

THE **SENIOR CARE** INDEX

Surveying the ups and downs
of family caregiving



About us

Care.com is the world's largest online destination for care, with 19.8 million families and 14.3 million caregivers across more than 20 countries, and approximately 1.7 million employees of corporate clients having access to our services (as of June, 2019). Spanning senior care to child care, pet care, housekeeping, and more, Care.com provides a sweeping array of services for families and caregivers to find, manage, pay for care or find employment.

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Millions of families provide
various forms of in-home care
and support to older adults

THE EVOLVING CHALLENGES OF FAMILY CAREGIVING

From nearly every conceivable angle, caregiving situations involving senior loved ones are complicated. Besides the inherent challenges of addressing their evolving physical, cognitive, and emotional needs, there are unexpected financial costs, difficult family dynamics, needs for unanticipated services, and profound impacts on the lives of everyone involved that add to the complexity. Throughout the United States, millions of families provide various forms of in-home care and support to older adults so that they can continue to live in their own homes or in a family member's home. Yet it isn't always easy for caregivers to figure out how to best provide and pay for this care, make caregiving decisions, and handle the impact the caregiving relationship has on their lives. That's where the Senior Care Index Report comes in.

To gain insights into the challenges faced by the unpaid family caregivers of seniors who need part- or full-time non-medical in-home care, Care.com collaborated with Hanover Research on a national online survey. The goals of this study were twofold: To identify the difficulties families encounter as they navigate options for care for senior loved ones and provide a roadmap that will facilitate families' success.

The survey involved 7,500 adults who live in the U.S. and have a parent or loved one over age 60 requiring part- or full-time non-medical care. The questions focused on respondents' access to informational resources: the costs of caring for an older parent or loved one, the personal impact of caregiving, experiences with hiring in-home caregivers, selecting an assisted living facility, and how the use of technology is—or isn't—impacting care. The results provide a multi-layered picture of family caregiver experiences, while shedding light on services and information that could make this important responsibility more manageable in the future.

Executive Summary

Currently, an estimated 40 million adults in the U.S. serve as family caregivers – the relatives, friends and neighbors who provide unpaid care to loved ones in need. As the population ages, these numbers are expected to increase considerably, and the portrait of family caregivers will grow increasingly complex. Women caring for an adult loved one remain the majority of family caregivers, but more men are assuming caregiving roles. And while the largest share of caregivers is in their 40s and 50s, a growing number of Millennials are responsible for the care of an older loved one. More than one in five caregivers are caring for more than one family member. Fully 24% of family caregivers have children living at home with them, meaning they're part of the Sandwich Generation. And, while previous research has shown 90% of older Americans prefer to remain in their homes, our research shows less than half of care recipients are aging in place, suggesting there's a considerable gap between expectations and reality. The results of our report, "The Senior Care Index," provide an illuminating picture of who family caregivers and their loved ones are, how caregivers feel about the experience, and the challenges they confront.

Family caregivers come from all walks of life. Yet, despite their differences, they share many common experiences. At nearly every stage of the process, caregivers face decision-making burdens and financial burdens, and many people are financially unprepared for caregiving costs, the survey found. Many people also struggle to get good information about caregiving issues and to handle the effects of caregiving on other relationships.

Here's a look at the key points and highlights from the survey results:

- Many families are not financially prepared for caregiving. Less than half of care-recipients have retirement savings, and only 11% have long-term care insurance. One in five caregivers has dipped into his or her own personal savings to pay for their loved ones' caregiving expenses, and another 10% have drawn from their own retirement savings to pay for their senior's care.
- Among the respondents, more than half are employed at least part-time, including 44% who work full-time, which means they're often juggling work, family, and caregiving responsibilities.

- For many respondents, caregiving is like a second job: 43% spend 11 hours or more per week caring for a loved one, 20% of caregivers spend more than 20 hours per week, and 11% spend 30 hours or more caring for a loved one each week.
- Most respondents (70%) do not use paid in-home care for their senior loved ones, and nearly one in five cite cost as a factor.
- Caregiving is not a short-term proposition: While almost half of caregivers have been providing care for their loved ones for more than three years, one in four has been doing it for five or more years.



The caregiving experience
has a profound impact
on both parties

THE FACES OF CAREGIVING IN AMERICA

The caregiving relationship is dynamic, not only because it involves give and take and sometimes conflicting desires, but also because challenges often evolve in relation to the care recipient's physical or cognitive limitations. Family caregivers come from all walks of life. They can be first-degree relatives, spouses or partners, members of the extended family, friends or neighbors—and the same is true of care recipients. In addition, some people receive care from paid caregivers. Regardless of who is on the giving or receiving end of such care, the experience has a profound impact on both parties. To understand the complicated dynamics in the caregiving relationship, we'll take a closer look at who the participants are.

Who's providing care?

All the respondents have at least some responsibility for caregiving, though not all the respondents are the primary caregivers for their loved ones. Though the majority of caregivers are female, a rising number (44%) are male. And more than one in five (22%) of caregivers are caring for more than one family member over the age of 60.

INSIGHT

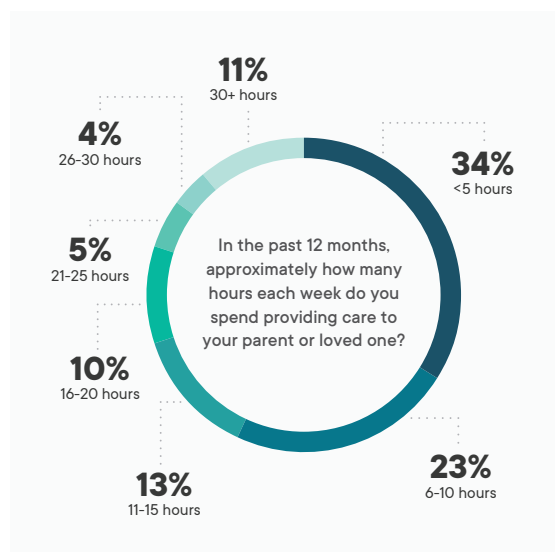
24% of caregivers have children living at home with them—which means they're part of what researchers often refer to as the “sandwich generation,” in which they're simultaneously taking on care responsibilities for seniors and kids.

More than half (52%) are the primary caregivers for their senior loved ones. In instances where the respondent is not the primary caregiver, that role is most often served by another member of the extended family (14%), paid staff at a senior care facility (12%), the loved one's spouse or partner (8%), another member of the respondent's household (7%), or a paid in-home care provider (5%). Most (72%) of the respondents are married (or living as married), 10% are separated or divorced, and 15% are single. Meanwhile, 30% have at least a 4-year college degree, 44% are employed full-time, and 10% are employed part-time, while 29% are retired.

INSIGHT

Caring for a loved one involves a substantial time commitment.

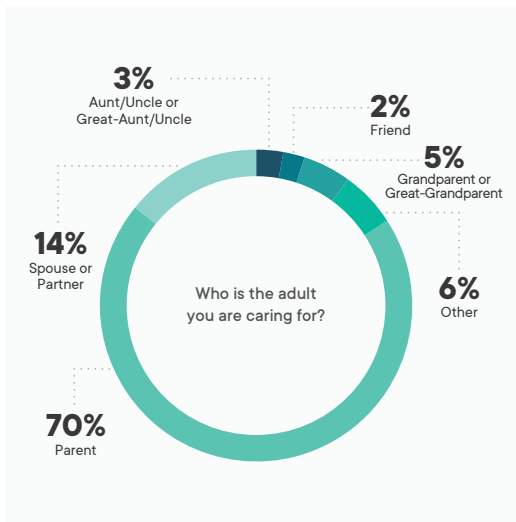
More than half of respondents (57%) spend 10 hours a week or less caring for their loved ones, while 23% spend 11 to 20 hours per week and 11% spend 30 hours or more.



More often than not, caring for a loved one is a long-term proposition: 33% have been providing care for one to three years, 44% of caregivers have for more than three years and 24% have been doing it for five or more years.

Who's receiving care?

Among loved ones who are receiving care, 70% of the care recipients are the caregiver's parents, whereas 14% are the caregiver's spouse or partner and the others are comprised of various relatives or friends.

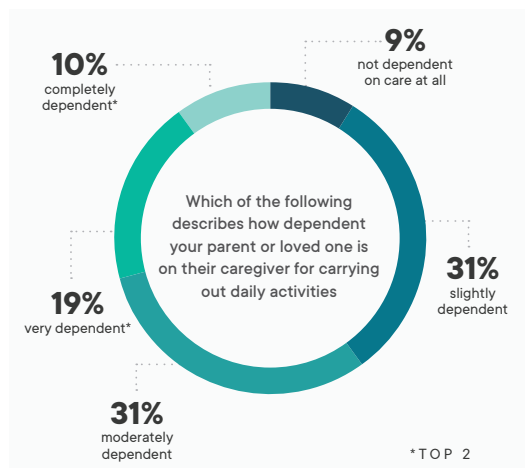


More than half of care recipients (54%) are over 80 years old, 24% are in their 70s, and about one in five (21%) is between the ages of 60 and 69. Thirty-six percent of senior loved ones have a high school diploma, and 18% have a college degree.

INSIGHT

Nearly a third (29%) of care recipients are completely or very dependent on the caregivers' care, especially when it comes to eating, taking medications, bathing, or moving around the home.

By contrast, 31% are moderately dependent on their caregiver, 31% are slightly dependent, and 9% aren't dependent at all.



Their health status varies considerably: 42% have limited mobility or a temporary disability, whereas 24% have dementia or memory impairment and 13% have a chronic illness (such as cancer).

Where care is happening

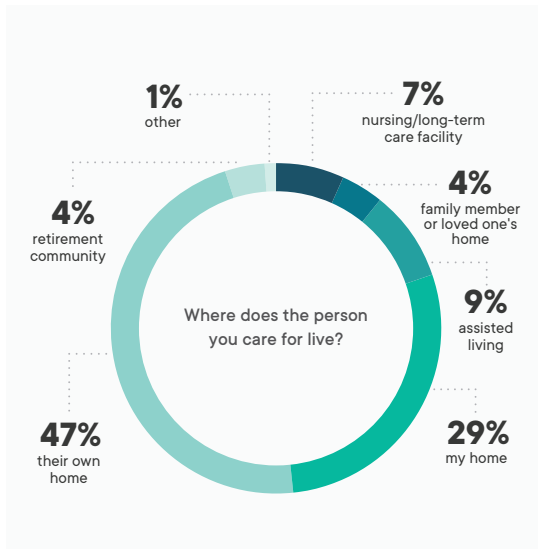
Forty-seven percent of care recipients are aging in place (in their own homes).

INSIGHT

Geographically, the closer a caregiver lives to the loved one, the more likely the loved one is to be able to age in place.

Those who are aging in place are less likely to require full-time care, more likely to make the final decision in their choices for care, and slightly more likely to be happy in their care situation; their caregivers are less likely to be responsible for financial costs of their loved ones' care and less likely to be familiar with their loved one's financial situation.

Among the 29% of care recipients who live in the caregiver's home, 41% are spouses and 45% are parents to the caregiver. Outside these venues, 9% of loved ones live in an assisted living facility, 7% in a nursing home or long-term care facility, 4% in another family member's home, and 4% in a retirement community.



More than half of caregivers (53%) live less than 20 minutes away from their loved ones.



Family caregiving
situations have some
universal challenges

DECISION FATIGUE AND THE PAID CARE GAP

Regardless of the personalities, financial status, and demographic factors involved, family caregiving situations have some universal challenges. These include a significant burden of decision-making, a juggling act with various responsibilities, and challenges in getting good information about caregiving issues. When it comes to making care decisions for senior loved ones, 40% of caregivers are the primary decision-makers for their loved one's non-medical care while another 40% share the responsibility with someone else. Thirty-seven percent of senior loved ones and their caregivers share input and make decisions together. By contrast, 26% of loved ones make the final choice about their care, 23% of loved ones have some input in their care decisions but not the final say, and 14% have no input in their care decisions.

INSIGHT

In most cases, the person who is responsible for making financial decisions for their loved one is also the one who is responsible for making health-care decisions for their loved one.

In other words, the burden of decision-making often falls on one family caregiver. This is true regardless of whether the responsibility for these decisions rests with the respondent, the loved one's spouse or partner, the parent or loved one, another family member, or another member of the respondent's household.

Fifty-five percent of respondents have power of attorney for their loved ones on health-care decisions, which means the caregiver has the legal authority to make health-care decisions for the loved one if he or she becomes unable to make or communicate those decisions.

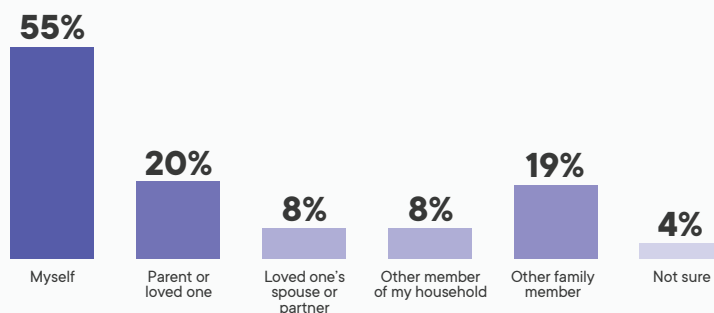
A nearly equal percentage of respondents (54%) have power of attorney for their loved ones on financial decisions.

When making decisions, more often than not people rely on trusted human sources of information about caregiving services and resources.

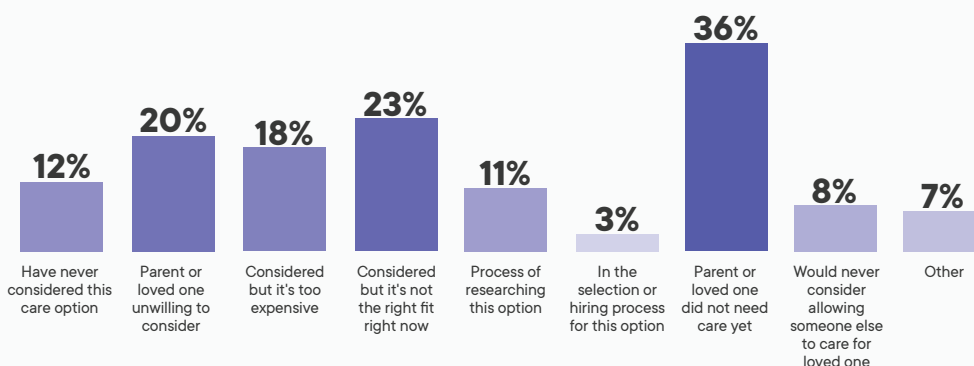
The most common sources are doctors (50%, followed by recommendations from family members and friends (43%), senior center support services (23%), a social worker or care manager (22%), a home care agency (21%), and/or hospital support services (21%). Other resources that are often used include federal government websites (20%), Care.com (20%), AARP.com (18%), local or state government websites (17%), illness-related websites such as the Alzheimer's Association (15%), and social media (10%).

Typically, while researching paid care options for their loved ones, caregivers are seeking information about the quality of care, the cost, what options are available and what their benefits are, though some are also looking for reviews/testimonials and legal information. After doing this research, 57% of caregivers said they learned about new options and 21% of caregivers ended up selecting a different care option than they had originally planned; meanwhile, 67% did not select a different care option than they originally planned, after doing their research.

Who has the power of attorney for your parent or loved one on health care decisions?



Which of the following describes why your parent or loved one did not receive paid in-home care?



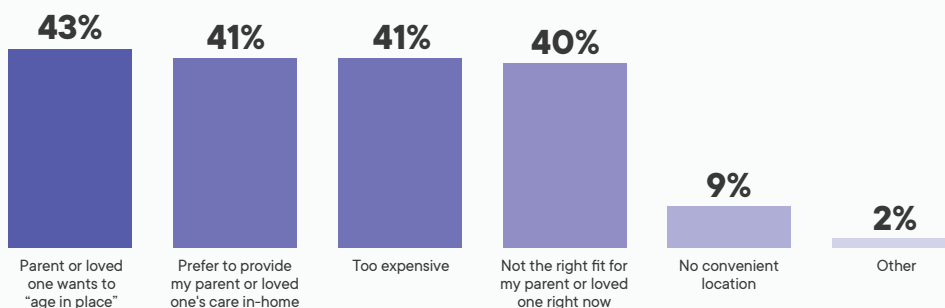
Who's using paid care?

Nearly one-third of respondents use paid in-home care for their loved ones and 18% would like to, but say it's too expensive. Another 20% of caregivers say their loved ones will not consider paid care as an option.

In other words, there's a significant proportion of family caregivers who could benefit from in-home care but can't afford it or are caring for a loved one who won't accept it.

Similarly, most respondents (82%) do not use assisted living for their loved ones. Among those who considered it as a possibility, the reasons they didn't go this route are: the loved one wants to age in place (43%), the respondent prefers to provide care to the loved one (41%), it is too expensive (41%), or it is not the right fit at this time (40%). Among those who looked at assisted living but chose another alternative, 43% say it's because their loved ones preferred to live at home.

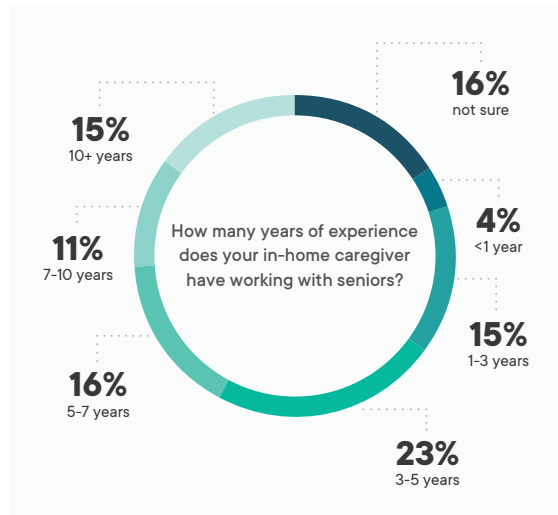
Why did you decide against assisted living for your parent or loved one?



By contrast, 30% of respondents have used paid, in-home care. Insight: A majority of those who use paid care are satisfied with it. Of respondents who used paid, in-home care, 74% of family caregivers are satisfied with the quality of paid in-home caregivers that is available, and 62% are satisfied with the quantity of paid caregivers that is available.

Experience and credentials matter when hiring paid care

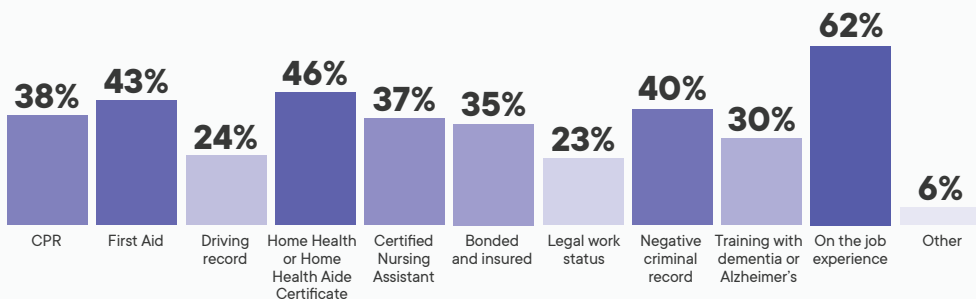
Hiring an in-home caregiver for a loved one can be a daunting process. Besides choosing the type of in-home care provider that suits your loved one's needs, there are questions about what to look for in a particular candidate. The survey found that **among those who use paid care, respondents considered the caregivers' qualifications, personality and its fit with the loved one, prior training, cost, and background checks during the selection process.** When hiring paid caregivers, the most important credentials respondents look for are: on-the-job experience (62%); a Home Health or Home Health Aide Certificate (46%); first-aid certification (43%); and lack of a criminal record (40%).



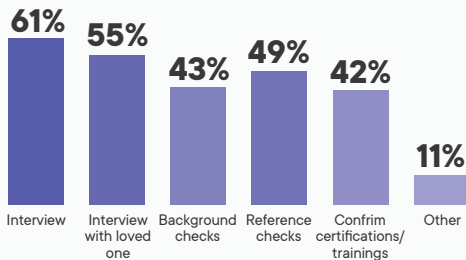
Among the paid in-home caregivers who were hired, 39% had between three and seven years of experience, while 26% had seven or more years of experience.

During the vetting and hiring process, most respondents (61%) held interviews with the potential caregiver, along with interviews between their loved ones and the candidate caregivers, and many performed reference checks and background checks.

What types of certifications were important to you when interviewing in-home care givers?



Which of the following steps did you take before hiring a caregiver?

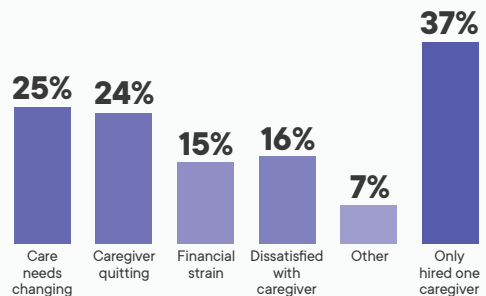


Most respondents (76%) interviewed fewer than five caregivers when hiring a paid caregiver, and 55% of respondents let the caregiver candidate interview with their loved one before hiring the person. These measures seemed to be sufficient because most respondents (81%) report being generally satisfied with their recent paid caregiver and the personality fit between the caregiver and their loved one.

Despite these efforts to find a good fit, **turnover is a big issue with paid care; relatively few paid caregivers stay for more than a year. And the reasons for that turnover are complex.** On average, 68% of the respondents who have hired paid in-home caregivers employed them for less than a year; 15% employed their caregiver for one to two years; and 17% held onto their caregivers for two or more years. Only 7% of respondents have employed a paid, in-home caregiver for longer than five years.

Sometimes (25% of the time) caregiver turnover occurs because the loved one's care needs change. In other instances, the turnover is because the paid caregiver quit (24%) or there was dissatisfaction with the caregiver (16%) or financial strain (15%).

Which of the following reasons have contributed to caregiver turnover?



THE IMPLICATION

Given the high turnover rates, if you're going to hire someone to provide paid in-home care, you should be prepared to go through the vetting and hiring process frequently, perhaps every year.



Caregiving is expensive:
financially and emotionally

THE FINANCIAL BURDENS OF CAREGIVING

It's no secret that caregiving comes with various financial burdens, whether family caregivers are doing it on their own or hiring in-home care. After all, caregiving is expensive, financially, emotionally, and in terms of the time and energy it requires.

What's surprising: **It's clear that many families are not financially prepared for the caregiving proposition or the financial impact it will have.** Less than half (44%) of care recipients have retirement savings, and only 11% have long-term care insurance. While 38% of seniors are responsible for their own financial expenses, 27% of caregivers say they are the sole person responsible for covering the financial costs of the loved one they are caring for; meanwhile, 28% of caregivers contribute to their loved ones' financial costs along with other people.

Regardless of whether or not they have power of attorney over their loved one's financial decisions, approximately 73% of respondents are very or extremely familiar with their loved one's financial situation. In the instances when caregivers are not familiar with their loved one's finances, it's often because:

- They are not the primary decision-makers for their loved one's financial issues (55% of the time).
- They do not have power of attorney (36%).
- In addition, 35% of respondents say they're not in-the-know because finances are sensitive subjects in the relationship.

Often, the care recipients' finances are used to pay for various forms of their care. To make caregiving financially feasible, family caregivers typically use various income sources from the loved one who's receiving

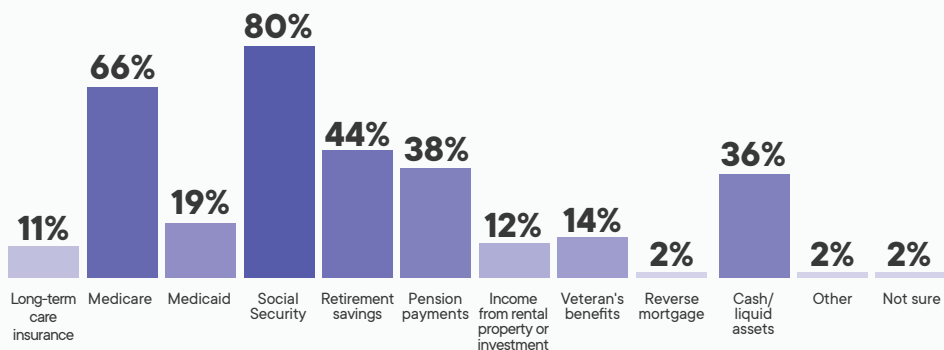
care: 80% use the care recipient's Social Security payments; 66% rely on Medicare (though not for long-term care, which isn't covered by Medicare); 44% use their loved one's retirement savings; more than a third (38%) use their loved one's pension payments; and 36% rely on their loved one's cash or liquid assets.

INSIGHT

A relatively small proportion of caregivers is caring for someone with a high annual income.

Only 8% of care recipients have an annual income of \$100,000 or more and 69% bring in less than \$75,000 per year. One in three people being cared for (32%) earn less than \$25,000 per year.

Does the person you care for have any of the following income sources that helps with the cost of their care?



If the care recipient doesn't have the money to finance his or her care, family caregivers sometimes use their own money to pay for care. One in five caregivers has dipped into his or her own personal savings to pay for their loved ones' caregiving expenses. And 10% have drawn from their own retirement savings to pay for their senior's care. To afford care for their senior loved ones, family caregivers have had to make sacrifices: More than three-quarters (81%) have cut back on trips or vacations; 80% have decreased their dining out; 24% have reduced their personal spending; 22% of caregivers have drawn from their personal savings; 17% have taken paid time off from work; 15% have reduced spending on extra-curricular activities for their children; and 12% have taken unpaid time off from work to afford care.

Financial expectations vs. reality

Another example of caregivers being unprepared financially: **For many caregivers there's a gap between how much they expected to pay out of pocket for caregiving and how much they actually pay.** For 32% of caregivers, the care expenses exceed their expectations. About half of caregivers expected to spend less than \$100 per month or nothing at all out of pocket, 24% expected to spend \$100 to \$499 per month, and 13% expected to pay more than \$1,000 per month in caregiving expenses. For 45% of respondents, the actual costs are in line with what they expected when they first started the caregiving arrangement.

Here's the reality of what caregivers spent:


- Caregivers typically spend between \$100 and \$1,000 per month for care of their loved one, with up to \$500 being out of pocket.
- 76% spend less than \$500 per month (or less than \$6,000 per year).

INSIGHT

The proportion of out-of-pocket expenses to the caregiver's household income varies significantly—from 24% among those with a household income less than \$25,000 to 3% among those whose household income is \$200,000 or higher.

What this means is: The burden of out-of-pocket expenses is much heavier for family caregivers on the lower end of the economic spectrum. Not surprisingly, the average total monthly cost of care and out-of-pocket expenses increase as the caregiver's household income goes up (note: this information is based on respondents' self-reported income levels).

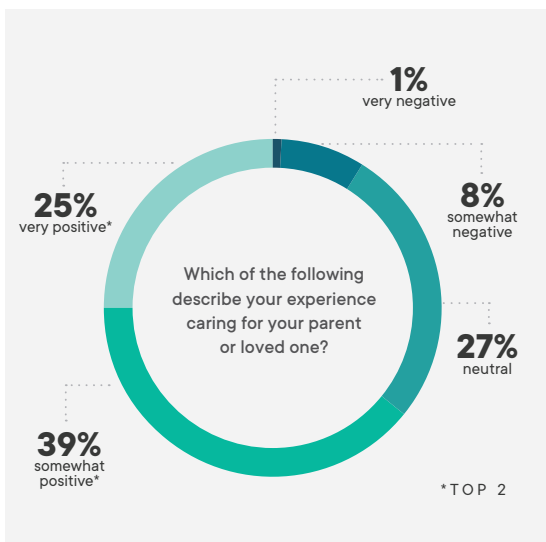
The more dependent a loved one is on their caregiver, the higher out-of-pocket spending tends to be for the caregiver. The more hours per week caregivers spend caring for their loved ones, the higher out-of-pocket spending tends to be, as well. On the other hand, the farther away caregivers live from their loved ones, the less money they spend out of pocket.

A photograph of a young Black woman with a joyful expression, wearing a floral patterned top and gold hoop earrings, leaning over and hugging an older Black man. The man has a grey beard, wears glasses, and a brown button-down shirt. They are both smiling. The background consists of vertical orange and white stripes. In the foreground, a glass of water and a bottle are partially visible, slightly out of focus.

Caregiving has ripple
effects on the quality of
life of everyone involved

LIFE IMPACTS: **THE GOOD** **THE BAD** **THE NEUTRAL**

For better or worse, caregiving has substantial ripple effects on the quality of life and well-being of everyone involved, and a variety of factors can affect whether these impacts are positive, negative or neutral. These include where the loved one is living, the number of hours per week the care recipient spends with the respondent, and how dependent the care recipient is on the caregiver, among others. On the upside, most respondents (64%) consider their personal experience caring for their loved one somewhat or very positive and 62% perceive that their loved ones are happy with the care situation.



Indeed, there's a high correlation between a caregiver's positive experience and the loved one's happiness level.

Caregivers are slightly more likely to have had a positive caregiving experience if they paid for in-home care and if they live close to their loved one (less than an hour away). Perhaps this is because they have less of a time burden and less driving to do as part of the caregiving experience, though this merits further investigation.

On the other hand, nearly one in five caregivers (19%) say their loved one is very or somewhat unhappy with the current care situation: These care recipients are often highly dependent on their caregivers (36%), live in a nursing home, long-term care, or assisted living facility (25%), live more than two hours away from the respondent (22%), and have a monthly care cost of more than \$2,500 (21%).

INSIGHT

Caregivers who believe their loved one is unhappy in their current care situation also indicate that their personal experience caring for their loved one has been negative and has had a negative effect on their relationship with their loved one.


The ripple effects don't stop there, because the caregiving relationship can have an impact on other relationships in the caregiver's life. Thirteen percent of caregivers say that caring for their loved one has had a negative effect on their relationship with their spouse/significant other and 13% say it has on their siblings; 7% say the caregiving situation has had negative repercussions for their children, and 12% say it has with other family members.

Outside the family circle, 10% of respondents who work full-time and 16% of those who are self-employed say their caregiving situation has had negative effects on their professional relationships; meanwhile, 9% of caregivers say their caregiving experience has had a negative impact on their friends. Surprisingly, 28% of caregivers say that caring for their loved one has had a positive impact on their professional relationships.

Driving frustrations

Driving is a big issue in the caregiving equation. Family caregivers report that only 15% of their senior loved ones are driving themselves; as a result, 52% of caregivers are the primary drivers when their loved ones need to travel to appointments or to meet friends. The more hours people spend as caregivers, the more likely they are to be the primary driver for their loved ones: Caregivers who spend more than 20 hours per week caring for their loved ones are more than twice as likely to be the primary drivers for their loved ones, compared to those who spend five hours or less per week as caregivers.

The survey found that the use of technology for various services appears to increase the happiness of the loved one and the experience for their caregivers. And yet only 2% of caregivers report that their loved ones primarily use rideshare services (such as Uber or Lyft) or taxis to travel to appointments or meet friends, and only 6% are using rideshare services at all. Just 11% of respondents say they use grocery delivery like Peapod or Amazon, and 9% say they've used tech-enabled laundry services like Fluff and Fold. In fact, 57% of respondents indicate that they're using none of these services to help improve their loved ones' lives.



The stress of caregiving can
be mitigated by proactive
planning, communication
and information

RECOMMENDATIONS

Many family caregivers are caught off guard by the financial, emotional and logistical demands of caregiving. While it's no surprise that caregiving comes with its share of burdens, the stress can be mitigated by proactive planning, communication and information. In addition, understanding how to access and pay for care can help families manage the numerous challenges associated with caregiving. Family caregivers are often not aware of the array of resources and services offered by local and national organizations such as Area Agencies on Aging, Councils on Aging, the Alzheimer's Association and other non-biased sources of information and support. More should be done within the healthcare system, workplace and public policy to identify, inform and support family caregivers who serve as the backbone of our nation's system of long-term care.

Learn about the costs of care

Many people underestimate the steep price tag for long-term care and dip into their own retirement savings to pay for it. Higher levels of care often result in higher out-of-pocket spending. To plan ahead, family caregivers need access to the basics about Medicare, Medicaid, long-term care insurance and veterans' benefits. There are also additional expenses such as co-pays, transportation, legal assistance and medical supplies. Learning about the costs of care requires advanced planning. Providing valuable and actionable information to family caregivers through trusted sources such as health care settings, the workplace, insurers, financial institutions and other channels may help caregivers be more prepared and make better choices.

Seek information and guidance to address difficult topics

Family caregivers often avoid thorny issues such as health status, finances, end-of-life care and driving, which can trigger emotional land-mines. But ignoring crucial topics usually makes things worse. Discussing issues proactively allows caregivers to make informed decisions and offer meaningful support. In order to do so, caregivers need access to objective information about what steps to take. For example, the [AARP Driver Safety Program](#) offers online and classroom refresher courses for drivers over the age of fifty. A website called [The Conversation Project](#) can help caregivers break down barriers around end-of-life care to better understand and honor their loved one's

wishes. The [Caregiver Action Network](#) provides disease-specific information, a caregiver toolbox and educational videos addressing common caregiving challenges.

In-home care can help

Hiring in-home caregivers can ease the burden for family caregivers and help older adults age in place. There are obstacles, however, such as cost, resistance to help, caregiver turnover and finding the right fit. It's essential to match a hired caregivers' qualifications, experience and personality with the needs of the family member receiving care. Online platforms like Care.com have emerged to provide families with access to caregivers at lower costs than traditional in-home care agencies. But most experts warn that, as the population ages, there will not be enough professional caregivers to meet the growing demand for non-medical care. And, while some states have adopted programs to offset the cost of in-home care for low-income older adults and persons with disabilities, these programs have limited reach. More needs to be done to address the looming caregiver shortage to ensure access to affordable, high-quality and much-needed in-home care.

Beware of decision fatigue

All too often, one family member is saddled with the lion's share of responsibility and decision-making. This can lead to increased stress on the chief family decision-maker who may be making choices without the necessary information to do so. The assistance of an expert such as a care manager, elder law

attorney, or financial advisor can go a long way in lessening the mental load and guiding family caregivers through the legal, financial and emotional quagmire of caregiving. Free information is also available through local Area Agencies on Aging ([4a.org](#)), the Alzheimer's Association ([alz.org](#)), [Care.com's online community](#) and the Medicare.gov website ([medicare.gov](#)).

Learn about workplace supports

The majority of family caregivers experience some type of workplace disruption and many take time off or leave the workplace entirely. A recent Harvard Business School study found that one third of U.S. workers have left a job due to caregiving responsibilities, and one third of those that left did so to take care of an elderly person with daily living needs. The good news: Employers are increasingly recognizing the importance of supporting their caregiving workforce. It is not only the right thing to do, research shows that it increases employee productivity and engagement. Employees should ask their manager or human resource department about available benefits such as information, resources, backup care and flexibility options—before a crisis erupts.

Caregiving is not a short-term proposition. Planning ahead and seeking support will help family members be better caregivers and often improves outcomes. Thankfully, there are many benefits amid the burdens of this profound life journey.

