

## Review

## The Sandwich Generation Caregiver: Hope for the Future

Janice F Hernandez\*

School of Nursing, The University of Texas at Austin, Austin, Texas, United States

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**ABSTRACT**

As the aging population increases, adult children are finding themselves embarking upon the responsibility of caring for their aging parent or parents. This task has become challenging for the adult children due to the fact that many are still continuing to provide care for their own children and are actively immersed in their careers. The populations facing this situation have now been identified as the “sandwich generation”. Being a sandwich generation caregiver is not a situation that adult children often prepare for. Although the seed may be planted within one’s mind, the actual evolution of the obligation over time may become overwhelming. Understanding and identifying the effects of this new added responsibility and the comprehension on how it impacts the sandwich generation caregiver is critical, not only for the well-being of the caregiver, but on the entire family structure.

**Keywords:** Caregiver, Sandwich generation, Mutigenerational, Caregiver interventions.

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**INTRODUCTION**

The quickest rising age group in the United States are the aging adults [1]. The initial baby boomers are turning 70 years of age in the year 2016 and it is estimated by the year 2030, about 37 million in this age group will be coping with one or more chronic illnesses. It is projected that informal caregiving is being fulfilled by 44 million Americans and of those numbers, 75% are family members performing 37 billion hours of unpaid care yearly [2]. According to a poll from the Pew Research Centre, 1 in 7 adults between the ages of 40-50 will become a sandwich generation caregiver [3]. A Sandwich Generation Caregiver (SGC) is defined as a generation of people who are caring for their aging parent or parents while continuing to support their own children [4]. It is also defined as “state individuals who are caught between the competing demands of caring for at least one dependent child and one or more aging parent [5]. The weight of balancing the provision of care between the aging parent, growing children, and demands of work can eventually lead to a decline in well-being of the SGC [5]. The co-existing workloads requiring much needed attention for the SGC include profession, family, and caregiving duties for aging parents [6]. The obligations during midlife regarding family are compelled by the present economic situation, sluggish progression to adulthood by the younger generation children, and enhanced support required by maturing parents [7]. Circumstances that arise for the SGC include added financial burden required to care for the aging parent, balancing parental and employment obligations, and maintaining optimal health for themselves [7]. Understanding and

identifying the effects of this new added responsibility and the comprehension on how it impacts the SGC is critical, not only for the well-being of the caregiver, but on the entire family structure.

**SIGNIFICANCE OF THE PROBLEM**

The significance of assessing the caregiver on a routine basis is essential in order to develop interventions that will support in promoting well-being for the caregiver [8]. Satisfaction is sustained by supporting caregivers with the tools to be successful, but some of the challenging encounters are the numerous complexities of caregiving and targeting all the matters involved. Several themes have been identified when assessing caregivers such as difficulties in providing care, responsibilities, and perceived stressors [5]. It is vital for health care providers to assist caregivers as they advance into unfamiliar responsibilities [9]. Statistics support that most caregivers are not equipped with the tools needed to successfully handle the task that has been placed on them. Obligating to the responsibility of caring for a loved one who is chronically ill may become distressing and lead to a negative outcome [10]. Although satisfaction and contentment may be obtained while taking on this responsibility, a caregiver’s health can be compromised when taking on more than they can handle. The negative impact sustained by the sandwich generation caregiver may include caregiver role strain, adverse physical and psychological effects, and reduced attentiveness to child rearing and spousal relations [11]. It is estimated that over time, one-third of caregivers end up reducing work hours or leave the job

market completely. The MetLife stud concluded these results in a loss of income and possible reserve funds for the sandwich generation [11].

Family caregiving has become an essential function in the healthcare system, addressing the caregiver needs in order to assist in successfully fulfilling the obligation has now become a wide-spread healthcare concern [12]. According to O'Donnell, the effects of caregiving not only impact the caregivers but the employers as well. AARP estimates that by the year 2030 a predicted 5.7-6.6 million caregivers will be providing care to the elderly and the ill. O'Donnell questions the economic consequences of caregivers having to take work leave for this obligation and employers' consequence of having to replace these employees and societal obligation to care for these caregivers when they become the age of needing assistance [13].

### FRAMEWORK

The Neuman Systems Model (NSM) is a theoretical framework that may be used when examining relationships among caregiver workload and health. According to Bachmann et al., in the NSM, "perceived wellness is viewed as a manifestation of health" [6]. The NSM believes the goal of nursing is to identify areas needing intervention and intervening before assistance is needed [6]. There is no question education and support is needed to in order for the caregiver to maintain their health and well-being. The literature on family and sandwich generation caregiving is increasing and caregivers can benefit greatly from support services and changes in policy that can assist the SGC in a successful transition [5].

### METHODOLOGY OF LITERATURE SEARCH

PubMed and CINAHL were the two search engines used to identify the literature used in this article. The key words used in this search were

- Caregiver
- Sandwich generation
- Mutigenerational
- Caregiver interventions.

The strategy was to find abstracts, titles that included these key words. The date range excluded articles that were published greater than 10 years ago (before 2010). Systematic reviews, journal reviews, and clinical decision support tools will also be studied. Qualitative research in particular was obtained in this literature search; this narrative explains the understanding of an experience or phenomenon within this particular group. A review of models such as caregiving models, implementation models, and clinical support tools were also included in the examination. The abstracts were scanned to limit the focus to only articles that pertained to the sandwich generation and those that included implications regarding interventions to assist caregivers. Exclusion criteria included articles not significant to the focus question or because the lack of significance in implications specifically towards the sandwich generation. After critiquing the studies and evaluating the evidence, eight articles were summarized in this mini review in evaluation (Tables 1-4).

Table 1: Evaluation.

Citation: (i.e., author(s), date of publication, and title)	Conceptual framework	Design / Method	Sample/ Setting	Major variables studied and their definitions	Measurement of major variables	Data analysis	Study findings	Strength of the evidence (i.e., level of evidence +quality [study strengths and weaknesses])
Boyczuk AM, Fletcher PC. The Ebbs and Flows: Stresses of Sandwich Generation Caregivers. Journal of Adult Development. 2016; 23: 51-56.	Explore lived experiences of married couples who are SG caregivers	Qualitative study	2 married Caregivers, age 45-48 with 2 dependent children (10-12) and 3 aging parents	Experiences (DV) Workload (IV) demographics	Interview / question 2 months apart First: Background questions Second: current caregiving experiences Direct quotes	Field noted taken Audiotaped and transcribed Given transcripts to edit or omit info. Data stripped of Identity info for protection Variable entry in sequential order X2 distribution. Hosmer Lemeshow test to determine fit for models. 2-way interaction. Plush 5.2. Satorra-Bentler scale	Emerged needs from aging parents and caregiver themes revealed: Ebbs and Flow: Caregiving responsibilities, perceived Stressors Stresses of being sandwiched: Overcoming barriers, Trickle-down effect, negotiating external support, lack of control, Striking a balance Responsibilities varied Caregiving=stress Roles fluctuated	S: Interviewing twice=Rich descriptive analysis L: outdated research stress. Need for more unique population Need to interview at different time points to fully capture experience of being "caught in the middle" Level 3

Chassin L, Macy JT, Seo DC, Presson CC, Sherman SJ. The Association between Membership in the Sandwich Generation and Health Behaviours: A Longitudinal Study. J Appl Dev Psychol. 2010; 31(1): 38-46.	Examine the association between membership in the SG and five health behaviours	Regression analysis	4943 participants from a longitudinal study of a Midwestern Community	Health behaviours (DV) Demographics (IV) Prior Health behaviours Multi-gen Caregiving Health behaviour Outcomes	Tested effects of multi-gen caregiving over other known predictors of health behaviour	SAS version (9.1.3 used to conduct regression for outcome variables	Favourable: changes between their prior age (30) for 3 health behaviours: checking food labels, using seat belts, choosing food on health value. Unfavourable: Experience behaviour Smoking remained constant. Health behaviours were diminished for SG: less likely to check food labels, less likely to use seat belts, increase smoking/day, less likely to exercise	S: First to explicitly test the unique effects of multigenerational caregiving on health behaviours L: Did not identify mechanisms for impact on health behaviours Data did not allow timing of onset of caregiving time Community population predominantly white well educated Level 3
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Table 2: Evaluation.

Citation: (i.e., author(s), date of publication, and title)	Conceptual framework	Design/ Method	Sample/ Setting	Major variables studied and their definitions	Measurement of major variables	Data analysis	Study findings	Strength of the evidence (i.e., level of evidence+quality [study strengths and weaknesses])
Do EK, Cohen SA, Brown MJ. Socioeconomic and demographic factors modify the association between informal caregiving and health in the sandwich generation. BMC Public Health. 2014;14(362):1-8.	Understand the association between socioeconomic and demographic factors and health in the SG	Ordinal logistic regression	Behavior Risk Factor Surveillance System federally funded representative survey adult population non-institutionalized	Caregiver health status (DV) demographics Age BMI Income Race Ethnicity Number of children	Liker scale	Questionnaire Variables tabulated using mean values OLR used to calculate odds ratio and confidence ratio for the outcome of general health Tests for potential modification by number of children, race, income by 2-way interaction terms Linear trends effect modification BRFSS survey weights for account: Probabilities, non-response, over sampling	Caregivers increased BMI than non-caregivers Less likely to report excellence in health Caregiving associated with poor health, increase age, male sex, increase BMI, non-white race, low income, having no children Impact on health had more detriment on health with child <18 SG higher risk for impaired health Increase SG stress when caring for elder and child Increase pronounced in detriment with more than 1 child No race/ income caregiving interactions was significant	S: Added contribution to Sandwich generation literature. L: cross-sectional data/ limit ability to make causal claims regarding association of caregiver and health status Only used one measure of health status Income thresholds were limited. Level 3
Schumacher LAP, MacNeil R, Mobily K, Teahue M, Butcher H. The Leisure Journey for Sandwich Generation Caregivers. Therapeutic Recreation Journal. 2012;XLVI(1):42-59.	Describe the lived experiences of leisure of adults in the sandwich generation who care for a parent with dementia and have at least one dependent minor child	Phenomenological study Hermeneutic phenomenology	Iowa City 2 caregivers in 30's 2 caregivers in 40's 2 caregivers in 50's Care receiver had dementia	Stress (DV) Obligations (IV)	Caregiver chose setting for interview 2 interviews conducted	Open ended interviewing Audiotaped and transcribed QSR Vivo 8 software design for qualitative research Coded phrases were synthesized to isolate thematic statements	Six themes emerged: Reconciling life transition, succumbing to infinite obligations, time shifts, constructing a foundation, revisit control and freedom to recreate Leisure is important to the Sandwich Generation caregiver Leisure was recognized as a necessary component of stress management Journey perspective was not conceptualized at beginning of study it emerged from data	S: Uncovers lived experiences of leisure for the Sandwich Generation L: small sample Level 3

Table 3: Evaluation.

Citation: (i.e., author(s), date of publication, and title)	Conceptual framework	Design/ Method	Sample/ Setting	Major variables studied and their definitions	Measurement of major variables	Data analysis	Study findings	Strength of the evidence (i.e., level of evidence + quality [study strengths and weaknesses])
Friedman ML, Buckwalter KC. Family Caregiver Role and Burden Related to Gender and Family Relationships. Journal of Family Nursing. 2014;20(3) : 313-336.	Describe and contrast family caregivers and explore the effects of gender and family relationships on the caregiver's role perception, workload burden	Qualitative/ Descriptive Caregiver theory guided study	533 multi-generational caregivers	Caregiver health status (DV) Caregiver workload (DV) Role Burden Family relationships ADLs	Caregiver health index Patient Health Questionnaire (PHQ-9) Caregiver relationship scale Spiritual perception scale ADL scale Problematic behaviour scale Caregiver Task instrument	Trained interviewers collected data Reliability and factor structure for diverse sample Described characteristics of the caregiver subgroups Compared means of demographics Descriptive stats and T-test analysis. Multivariate analysis was used to contrast the caregiver group	Men in study felt less burden and depression than women who believed it was their female duty. Gender approach to self-appraisal and coping, Older spouse resistant to using family and community resources and hardworking female adult children, assessment of each family situation individually is important	S: First to examine caregiver coping. Findings relevant for research and practitioners and policy makers L: Small sample Only interviewed primary caregivers No African American caregivers Level 3
Friedman EM, Park SP, Wiemers EE. New Estimates of the Sandwich Generation in 2013 Panel Study of Income Dynamics. The Gerontologist. 2015;1-6.	Obtain the first estimates of the prevalence of transfers of time and money to adult children and parents for U.S. men and women aged 35-75	Genealogical design	Restriction in end to 824 women 606 men Who engage in transfers with two generations	Transfer of time and money Age Difference between men and women	The roster and transfer module in the 2013 PSID t-test used to compare mean differences	Questionnaires Surveys Reports of transfers Described transfers in the amount of total dollars and total hours cross sectional survey weights for diff. in probabilities of selection in sample attrition	30% provide transfers to two generations Transfer does not defer by age Difference between men and women are small Women provide more hours of time and money to adult children than men The number of hours given to children exceed the number given to parents	S: First to show that men and women are likely to provide transfers to two generations First to examine transfers of two generations by men Elaborate on past work by examining a broader age range and find that the prevalence of transfers to two generations L: Unable to distinguish time help for chores No information on emotional support to parents and children No information of potential transfers in time of need Level 3

Table 4: Evaluation.

Citation: (i.e., author(s), date of publication, and title)	Conceptual framework	Design/ Method	Sample/ Setting	Major variables studied and their definitions	Measurement of major variables	Data analysis	Study findings	Strength of the evidence (i.e., level of evidence + quality [study strengths and weaknesses])
Igarashi H, Hooker K, Coehlo DP, Manoogian MM. "My nest is full": Intergenerational relationships at midlife. Journal of Aging Studies.	Explore experience of midlife adults who are providing support to emerging adult children and aging parents	Qualitative Exploratory study	White-25 women, 4 men, 45-68 years old West coast counties Educated Participant Children: 1-6 children per family age (18-30)	Health outcomes Workload Provisions of care	Phone interviews Focus groups At local libraries and universities and private homes Audio recorded and	Guided theory used Results emerge from raw data consistent with general inductive approach Research team mindful of issues regarding personal biographies and	Ambivalence experienced include joy and burdens Participants viewed their parenting with confidence despite various challenges A sense of purpose in a difficult time was illustrated Adult children felt ill-prepared for the new challenges Anxiety	S: Greater understanding through the thoughtful exploration of a subject in the midst of experience L: Population was white, educated, high income Not enough male participants Level 3

2013;27:102-112.					transcribed interviews 10-minute written survey and questionnaire Grounded theory Discussion prompts	beliefs Open coding on all transcripts Consolidation of themes and interconnections between data throughout writing process	was expressed while witnessing decline health and function of the parents	
Solberg LM, Solberg LB, Peterson EN. Measuring Impact of Stress in Sandwich Generation Caring for Demented Parents. GeroPsych. 2014;27(4): 171-179.	Examine the impact of stress by the Sandwich Generation	Exploratory Analysis Survey IRB approved study	45 adult caregivers caring for their demented parents	Healthcare status (DV) Stress experience (IV)	Questions were modified to reflect the intent to measure the impact on adult children who were primary caregivers for their demented parents	Classical test theory Exploratory factory analysis T-tests CGQ-13 questions	Caregivers experienced stress, anxiety and sadness Also, emotional caregiver stress on members of the Sandwich Generation and those from the non-SG Meeting with social workers for resource availability was identified most helpful intervention for coping with the impact of stress	L: small sample size Homogeneous nature of the patients Questionnaire was an original survey Not a validated tool Level 3

## REVIEW ELEMENTS

The eight articles that were retained and analysed included qualitative, phenomenological, regression analysis, genealogical, and exploratory analysis design. According to an AARP report, 44% of the 2,352 Americans studied between the ages of 45-55, have parents or in-laws and dependents under the age of 21, while 6% reside in a three-generation household, and 22% report providing assistance to a family member in need [14].

In the study by Friedman et al. transfer of care was defined as the giving of time in hours and the giving of money in dollars to a parent or dependent [15]. In this study, three groups were divided by age, 35-49, 50-64, and 65-75. Furthermore, 45% of this population stated having at least 1 child over 18 and a minimum of 1 parent or in law who were dependents; 30% of those individuals were delivering transfers of care to both generations. The report also concluded the transfers of care by women were greater in the form of time and the transfers of care by men were more likely to be in the form of financial support.

The qualitative study performed by Ingrashi et al. surveyed the lived experiences of midlife adults providing assistance to their parents and adult children [7]. This exploratory study shined light on the issue of adult children continuing to need assistance from their parents due to the current economic situation. It also highlighted the enhanced dependence of aging parents, and family obligation. The results portrayed the continuing acceptance by sandwich generation caregivers to continually provide assistance to evolving adult children. The consciousness of the challenging economic period in which the adult children are residing today was understood by SGC. However, many of the sandwich generation caregivers expressed the concern of being inexperienced and unprepared for the task at hand. More so was the feeling of unease with the deteriorating health of the aging parent. Certain sandwich generation caregivers expressed no prior knowledge or familiarity of caring for an older adult or grandparent. Other

sandwich generation caregivers expressed capability while understanding this obligation to be in their future. The themes originating from the sandwich generation and this new responsibility are as follows:

- Change within the relationship with the adult caregivers and their parents
- Task and duties conflicting with current life schedule
- Feelings of being tugged in different directions
- Ambiguity for the future.

With the state of emotion transpiring in this new role, future trends are emerging from this generation and their experience that seem to be crucial. These trends include:

- Increase for own enhanced health
- Reduction in the accumulation of material things
- Preparation for their own future care.
- This insight confirms the acknowledgment of preparation for future generations.

The Friedman et al. study also concluded a greater rate of transfers of care to children rather than to the aging parent [15]. Friedmann and Buckwalter, found a comparable gender approach to self-appraisal and coping [16]. The Latino and Caribbean sample of men in this group experienced a sense of decreased burden as compared to the women who believed it was their duty to be caretakers. This study also explored the gender role of women who tradition presumes the role of providing care to be a female obligation and in males the obligation to manhood. Friedman et al. found that caregiver burden was amplified along with depression when the care receiver had to reside with the caregiver, or when the caregiver was obligated to work [15].

The study by Do et al. examined the socioeconomic factors as well as demographic factors and their association between caregiving and health in the sandwich generation [11]. This study concluded an uneven male and female caregiver distribution of women (56.9%) to men (43.1%). The report also included a small increase in BMI, decrease in report of

good health with higher numbers in non-white, self-reported health differed noticeably with one child and became dire if one child in addition to the aging parent. The findings support possible diminished health behaviours related to income and ethnicity.

The study by Chassin et al. examined the association of health habits among the sandwich generation providing care to both a parent and children [17]. The study revealed significant findings to illustrate that sandwich generation caregivers (multi-generational caregivers) compared to non-multi-generational caregivers were less likely to check food labels or choose foods based on food value. Sandwich generation caregivers were more apt to be smokers, not use seatbelts, and if the number of dependent children increased, less likely to engage in physical activity. Although much of the research is consistent with negative outcomes, the article also found a link between caregiving and improved health outcomes. Comments on the position of the healthiest populations being the individuals taking on these roles, possible benefits from caregiving on health, and the importance of maintaining health due to the dependency from care recipient and from witnessing first hand degeneration in health.

The qualitative study by Boyczuk and Fletcher describe the “lived experiences” of the sandwich generation caregiver [5]. The participants communicated the experiences varied based on the situation at hand. The emergence of themes came to life in this study.

- Ebbs and Flow
- Stresses of being sandwiched

Ebbs and Flow places focus on the responsibilities day to day with the occurrence of fluctuations, and the perceived stressors involved with balancing the intensified care with the demanding personal schedule. Stresses of being sandwiched encompassed overcoming barriers, trickle-down effect, negotiating expectations, lack of external support, lack of control, and striking a balance. Overcoming barriers gives insight to fulltime carriers, the incorporation of dependent children to caregiving, and having to break away from own life to care for aging parents. The trickle-down effect has not been mentioned in prior research. The importance of the dissection of labour that is occurring between spouses was noted. The increase demand for compensation when one had to fulfil the obligation of caring for the elder parent. This study describes the added stressors of the opposite spouse satisfying family needs regarding the care for the home children and other household duties without the assistance of their other half. Compensating for the lack of support due to the caregiver supplying care to the aging parent takes a toll on the relationship. Meeting expectations was significant as many caregivers felt parents did not comprehend the initial obligations and responsibilities still needed to be performed. Sandwich generation caregivers voiced lack of external support with an increase in lack of control regarding parent’s health. Striking a balance was key to maintaining fulltime employment and meeting the requirements of caregiving. The physical and emotional stress, less time for self, and the increase absence from work are comments needing consideration for the sandwich generation caregiver.

Measuring the impact of stress in the sandwich generation caring for the demented parent was reviewed in the Solberg, Solberg and Peterson study, and a 13-item questionnaire, Care Giver Stress Impact (CGSI), was developed to calculate caregiver stress [18]. The findings suggest there was no substantial difference in the impact of caregiver stress in the sandwich generation compared to the non-sandwich generation. Furthermore, in this report, the variables pertaining to sex, age, marital status, number of parents, residence of parents, number of children, had insignificant effects on the total score of the CGSI. Nevertheless, when viewing the single elements that evaluated stress, it was discovered the sandwich generation caregivers who cared for a demented parent struggled from increased feelings of irritation, anxiety, and negative impact on individual health more than non-sandwich generation caregivers. The results also indicated caring for a dependent child and a demented parent rather than just caring for a demented parent did not impact stress. The study did convey three interventions that were beneficial for the sandwich generation caregiver for the relief of stress:

- Seminars on care for the demented parent
- Meetings with social services for resources
- Coping mechanism seminars.

Schuacher et al. described the lived experience of leisure for adults in the sandwich generation. The significance in this study was not the finding of the sandwich generation suggesting the importance of leisure, but realizing the importance of leisure for their own health only after experiencing caregiving initially. In this study the themes transcribed by the sandwich generation caregiver included reconciling life transitions, succumbing to infinite obligations, time shifts, constructing a foundation, revisit control, freedom to recreate. The ambiguity seemed overwhelming when integrating parent demand with family needs, exhaustion rose with balancing guilt and grief, and emotional pressure with loss increased emotional strain. The guilt of what children are being taught, care provided to parent, and fear of failing one’s spouse was voiced. Loss of the parent once known to them, loss of time with children, loss of energy and self-care were also important issues expressed in this study. Fear was stated by participants feeling as if life was not fair, not being in control, and uncertainty. Quinn describes caregivers as very often not obtaining the educational needed and support needed to handle the demands placed on them. Education on leisure articulated in the primary stages of caregiving may contribute to the handling of the caregiving role with fulfilment [19].

## DISCUSSION AND CONCLUSION

Sanders gave vision to the “Caregiver Identity Theory”, the summarization of the caregivers’ role emerging from self-appraisal on the belief of what the initial caregiver expectations were. The need for realistic self-appraisal and the need to reinforce positive appraisal is imperative for the sandwich generation. Having multiple responsibilities at the same time, places the sandwich generation caregiver at an increased risk for undesirable outcomes. Interventions ensuring support and a reduction in stress include teamwork/

mutual support, fostering open communication, encouraging caregiver self-care, providing information, and referrals as need for resources.

Acknowledgment and identification of the caregivers' physical and psychological well-being is an increasing concern and needs to be addressed by healthcare providers. There has been much research on the sandwich generation within the past ten years. The most important issue for the sandwich generation is the need for educational preparedness for the sandwich generation caregiver; this would allow them to successfully manage the new obligations they have been confronted with. Most of the research conducted is based on the caregiver already caring for their aging parent and their children. It is important to understand and educate the SG caregiver on all the positive and negative aspects of these responsibilities, so they can determine whether or not they can manage this responsibility. Bringing to light the primary issues confronted by the SG caregiver and understanding the issues they will come across may assist the SG caregiver in making the best decision for them and their family. Further research is needed to explore the association between caregiving and health and comparing caregiving alone to caregivers caring for both elderly parents and growing children. The impact of the children and consequences of being raised by the sandwich generation have not been studied and needs further investigation. While much research has been conducted, there is a lack of data about how to prepare the SG caregiver for the role prior to them assuming the role. The lack of knowledge and support services regarding the sandwich generation in government requires further evaluation and the increased recognition by policymakers needs to be made known. Policies need to be implemented to further assist the sandwich generation caregivers who are the caretakers of our children and elders. Finally, there is a lack of data about how to prepare the sandwich generation caregiver for the role prior to them assuming the role. Prevention of undesirable outcomes may be avoided if we can reach the sandwich generation caregiver and provide the appropriate tools needed prior to initiation.

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