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The toughest course at university: Caring for aging parents

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A former colleague once quipped about the guilt he experienced as we approached the end of the term; many grandparents, he feared, were about to have their lives shortened by grandchildren not yet prepared to write their final exams.

Academics are naturally skeptical, perhaps a bit unfairly when it comes to what is known as “dead grandmother syndrome” – the observation that there is a spike in the death of grandmothers the week before final exams.

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It’s no surprise that many students lose a grandparent during their university years, given the age difference, but something changed in the years since this observation was made. It seems that now, in my classes at least, more and more students are experiencing disruptions to their term because of their parents’ health.

Parents are getting older and, as a result, their children experiencing the burden of caring for those parents at a much younger age than previous generations.

According to data in the General Social Survey, in 1990 only 14 per cent of fathers and 6 per cent of mothers were expected to be over the age of sixty by the time their youngest child finished an undergraduate degree. By 2011, the share of fathers in that category has risen to 25 per cent, and the share of mothers has more than doubled to 13 per cent.

Having children while going to school and then building a career is not easy, which explains why the age at which people are becoming parents has increased over the decades. The balance between having aging parents while going to school and building a career is also a challenge, one that seems to have been largely ignored or, at least, understated by parents who choose to have their children late.

One reason might be that life expectancy in Canada has increased. Today, a 40-year-old mother of a newborn can expect to live, on average, until her child is 44 and a 40-year-old father can expect to live, on average, until his child is 40. So, if those children make the same decision as their parents, their own children will be born in the same decade as their parents die, on average.

A much better measure when it comes to anticipating the burden of aging parents on young adults, however, is HALE: the Health-Adjusted Life Expectancy. HALE measures the number of years that a Canadian can expect to live in a healthy state.

If the parents of the child described in the scenario above are in the top one third of income earners, she will be 32 years old when her mother ceases to be in good health and only 30 when her father ceases to be in good health. For children whose parents are in the bottom third of the income distribution those ages become 29 for mother and 25 for fathers.

Perhaps, as these numbers suggest, these university students will have an average of 10 years before they need to worry about their parent’s declining health, but there is a big difference between saying “an average of 10 years” and saying “at least 10 years”; the health of a young adult’s parent is almost as likely to start declining 10 years before the average as it is 10 years after the average.

Just last week, I read an anonymous online comment that said the following “I waited until I was in my 40s to have my children, but since I am going to live to be 97 I don’t have to worry about being a burden on them.”

I don’t imagine that most parents are so optimistic when it comes to predicting how their own lives will play out. I do think, however, that when it comes to our own health expectancy we are a bit like the proverbial children of Lake Wobegon; we all believe ourselves to be above average.

Marina Adshade is the author of [The Love Market: What You Need To Know About How We Date, Mate and Marry](#) [<http://www.amazon.ca/Love-Market-What-About-Marry/dp/144341056X/>]. She teaches at the University of British Columbia’s Vancouver School of Economics.

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