

Valuing the Costs of Family Caregiving: Time and Motion Survey Estimates

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Abstract

Family caregivers represent a key informal support mechanism, with cost estimates of their value varying by the type of person cared for, disease state, or whether care is national or local. This study provides national estimates of the economic value of family caregiving based on national time and motion survey time diary entries. All components of the cost estimate (i.e., time, wages, and prevalence) are derived from the same data source. In 2009, we estimate an annual economic value of over \$335 billion for unpaid national caregiving services using a replacement wage for the value of caregiver time. Further an annual economic value of \$641 billion for unpaid national caregiving is estimated when an opportunity wage value of caregiving time is used. The paper concludes with a discussion of policy implications of our findings.

Introduction

Family caregivers represent a key informal support mechanism. They allow many older persons to live at home in the community when their disability levels and chronic conditions require assistance in maintaining medication and health regimens, as well as assistance in basic activities of daily living. This unpaid labor force creates a product that is valuable, the quantification of which is the focus of this study.

Some refer to this unpaid care as “free care,” while others consider it invaluable. It is essential to quantify the economic value of what seems to be an invaluable family service that we expect families to provide at no charge.

Estimates of the cost of caregiving vary by whether they reflect costs of caring for older disabled persons or not, caring for a particular disease state, or national or local level care. Additionally, costs vary by the measure used to estimate the prevalence of caregiving and the definition of caregiving. The economic value assigned to an hour of the caregiver’s time also influences the magnitude of the cost estimate.

Literature Review

Arno, Levine, and Memmott (1999) derived national estimates of the cost of the cost of caregiving as ranging from \$115 billion to \$288 billion, exceeding national spending in 1997 for both home health care (\$32 billion) and nursing home care (\$83 billion). These estimates were constructed using time data from the 1996 National Family Caregiving Survey (National Alliance for Caregiving, 1997), assuming an average of 17.9 caregiving hours per week; hourly time values ranging from the minimum wage (\$5.15/hr) to the national price of a home health aide (\$11.20); and caregiving prevalence estimates from Survey of Income and Program Participation (SIPP) and the National Survey of Families and Households (NSFH). Prevalence estimates from these later surveys incorporated a definition of caregivers that included persons who were age 15 and older who provided personal assistance to someone with a limitation in activities that was caused by a chronic health condition. In a similar study focusing on state variation in the economic cost of caregiving, Arno (2006) reports a national value of caregiving of \$306 billion, with the highest costs experienced in California (\$36 billion), Texas (\$22 billion), and New York (\$20 billion).

In another estimate of the national cost of caring, LaPlante, Harrington, and Kang (2002) use the Disability Followback Survey of the National Health Interview Survey on Disability (1994-97) to impute unpaid personal assistance costs to adults with disabilities. They find that 11.7 million persons received an average of 30.7 hours of care that had an economic value of \$168 billion in 1996.

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The AARP Public Policy Institute (Houser and Gibson, 2008) has the most recent national estimates of the economic value of family caregiving. They estimate an annual cost of \$375 billion for 2007, assuming that the number of caregivers was about 34 million, 21 weekly hours of caregiving was provided to adults with activity of daily living limitations, and that the value of an hour of caregiving was \$10.10. Prevalence of caregiving is based on previous published estimates, adjusting for annual population growth (John and Schaner, 2005; Mc Kune et al., (2006); Arno, 2006). These estimates use the Survey of Income and Program Participation (SIPP) and the National Survey of Families and Households (NSFH). Annual hours of caregiving are similarly based on averages derived from previous studies, such as National Family Caregiving Survey. The hourly time value is the weighted average of the average market wage rate for a private duty nurse/aide, median wage of a home health aide, and the minimum wage.

The AARP Public Policy Institute updated these estimates in 2009 (Feinberg, Reinhard, Houser, and Choula, 2011). They report an annual caregiving cost of \$450 billion for 2009, assuming that number of caregivers was about 42.1 million, 18.4 weekly hours of caregiving was provided to adults with activity of daily living limitations, and the value of an hour of caregiving was \$11.16. For these estimates, prevalence of caregiving is based on NAC survey of 1480 caregivers, weighted to be a nationally representative sample. Persons were noted as caregivers if they responded yes to the question of whether anyone in the household provided unpaid care to a relative or friend. Weighted data from the Behavioral Risk Factor Surveillance System (BRFSS) was also used to assess caregiving. Persons were that asked about caregiving provided in the last month. Annual hours of caregiving are similarly based on the same two surveys, but since BRFSS did not have state specific data for all states, a single value was used for all states. The hourly time value was estimated at the state level as the weighted average of . is the weighted average of the average market wage rate for a private home health aide, median wage of a home health aide, and the state minimum wage.

Formal and informal caregiving costs, with hours of care valued at the cost of replacement were \$64,741 per capita for community-residing and \$71,149 for institutionalized California residents in 1998 (Fox, Kohatsu, Max, and Arnsberger, 2001). In contrast, using multi-site data for 1200 family caregivers enrolled in the Resources for Enhancing Alzheimer's Caregiver Health (REACH) and a replacement wage rate approach, Harrow et al., (2004) report \$23, 436 of informal caregiving costs.

One estimate of annual per capita cost of caregiving for cancer patients indicates a cost of \$4,200 for patients receiving recent treatments and \$2,900 for those with a history of treatment (Hayman, et al., 2001). The respective caregiving hours are 10 and 6.8, and the value of an hour of caregiving time is \$8.17 per hour (the value of a home health aide in 1998). The data source for these estimates is the 1993 wave of the Asset and Health Dynamics (AHEAD) survey, with care recipients residing in the community and age 70 or older. In another study of caregivers for persons who survived cancer two years post diagnosis, Yarbrough and Kim (2009) estimate that caregivers provide 8.3 hours of care per day at an annual cost of \$47,710 (median wage of \$16.28). However, cost of caregiving varies by type of cancer, with lung cancer the highest at \$75,702 and breast cancer the lowest at \$38,334. The data for this study are from the American Cancer Society's Quality of Life Survey, with interviews of caregivers who live in Alabama, Connecticut, Iowa, Idaho, Minnesota, New Jersey, Ohio, Pennsylvania, Rhode Island, South Carolina, and Wyoming. Using a cross-sectional survey of lung and colorectal cancer patients, van Houtven, et al., (2010) estimate costs of \$7,028, \$19,701, and \$14,234, respectively, for caregivers of patients in first year of diagnosis who survive at least six months, patients who have survived one year and were not within six months of death, and patients who were within six months of death.

Several other studies use the 1993 AHEAD survey to develop estimates of the cost of informal caregiving. Langa, Chernew, Kabeto et al.,(2001) report annual per person cost of dementia caregiving of \$3,600 for mild dementia, \$7,420 for moderate dementia, and \$17,700 for severe dementia, with respective caregiving hours of 8.5, 17.4, and 41.5. Their national cost estimate for dementia care is \$18 billion. All estimates use the time value of a home health aide (\$8.20) as the time value of the caregiver. For chronic lung disease patients, the 1993 AHEAD generates estimates of \$2,200 per person, and a national estimate of \$2.4 billion (Langa, Valenstein, and Flaherty, 2002). In contrast, estimates of cost of caregiving for persons with symptoms of depression total \$600 per person for elderly care recipients with mild depressive symptoms and \$1330 per person for those with 4-8 depressive symptoms; the national annual estimate of caregiving cost for elderly with depressive symptoms is \$9 billion Langa, et al., (2004).

Moore, Zhu, and Clipp (2001) prepare national estimates of informal costs for dementia care using the first wave of the National Longitudinal Caregiver Study. This data base includes caregivers for elderly male veterans with Alzheimer's or vascular dementia. Valuing the time of caregivers with the average state wage of a home health aide engaged in various care activities, and also by using a predicted wage, the authors report a cost of informal

caregiving of \$18,385 per patient. This includes \$6,295 of direct costs of caregiving and an indirect cost of lost time from work of \$10,709.

This study provides national estimates of the economic value of family caregiving. Its contribution is unique in that it is the first time caregiving cost estimates have been derived based on national time and motion survey time diary entries. Additionally, the study reports national cost of caregiving such that all components of the cost estimate (i.e., time, wages, prevalence) are derived from the same data source. We report the economic value of caregiving using the opportunity wage as the time value, and contrast these estimates with those based on a replacement cost value. We report the economic value of caregiving separately for men and women and for whites and blacks. The paper concludes with a discussion of the policy implications of our findings.

Methods

Theoretical Focus

The theoretical focus of this paper is on the economics of household production. Family caregiving is a household production activity that sometimes substitutes for and sometimes complements formal medical services provided by health care institutions.

The key question posed by using the economics of household production as the conceptual framework is how do you quantify the dollar value of a unit of caregiving time? Do you use a replacement value or do you use an opportunity cost measure? You can value the caregiver's time based on replacement cost, i.e., the market price of hiring someone else to provide the same services that the caregiver provides, such as the hourly cost of a home health aide. However, the wage of a home health aide reflects the value of the last hour of that worker's time, which may not be the same as the value of an hour of the caregiver's time (White-Means and Chollet, 1996). Alternatively, by using an opportunity wage, the market value of the caregiver's time, the measure of the time value is the value of the last hour of the caregiver's time. Previous research in assessing the value of housewives' time has documented that market replacement cost measures significantly underestimate the value of housewife time (Zick and Bryant, 1983).

Data

The data for this study are the 2009 American Time Use Survey (ATUS). The survey was designed to produce nationally representative estimates of the U.S. population's time use. It is the only federal survey providing data on the full range of nonmarket activities that the population engages in. Survey respondents are a subsample of the population interviewed for the Current Population Survey, the monthly national survey of households sponsored by the Bureau of Census for the Bureau of Labor Statistics and designed to document patterns of labor force participation and unemployment.

The ATUS estimates of time use are based on data reported in time diaries. It captures detailed information on the types of caregiving activities and their associated time allocation. Caregiving time within one's own home and outside of the home is reported. For both household and nonhousehold adults receiving caregiving services, activities of daily living (ADL) care such as physical care, providing medical care, waiting associated with caring are recorded. The documentation of instrumental activities of daily living (IADL) caregiving differs slightly for within household and nonhousehold caregiving. The IADL activities for within household caregiving includes helping with computers, taxes, shopping, and errands; organization and planning activities; and transportation and waiting associated with providing IADL care. Additional IADL caregiving activities are recorded for nonhousehold caregiving. These include helping with housework, laundry, cooking, house and lawn maintenance and repair, animal and pet care assistance, and vehicle and appliance maintenance and repair.

For the analysis reported in this paper, we document caregiving prevalence (defined as providing care for other household adults, help for household adults, care for other non-household adults, or help for non-household adults) for a subsample of persons who are younger than age 65 and who report making a time commitment/allocation to ADL and/or IADL care to adults who live with and/or who reside outside of the home. Activities associated with providing care are medically related activities, while activities associated with providing help are other types of essential care activities that allow care recipients to maintain their independence and/or delay possible institutionalization. Cost of caregiving estimates are derived for caregivers in 2009.

Developing estimates of the cost of caregiving from ATUS has several advantages. First, prevalence, caregiving hours, and the value of time can be derived from the same source, for the same population. Additionally, caregiving time activities that are based on time diaries provide a more accurate estimate of the time allocated to informal support because they don't rely on recall that exceeds a few days. Further, by using time diaries it is not

necessary to request that the respondent retrospectively describe what they have done in a typical day or a typical week, which is fraught with measurement error (Gauger, Kane and Kane, 2002).

Valuing the Time of Caregivers

This study assesses the direct cost of adult caregiving. It excludes indirect costs of caregiving due to lost work force hours. Thus, the estimates generated provide a lower bound on the overall cost of caregiving. Cost is calculated as hours of caregiving per year (the sum of the detailed time diary reports of time spent in various caregiving activities) times the number of caregivers engaged in that activity (the count of caregivers from ATUS) times the value of an hour of the caregiving time (either the average wage of caregivers derived from the CPS or the replacement cost, i.e., the national price of a health aide).

In the estimates presented in this paper we use caregiving prevalence data and caregiving hours data from the ATUS. We use two alternative measures of the value of the caregiver's time, the caregiver's hourly wage rate as reported in the ATUS and, for comparison to previous research, the market replacement wage rate. Economic theory suggests that market wage rates are reliable measures of the current opportunity value of an hour of a caregiver's time (White-Means and Chollet, 1996). This is because the caregiver's market wage rate reflects the productive value of the last hour of the caregiver's time. Because time values differ by race and gender, the economic value of caregiving is estimated for men and women and for whites and blacks.

Results

Prevalence of Caregiving

In 2009, the ATUS sample represented 27,027,000 respondents nationally who reported providing some care or help for a household adult. The majority of respondents were women (54%) and white (83%).

Caregiving Activities Based on Time Diaries

Average daily hours committed to caregiving varied by the type of support given. Physical and medical care and other forms of activities of daily living (ADL) assistance to nonhousehold adults had the highest average daily hours (1.27), with ADL care for household adults, and instrumental activities of daily living (IADL) care (e.g., housework, cooking, etc.) for nonhousehold adults, and IADL care for household adults averaging 0.86, 0.75, and 0.42 hours, respectively. It is also interesting to note that despite caregiving activities that average 3 hours per day, ATUS respondents were working an average of 6.4 hours per day, engaged in other income generating activities for 2.4 hours per day, socializing/relaxing about 4.6 hours per day, and partaking in sports for 1.9 hours per day. Caregivers allocated about 1115 hours per year in providing ADL and IADL support to household and nonhousehold adults (Table 1).

Economic Value of Caregiving

Using the replacement wage of \$11.16 for the value of an hour of caregiver time, we estimate that the annual contribution of each caregiver is \$12,446 of unpaid ADL and IADL services to household and nonhousehold adults (Table 1). This yields an economic value nationally of \$335 billion of unpaid caregiving services in 2009. This estimate differs from the AARP estimate because of a much lower estimate of caregiving prevalence.

When we assign the mean wage of caregivers in the ATUS as the economic value of caregiving time, the mean caregiver wage in the ATUS is \$21.33. Using this alternative wage value increases the estimate of the annual contribution of each caregiver to \$23,787 of unpaid ADL and IADL services to household and nonhousehold adults and yields an economic value nationally of over \$641 billion of unpaid caregiving services in 2009 (Table 2). This compares to AARP's 2009 estimate of \$450 billion. Gender and race differences in the value of caregiving exist. The annual value of caregiving per person for men is \$31,982, compared to \$19,711 for women. Similar variations exist for whites and blacks, \$23,733 and \$19,350, respectively. These differences reflect differences in relative wages by gender and race.

Discussion

We learn from this study the value of using time diary reports of caregiving activities to estimate caregiver prevalence and hours. In addition to being more accurate, we are able to discern detailed information about the types of care activities that are performed. Further, we learn that estimates of the cost of caregiving that use replacement market wages vastly underestimate the value of caregiving contributions.

This system of “free” care seems to work in generating essential in-home care for adults, while at the same time helping to reduce cost burdens to state Medicaid programs by reducing or delaying nursing home and hospital care. Houser and Gibson (2008) report that this “free” care is valued at 3.7 times the average state Medicaid expenditure on long-term care. Using the cost of caregiving estimates reported in this paper, the economic value of the human capital contributions of caregivers is about five times that of state Medicaid expenditures on long-term care. Yet tax credits for caregiving, financial subsidies for unpaid leaves from work due to caregiving, and funding for respite care are limited or nonexistent and vary substantially by state of residence. Supplements to Social Security to compensate caregivers for prematurely leaving the laborforce due to caregiving responsibilities do not exist. Thus, the wealth available later in the lives of many caregivers is substantially lower due to engaging in efforts that save the resources of society.

The changing demographic composition of the population, with relatively more older disabled persons and relatively fewer persons potentially available to provide caregiving support, suggest that new strategies are needed. Accurately quantifying the value of caregiving efforts will be vital in determining potential state or federal support that caregivers may receive. Time diary reports of caregiving activities are more accurate and provide detailed information about the types of care activities that are performed. What must be remembered, particularly if caregiver compensation is based on the hourly wage value of time, is that adjustments for race and gender wage inequities may be needed in order to avoid race and gender inequities in caregiver compensation.

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Table 1*Economic Value Analysis on 2009 ATUS (Based on AARP fixed wage \$11.16)*

	Average Hours				
	Total	Male	Female	White	Black
Caring For Household Adults	0.862	0.995	0.767	0.905	0.801
Helping Household Adults	0.424	0.386	0.466	0.459	0.26
Caring For Nonhousehold Adults	1.267	1.789	1.132	1.169	1.688
Helping Nonhousehold Adults	0.751	0.953	0.587	0.782	0.598
Total of Caregiving Activities	3.055	3.882	2.689	3.082	3.022
	Number of Participants (thousands)				
	Total	Male	Female	White	Black
Caring For Household Adults	3,675	1,525	2,150	2,915	494
Helping Household Adults	6,752	3,608	3,143	5,637	601
Caring For Nonhousehold Adults	1,499	306	1,192	1,095	239
Helping Nonhousehold Adults	17,224	7,676	9,548	14,353	2,048
Total of Caregiving Activities	26,956	12,349	14,607	22,310	3,054
	Number of Hours per Year				
	Total	Male	Female	White	Black
Caring For Household Adults	314.63	363.18	279.96	330.33	292.37
Helping Household Adults	154.76	140.89	170.09	167.54	94.90
Caring For Nonhousehold Adults	462.46	652.99	413.18	426.69	616.12
Helping Nonhousehold Adults	274.12	347.85	214.26	285.43	218.27
Total of Caregiving Activities	1115.19	1417.00	981.65	1124.77	1103.17
	Economic Value of Caregiving per person/year				
	Total	Male	Female	White	Black
Caring For Household Adults	\$3,511	\$4,053	\$3,124	\$3,686	\$3,263
Helping Household Adults	\$1,727	\$1,572	\$1,898	\$1,870	\$1,059
Caring For Nonhousehold Adults	\$5,161	\$7,287	\$4,611	\$4,762	\$6,876
Helping Nonhousehold Adults	\$3,059	\$3,882	\$2,391	\$3,185	\$2,436
Total of Caregiving Activities	\$12,446	\$15,814	\$10,955	\$12,552	\$12,311
	Economic Value of Caregiving (Billions)				
	Total	Male	Female	White	Black
Caring For Household Adults	\$12.90	\$6.18	\$6.71	\$10.74	\$1.61
Helping Household Adults	\$11.66	\$5.67	\$5.96	\$10.53	\$0.63
Caring For Nonhousehold Adults	\$7.73	\$2.22	\$5.49	\$5.21	\$1.64
Helping Nonhousehold Adults	\$52.69	\$29.79	\$22.83	\$45.72	\$4.99
Total of Caregiving Activities	\$335.48	\$195.28	\$160.02	\$280.04	\$37.59

Note: Age under 65 only

Table 2*Economic Value Analysis on 2009 ATUS (Based on Weighted Mean Averages)*

	Average Hours				
	Total	Male	Female	White	Black
Caring For Household Adults	0.862	0.995	0.767	0.905	0.801
Helping Household Adults	0.424	0.386	0.466	0.459	0.26
Caring For Nonhousehold Adults	1.267	1.789	1.132	1.169	1.688
Helping Nonhousehold Adults	0.751	0.953	0.587	0.782	0.598
Total of Caregiving Activities	3.055	3.882	2.689	3.082	3.022
	Number of Participants (thousands)				
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Helping Nonhousehold Adults	274.12	347.85	214.26	285.43	218.27
Total of Caregiving Activities	1115.19	1417.00	981.65	1124.77	1103.17
	Economic Value of Caregiving per person/year				
	Total	Male	Female	White	Black
Caring For Household Adults	\$6,711	\$8,197	\$5,621	\$6,970	\$5,128
Helping Household Adults	\$3,301	\$3,180	\$3,415	\$3,535	\$1,665
Caring For Nonhousehold Adults	\$9,864	\$14,738	\$8,297	\$9,003	\$10,807
Helping Nonhousehold Adults	\$5,847	\$7,851	\$4,302	\$6,023	\$3,828
Total of Caregiving Activities	\$23,787	\$31,982	\$19,711	\$23,733	\$19,350
	Economic Value of Caregiving (Billions)				
	Total	Male	Female	White	Black
Caring For Household Adults	\$24.66	\$12.50	\$12.08	\$20.31	\$2.53
Helping Household Adults	\$22.28	\$11.47	\$10.73	\$19.92	\$1.00
Caring For Nonhousehold Adults	\$14.78	\$4.51	\$9.88	\$9.85	\$2.58
Helping Nonhousehold Adults	\$100.70	\$60.26	\$41.07	\$86.44	\$7.84
Total of Caregiving Activities	\$641.20	\$394.94	\$287.92	\$529.47	\$59.09
Weighted Mean Wage in 2009	\$21.33	\$22.57	\$20.08	\$21.10	\$17.54

Note: Age under 65 only