

► a friend's referral, she hired daytime and overnight assistants to help her mother with meal preparation, trips to the bathroom and some shopping and housekeeping tasks.

Michaelis and her brother called their mother daily, and Michaelis continued to visit regularly. Much of her work, including grant applications and reviewing papers, could be transported easily. But over the years, Michaelis says, the time and energy spent arranging her mother's medical appointments, managing health-insurance paperwork and dealing with unexpected household and medical emergencies — often from afar — took attention away from her research programme.

"We all already have a lot of non-scientific work that we have to do. Even a small diminishment in time has an impact," says Michaelis.

This year, Michaelis noticed a decline in her mother's mental acuity, and in April, she moved her to an assisted-care facility in Baltimore. She had to delay renewing one of her grants so that she could help her mother to move and prepare her parents' house for sale.

"It has had an impact on the progress of our work," she says. But, she adds, "I would do it all over again".

RETURNING HOME

Faced with the worry and expense of providing care and oversight remotely, some researchers decide to relocate. That decision hinges on a combination of family and cultural expectations, as well as on personal goals: some researchers must decide whether to stay in an institution where their careers are established or move closer to their parents, where prospects might be uncertain.

Neuroscientist Fuqiang Xu grew up in a small farming town in Henan province, China. He moved to the United States in 1988, where he earned two doctorates, completed a postdoc and secured a research position at Yale

University's Magnetic Resonance Research Center in New Haven, Connecticut.

But in 2004, his mother died after a three-month battle with lung cancer, and he decided that he needed to move closer to his father, then in his eighties. "I should have returned earlier," says Xu. He accepted a research post in 2007 at the Wuhan Institute of Physics and Mathematics in China, about 400 kilometres from his hometown. He was able to visit several times before his father died in 2008.

Xu's colleagues often ask him if he regrets leaving the United States, but he says that he enjoys the lower competition for funding in China. And his prestigious US education and training, he says, have helped him to secure — and to support — his current position, where he heads a lab of about 40 postdocs, graduate students and other staff members.

COMPETING DEMANDS

Igor Stajlar, a molecular geneticist at the University of Toronto in Canada, is considering moving closer to his mother in Croatia, where she has been living alone since Stajlar's father died in 2007. Four years ago, Stajlar dropped a grant application and flew to Croatia for three weeks when he found that his mother had been diagnosed with renal cancer. "I was just mentally not ready to write that grant," he says.

Stajlar's mother made a full recovery. But the incident started him thinking about the future. "I'm the only child in the family," he says. "I would feel really bad if I couldn't help her."

He hopes to find a professorship in Europe once the younger of his two daughters, now 14, finishes secondary school in Canada. For now, he talks to his mother on Skype most days, and visits about three times a year, sometimes combining his trips with conference travel.

Caring for ailing parents while juggling busy work schedules can leave many researchers feeling overwhelmed. Adult children of parents

stricken with terminal illness or dementia can feel guilty, frustrated or grief-ridden.

In January 2012, as immunologist Laurie Glimcher started a job as dean of Weill Cornell Medical College in New York City, her father

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began showing signs of dementia. She moved him nearby, and tried to spend as much time as she could with him, even as she was learning

the ropes at her new position and managing a packed agenda of meetings and fund-raising events. But within a year, he lost interest in daily activities, including eating and drinking.

"It was a huge weight, watching him deteriorate," she says. Her father — Melvin Glimcher, former chair of orthopaedics at Massachusetts General Hospital in Boston — had published papers with her when he was well. "I wanted to remember him the way he was," she says.

In the months before her father's death in May, Glimcher found support in talking to colleagues who had lost parents to Alzheimer's disease. Some US universities offer counselling and guidance for carers, as well as free referrals for care providers, and free or subsidized back-up care for occasions when normal arrangements fall through (see 'Helping hands'). But many employees remain unaware of such services.

"I don't think people necessarily think, when they're having a personal crisis, to look to their employers first," says Ian Reynolds, president of the College and University Work-Life-Family Association, a nationwide organization of work-life professionals. "It's still a developing service and developing field," he says. But, he adds, "we're seeing a real need emerge".

In addition to institutional resources, many people rely on informal support. Michaelis chats to friends about her mother's care. Several have had their own care stories and tips, making more bearable what otherwise would have been a perplexing and lonely experience.

"There's kind of a trajectory you can expect for children, for their growth and development. Elder care is complicated. There are many different ways that people can fail, and it's totally unpredictable," says Michaelis. "It's really helpful to have a support group of friends to talk about all of this." ■

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HELPING HANDS

Resources for caregivers

Caring for an ailing parent can be a daunting task. Here are some places to find help.

University work-life office Many institutions offer referrals for full- or part-time professional caregivers, who may have medical training. In case of brief, unexpected interruptions in care, some universities offer free or subsidized back-up care services.

Government agencies The US government funds a network of agencies that can help to find local programmes such as adult day-care and meal services. Families may be able to find help with health insurance and legal issues (see go.nature.com/nfhxpk). Countries

including Germany, Japan, the Netherlands and South Korea run national insurance systems that help to offset the costs of care.

Geriatric care-management services Care managers can help to develop and execute a care plan and perform in-home assessments to determine a care recipient's medical and social needs (www.caremanager.org).

Patient-advocacy groups Advocacy groups that focus on a particular disease, such as the Alzheimer's Association in Chicago, Illinois (www.alz.org), can connect patients and families to others who have gone through similar experiences. **H.S.**

CORRECTION

In the Careers Feature 'Kid-friendly digs' (*Nature* **513**, 575–577; 2014), the image including Suzanne Anderson had an incorrect caption. It should have read: 'Suzanne Anderson (far right) sometimes mixes family and research on trips to study glacier outbursts.'