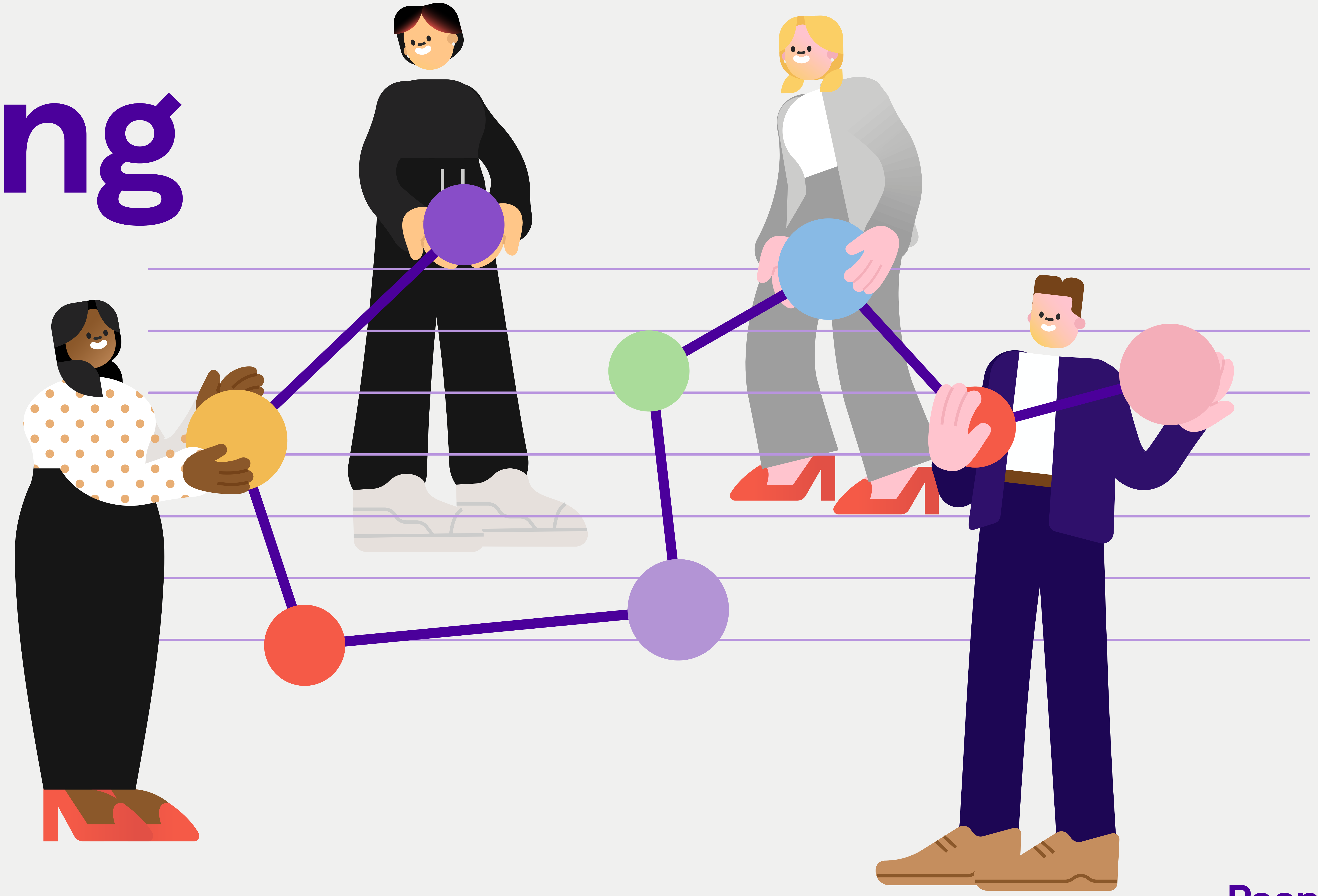
2026
health trends and insights

Connecting the Dots

Focus paper
Mid-life adults
(ages 31 to 50)



beneva

People protecting people

Mid-life adults (ages 31 to 50)

The backbone of Canada's workforce

Spanning Millennials and younger Gen X (or Xennials), this group bridges the analog and digital worlds. As the most influential workforce segment, they combine experience, adaptability and technical fluency. They represent a critical concentration of skills, leadership potential and institutional knowledge.

A defining reality for many in this cohort is that they represent a significant share of the sandwich generation. This term describes individuals who support their children while also caring for aging parents. Being sandwiched is less about age or family size and more about the cumulative emotional, practical and time-intensive load it creates. Daily life involves constant transitions between school drop-offs, work responsibilities, household logistics and the increasing needs of older family members.[1,2]

For this generation, balance is not a static goal but an ongoing negotiation. Supporting two generations at once—often while carrying significant professional responsibilities—directly shapes their stress levels, their time constraints and their reliance on benefits that help them stay healthy, protect their families and manage the unexpected.[2]

1. Canadian Centre for Caregiving Excellence. (2024). Caring in Canada.
2. Statistics Canada. "Sandwiched" between unpaid care for children and care-dependent adults: A genderbased study. April 2, 2024.

When financial stress grows new heads

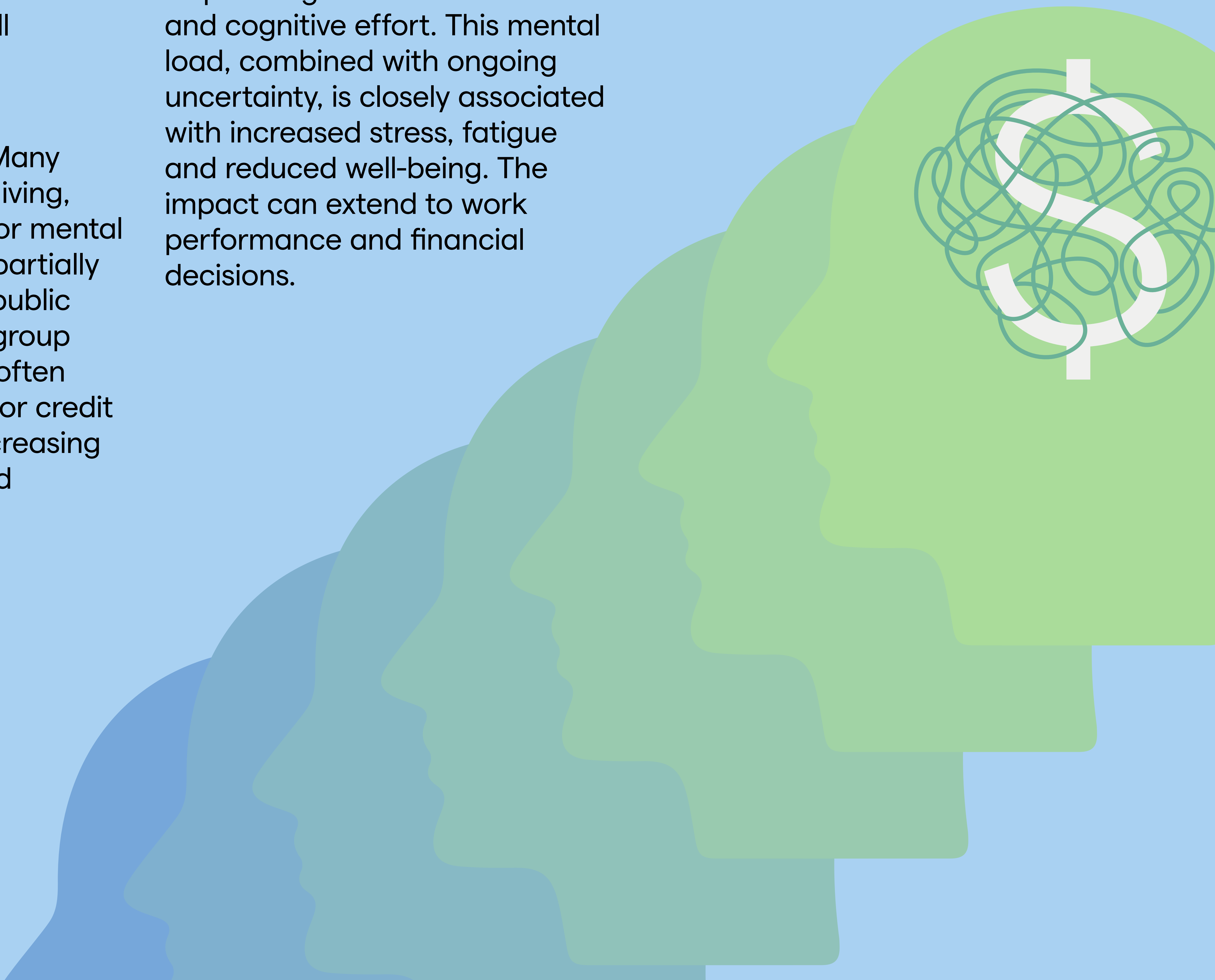
For adults in their prime working years, financial stress is rarely driven by a single pressure. It reflects overlapping responsibilities, rising costs, and gaps in coverage that create sustained strain. As Psychiatrist and medical consultant Dr. Robitaille puts it, “An accelerated pace of life acts as an aggravating factor,” making this stress structural rather than episodic.

This life stage also coincides with peak household spending. Costs related to housing, food, transportation, childcare, and debt repayment are typically highest during these years. At the same time, added expenses such as home adaptations or private care for aging parents create parallel financial pressures that can quickly become overwhelming. As these responsibilities often grow incrementally, their full financial impact is difficult to anticipate.

Financial stress is further compounded by income pressure and career trade-offs. Caregiving responsibilities frequently influence work choices. Statistics Canada research shows that sandwiched caregivers are more likely to adjust their schedule (30%), reduce their hours (14%) or reduce their tasks and responsibilities (9%). They are also more likely to give up better opportunities at work (7%) than other single-generation caregivers.[2] These adjustments are often framed as short-term solutions, but they carry consequences for earning potential. Over time, they affect income growth, pension accumulation and overall financial security.

Gaps in coverage add another layer of stress. Many expenses linked to caregiving, family-building journeys or mental health support are only partially covered or excluded by public systems and traditional group insurance plans. People often rely on personal savings or credit to bridge these gaps, increasing financial vulnerability and reducing flexibility.[3]

Finally, the administrative burden of managing finances contributes to overall strain. Navigating benefits, reimbursements, tax credits and care coordination requires significant time and cognitive effort. This mental load, combined with ongoing uncertainty, is closely associated with increased stress, fatigue and reduced well-being. The impact can extend to work performance and financial decisions.



2. Statistics Canada. “Sandwiched” between unpaid care for children and caredependent adults: A genderbased study. April 2, 2024.
3. Government of Canada. Financial support for fertility treatment and surrogacy.

Impact on group plans

Where stress and health intersect

As the core of most workforces, plan members in this age group carry significant organizational knowledge and often drive operational stability. They represent valuable talent that is costly to replace. Evidence consistently shows that sustained financial stress has clear consequences for both mental and physical health. Canadians who are worried about their finances are twice as likely to report poor overall health.[4,5]

Psychological trends

Persistent financial pressure increases psychological distress and emotional exhaustion, two core components of burnout. Among this cohort, claims for psychological care are the highest of any age group, with annual growth holding steady at 4% since 2017. In contrast, this same group recorded the largest increase in the share of short-term disability claims related to mental health, up 8% since 2019.

Together, these trends point to a timing issue rather than a participation issue. High use of psychological services does not necessarily mean care is accessed early or used preventively. Canadian data shows that many people who meet diagnostic criteria for a mental disorder do not consult a health professional within the year, with many reporting unmet needs for counselling or psychotherapy.[6]

Busy schedules also play a part in delayed treatment. An Ipsos survey found that seven in ten Canadians (68%) have missed a doctor's appointment for reasons ranging from long wait times to an inability to find a doctor outside of working hours.

And lastly, it comes as no surprise that high out-of-pocket expenses are also a contributing factor.[7]

In this context, the issue may not be whether care is being used, but when and how easily it can be accessed. Delays driven by time pressure, access barriers and out-of-pocket costs increase the risk of stress evolving into more complex and costly health outcomes.

4. Financial Consumer Agency of Canada. Financial stress and its impacts.
5. Benefits Canada. The Benefits Canada Healthcare Survey 2025.
6. Statistics Canada. Stephenson, Ellen. Mental disorders and access to mental health care. Insights on Canadian Society. September 2023.
7. Canadian Institute for Health Information (CIHI). Canadians report increasing need for mental health care alongside barriers to access. Commonwealth Fund survey, 2023.

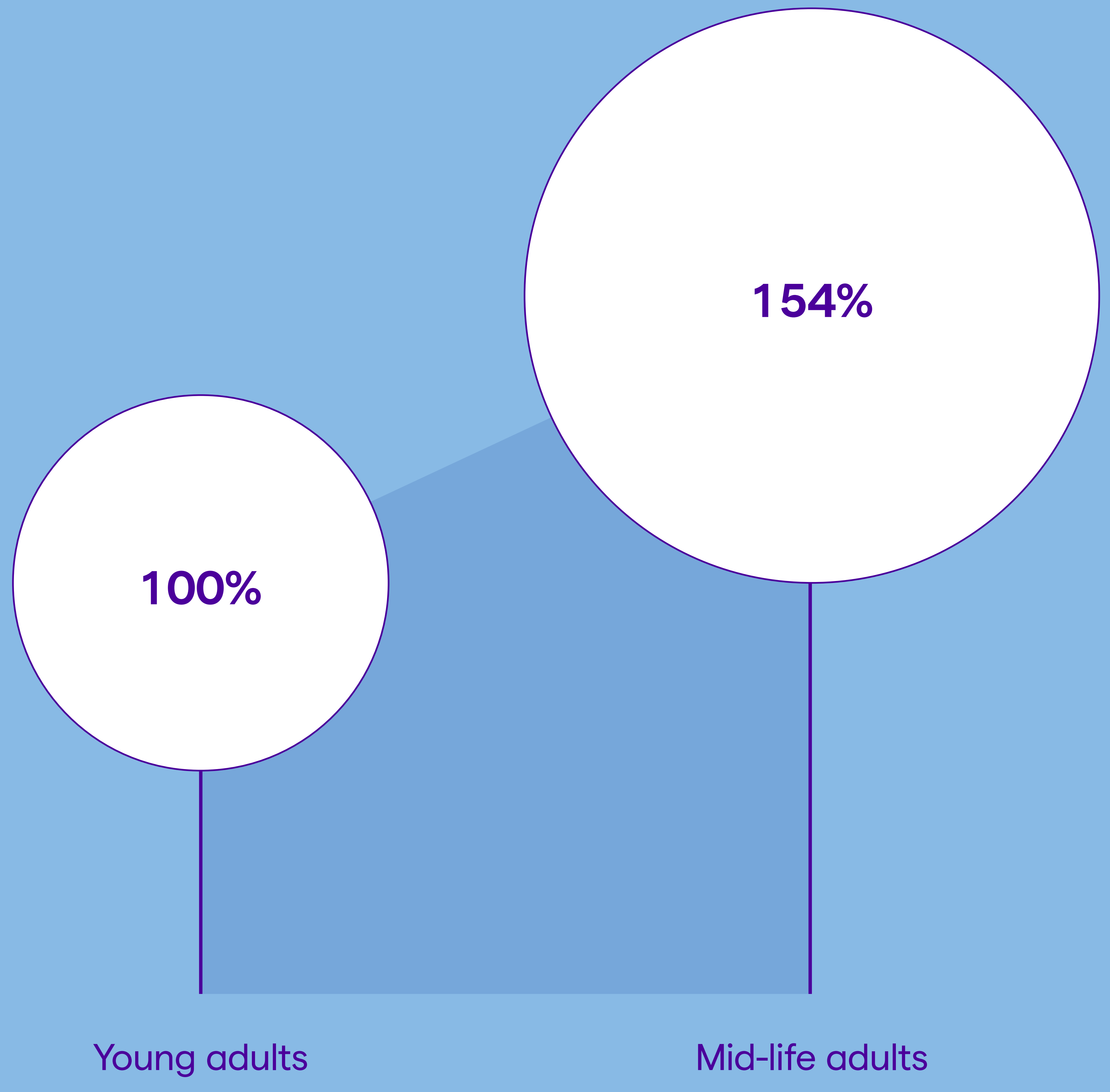
Physical trends

Over time, stress increasingly manifests physically. People experiencing chronic stress are more likely to report persistent fatigue, sleep disturbances, headaches and musculoskeletal pain. “When you are constantly under stress, you tend to become more ill: stress can bring physical symptoms to the surface, often rooted in an underlying internal imbalance,” explains Dr. Denis, family doctor and medical consultant for Beneva.

Sustained stress that progresses to psychological distress is strongly associated with cardiometabolic conditions such as diabetes and hypertension, as well as cardiovascular disease. While stress does not cause these conditions on its own, it adds to an already heavier health burden and can intensify symptoms, treatment needs and day-to-day strain.[8]

Our 2025 data reflects this broader shift. Drug costs increase by a little over 50% per insured from young adulthood to mid-life, mirroring the sharp rise in chronic conditions and overall morbidity during prime working years. This pattern suggests that sustained stress and rising chronic disease are occurring together in mid-life, contributing to higher healthcare use and more complex health needs, even if stress itself is not the sole driver.

Chart 3: Average drug cost per insured – Young adults vs mid-life adults
Index (Young adults = 100%)



8. Hatamova M, Rizk M, Rattan K, Gaballa A, McFarlane SI. Chronic stress, diabetes, and cardiovascular disease: epidemiologic evidence, pathogenetic insights, and therapeutic strategies. Cureus.

Solutions and preventive measures

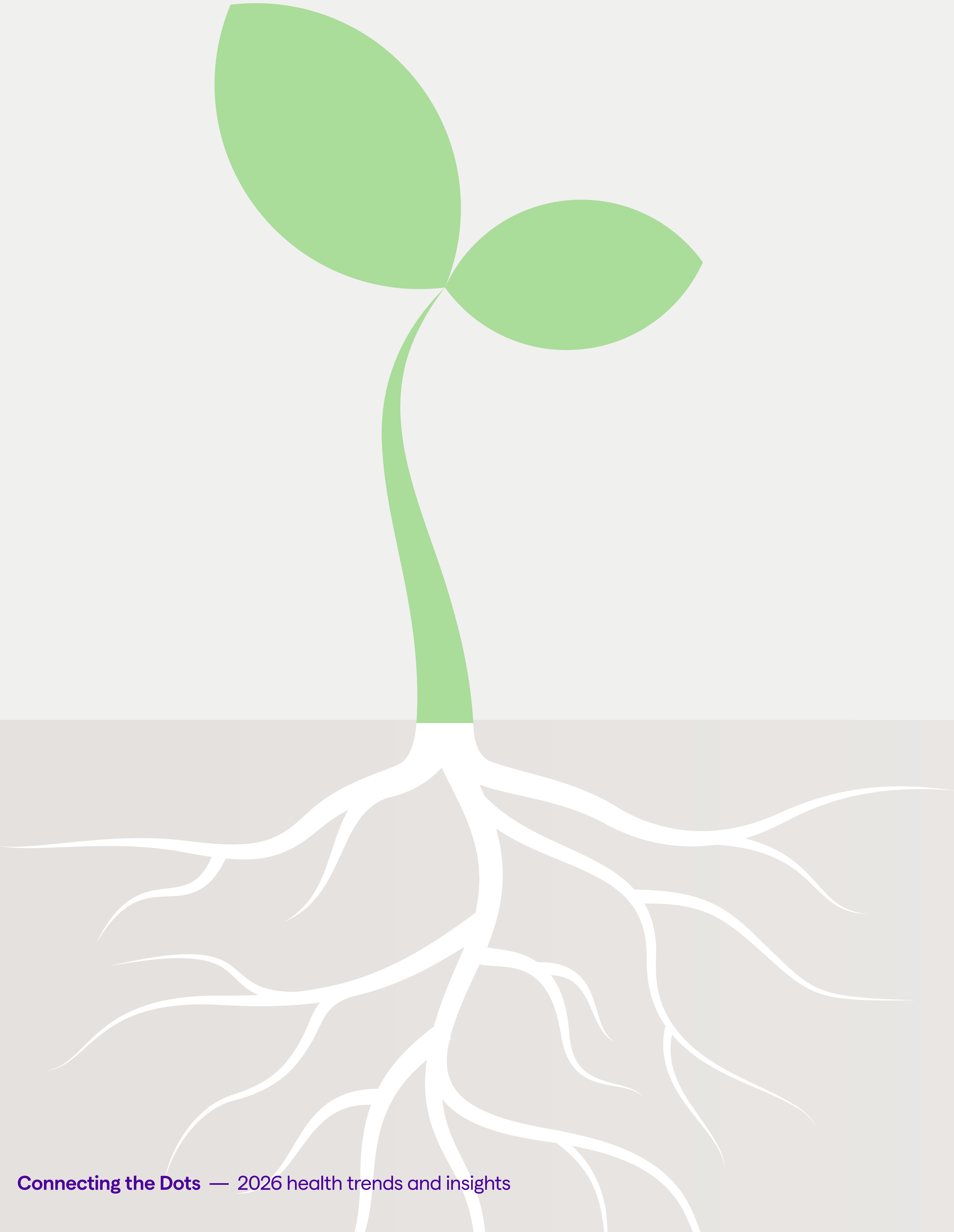
Modular group insurance plans such as those offered by Beneva are particularly well suited to this cohort. By offering tiered levels of protection, typically structured around three coverage options, modular plans allow employees to align benefits with their evolving responsibilities and risk exposure. This flexibility helps mitigate financial pressure by reducing out-of-pocket costs at key moments, whether related to family needs, caregiving responsibilities or emerging health concerns. This approach allows plan sponsors to maintain cost discipline and predictability.

Optional life insurance can also complement modular plan design. As a voluntary, employee-paid option, it allows plan sponsors to broaden the overall protection framework without increasing plan costs or creating an administrative burden. Premiums are typically handled through payroll deduction, making optional life insurance a low-impact way to enhance flexibility and perceived value.

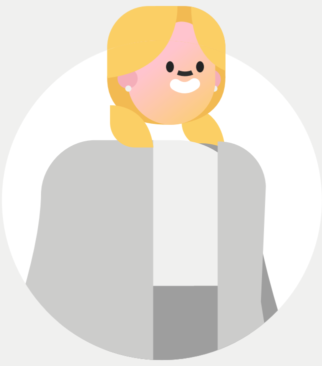
Beyond coverage and assistance programs, accessibility is critical. Virtual healthcare responds directly to the time constraints faced by mid-life employees, enabling faster access to medical support without disrupting work or caregiving schedules. Reduced delays limit the risk of conditions escalating, thus preventing avoidable costs for both plan sponsors and members.

Work accommodations further strengthen the effectiveness of benefits coverage. Flexible work arrangements, as well as supported leave options and structured return-to-work practices allow plan members to remain engaged while navigating periods of increased strain.

Taken together, modular benefits, optional coverage, virtual healthcare and supportive work practices form a coherent group insurance strategy that addresses financial stress at its source. They provide plan members with the flexibility and protection needed to manage complex life demands, while helping plan sponsors protect productivity, retain experienced talent and manage long-term risk. For this cohort, benefits that adapt are not a luxury; they are essential infrastructure.



Recognizing the different paths to family



Interview with **Marie-Claude Parent**,
Director, Culture and Organizational Development at Beneva

Decisions about when, how or whether to become a parent are no longer linear, nor do they follow a single model. Births among women in their 30s and early 40s now account for the largest share in Canada, even as the total fertility rate has reached a record low. This reflects changing social norms, economic realities, career trajectories, and personal choices.[9]

These shifts are also beginning to appear in benefits usage, with a modest uptick in fertility-related claims among mid-career plan members. While this increase is partly linked to later childbearing and the higher likelihood of conception challenges, timing is only part of the story. Family building itself is evolving. Same-sex couples, single parents by choice, blended families, and individuals who cannot conceive without assistance are all examples of how becoming a parent can take different paths.

Together, these trends underscore a fundamental shift: family building now unfolds later, differently, and more diversely than in the past. It often coincides with periods of high professional responsibility, financial pressure and emotional load. For organizations, this evolution has direct implications for group insurance design and workplace practices. Recognizing and supporting the full range of family building journeys is essential to create inclusive, resilient workplaces that reflect how people live and plan their lives today.

To explore this subject, we spoke with Marie-Claude Parent, Culture and Organizational Development Director at Beneva.

9. Statistics Canada. Fertility in Canada, 1921 to 2022. Demographic Documents, released January 31, 2024.

Why is it important to recognize different paths to parenthood from a group insurance perspective?

Recognizing diverse family journeys is both a people-first decision and a business imperative. Acknowledging the family project from the outset strengthens the employer brand, fosters belonging and reflects today's realities beyond heteronormative models. From a group insurance standpoint, this approach helps reduce distress, fatigue and absenteeism. It also promotes psychological safety and ensures more equitable access to benefits, regardless of how parenthood is achieved.

What common realities do employees encounter when building a family?

Across all projects, uncertainty and lack of control generate significant stress. Waiting periods, unpredictable outcomes and complex administrative requirements increase mental load, while financial costs are often high and only partially covered by standard plans. These realities require time, flexibility and open communication with managers.

How do nontraditional family projects amplify these challenges?

Fertility treatments, adoption and surrogacy often involve additional expenses such as medical services, donor programs, legal fees, psychosocial assessments and travel. Many of these costs fall outside traditional coverage, creating financial inequities for employees pursuing the same goal. The emotional burden associated with these journeys can also affect concentration and attendance, underscoring the importance of bias-free performance evaluations.

What solutions make the greatest difference?

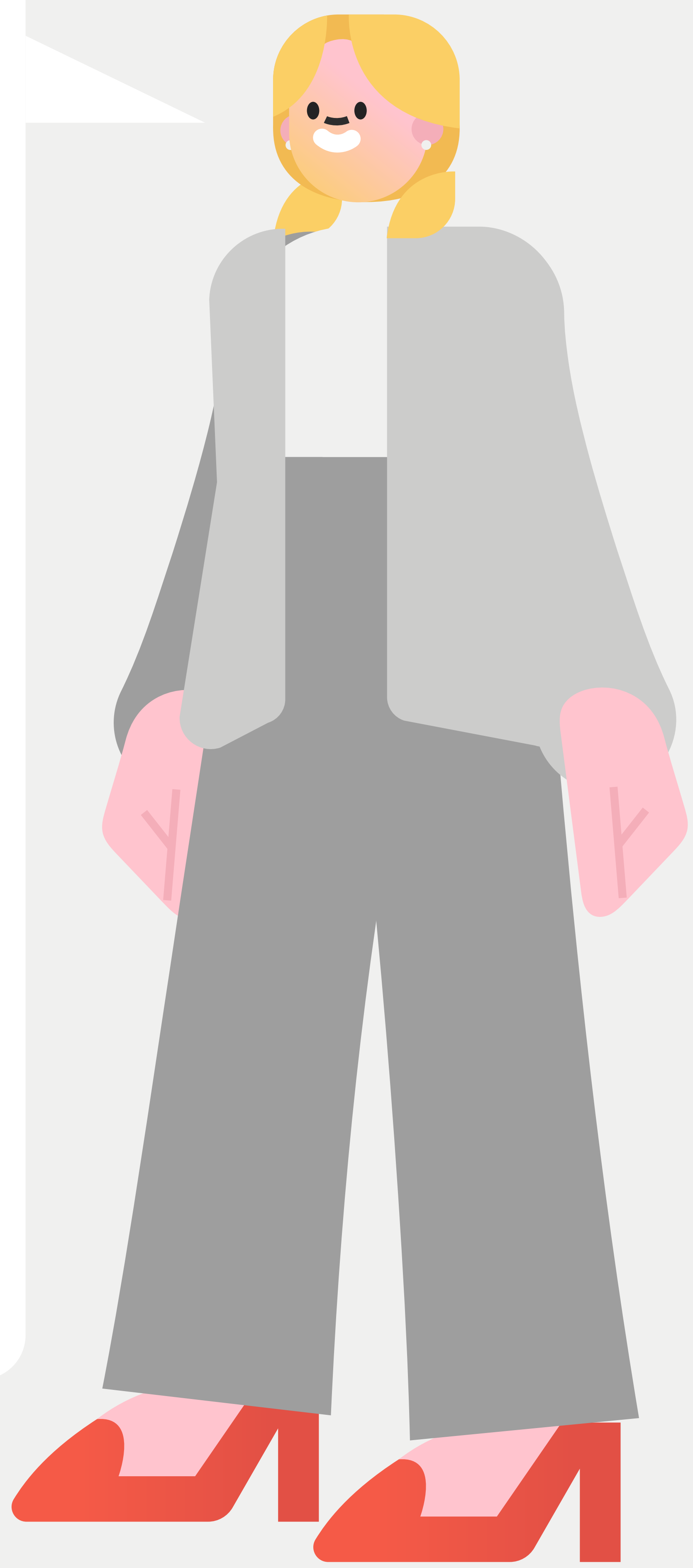
The most impactful lever lies in group insurance design and related workplace policies. Inclusive solutions focus on the goal of becoming a parent rather than the method used. This includes benefits that cover all family-building avenues, flexible and equitable leave, dedicated financial allowances, and access to mental health support and EAPs. Flexible work arrangements, discreet medical leave processes and clear return-to-work planning further support employees during these demanding periods.

How can companies ensure these solutions are effective?

Inclusive language, forms and systems help reinforce trust, but they must be supported by concrete plan design. Training managers on confidentiality, bias and inclusive practices is essential to ensure that benefits are accessible, used and experienced as equitable.

What biases persist, and how can they be addressed?

Assumptions about availability or commitment, hetero-centric policy design and informal career slowdowns can undermine even well-designed benefits. DEI teams and leadership play a key role by reviewing policies through a diverse pathways lens, monitoring utilisation and retention indicators, engaging employee resource groups, and providing managers with practical guidance and training.



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For more information on our group insurance solutions, talk to your account executive. If you don't have one, simply get in touch with our team at beneva.ca/en/group-insurance/form

People protecting people

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