for an elderly family member suffering from dementia (75%), many stress-inducing situations described by the sandwiched caregivers (SCGs) directly relate to behavioral changes that are generally associated with a dementia diagnosis. Specifically, SCGs reported several situations in which behaviors associated with dementia negatively impacted the SCGs' children. For example, one SCG described how her mother's dementia led to risking her son's safety as well as stress and conflict when the SCG had to subsequently limit her mother's independence.

She took one of my little boys out [on a golf cart ride] without permission – the little four-year-old and she got lost. She couldn't find a way back home and *I was so scared* and then we had to take that key from her, and she already couldn't drive a car anymore... *That was really upsetting for me.* (Chelsea, Female, Age 58, 2 kids)

In another situation, SCG Eloise (Female, Age 56, 4 kids) described a situation where her elderly mother's dementia prohibited her from recognizing her grandchildren. This confusion led to her elderly mother experiencing romantic feelings for Eloise's adult son.

My mother is in love with my son and does not know that he is my son. She says [and tries] very inappropriate things. I am with my mother 24/7 and my son can't be in that room [with us]...*it's extremely hard.* And then you don't have a relationship with your son. (Eloise, Female, Age 56, 4 kids)

Eloise recounted the emotional awkwardness and complications that this created in her household. She described the barrier that now exists between herself and her son—Eloise spends the majority of her day caring for her mother, preventing her from spending time with her son. She also talked about how her son used to have a close relationship with his grandma, but no longer has that connection. In general, Eloise shared her difficulties attempting to balance both of those relationships, and she expressed sorrow over the disrupted relationships between herself and her son, as well as between her son and his grandmother.

Participants also related increased stress to instances when the elderly family member suffering from dementia lashed out physically on other family members:

She pushed my daughter today. (Eloise, Female, Age 56, 4 kids)

She's hit me, she's grabbed me, she's shaken me, and she's done that to my dad. (Katy, Female, Age 52, 2 kids)

SCGs, like Katy (Female, Age 52, 2 kids), also noted stressful situations related to conflicts between elderly parents related to physical violence perpetuated by the elderly parent with dementia. Katy was in a tough situation when her elderly mother's dementia led to outbursts of physical violence that put her mentally-sound elderly father in danger.

When my mother was physical...I saw bruises on my dad. One time, *my mother took a knife and ran after him* and he ran out of the house... that's when we moved him into our house. (Katy, Female, Age 52, 2 kids)

Katy recounted how stressful it was to convince her dad to move in with her. She described how guilty her dad felt, leaving her mom alone. She also said it was very difficult for her mother to come to terms with her husband choosing to live with their daughter over herself. This was something her mother could not understand because her dementia

prevented her from remembering her violent outbursts. This experience was stressful for the whole family—Katy’s father was emotionally affected by his wife’s violent outbursts and his guilt over moving out. In addition, Katy’s children were unable to see their grandmother for a period of time. There was also additional stress as Katy and her family adjusted to sharing their household with her elderly father (Katy, Female, Age 52, 2 kids).

This research builds on previous findings related to the presence of dementia increasing caregiver stress and contributes the additional perspective of how this stress might also impact the SCG’s children. These findings regarding the increased caregiver stress associated with dementia are supported by previous literature (Boutoleau-Bretonniere, Vercelletto, Volteau, Renou, Lamy, and Zarit 2008; Solberg, Solberg, and Peterson 2014). In addition to the increased caregiver stress, Son et al. (2007) also found that in caregiving situations where the elderly parent suffers from exacerbated health or behavioral issues associated with dementia, the caregivers experienced more overall poorer physical and mental health. As experienced and shared by the participants in this study, the presence of parental dementia further complicates the unique stressors experienced by sandwiched caregivers.

### *Role conflict and social isolation*

In addition to the challenges that come with caring for an elderly parent’s cognitive decline, caregiver stress was found to be exacerbated by role conflict. *Role conflict* occurs when multiple roles that one plays in life (such as wife, mother, daughter) compete with each other (Miller 1981). SCGs experience role conflict in relation to their double-duty caregiving roles (Pierret 2006). The concept of *double-duty caregiving* is traditionally referred to in the context of work and home—performing care work in a professional setting as well as at home (Cottingham, Chapman, and Erickson 2019); however, in this research, we have extended the concept of double-duty caregiving to include two types of uncompensated caregiving, parental care and childcare. This approach is a contribution to literature. When participants were asked to describe their most stressful situations, they referred often to the juggling of the many roles a sandwich generation caregiver must play—mother, daughter, wife, and employee:

I can’t be a great mom and a great teacher and a great wife and a great daughter and take care of myself. *I can’t do it all.* (Chelsea, Female, Age 58, 2 kids)

Chelsea was experiencing role conflict in this situation—she wanted to excel in her roles of mother and daughter, but felt as though she needed to choose whether to put her energy towards being a great mother or a great daughter—that she could not be great at both roles at once. Another SCG described her experience with conflicting roles as something that caused her to lose her sense of self. She explained feeling detached from her life and as though her life existed simply to serve others:

I feel like my life is very much so not my own. (Veronica, Female, Age 34, 1 kid)

Other SCGs recounted feelings of guilt when the roles of wife, mother and daughter would conflict, and they felt forced to prioritize one over the others. In many cases, feelings of

guilt seemed unavoidable. They felt guilty for not spending enough time with their children and husband, and also felt guilty for not spending enough time with their elderly parents (Katy, Female, Age 52, 2 kids).

I just feel like I should be at home with my parents, but *being home with my parents means I'm away from [my family]*. (Amanda, Female, Age 57, 2 kids)

The role conflict that SCGs experience can be extreme and lead to isolation from friend groups as well as their families in some situations. As explained by Amanda (Female, Age 57, 2 kids), her isolation from her family was one of the most stressful periods of her life. Her elderly parents who needed her care lived over 8-hours and a state line away. She was making trips back and forth so that she could take care of both her small children and her sick parents. The time-intensive commute further complicated Amanda's (Female, age 57, 2 kids) double-duty caregiver stress.

I was coming back and forth...*I'd be home and then I'd leave*. I figured out I was home, over those three months, actually 12 days. (Amanda, Female, Age 57, 2 kids)

Alongside isolation from their families, many SCGs (50%) mentioned feelings of isolation from their friends. This isolation from personal relationships outside their family was due to the busyness of their double caregiving role:

I don't see my friends...*my personal life is shot*. (Eloise, Female, Age 56, 4 kids)

I didn't have time to tend to a lot of my relationships outside of my immediate family...*my circle got a lot smaller*. (Carly, Female, Age 52, 2 kids)

In some cases, respondents identified that sheer busyness was not always to blame for their social isolation. Veronica suggested that her sandwiched caregiving role seemed to define her lifestyle in a way that was different to that of her friends, creating an invisible social barrier of sorts. She explains:

*I'm not dealing with this alongside any friends*. Like they're taking care of their, you know, babies and toddlers and dogs (Veronica, Female, Age 34, 1 kid)

Several participants reported that these experiences of social isolation and role conflict associated with their sandwiched caregiving role directly led to strained relationships. Two specific types of strained relationships that they mentioned included those with their spouses and those with their siblings. Both of these types of relationships seemed to be stressed by the time demands of the sandwich caregiving role. Interestingly though, although the demands of the sandwich caregiving role were the culprit for both types of strained relationships, the point of stress was different for each. The SCGs shared that while their marriages were strained by issues related to role conflict, their sibling relationships were strained by the perception of

uneven distribution of caregiving labor among siblings. Regardless of the point of stress, the fact remains that the SCGs experienced strained relationships due to their sandwich caregiver role.

### *Marital strain*

Many of the participants shared that in addition to feeling socially isolated from their friends, they also felt isolated from their husbands. Due to the time and energy required for the sandwich caregiving responsibilities, the majority of the SCGs interviewed reported an increased level of strain on their marriage that led to them feeling isolated from their spouses.

For my husband and I to even go to the grocery store [together], it's huge. Everything is: "oh you stay here [with my mom] while I go do this." And *it's extremely stressful* that I don't have time with my husband. (Eloise, Female, Age 56, 4 kids)

In one case, the marital strain was so great that it led to a divorce for Chelsea (Female, Age 58, 2 kids) and her husband. Her husband had initially agreed to help her provide care for her elderly parents—one of whom was suffering from dementia. Chelsea and her husband even purchased a bigger house so that her elderly parents could move in with them. However, after a few months, Chelsea explained that her husband felt that she was neglecting her role as a wife:

My husband decided he didn't want to be a husband anymore and left. *I drove [him] away.* (Chelsea, Female, Age 58, 2 kids)

As Chelsea explained this heartbreaking situation, she recounted feelings of guilt and explained how her struggles with role conflict led to her husband realizing he was not actually okay with caring for her elderly parents.

I was really struggling with being a good wife, a good daughter, a good mom...and I definitely prioritized being a good daughter and mom before being a good wife...I was trying to be a good wife, but *I could not pull it all off and he left over that.* (Chelsea, Female, Age 58, 2 kids)

Unfortunately, Chelsea's situation is not uncommon. The majority of literature agrees that sandwich caregiving is linked to increased marital conflict (Loomis and Booth 1995; Tebes and Irish 2000; Bengston 2001). Similar to the results of this study, which showed that it is common for husbands to feel neglected by their wives because of the lack of time available to be a good wife (specifically in the case of Chelsea), literature shows that increased marital strain is connected to the lack of ability to put time and effort into marriages, leaving one spouse feeling insignificant (Roots 1998; Pnina 2006). Other researchers credit marital strain in the case of sandwich generation caregivers to the disturbance of the caregiving in daily life and its interruption of privacy (Loomis and Booth 1995).

Many SCGs recounted stressful situations that were related to the isolation that came from juggling so many roles—caregiving and otherwise. There is a gap in the literature related to a sandwich caregiver’s experience with role conflict. In fact, role conflict has even been classified as an “atypical” occurrence for sandwich generation caregivers (Evandrou and Glaser 2004). Additionally, caregiver stress researchers have reached different conclusions related to the experiences of role conflict among sandwich caregivers. Researchers agree that female sandwich generation caregivers experience role conflict when they have conflicting priorities regarding how to spend their time and energy (Evandrou and Glaser 2004; Mui 1992). However, the present study uncovered that role conflict led to isolation from both their husbands and children, and in some cases, from their friends, too. Isolation from their families is not covered in the literature, but sandwich caregivers experiencing isolation from friends is well studied.

The effects of caregiver stress and the juggling of many roles limits personal time because caregivers choose to sacrifice their personal lives and activities in order to provide care for their elderly parents (Riley and Bowen 2005). In their study of caregiver stress, Glaser and colleagues (2006) found that occupying an intensive caregiver role significantly reduced the caregiver’s involvement in social activities. Opposing literature does exist, noting that maintaining multiple roles is associated with higher social activity levels for women, as well as with more opportunities to meet new people (Glaser, Evandrou, Tomassini 2006). This study contributes to the current body of sandwich caregiver research by identifying that many SCGs felt isolated from their own families, in addition to their friends.

#### *Strained sibling relationships*

The majority of the stressful situations described above occurred within the home or directly with the elderly family member requiring care, yet all 12 SCGs interviewed also mentioned increased stress and conflict in relation to the uneven distribution of caregiving labor among siblings of SCGs. Most conversations with the SCGs related to sharing responsibilities for their elderly parent with a sibling or sibling-in-law consisted of them expressing frustration about people being unhelpful. Interestingly, in their descriptions of these frustrating situations, the SCGs often discussed a reason for why they, of all the siblings, were the best cut out for sandwich generation living. More often than not, this excuse was often related to gender. For example, Katy (Female, Age 52, 2 kids) lived over two hours away from her parents when they started needing everyday help. Her brother lived less than 30 minutes from them, but Katy still took on the role of primary caregiver. Eventually, she had no choice but to disrupt her parents’ lives even more and move them closer to her so she could provide more frequent and in-depth care. Katy described it this way:

My brother is a male and not in healthcare. I’m in healthcare, I’m female...*it just makes sense* and I’m willing to do it; I can do it. (Katy, Female, Age 52, 2 kids)

Other SCGs provided similar gender-related reasons as to why brothers were unable to step up and take on partial responsibility for the elderly parent caregiving. All of the SCGs

interviewed were women and they collectively seemed to think that this fact alone made them responsible for being the sole provider of care for their elderly parents.

My brother...was working and *couldn't take time off*. (Amanda, Female, Age 57, 2 kids)

They [my brothers] have jobs and lives and they can't stop. My oldest brother...just doesn't care. *It's not that he can't [help], but he won't*. (Eloise, Female, Age 56, 4 kids)

My dad couldn't stay in California because *it was just more than my brother could ever have taken on*. (Carly, Female, Age 52, 2 kids)

This mindset, that women are better equipped to be caregivers, exemplifies gender role theory—which describes the influence of gender socialization. Umberson and colleagues (1996:838) explain that young girls are commonly socialized to be more “nurturant and relationship-oriented” than young boys. This theory explains that gender socialization influences the roles that men and women play in social institutions, specifically the sexual division of labor in the heteronormative family. This division of labor connects women to the roles of wife, mother, and overall caregiver (Ritzer and Stepnisky 2017: pg. 224). The literature also supports increased conflicts and stressors related to sibling relationships in the sandwich generation caregiving situation, especially when females are forced to assume the caregiver role (Scommegna 2016).

Another interesting finding related to the distribution of caregiving amongst siblings included the dynamic of in-laws. Three of the SCGs interviewed were wives caring for their husband's elderly parents – their in-laws. There appeared to be more stress associated with these situations because the SCGs felt that the actual children of the parents should be taking on more responsibility and more of an active caregiving role. Because these three SCGs were the main caregivers of their husband's parents, they felt restricted in how they lived their lives due to the fact that their schedules were dependent on other biological children of the elderly parents stepping up to cover caregiving shifts:

If she [sister-in-law] decides that she wants to do something other than have her mom, *then I can't do what I want to do*. (Julie, Female, Age 48, 4 kids)

Multiple cases were described where a biological son wanted to help provide care for his elderly parents, but his wife was not supportive, leaving the responsibilities up to the elderly parents' biological daughter.

Her son wanted her, but *my sister-in-law felt that this was going to be too much*... It was like: I already have my own problems. (Molly, Female, Age 73, 1 grandkid)

*They had their own family*. My brother's wife wanted to raise her kids and my mother would take over a little cooking and...*there was conflict*. (Hannah, Female, Age 76, 3 kids)

Another cause of stress in this situation related to times when the uninvolved siblings and in-laws freely offered their opinions on the caregiving situations. In Michaela's (Female, Age 44, 4 kids) case, her husband's parents needed everyday care, but his sister was unwilling to step up and help with caregiving responsibilities, yet she offered criticism as to how Michaela and her husband chose to provide care:

[My husband's] sister has a lot of opinions about their health and their money or with their situation. And she offers them freely but *isn't around to actually help with anything*. She just has an opinion on what should happen. (Michaela, Female, Age 44, 4 kids)

In another situation, Chelsea's (Female, Age 58, 2 kids) elderly mother was on hospice and had a failure to thrive. Her brother who lived states away and who had not played any type of active role in providing for her care for the entire decade beforehand decided to offer his opinion regarding end-of-life care:

When it came to make a decision about my mom and letting her go, he [my brother] basically said *we couldn't play God* and take the feeding tube out, but *the rest of the family and my dad all wanted that*. My brother wasn't living out here with her. (Chelsea, Female, Age 58, 2 kids)

The literature supports the finding that it is common for one sibling to assume the position of "primary caregiver" over other siblings because they view caregiving as a type of familial duty (Keith, Wacker and Collins 2009). Literature related to caregiver stress associated with sibling relationships for sandwich generation caregivers is limited. One study, by Young (2017), surveyed SCGs and asked a few questions about sibling relationships and found that the majority of participants reported feeling low levels of support from their siblings and in-laws, leading to moderate levels of additional caregiver stress (Young 2017). Another study by Smith and Hamon (2012), noted a few positive sandwiched caregiving interactions and concluded that if siblings are able to work together on the caregiving responsibilities and communicate well, then there is more sibling satisfaction and less additional stress due to sibling interactions.

## Theme 2: The Impacts of Double-Duty Caregiving on Relationships with Children

In addition to looking at what situations caused increased caregiver stress for the SCGs, this research also aimed to analyze how being part of the sandwich generation impacts familial interactions, specifically how parents perceived their sandwiched caregiver role to influence their children. Multiple respondents mentioned that their children had vocalized feeling abandoned and isolated by their mothers when more time was spent caring for their grandparents than themselves. Isabelle directly asked her now adult son:

If you could put down a couple words that you look back and think of during that time? And he had three words. He said, "*You were absent and sad and stressed.*" (Isabelle, Female, Age 54, 4 kids)

My youngest son...will even talk about it today and he's 28 [now], about *how I abandoned him as a child*. Because in his eyes, he was. (Amanda, Female, Age 57, 2 kids)

Molly (Female, Age 73, 1 grandkid) was in a unique situation where she was providing care for both her grandchild and her own elderly mother. Molly was able to recall a situation when her granddaughter expressed her frustration with the sandwiched caregiving situation during a play session involving her dollhouse:

There were mother, father, child, and grandma [dolls]. And she couldn't express it, but she put the grandma doll on the roof, and she said, "Grandma, this is you!" And she would hit it and knock it off the roof. *She didn't want her [great-grandmother] here.* (Molly, Female, Age 73, 1 grandkid)

The feelings of abandonment that these children felt are evident in these examples. The now adult children are able to clearly remember the absence of their parents that came from their parents having to provide care for their grandparents, and even the younger children were able to express their feelings toward the sandwich generation situation using toys. Feelings of stress and abandonment in children of sandwich generation caregivers is supported with previous literature. A study by Szinovacz (2003) found that children of the sandwich generation felt that the double-caregiving role took their parents away from them and that their parents showed more attention towards their grandparent than themselves.

These real-life examples also show that SCG parents are aware of how their double-duty caregiving role affects their children, whose childhoods look different than the average child's. Sandwich generation caregiving leads to a unique set of circumstances that, in some cases, lead to older children playing a more active role in providing care for the elderly family member. This is especially likely to occur when the SCG also works outside the home:

My older daughters were helping care for her while I was at work...helping her to the toilet and washing her up. And they helped me care for my dad as well; *at a very early age, she was helping me empty his colostomy bag.* (Abigail, Female, Age 36, 4 kids)

This mother needed additional help so she could go to work and provide for her family, but she knew that caring for their elderly and ill grandparents was hard on her daughters – this made the situation all the more difficult for Abigail. She felt guilty because their teenage years were being spent caregiving and this goes against the cultural norm (Abigail, Female, Age 36, 4 kids). This same sort of situation can be seen in previous literature. A study by Brody (1989) noted that children growing up with sandwich generation parents usually take on some form

of a caregiving role in order to help out and that this phenomenon typically leads to disruption of social life and increased family conflicts.

Additionally, many participants shared feelings of guilt when asked about their children. On top of feeling guilty for being absent, many respondents associated their guilty feelings with missing out on various events and activities that their children were involved in, such as school awards ceremonies or sporting events.

I missed my daughter's senior year. Everything...her awards, she played field hockey. *I just wasn't present in her life.* (Eloise, Female, Age 56, 4 kids)

I missed one parent-teacher conference, and my older son made a statement about like, "Well I only had my dad, everybody else had their mom and their dad." (Amanda, Female, Age 57, 2 kids)

Isabelle (Female, Age 54, 4 kids) recounted her regret in having to miss her son and daughter's high school football games, but she put more emphasis on her guilt related to how their family had to change how they spent the holidays during this time:

Even Easter, like holidays where I would [normally] be the main hostess, *those kind of fell by the wayside* (Isabelle, Female, Age 54, 4 kids)

Multiple SCGs recounted that they were aware that their family home life made their kids' childhoods look different than other children their age – regarding both the everyday life and holidays. This sandwich caregiving lifestyle was noted to emotionally strain their children in many cases (Eloise, Female, Age 56, 4 kids; Isabelle, Female, Age 54, 4 kids; Amanda, Female, Age 57, 2 kids), but in one case, the emotional stress manifested physically for a child. Amanda was driving across multiple state lines to provide care for her ill parents when her kids were young. She was driving back and forth multiple times per week to show up as both a mom and a caregiving daughter, and while this imposed an incredible amount of stress on Amanda, it also caused stress for her son.

He [has] no mom at home because I was coming back and forth. My youngest son was starting to have issues. He didn't want to go to school; he had a bellyache. And *it was all related to the fact that I was not home...he developed a stomach ulcer* (Amanda, Female, Age 57, 2 kids)

The negative effects that a sandwich caregiving position has on the caregiver's children is covered in literature, though with much less specificity and personal detail as listed above. Similar to the case discussed above with Abigail, other studies have shown that when SCGs are under intense amounts of caregiving stress, their children are more likely to experience increased depression, problematic behaviors, and diminished functioning (Tebes and Irish 2000). The study by Tebes and Irish (2000) saw an overwhelming amount of noticed

absenteeism in SCG children's lives, but the majority of other literature does not acknowledge the commonality of SCG parents being aware of their absence in their children's lives. While Szinovacz (2003) found that children felt that their parents showed more attention to their grandparents than themselves (Szinovacz 2003), the parents themselves are not found to notice this in outside literature.

### *Positive experiences for SCG children*

While a number of respondents in this study reported negative emotional experiences related to being raised by sandwich generation parents, many were also able to recall positive experiences that, in some cases, outweighed the negative. For example:

My boys are very, very close. They slept together almost every night [when I was away]. *They had to rely on each other...*they probably talk every day on the phone [now, as adults] (Amanda, Female, Age 57, 2 kids)

My boys are both really- very family oriented (Carly, Female, Age 52, 2 kids)

They recognize...when something needs done or someone needs help and they'll just do it without being asked...that's a little bit of *maturity*. (Julie, Female, Age 48, 4 kids)

While the majority of respondents experienced guilt or negative emotions related to their double-duty caregiving stress, these participants also framed the experience in a beneficial way to their children. Participants noted positive attributes that their children gained from growing up in such a unique environment – stronger sibling bonds, higher value on family, selflessness, and independence. These reflections align with other literature that found SCG children to have more productive sibling relationships, increased empathy, and greater maturity (Beach 1997; Szinovacz 2003). Additionally, a pattern that arose within this research – but is not mentioned in literature – was the prevalence of a child growing up with an SCG parent(s) choosing a caregiving field career path. Of the now-adult aged children of the SCGs interviewed, 38% were reported to be in a caregiving profession. When you look at just female children, because females are more likely to occupy a caregiving role than men (Croft, Schmader, and Block 2015), the percentage increases to 62%. This gravitation towards a caregiving career suggests that their sandwiched childhood experience may have shaped their character towards being more empathetic and drawn towards caring for those in need (Szinovacz 2003).

### Theme 3: Work-family Spillover

Work-family spillover is defined as the transmission of behaviors, stress, and emotions between work and home (Curbow, McDonnell, Spratt, Griffin and Agnew 2003:311). For the purpose of this study, "work" is defined as work related to a career outside the home or uncompensated work related to the caregiving specifically performed for an elderly family member by the sandwich generation caregiver. This operationalization expands the traditional notion that double-duty caregiving is associated with a combination of occupational and

personal caregiving responsibilities. This research specifically extends the concept of double-duty caregiver and work-family spillover to include the non-paid caregiving that SCGs provide to their elderly parents. In general, SCGs reported two distinct experiences of work-family spillover related to their SCG role: career conflicts and the neglect of their personal health. In both situations, the SCGs described negative spillover experiences.

### *Career conflicts*

Because women are now increasingly more likely to be part of the workforce (Pierret 2006), balancing a career on top of being a wife, mother, and daughter is another unique aspect of the sandwich generation that is associated with stress. Many SCGs described having to make drastic (and oftentimes unwanted and unplanned) career changes in order to care for their elderly parents and children. For Katy (Female, Age 52, 2 kids), she worked with patients in a homecare setting, but when her parents needed more and more of her attention, she cut back to part time and then, eventually, took a remote position so she could work from home and stopped seeing patients altogether:

I probably would've never ever done this job if I didn't have my parents with dementia.  
(Katy, Female, Age 52, 2 kids)

She expressed disappointment that her career took such an unforeseen turn. She reiterated how much she had loved her previous job and missed seeing patients, but working from home gave her the flexibility that she needed to be a good mom and a good daughter to her elderly parents with dementia.

For another family, beginning to take care of their elderly parents involved moving across the ocean. Michaela (Female, Age 44, 4 kids) and her husband worked overseas, but had to both completely switch careers so that they could move back to the United States in order to be able to provide care for her husband's parents. While Michaela looked on the bright side regarding her sandwiched caregiving circumstances, she did share some disappointment in regards to having to postpone their overseas ventures.

It was also a common occurrence for women to feel lost without their preferred careers that they had been working towards. Eloise (Female, Age 56, 4 kids) initially had a caretaker come in during her workday, but because of the aggressive behaviors her elderly mother was exhibiting, due to the dementia, that was not a sustainable solution. Eloise ended up quitting her job to take care of her mother, but having to leave a job that gave her such purpose left her feeling displaced and useless:

*I ended up quitting my job... I loved my job. I was good at my job... I don't use my brain anymore.* (Eloise, Female, Age 56, 4 kids)

Eloise quitting her job ended up exacerbating the stress her family was under because she had been providing her family with health benefits. Having to quit her job to care for her mother led to financial stressors for her family as well. Another SCG experienced a similar

career situation where she struggled to find a job that would allow her to financially support her family as well as be flexible enough for her to provide care for her family:

I needed to work financially, but *I had to make sure I was in a job that gave me flexibility.* (Carly, Female, Age 52, 2 kids)

The situations described above are not uncommon. Literature supports the unfortunate scenario of females in the sandwich generation quitting their jobs in order to simultaneously provide the best care for their children and their elderly parents. Balancing multigenerational caregiving with a career makes it significantly harder to achieve career goals and meet employer expectations, especially in the United States where family-oriented employment processes such as paid leave and flexible work schedules are lacking (Ciabattari 2017:174-176). Previous studies have shown that adults in the sandwich generation are more likely to have to take time off of work for caregiving tasks than regular caregivers. The conflict between career and home can lead to increased caregiver stress and results in many sandwiched women changing careers or quitting their jobs altogether (Starrels, Ingersoll-Dayton, Dowler, and Neal 1997; Chapman, Ingersoll-Dayton, and Neal 1994).

#### *Neglecting personal health*

With the extreme volume of work that sandwich generation caregivers must provide for their children, elderly parents, and careers outside the home, the SCG's own health tends to fall low on the priority list. Veronica (Female, Age 34, 1 kid) explicitly said that she is no longer able to take the time to schedule her own doctor's appointments between the time needed for her parents' and her young daughter's appointments. Over half of the SCGs interviewed reported trouble sleeping during their time of double-duty caregiving. One SCG shared that her insomnia was a physical manifestation of caregiver stress and her constant worry for her elderly parents in the back of her head:

It's always in the back of my head, always there. What do they need? *It weighs me down.* (Veronica, Female, Age 34, 1 kid)

Another common physical health outcome of sandwich generation caregiving was back pain. Many of these women had to physically help lift the elderly family member they were taking care of – sometimes daily, for years – and this repeated strain has led to chronic back pains for some SCGs (Abigail, Female, Age 36, 4 kids; Eloise, Female, Age 56, 4 kids). Outside literature regarding the health of SCGs mainly focuses on negative mental health effects such as depression and anxiety (Catanach and Tebes 1991; Byrd, Grant-Vallone, and Hamill 2002). The results of this study contextualize these findings with qualitative evidence of the connection between caregiver stress and mental health (Son et al. 2007). In general, the participants in this study shared that the stress of providing double-duty caregiving led many of them to neglect their personal health.

#### Theme 4: Positive Experiences of Sandwiched Caregivers

While there are many drawbacks to living in the sandwich generation that have been discussed at length, positive examples did arise when the women were asked to reflect on how living in such a unique circumstance might have impacted their lives for the better. The following positive outcomes discussed are examples of *positive work-family spillover*. It is well founded in the literature that positive work-family spillover experiences are in the minority (Grzywacz 2000). A few participants noted how the sandwich generation – in hindsight – positively impacted their marriage. The sandwiched situation taught some couples important life lessons and made them more grateful for the time they had with their families:

[I] really do think that it made us stronger because the reality of losing a parent is very sobering and *it makes you appreciate the time you have with your own spouse*. (Isabelle, Female, Age 54, 4 kids)

The sandwich generation situation also provided opportunities for husbands to grow in their roles of husband and father. Multiple women described how their husbands showed their support by doing house renovations. For Abigail (Female, Age 36, 4 kids), her husband was tired of not having his wife around all the time because she was driving back and forth to her parents' house every day to care for them, so he decided to do something about it:

He came home one day and said, "I'm going to convert our apartment building into one big house *so we can all be together*." (Abigail, Female, Age 36, 4 kids)

Though scarce, positive outcomes related to marriage were seen in the literature related to sandwiched caregiving. Ward and Spitze (1998) found that spouses in the sandwich generation experienced increased marital happiness when their relationships with the elderly parent and their children were strengthened by the sandwiched living. The present study provides further support for these strengthened relationships.

Another prevalent positive outcome of sandwich generation caregiving involved role satisfaction for the SCG and their family. Several SCGs reported having no regrets after their elderly family member(s) passed away. SCGs felt validated that they were intimately involved in their elderly family member's life – playing their part in making sure that they were properly taken care of till the end.

We all feel like we *did our part*. We *feel like we honored him* and we're *thankful* we had that opportunity to make sure he was safe and cared for *and not alone*. (Carly, Female, Age 52, 2 kids)

I got to know my mom and dad. [I had] all that adult time of learning about who they were and when my dad passed away, *I had zero regrets*. I was so thankful that I had *all that time with him*. (Chelsea, Female, Age 58, 2 kids)

The role satisfaction experienced by SCGs is supported by outside literature. Especially after the elderly family member passes away, SCGs are able to fully appreciate the role they were able to play at the end of their parents' lives. One study found that SCGs reported role satisfaction because they were able to give back to their parents who put so much work into raising them when they were children themselves (Stephens, Franks, and Townsend 1994).

## DISCUSSION AND CONCLUSION

Adults in the sandwich generation live a unique life in that they occupy double-duty caregiving roles—caring for their children and an elderly family member simultaneously. This research investigated the lives of 12 female sandwich generation caregivers who experienced varying levels of caregiver stress and role conflict associated with the fulfillment of their various social roles. Personal situations differed in many aspects, including the quality of the caregiving relationship, level of perceived support, the presence of serious medical conditions, and resources. This research aimed to study specific situations associated with caregiver stress, how double-duty caregiving affected family relationships, and the experiences of work-family spillover.

Through qualitative analysis, this study highlighted the interconnectedness between the double-duty caregiving status, stress levels and relationships for the caregiver. The results of this study suggest that sandwiched caregivers perceive their double-duty caregiving roles to be associated with both positive and negative outcomes. Many participants reported that the combined stressors associated with their SCG role resulted in negative physical outcomes, such as insomnia and back pain. One participant (Veronica, Female, Age 34, 1 kid) even directly connected that her caregiver stress is associated with her insomnia. As such, this research exemplifies the hypothesis of role strain theory, because many of the SCGs described increased stress when the role of primary caregiver for an elderly parent was added to the multiple roles they already fulfilled (Goode 1960).

Interestingly, the results of this research also support notions of role enhancement theory (Marks 1977) by expanding our understanding of the potential positive outcomes associated with performing sandwich caregiving, such as improved marital relationships, due to spouses having the opportunity to demonstrate support for their double-duty caregiving spouse. Additionally, as supported by some previous work, some SCG's in this study reported feeling role satisfaction following the death of their elderly family member. In essence, following the death of their elderly family member that they were providing primary care for, they were left with a feeling that they had "done their part" and some even expressed gratitude for the time and increased interactions they got to share with their family member while performing their sandwich caregiving role.

The simultaneous support of two conflicting theories, role enhancement and role strain, highlights the complexity of the individual experiences within the sandwich caregiver role. As supported by the literature, these variable perceptions of the experience might be related to both personal, as well as structural factors, such as an individual's interpretation of the situation, and the presence of young children. Steiner and Fletcher (2017: 142) note that "unexpected" roles are also often perceived as "more challenging" and are associated with higher stress levels. From a symbolic interactionist perspective, these varying perceptions of

the experience of performing double-duty caregiving enhance our understanding of expectations and norms associated with the institution of the family (Stryker and Statham 1985).

The majority of research regarding the sandwich generation in the United States is dated, mostly from the 1990s and early 2000s. Contemporary research is needed to contextualize how the large Baby Boomer generation – those born between 1946 and 1964 (Smith and Tasman 2005) – is experiencing double-duty caregiving within modern society. This research study showed that all of the female sandwich generation caregivers interviewed experienced varying forms of loneliness, isolation, and perceived a lack of support. This evidence indicates that future research needs to focus on caregiving resources and healthy coping mechanisms, in addition to the changing demographics of the American family. Additional research on the sandwich generation experience could be beneficial to family counselors as well as policymakers. Counselors may not know how to help a family in this unique position and more research could provide counselors with resources that may help them aid sandwich caregivers in self-care, as well as managing role conflict and caregiver stress. Policymakers might be able to use this type of research to inform family-friendly policies that improve the welfare of sandwich generation caregivers and the care recipients.

It is important to note that one potential limitation of this research is related to the use of convenience sampling. This sampling methodology might be at least partially responsible for the racial and gender homogeneity of the sample. Since generalization to the population is generally not a goal of qualitative research, the results of this study remain valuable to contextualize our understanding of how sandwich caregivers perceive their lived realities. It is equally as important to also note that the majority of family caregivers in the United States are women (Hammer and Neal 2008; Tebes and Irish 2000). Regarding racial composition, increased diverse samples will further improve our understanding. Future research should work to address differences in race/ethnicity/cultural values of family members, and how those characteristics may shape the sandwich generation caregiving experience. Future research endeavors regarding the sandwich generation could also work to contextualize nuances of double-duty caregiving such as the unique stress that in-law children feel when they provide care for their spouse's parent(s). Additionally, it is likely that men in the sandwich generation caregiver role experience/perceive caregiver stress and role conflict differently than women and future research would expand our understanding of the role by investigating how men experience and adapt to the situation.

This qualitative study focused on investigating the lived experiences of sandwich generation caregivers and discovered that SCG's experience both positive and negative aspects of double-duty caregiving in the 21<sup>st</sup> century in the United States. The results of this research enhance our understanding of the complex situations involved in the sandwiched caregiving role that lead to caregivers experiencing both positive and negative stress. For some, the double-duty caregiving role of the sandwich generation is associated with role conflict, while for others, it is associated with role enhancement. Future researchers might attempt to investigate the personal and structural characteristics that are associated with these differential caregiving experiences.

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