

The economic and social well-being of caregivers in the Northeast Region

Florence Becot, Shoshanah Inwood, Emily Southard



Caregiving is a common experience

- More than four in five respondents (81%) have provided care at some point.
- Over half of the sample (58%) have provided care in the last 12 months. Among these respondents:
 - 43% cared for children (ages 0 to 17 years old), 42% cared for adults (18 years and older), and 26% cared for children and adults.
 - Among respondents caring for adults, about half of the adults cared for were over the age of 65.
- Caregiving is often a family affair:
 - Individuals caring for children were most often the parent of that child (57%), followed by their grandparent (17%), and their aunt/uncle (17%).
 - Those caring for adults were most often the child of that adult (33%), followed by their spouse/partner (26%), and their parent (18%).

Caregiver demographics

- Among respondents who had provided care in the last 12 months, the majority identified as female (63%), were 43 years old on average, were white (62%) followed by Hispanic or Latino (27%) and Black or African American (26%).
- Most caregivers in this survey were employed (63%), followed by retired (12%) and unemployed/not working (10%).
- One third reported a household income of less than \$50,000 (38%) or between \$50,000 and \$99,999 (35%) while a quarter reported a household income of \$100,000 or more (25%).
- Geographically, respondents were split between living in a suburban area (37%), urban area (39%), and rural area (24%).

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Health needs of children and adults needing care

The health care needs of children and adults being cared for are noticeably different, where 86% of adults cared for had a health condition compared to one-third (36%) of children.

- Long-term health conditions, where the individual being cared for is not expected to (re)gain independence in the future, affected 57% of adults and 18% of children in care.
 - 30% of adults and 58% of children in care had an emotional, behavioral, or mental health condition.
 - 17% of adults requiring care had memory problems.
 - 32% of children needing care had a learning disability.
- Short-term health conditions, where the individual being cared for is expected to (re)gain independence accounted for 28% of adults and 10% of children needing care.
 - For adults, the most frequent short-term condition was physical (35%) while 12% of respondents reported short-term emotional, behavioral, or mental health conditions.
 - For children, short-term health needs were more often physical (18%) than they were emotional, behavioral, or mental health (14%) conditions.

Time and financial resources needed for caregiving

Caring for children requires more time than caring for adults.

- One third (35%) of those caring for children either provide constant care or between 20 to 40 hours per week. A quarter (26%) of adult caregivers reported providing that level of care.

Over two-thirds of respondents caring for children or adults paid for some care.

- Among those who paid for care, 39% of those caring for children and 36% of those caring for adults spent more than \$201 per week.

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Intersection between caregiving and household finances

Caregiving is multidimensional and complex. Caregiving responsibilities often intersect with household needs and can impact the household's finances.

Respondents shared that caregiving affected their ability to perform their household responsibilities (50%) and their ability to perform paid work (48%).

- To meet their caregiving responsibilities, respondents reported they or someone in their household made changes to:
 - Their employment (38%).
 - Their living situation and/or the living situation of the person they care for (40%).
 - Their education (23%).
- As a result of providing care, almost half of the respondents (41%) experienced financial difficulties. The difficulties most frequently reported include:
 - Taking on more debts (22%).
 - Missed or were late paying a bill (22%).
 - Borrowed money from friends or family (17%).
- Within the last 12 months, two thirds (67%) of respondents had used social safety net programs. The most frequently used programs included:
 - Food assistance through SNAP (33%).
 - Medicaid (26%).
 - COVID-19 stimulus check (20%).

Varying impacts of caregiving on caregivers' health and well-being

- Caregiving is more likely to affect the caregivers' mental and/or emotional health (47%) and social life (44%) than it was to impact physical health (33%).
- A quarter of respondents shared that caregiving worsened their mental and/or emotional health (25%) and their social life (27%).
- Fewer respondents reported that caregiving improved their mental and/or emotional health (22%) and social life (17%).
- The impact of caregiving on physical health was mixed, 14% reported their physical health is worse, and 19% said it is better.

Policies and programs to support caregivers

Respondents identified a variety of policies and programs that would better support their roles as caregivers.

- Most respondents (87%) would like more help or information. Most frequently they asked for:
 - Information on how to keep people they care for safe (27%).
 - Financial compensation for caregiving (25%).
 - Caregiving activities (24%).
 - Managing challenging behavior (22%).
 - Help manage emotional or physical stress (19%).
- To help respondents enter or return to the workforce:
 - About three quarters favored financial support (75%), paid leave/time off/sick time (70%), and flexible work hours (69%).
 - About half of survey participants favored information, referrals, or counselling to help caregivers (52%) and unpaid leave/time (43%).

About this Research

Authors: Florence Becot, Penn State, florence.becot@psu.edu, Shoshannah Inwood, The Ohio State University, inwood.2@osu.edu, Emily Southard, Penn State, ems617@psu.edu.

Methods and dataset: The survey conducted in 2023 with 4,480 responses from the 13 states of the Northeast Region through a Qualtrics online panel. The technical documentation, survey codebook, and the open access dataset are available for download here: [doi:10.4231/TP7N-8B10](https://doi.org/10.4231/TP7N-8B10).

NER-Stat: Caregiving Survey is the regional household survey that the [North Central Regional Center for Rural Development](#) (NCRCRD) conducted in collaboration with [Northeast Regional Center for Rural Development](#) (NERCRD), The Ohio State University and the National Farm Medicine Center. NCRCRD has also previously conducted the NCR-Stat: Caregiving survey in the North Central Region. All data gathered via the NER-Stat and the NCR-Stat Caregiving Surveys are available for those who want to use the data as a baseline for further research and extend the portfolio of already existing databases: [NER-Stat: Caregiving Dataset](#) and [NCR-Stat: Caregiving Dataset](#).

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