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Caregiving in the US

EXECUTIVE SUMMARY

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Executive Summary

Caregiving in the US 2025 presents a comprehensive picture of the growing and evolving landscape of family caregiving. In 2025, 63 million American adults provided ongoing care to adults or children with a medical condition or disability–representing almost one-quarter of all adults in the United States. This is a dramatic increase of 45 percent since *Caregiving in the US* was fielded in 2015. Of these 63 million caregivers, 59 million care for an adult with a complex medical condition or disablity.

Family caregivers include parents, friends, neighbors, and even children, and they span across all ages, races and ethnicities, incomes, and communities. They assist care recipients with basic mobility, personal care, financial management, complex medical tasks, and more. This report describes the critical role family caregivers play in supporting the nation's fractured long-term services and supports system and highlights how policies and practices support this essential work and where gaps persist.

What's New for 2025

The 2025 study builds on the last survey in 2020 with the following improvements:

- Addition of state representative caregiver samples for many states (to be summarized in a separate report to be published in November 2025)
- Inclusion of family caregivers participating in caregiver payment programs, such as through Medicaid home and community-based services self-direction waivers, the Department of Veterans Affairs, and state programs
- Use of a four-question summary measure of caregivers' physical and emotional health, the CDC Healthy Days measure
- Inclusion of an expanded Level of Care Index that includes objective and subjective measures of the caregiving experience

Key Findings

Today, roughly one in four American adults (24 percent) is a family caregiver. In addition, 59 million caregivers report caring for adults ages 18 and older, and 4 million report caring for a child under age 18 with an illness or disability. The detailed analysis of this report focuses on the experiences, living situations, and needs of the 59 million family caregivers of adults.

Table 1. Estimated Number of Family Caregivers and Prevalence of Family Caregiving by Age of Care Recipient, Trend 2015–2025

Types of Care Recipients	2015	2020	2025
Total Family Caregivers *(of adults or children with medical conditions or disabilities)*	43.5 million *(prevalance: 18.2%)*	53.0 million *(prevalence: 21.3%↑)*	63.0 million *(prevalence: 24.0%↑)*
Family Caregivers of Adults Age 18+	39.8 million *(prevalence: 16.6%)*	47.9 million *(prevalence: 19.2%↑)*	59.0 million *(prevalence: 22.5%↑)*

↑↓ *Significantly higher or lower than prior wave.*

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Who the caregivers are. The average caregiver is 51 years old. Women still account for the majority of caregivers (61 percent), and 61 percent of all caregivers identify as non-Hispanic white individuals. Latino/Hispanic caregivers represent 16 percent; African American/Black caregivers 13 percent; and Asian American, Native Hawaiian, and Pacific Islander (AANHPI) caregivers 6 percent. Twenty percent of caregivers live in rural areas, and 24 percent of family caregivers support more than one care recipient. Most are caring for relatives, especially parents or spouses, but 11 percent are caring for nonrelatives such as friends or neighbors. Older caregivers tend to care for spouses, whereas younger ones are more likely to care for older generations.

The care recipients. Care recipients themselves are mostly older adults; nearly half are age 75 or older. Most of these older adults face multiple chronic health conditions. Common primary conditions include age-related decline, Alzheimer's or other dementias, mobility limitations, cancer, and postsurgical recovery. Cognitive issues are prevalent: 27 percent of caregivers report that their care recipient has Alzheimer's, dementia, or another memory-related impairment. Caregivers under 50 are more likely to manage short-term or mental health conditions, whereas older caregivers typically support those with long-term physical health issues. These patterns highlight how the caregiving trajectory differs across the lifespan.

Living arrangements. Most caregivers live with their care recipient (40 percent) or nearby (35 percent), and proximity plays a major role in the intensity and frequency of care provided. Caregivers who live with care recipients provide more care hours and use help less often, whether paid or unpaid, than caregivers who live apart from their care recipients. Lower-income caregivers, men, LGBTQ+ individuals, and caregivers of color are more likely to live with the person they care for. Among caregivers living with care recipients, 22 percent provide more than 21 hours of care weekly. Caregivers who live with their care recipients also less often use either paid (22 percent) or unpaid help (36 percent) than caregivers who live apart from their care recipient.

Among all caregivers, 32 percent use paid help, and 53 percent have unpaid assistance. LGBTQ+ and lower-income caregivers less often have help of any kind. Use of respite care—short-term care that gives caregivers a break from their care responsibilities—is notably low. Although 39 percent of caregivers say respite would be helpful, only 13 percent use it, citing structural and subjective barriers such as lack of trust, shame, or concerns about quality of care.

Nearly one-third of all caregivers care for both an adult with disabilities or complex medical conditions and a child under 18 at home—even more caregivers under age 50 (47 percent) are in this dual role, known as sandwich generation caregiving. African American/Black and Hispanic/Latino caregivers are more often sandwich generation caregivers. Children in a caregiving household may also be care partners. About 4 million children under age 18 assist their families with the care of adults.

What caregivers are doing. Caregiving has become longer term and more intensive. Thirty percent of caregivers provided care for five or more years, a significant increase from 2020. On average, caregivers spend 27 hours per week providing care, and 24 percent provide 40 or more hours per week. Two-thirds of caregivers help with at least one activity of daily living (ADL) like bathing, dressing, toileting, feeding, and mobility. Since 2020, more caregivers are providing some ADL assistance, and more caregivers are providing help with multiple ADLs. Some groups of caregivers are more often engaged in these challenging tasks. Paid family caregivers more often help with any ADLs, whereas more African American/Black and

Hispanic/Latino caregivers assist with multiple ADLs. For many, these tasks are physically difficult—23 percent report struggling with these duties.

Instrumental activities of daily living (IADLs)—such as shopping, managing finances, preparing meals, and handling transportation—are common responsibilities. More caregivers are helping with multiple IADLs than in 2015. Just over 8 in 10 caregivers (84 percent) assist with three or more IADLs. Despite the complexity of ADL and IADL tasks, only 11 percent of caregivers received any formal training to prepare them for these tasks.

Many caregivers also handle medical or nursing tasks such as managing catheters, performing injections, or monitoring vital signs. More than half (55 percent) provide these types of tasks, yet only 22 percent received training for this. Training often comes from nurses or doctors when it is available.

Coordination with health care providers is another common care task: 70 percent of caregivers monitor their recipient's health, 64 percent communicate with providers, and 58 percent advocate on behalf of their care recipient. Certain groups of caregivers are more often helping with care coordination tasks, including female caregivers, African American/Black caregivers, and AANHPI caregivers. Younger caregivers less often communicate with health care professionals (57 percent) or advocate on their care recipient's behalf (52 percent).

Technology use among caregivers is growing. Remote monitoring tools, health tracking software, and assistive devices are becoming more common, especially among younger and female caregivers. Remote monitoring, for example, jumped from 13 percent use in 2020 to 25 percent in 2025. These tools help caregivers stay organized and maintain oversight when they are not physically present, and they are increasingly viewed as essential components of modern caregiving.

Working while caregiving. Seven in ten working-age (ages 18 to 64) caregivers are engaged in paid employment. Balancing work and care responsibilities is challenging. Half of all working caregivers experience work impacts such as arriving late, leaving early, or taking time off to meet caregiving obligations. Working caregivers more often feel isolated (25 percent) and face negative financial impacts, including taking on more debt (22 percent), using up short-term savings (31 percent), and leaving bills unpaid or paying bills late (19 percent).

Access to caregiver-friendly workplace benefits has improved since 2015, but access remains uneven. Salaried workers enjoy better access to telecommuting, paid leave, and employee assistance programs than hourly workers. Additionally, many caregivers hesitate to disclose their role—only 49 percent say their supervisor knows they are a caregiver.

Financial impact of caregiving. Nearly half of caregivers report at least one negative financial impact from their caregiving responsibilities. One-third of caregivers have stopped saving money, and 24 percent have used up short-term savings. Others report taking on more debt, delaying retirement, or even facing housing instability. African American/Black, Hispanic/Latino, younger, and lower-income caregivers more often experience negative financial impacts affecting their savings, debt burden, and ability to pay bills and basic expenses. LGBTQ+ caregivers more often report negative financial impacts related to savings and ability to afford basic expenses.

Over the past decade, more family caregivers (28 percent) have had difficulty finding affordable services for their care recipients, like home health aides, transportation, and meal delivery. Caregivers in rural areas (34 percent) more often have difficulty finding affordable services.

Caregiver health. Caregivers may struggle to maintain their own physical and emotional health while caring for someone else. One in five family caregivers rate their health as fair or poor, and nearly a quarter say they have difficulty caring for themselves. Women, LGBTQ+ caregivers, and those living with their care recipient report the worst impacts. Many caregivers experience high emotional stress (64 percent) and physical strain (45 percent). Feelings of isolation have increased since 2020, with 24 percent of caregivers saying they feel alone. Notably, caregivers who report having no choice in becoming a caregiver—56 percent of all respondents—experience significantly worse mental health outcomes, more days of physical strain, and lower perceived purpose in caregiving.

Despite this, there is resilience and meaning in caregiving. More than half of caregivers say that their role gives them a sense of purpose, and this sense is even stronger among Hispanic/Latino caregivers, lower-income caregivers, and those caring for nonrelatives. Purpose, however, is not a substitute for support.

Policy and program supports. Caregivers report that they would benefit from financial support in the form of tax credits (69 percent), direct payment programs (68 percent), or partially paid leave (55 percent). Lower-income caregivers prefer direct payments, whereas higher-income caregivers tend to favor tax credits. Beyond finances, caregivers seek services like respite care, emotional support, and training from health care professionals. They also want help keeping their loved ones safe and managing complex paperwork. Although nearly half have started planning for their future, many report no concrete plans for the person they are caring for—an area ripe for intervention.

Caregiving in the US 2025 offers a comprehensive look at the state of family caregiving in America. The report reveals a growing and diverse population of caregivers, many of whom are strained, under-supported and often invisible in national conversations about health care, aging, and economic policy. These findings are a springboard for action—for families, policymakers, and all who play a role in developing systems to support and sustain the vital contributions of family caregivers.

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