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# Rural-Suburban-Urban Differences in Caregiving in the Northeast U.S. Region

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Variations in social and physical infrastructures across the rural-urban interface shape caregivers' experiences and access to resources. In this brief, we describe the caregiving experience for rural, suburban, and urban caregivers in the Northeast region of the U.S., as reported via a regional household survey conducted in 2023. **Urban caregivers were generally younger and more likely to take care of children. Likely as a result, they reported having the most financial struggles and the greatest desire for supports (i.e., financial, educational and other resources). However, rural and suburban caregivers also reported facing significant burdens and wanting more support. In particular, caregivers recommended greater support for childcare, policies to encourage workforce participation, and financial and in-kind assistance.** The following provides greater detail.

## Caregiving in the Northeast

**Caregiving is a common occurrence in most peoples' lives.** Most respondents (81%) have provided care at some point in the past. Over half of respondents (59%) provided care in the past 12 months (Figure 1).

- Rural caregivers were less likely to have provided care in the past 12 months (54%).
- A larger share of urban caregivers (63%) had provided care in the past 12 months.
- These findings may be related to the age structure of rural, suburban, and urban caregivers, which we describe in greater detail below.



Figure 1. Who provided care in the past 12 months?

For the remainder of the brief, we focus on respondents who provided care in the past 12 months.

Across the rural-urban interface, women were the majority of caregivers in the Northeast: about twice as many were women (63%) as were men (37%).

Over half (55%) of caregivers were in their prime working ages (i.e., 25-49), while 20% were ages 50-64, 11% were 65 or older, and 14% were 18-24 years old (Figure 2).

Regarding age structure along the rural-urban interface:

- Rural caregivers tended to be older, with almost half (46%) being 50 years or older.
- Urban caregivers tended to be younger, with the vast majority (81%) being less than 50 years old.

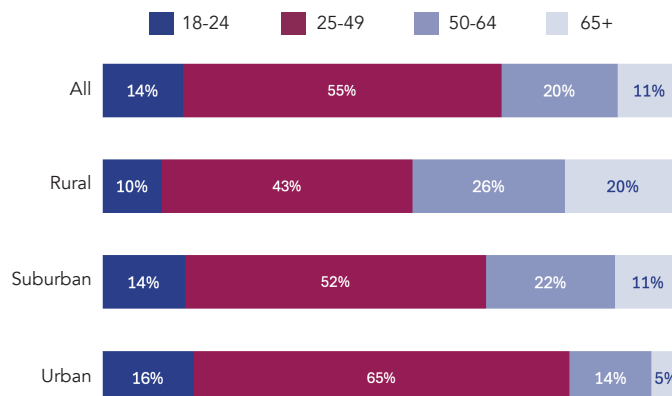


Figure 2. Age profile of caregivers in Northeast

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Respondents were split relatively evenly between caring for just children, just adults, or both children and adults.

- Rural caregivers were less likely to care for both children and adults (27%) than the overall sample.
- Urban caregivers were more likely to care for both children and adults (43%) than the overall sample.

One-fourth (25%) of respondents had a high-income household, while 36% had a middle-income and 39% had a low-income household (Figure 3).

- Rural caregivers were the least affluent, with 18% making over \$100,000.
- Suburban caregivers were the most affluent, with 29% making over \$100,000.

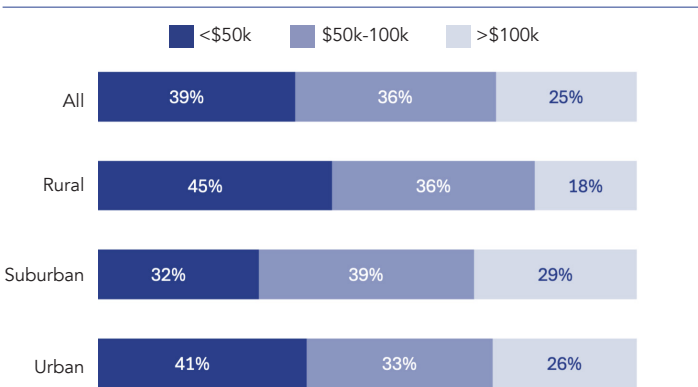


Figure 3. Income profile of caregivers in the Northeast

Most respondents in the Northeast were White (47%), followed by Hispanic (27%) and non-Hispanic people of color (POC) (26%) (Figure 4).

- Rural caregivers were by far the least diverse, with 71% being non-Hispanic white.
- Urban caregivers were the most diverse, with each group comprising about one-third of the population.

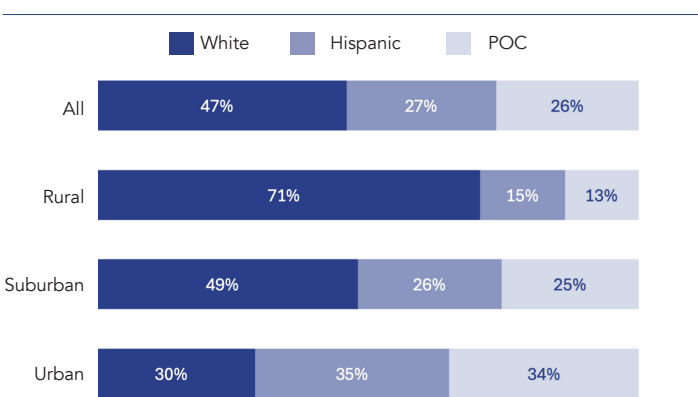


Figure 4. Racial-ethnic profile of Northeast caregivers

Providing care is a multifaceted effort

**Caregiving takes time.** Many caregivers spend more than 20 hours per week on either child- or adult care (35% and 26%, respectively).

- Rural caregivers were more likely to do around-the-clock adult care (13%) than the overall sample (9%).

**Some caregivers commute to provide adult care.** Although one-third (36%) of caregivers lived with their adult care recipient, 20% lived over an hour away. These adult recipients lived primarily in their own home (68%).

- Urban caregivers were simultaneously less likely to co-reside with the adult care recipient (32%) and more likely to live over an hour away (24%).
- Nearly three-quarters (71%) of both rural and urban caregivers of adults provide care in that adult’s own home, while only 62% of suburban caregivers do the same.

**Many caregivers rely on paid services to help with care responsibilities.** Almost three-quarters of caregivers (72%) had out-of-pocket care-related expenses in the last 12 months, with over nearly half (44%) of respondents spending more than \$200 each week (Figure 5).

- Urban caregivers reported paying more for child- and adult care than did other caregivers. They were more likely to pay over \$200 weekly for childcare than were other caregivers (53% vs. 44%).

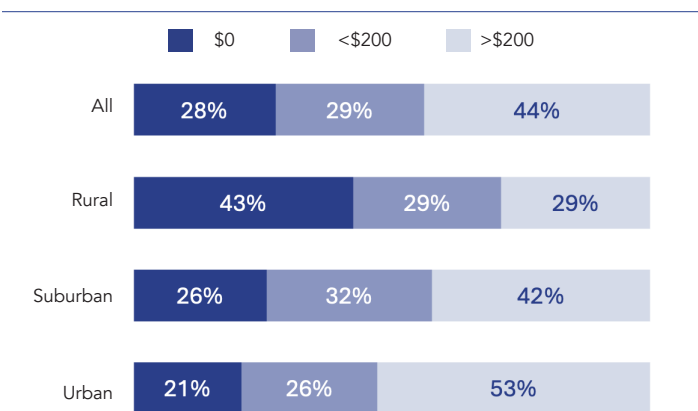


Figure 5. Weekly care expenses

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**Caregiving can be financially difficult.** Over half of caregivers (55%) reported that they had experienced financial difficulties because of caregiving (Figure 6). Of this subset, over one-third (38%) experienced three or more of the difficulties listed. The most common difficulties experienced were taking on more debt (41%), missing or being late paying a bill (38%), and borrowing money from family and friends (31%).

- While urban caregivers were significantly more likely (60%) to report experiencing financial difficulties, a large portion of rural and suburban caregivers (47% and 55%, respectively) reported experiencing financial difficulties.
- Among those who experienced difficulties, rural caregivers were likelier to experience a greater number of challenges, with 42% reporting at least three different types of financial difficulties.

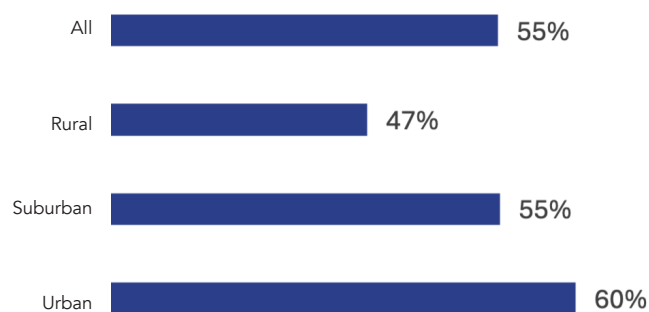


Figure 6. Experience of financial difficulties

Over one-third (37%) of caregivers reported that they had made changes to their employment because of caregiving.

- Suburban and urban caregivers were significantly more likely to have made changes to their employment (39%).

## Care options in the community

Respondents were asked about their satisfaction with the availability, hours, cost, quality, transportation to care, and care recipient-specific options (i.e., summer camp and school), of care options in their community. Nearly one-third (29%) of caregivers reported being unsatisfied with the childcare options in their community, while one-quarter (24%) were unsatisfied with local adult care options. However, there were no differences across the rural-urban interface.

**Respondents often relied on multiple care options.** For childcare, over half of respondents (59%) relied on in-home care by the primary parent, family members or friends, or a babysitter or other childcare provider. A similar number (57%) used out-of-home options such as bringing their child to work, the home of family members, friends or a sitter, licensed childcare providers or pre-Ks, school, before/after school programs, or summer camps/school.

- Urban caregivers were far more likely to rely on in-home care (67%) or out-of-home care (62%) than other caregivers. Over half of suburban caregivers relied on in-home care (55%) or out-of-home care (55%). Nearly half of rural caregivers relied on in-home care (50%) or out-of-home care (48%).

## Solutions and support

**Caregivers rely on many sources of support, but also desire additional supports. Supports can include financial, educational, or other resources.**

**Caregivers often rely on help from social safety net programs.** In the last 12 months, which covered the 2022-2023 period, nearly two-thirds (64%) of caregivers used such programs, which include COVID-19 stimulus checks, Supplemental Nutrition Assistance Program (SNAP), Medicaid, community support, Special Supplemental Nutrition Program for Women, Infants, and Children (WIC), Children's Health Insurance Program (CHIP), and Temporary Assistance for Needy Families (TANF; Figure 7).

- Urban caregivers relied more heavily on such supports than did the general sample, with 73% using safety net supports.
- Use of social safety net supports is still quite high, however, among suburban (60%) and rural (56%) caregivers.

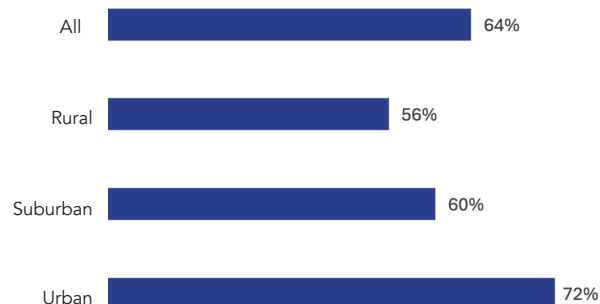


Figure 7. Caregivers' use of social safety net programs

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Most caregivers, or a member of their household, have medical insurance: only 6% do not. Most people receive insurance through their employer (36%) followed by Medicare (28%) or Medicaid/CHIP (26%).

- Urban caregivers were more likely to lack medical insurance than other caregivers, at 8% uninsured. They were also more likely to have Medicaid or CHIP (31%).
- Suburban caregivers were more likely to get their insurance through their employer (36%).
- Rural caregivers were more likely to receive insurance through Medicare (35%)

**Caregivers also reported wanting more resources and support.** Although over three-quarters (78%) reported using caregiving-specific or social safety net supports, many still faced a shortage. Many caregivers reported requesting info for financial help for caregiving expenses (41%) or for help carrying out caregiving duties (35%), using respite services (25%), relying on help from family, friends, and community members (36%), and paying for transportation services (28%).

Caregivers stated that certain benefits would help them be able to enter or return to the workforce (Figure 8). Among these options, around half (52%) of caregivers stated that flexible work hours or the option to telecommute or work from home would help them, while 51% wanted information, referrals, counseling, or an employee assistance program.

- Urban and suburban caregivers were more likely (42% and 39%) than the overall sample (37%) to desire paid leave to be able to enter or return to the workforce.

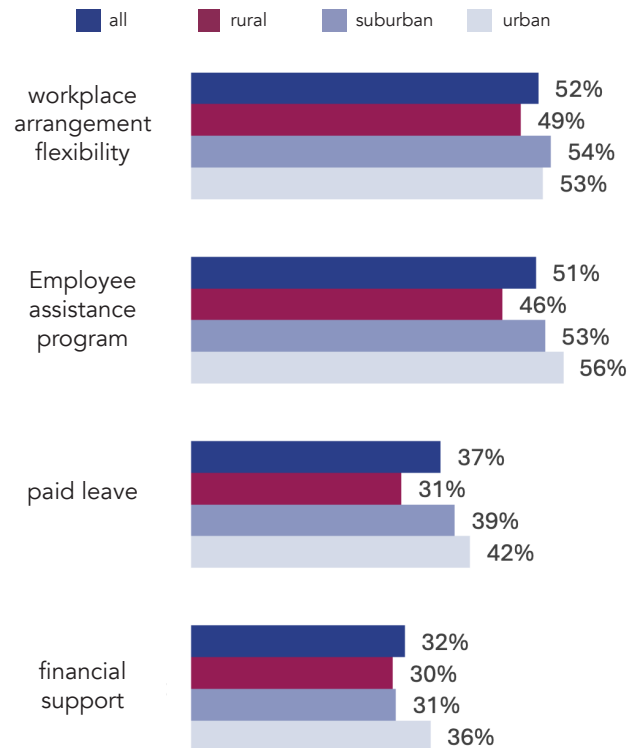


Figure 8. Desired supports to participate in the workforce

**Caregivers expressed interest in additional supports for childcare**, such as more affordable childcare options, including those that match their work schedule or before/after school programs or summer camps.

- 58% of urban caregivers responded that more affordable childcare options would be helpful, compared to 50% of all respondents.
- Across a range of questions, urban caregivers were consistently more likely than other caregivers to respond that supports for childcare would be helpful, with 70% reporting that financial support for respite care for special needs children would be helpful. Notably, 64% of all caregivers also reported that childcare supports would be helpful.

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## About this research

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**Methods and dataset:** The survey was conducted in 2023 with 4,480 responses from the 13 states of the Northeast Region through a Qualtrics online panel and with the use of nested quota sampling to improve representation of certain household types. These quotas were: 62% family and 38% nonfamily, maximum 60% female and minimum 40% male, 70% urban and 30% rural, and minimum 1% American Indian and Alaska Native, 5% Asian, 13% Black or African American, 69% White, and 11% Hispanic or Latino households. 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. The technical documentation, survey codebook, and the open access dataset are available for download here: Inwood, S.; Bednarik, Z.; Becot, F.; Caldera, S.; Henning-Smith, C.; Cohen, S.; Finders, J.; Brown, L. (2024). Northeast Region Household Data. NER-Stat: Caregiving Survey. Purdue University Research Repository. [doi:10.4231/TP7N-8B10](https://doi.org/10.4231/TP7N-8B10).

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