

Fact Sheet

Women and Long-Term Services and Supports

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Introduction

Women face major challenges as they seek to live with independence and dignity as they age. With longer average life spans and higher rates of disability and chronic health problems than men, most women will need long-term services and supports (LTSS) in their lifetimes.¹ Meanwhile, they often lack sufficient resources to pay for these additional years of greater care. Women are also the primary providers of LTSS, as the vast majority of both paid direct care workers and unpaid family caregivers are women. Women, therefore, are at the center of all aspects of LTSS.

The Need for Long-Term Services and Supports

Women have a longer life expectancy than men, outliving men by about 5 years on average. Women who reach age 65 can expect to live an average of 20.5 more years, and those who reach age 75 an additional 13 years.² Nearly two-thirds of Americans ages 85 and older are women (65 percent).³ With advancing age, disabilities are more prevalent, and the need for LTSS increases.

- Two-thirds (67 percent) of nursing home residents are women.⁴
- About 60 percent of formal (paid) home care, hospice, and adult day service users are women.⁵
- Among people ages 65 and older living in the community, women are significantly more likely than men to need help with one or more activities of daily living, such as eating, bathing, dressing, or getting around inside the home. About 1 in 12 women ages 65 and older, and more than 1 in 5 ages 85 and older, need assistance with daily activities.⁶

The Ability to Pay for Long-Term Services and Supports

Long-term services and supports can be costly. In 2016, the typical annual cost of a private room in a nursing home was about \$92,000; for a shared room, about \$82,000. Costs for home care are about \$20 per hour.⁷ For a typical amount of home care—30 hours per week—that comes to about \$32,000 per year.

Millions of older women cannot afford to pay for LTSS because of low income and limited assets. A major factor affecting income is marital status; married couples have higher incomes than single people.

- More than half (57 percent) of women ages 65 and older are widowed, divorced, separated, or never married, compared with only about 30 percent of men.⁸
- In large part because of the difference in marital status figures for women and men, older women are much more likely to live alone, meaning that more women have no one in their household to help with daily activities. Nearly one-third (32 percent) of women ages 65 and older are living alone, compared with less than one in five men (18 percent).⁹
- For women ages 65 and older and living alone, the median household income was approximately \$22,000 in 2014–15. In contrast, men in that age group who lived alone had a median income of about \$27,000, while householders ages 65 and older not living alone had a median annual income of more than \$52,000.¹⁰



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Women as Care Providers

The overwhelming majority of persons with disabilities live in their homes, receiving assistance from family and friends (as unpaid caregivers). Caregiving responsibilities fall more heavily on women, many of whom are older women with health problems of their own.

Six out of 10 family caregivers are women, according to a 2014 National Alliance for Caregiving (NAC)/AARP survey.¹¹ The national survey reported the following:¹²

- One in three female caregivers provide more than 20 hours of care per week.
- Twenty percent of female caregivers report high levels of physical strain, and 41 percent report high levels of emotional stress as a result of caregiving.
- Sixty percent of female caregivers who were employed had to make sacrifices at work

to accommodate caregiving responsibilities, including going in to work late or leaving early, working fewer hours, turning down a promotion, losing some benefits, taking a leave of absence, choosing early retirement, or giving up working entirely.

The direct care workforce is also overwhelmingly female. About 88 percent of home health and personal care aides, and about 90 percent of nursing home aides, are women.¹³ These workers tend to have low pay, no benefits, and uneven hours.

The Bottom Line

Long-term services and supports are important for everyone, but for women especially. Women are a clear majority of LTSS users, paid providers, and unpaid family caregivers, and have lower incomes and greater likelihood of living alone.

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- 2 National Center for Health Statistics. Health, United States, 2014, data year 2013, table 16. Hyattsville, MD: National Center for Health Statistics. 2015.
- 3 US Census Bureau, Population Division, "Annual Estimates of the Resident Population for Selected Age Groups by Sex for the United States: April 1, 2010 to July 1, 2014, data year 2014," 2015. Retrieved from https://factfinder.census.gov/faces/tableservices/jsf/pages/productview.xhtml?pid=PEP_2015_PEPAGESEX&prodType=table.
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- 5 Ibid.
- 6 National Center for Health Statistics. Early release of selected estimates based on data from the National Health Interview Survey, January–September 2015, data table for figure 12.2. Hyattsville, MD: National Center for Health Statistics. 2016.
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- 8 AARP Public Policy Institute calculations based on US Census Bureau. (2015). American Factfinder, 2015 American Community Survey 1-year estimates, table B12002. Retrieved from https://factfinder.census.gov/faces/tableservices/jsf/pages/productview.xhtml?pid=ACS_15_1YR_B12002&prodType=table.
- 9 AARP Public Policy Institute calculations based on US Census Bureau, Population Division, "Annual Estimates" and US Census Bureau. (2015). American Factfinder, 2015 American Community Survey 1-year estimates, table B11010. Retrieved from https://factfinder.census.gov/faces/tableservices/jsf/pages/productview.xhtml?pid=ACS_15_1YR_B11010&prodType=table.
- 10 US Census Bureau. (2015). American Factfinder, 2015 American Community Survey 1-year estimates, table B19215. Retrieved from https://factfinder.census.gov/faces/tableservices/jsf/pages/productview.xhtml?pid=ACS_15_1YR_B19215&prodType=table.
- 11 NAC and AARP Public Policy Institute, *Caregiving in the U.S.* (Bethesda, MD: NAC; Washington, DC: AARP Public Policy Institute, 2015).
- 12 AARP Public Policy Institute calculations based on NAC and AARP Public Policy Institute, *Caregiving in the U.S.*, public use survey data.
- 13 AARP Public Policy Institute calculations based on US Census Bureau, 2015 American Community Survey (ACS) Public Use Microdata Sample (PUMS).

Fact Sheet 451, April 2017

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