

# AARP Oklahoma Caregiving Survey: The Family Caregiver Profile

Six in ten registered voters ages 40 and older in Oklahoma (60%) are currently providing care to an adult loved one or have previously provided such care.

**In our survey, a family caregiver in Oklahoma, currently caring for an adult loved one, is a woman (67%), who is married (72%), is 60 years of age, has graduated from college with at least a two-year degree (60%), and has a household income under \$60,000 (57%).** Four in ten of these current caregivers are employed (40%).

In addition to providing care to their loved ones, over one in four current caregivers (26%) are also caring for their children. About one in six (16%) are caring for children 18 and younger who live with them, seven percent are caring for children 19 and over living with them, and three percent are caring for both younger and older children living with them.

Current caregivers are providing care to loved ones who are most likely over 80 years of age. In fact, the median age of the person they are caring for is 81 years old. Most current caregivers rate their health as excellent, very good, or good (77%), but twenty-one percent rate it as fair or poor.

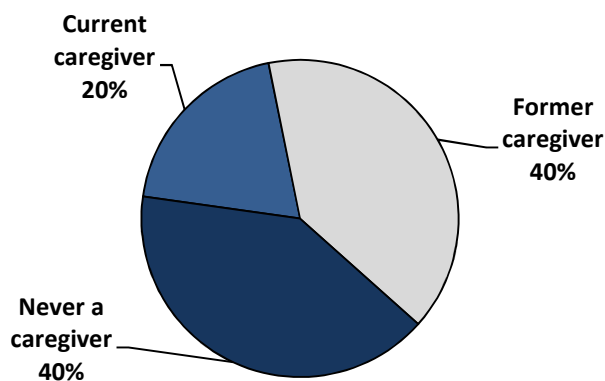
## Caregiving Activities

Current and former caregivers provide significant amounts of care to their loved ones. Most caregivers had been caring for their loved ones for at least one year (72%), and provided over 20 hours of care each week (51%). Most caregivers helped their loved ones by assisting with activities of daily living. Over half assisted with bathing and dressing – and six in ten current caregivers say they do this everyday (61%). Seven in ten caregivers oversaw medications – with six in ten current caregivers doing this everyday (61%). Six in ten caregivers were responsible for medical or nursing tasks – with half of current caregivers doing this everyday (55%).

Over eight in ten caregivers provided transportation to appointments, and most of these caregivers drove their loved ones to medical appointments (90%).

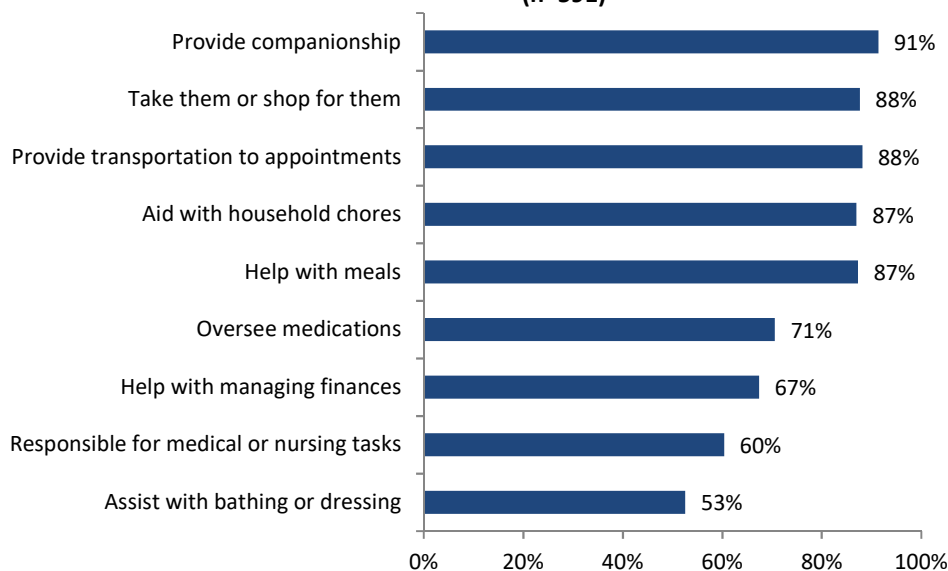
Over eight in ten caregivers took their loved ones shopping or shopped for them, helped with household chores, and helped provide meals. Two in three caregivers helped manage the finances of their loved ones. And, nine in ten caregivers provided companionship or engaged socially with their loved ones.

Caregiver Status of Registered Voters Ages 40-Plus in Oklahoma (N=1,000)



Age of Loved Ones	
18-49	4%
50-69	20%
70-79	24%
80+	53%

Caregiving Activities of Current or Former Caregivers (n=591)



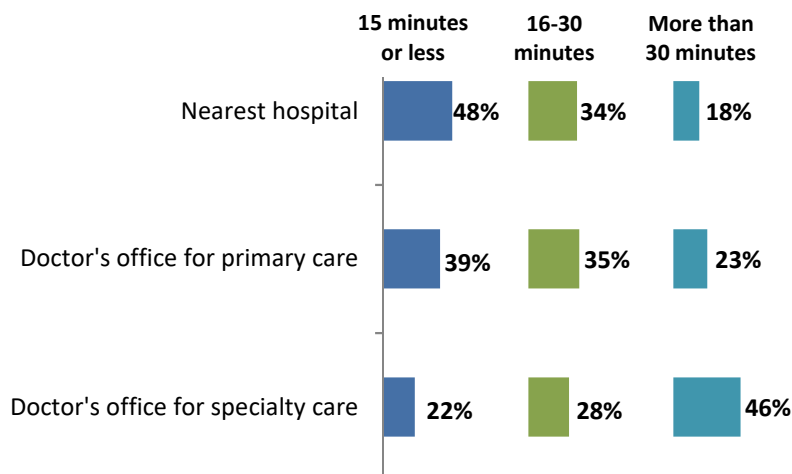
## Distance to Health Care

While most caregivers could get their loved ones to a hospital (81%) or a primary care doctor (74%) in a ½ hour or less; **for a significant minority of caregivers, these times were higher** – it took nearly two in ten caregivers over a ½ hour to get their loved ones to a hospital, and over two in ten this long to get to a primary care doctor.

For caregivers who live in rural areas (n=129 counties under 20,000 population), it takes about three in ten more than a ½ hour to get their loved ones to a hospital (30%) or a primary care doctor (36%).

Caregivers spent the most time getting their loved ones to a doctor for specialty care; it took over four in ten caregivers (46%) more than a ½ hour to get their loved ones to specialty care, and it took over seven in ten rural caregivers (73%) this long to get loved ones to specialty care.

Time Needed by Caregivers to Get Their Loved Ones to Health Care (n=591)

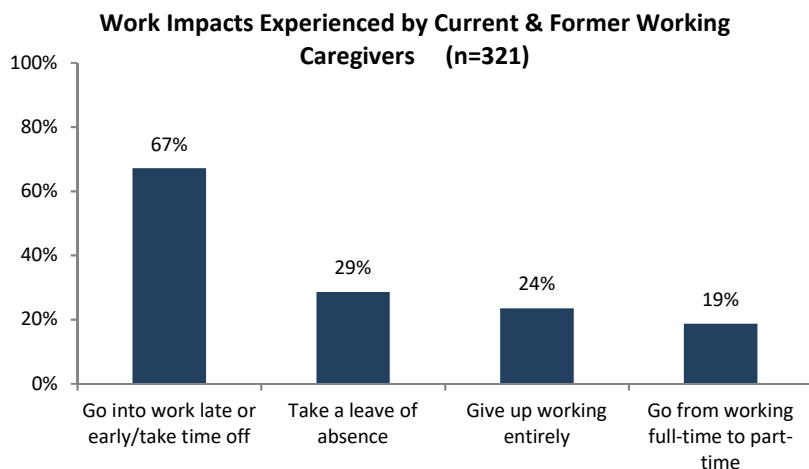


## Working Family Caregivers

Balancing work and family can be challenging, and adding caregiving responsibilities to the mix drastically amplifies this challenge. **Over half of current and former family caregivers (54%) have been employed either full- or part-time while they provided care to a loved one.** When this balance between work and caregiving becomes difficult, caregivers may need to make changes to their work situation. Many working caregivers have had to adjust their work schedules to provide care – two in three say they have gone into work late or early or taken time off to provide care, and about two in ten say they have gone from working full-time to part-time to provide care.

Some working caregivers have stopped working to provide care – either by taking a leave of absence or by giving up work entirely to provide care. In fact, three in four (76%) working caregivers say they have taken at least one of these four actions while providing care.

Working caregivers, who have had to adjust their work schedules to provide care, needed to adjust their schedules at least weekly (27%) or monthly (53%).



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## Caregiving Sacrifices

Over six in ten current and former family caregivers say **they had to use their own money** to help provide care to their loved ones. Four in ten caregivers also reported making changes to their own homes for their loved ones. One in six reported moving into another home to accommodate the loved one in their care. Three in four caregivers (75%) say they have taken at least one of these three actions while providing care.

Caregiver Status	Sacrifices Caregivers Made to Provide Care		
	Use own money to provide care	Make changes to your home	Moved into another home
All Caregivers	64%	40%	16%
Current caregivers	68%	46%	20%
Former caregivers	63%	38%	13%

## Family Caregiver Stress

Over eight in ten current and former caregivers (86%) reported feeling at least one of the nine stressors asked about in this survey.

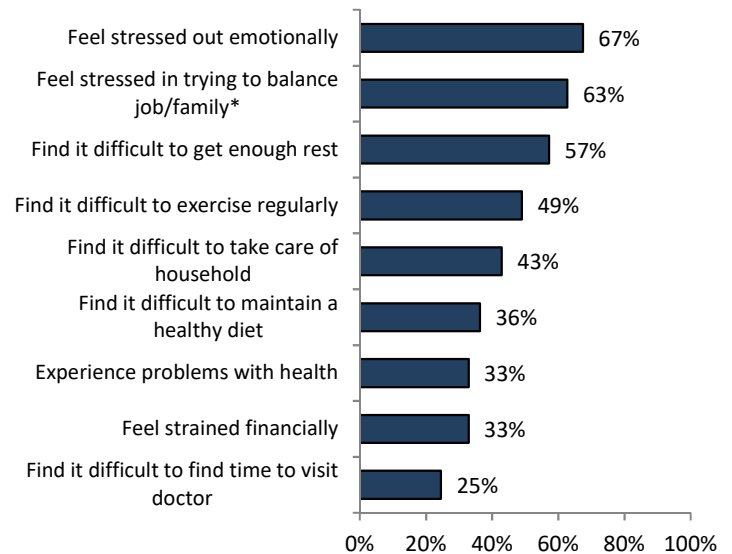
Two in three current and former caregivers felt stressed out emotionally due to caregiving, and six in ten **working** caregivers admitted to feeling stressed in trying to balance their job and their family.

Over half found it difficult to get enough rest, and nearly half found it difficult to exercise regularly. Four in ten found it difficult to maintain their households, and about one in three found it difficult to maintain a healthy diet, experienced problems with their own health, or felt strained financially.

Finally, one in four found it difficult to visit their own doctor.

*\*Asked only of working caregivers*

**The Emotional Stress of Caregiving**  
(Current & Former Caregivers; n=591)



## Support for Respite Care and Tax Credit

Given all the stressors that caregivers face, it is not surprising that **over nine in ten current and former caregivers (92%) support the provision of respite care** – or short-term help from a home health aide so that they can get a break from their caregiving duties. Nine in caregivers (**89%**) **also support a state income tax credit** for family caregivers who incur expenses for the care of a loved one who lives with them.

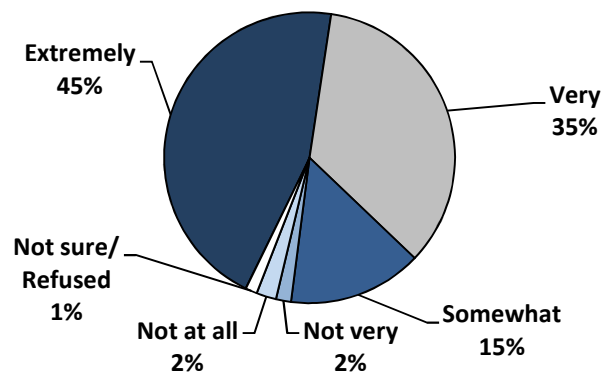


## Support for Caregiving Resources and Training

Eight in ten current and former caregivers 40-plus say that it is **extremely or very important to have more resources and training for family caregivers (80%)**. Less than one in twenty-five say it is not very or not at all important (4%).

The importance of training may be high since the majority of current family caregivers (51%) say that their loved one had been admitted into a hospital while they were providing care during 2017.

**Importance of Having More Resources and Training for Caregivers**  
(Current & Former Caregivers; n=591)



## Living Independently at Home and in the Community

Nine in ten current and former family caregivers (92%) also believe that it is extremely or very important to provide care so that their loved one can live independently in their own home. And if both current and former caregivers or one of their family members needed help, most would prefer to receive that help at home with caregiver assistance (85%).

## **Methodology**

AARP Oklahoma commissioned a telephone survey among 1,000 registered voters age 40-plus in Oklahoma to learn about their experiences with family caregiving. The sample utilized an age-targeted registered voter landline and cell phone list. The sample was obtained from L2 (Labels & Lists). There are 1,132,000 registered voters age 40-plus in Oklahoma. There are approximately 550,000 residents of Oklahoma age 40-plus who are not registered to vote, and there are approximately 7,500 registered voters age 40-plus who did not have a phone number on file that were not included in the sampling of this study. Quotas were used in this study based on age and gender, and were filled based on response to questions in the questionnaire. They were designed to yield a proportional representation of the Oklahoma age 40-plus registered voter population. An oversample of 200 was conducted to increase respondents who live in rural areas of Oklahoma.

Voter files were selected at random from the voter list to be dialed. Precision Opinion asked to speak with the registered voter listed on the file. If that person was unavailable, Precision Opinion asked to speak with another member of the household aged 40-plus who was a registered voter. The interviews averaged 24 minutes in length and were conducted in English. The survey has a margin of sampling error of  $\pm 3.1$  percent.

This report highlights results from 1,000 residents interviewed from September 15, 2017 to October 1, 2017. The data collection and weighting were performed by Precision Opinion. The data is weighted by age and gender to reflect registered voters in Oklahoma age 40-plus, based on the population of registered voters 40-plus from the sample source. The Rural Oversample was weighted by age within gender and to reflect the rural/urban distribution of the total population in Oklahoma.

Percentages reported are rounded. The survey annotation will be made available at [www.aarp.org/research](http://www.aarp.org/research).

AARP is the nation's largest nonprofit, nonpartisan organization dedicated to empowering Americans 50 and older to choose how they live as they age. With nearly 38 million members and offices in every state, the District of Columbia, Puerto Rico, and the U.S. Virgin Islands, AARP works to strengthen communities and advocate for what matters most to families with a focus on health security, financial stability, and personal fulfillment. AARP also works for individuals in the marketplace by sparking new solutions and allowing carefully chosen, high-quality products and services to carry the AARP name. As a trusted source for news and information, AARP produces the nation's largest circulation publications, *AARP The Magazine* and *AARP Bulletin*. To learn more, visit [www.aarp.org](http://www.aarp.org) or follow @AARP and @AARPadvocates on social media.

AARP staff from the Oklahoma State Office, Campaigns, State Advocacy and Strategy Integration (SASI), and AARP Research contributed to the design, implementation, and reporting of this study. Special thanks go to AARP staff including Sean Voskuhl, Melanie Henry, Mashell Sourjohn, and Joy McGill – AARP Oklahoma State Office; Chryste Hall, Scott Musser, William F. Brown III, and Pricilla Hume – Campaigns; Denise Gaines – SASI; and Aisha Bonner and Cheryl Barnes – AARP Research. Please contact Terri Guengerich at 202-434-6306 for more information regarding this survey.

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