

Paid Family and Medical Leave Supports the Health, Well-Being, and Financial Security of Older Adults and their Caregivers

The United States is one of the only countries in the world that does not provide a national right to paid family and medical leave—a glaring gap in the law that harms older adults.¹ Paid family and medical leave is a critically important aging policy that can provide a lifeline to both older adults in the workforce and those who are not.

Older workers—including many who remain in the workforce out of financial necessity—need access to paid medical leave to manage their own serious health issues, without jeopardizing a job or paycheck. Even for older adults who no longer work, many rely on care from loved ones who are struggling to juggle work and family responsibilities. Paid family and medical leave increases the likelihood that workers can provide care to their family members, which in turn can lead to tangible health benefits for older adults and increase their ability to age in place. Workers who provide unpaid care to older adults also see lower caregiving stress and improved well-being when they can take paid family leave without risking their jobs or financial security.

Thirteen states and Washington D.C. have passed comprehensive paid family and medical leave programs, and the research shows that these statewide paid family and medical leave programs help older adults age in place and lead to tangible health benefits for older adults *and* their caregivers. All workers—regardless of the state they live in—should have the right to paid family and medical leave to care for themselves and their loved ones.

I. Access to Paid Family and Medical Leave Improves the Health and Financial Security of Older Adults in the Workforce

A. In the U.S., older adults are working longer and in positions (including part-time work and self-employment) that are less likely to have access to paid medical leave.

- The American population is growing older, which is increasing the need for paid family and medical leave.² In 2022, for example, older adults (ages 65 and older) made up 17.3% of the population, and by 2040, that share is projected to increase to 22%.³
- As the general population ages, so does the country's workforce; nearly 1 in 5 older adults were employed in 2023, which is nearly double the number of those who were working 35 years ago.⁴ As of 2023, 11.2 million older adults in the U.S. were working or actively seeking employment.⁵
- Older adults are more likely to work part-time, and part-time workers are less likely to have access to short-term disability or paid medical leave for their own serious health conditions. According to data from the U.S. Bureau of Labor Statistics, 48% of full-time private sector workers lack access to short-term disability insurance to take time off when a serious health concern occurs; among part-time private sector workers, 80% lack employer-provided short-term disability or paid medical leave.⁶ This disparity in access to paid medical leave between part-time and full-time workers disproportionately impacts older adults: approximately 38% of working adults age 65 and older worked part time in 2024, compared to approximately 14% of workers ages 55 to 64 and 11% of workers ages 25 to 54.⁷
- A significant portion of self-employed workers—23.5%—are 65 and older.⁸ Most state paid family and medical leave programs offer important support to many of these older adult workers by allowing self-employed individuals to opt-in to the program and receive wage

replacement when they need to take a family or medical leave.⁹ The proposed federal FAMILY Act pending in Congress, which would establish a nationwide right to paid family and medical leave, would also allow self-employed individuals to access this necessary benefit—benefiting a large number of older adult workers.¹⁰

B. As the U.S. workforce gets older and more prone to chronic illness, access to paid medical leave is a vital lifeline.

- The growing number of older adults in the workforce face unique health needs, underscoring their particular need for paid medical leave. In 2022, for example, 24% of adults aged 65 and older rated their health as fair or poor, compared to 19% of those aged 50 to 64.¹¹ According to the Centers for Disease Control and Prevention (CDC), nearly 93% of older adults have at least one chronic health condition, while 79% have two or more.¹² Paid medical leave helps older workers take care of their health without leaving their jobs.¹³
- Some of the most common chronic health conditions for adults 65 and older include diabetes, heart disease, hypertension, and high blood pressure—conditions that can in turn cause or contribute to other serious illnesses, such as stroke and heart attacks.¹⁴ Cancer also presents a major health risk for older adults, with a large proportion of cases occurring in individuals aged 65 and older.¹⁵
- With access to paid medical leave, older adults with chronic conditions—such as cancer, diabetes, and heart disease—can take the time they need to determine a course of treatment, follow through with that treatment, afford treatment, and manage side effects.¹⁶ Without access to sufficient paid medical leave, these workers may have no choice but to forego necessary care or risk their jobs.

C. Access to paid family and medical leave ensures that older adult workers can better maintain their financial security.

- In addition to increased longevity and a number of cultural and health shifts in the U.S., many older adults are working longer than in the past due to increased financial insecurity.¹⁷ Benefits such as health insurance, retirement savings plans, and paid leave for health and caregiving can heavily influence the choices of older workers to remain in the workforce, especially workers of color.¹⁸
- Over 17 million adults aged 65 and older are economically insecure,¹⁹ with older women being more likely than men to live in poverty because of wage discrimination and a history of needing to leave the workforce due to caregiving.²⁰ Therefore, many older adults—and older women in particular—are seeking employment out of financial necessity, while also managing health needs associated with aging. Without paid family and medical leave, however, many older adults in the workforce may have no financial choice but to forego care or leave the workforce altogether.
- With access to paid family and medical leave, older workers can better maintain their financial independence and address their health and caregiving needs without having to leave their jobs or sacrifice a paycheck.

II. Paid family and medical leave decreases nursing home rates and can be an important tool to help more older adults age in place.

- Chronic health conditions can restrict an older adult's ability to carry out daily tasks, potentially leading to a loss of independence and the need for institutional care, in-home assistance, or other long-term support services.²¹

- Paid family and medical leave programs can be an important tool to help aging individuals to “age in place,” or live and age in a community-based dwelling instead of a nursing home.²² Older adults can age in place at their longtime residence or potentially downsize to an apartment, mobile home, or other residence.²³ Aging in place can also include when older adults move in with a family member or friend in order to maintain their independence while benefitting from the supports of co-housing.²⁴ A survey by AARP reports that 75% of adults aged 50 and older want to remain in their current homes as they age.²⁵ This decision to age in place is even stronger among older adults aged 65 and older.²⁶
- When caregivers are able to take paid family leave, older adults are more likely to stay out of nursing homes. In a California study, research found that the implementation of the state’s paid family leave law led to a relative decline of over 11% in the proportion of elderly adults in nursing homes.²⁷ Moreover, AARP reports that 40% of caregivers live with their care recipient and that proximity greatly impacts the quality and frequency of care provided.²⁸

III. Paid family and medical leave programs help workers to better care for their aging loved ones and can reduce the stress of balancing work and caregiving responsibilities. By lowering caregiver stress and increasing family caregiving rates, paid family and medical leave programs also benefit the health and well-being of the older adults who rely on such care.

A. A growing number of American workers provide unpaid care to older adult loved ones.

- In the past decade, the number of family caregivers in the United States has increased by 45 percent.²⁹ Approximately 63 million adults are caring for an adult or child with a disability, with 70% of these individuals—or roughly 44 million Americans—caring for a loved one who is age 65 or older.³⁰ Eldercare includes a wide range of responsibilities, such as helping with grooming, preparing meals, and offering transportation, or simply being present to assist with daily activities when needed by a loved one with a serious health condition.³¹
- Nearly 30% of family caregivers who are providing care to an adult loved one also have children or grandchildren under age 18 living at home.³² These caregivers, often known as the “sandwich generation,” face added care burdens from juggling care of children and adult loved ones at the same time. Black and Latinx individuals are more likely to be members of the “sandwich generation,” with 36% of Black caregivers and 43% of Latinx caregivers providing care to both a child at home and an adult care recipient.³³
- Family caregiving falls disproportionately on women, who comprise more than 60% of unpaid family caregivers.³⁴ Furthermore, older women (ages 55 and older) make up over one-third (35.3%) of all unpaid eldercare providers in the U.S.³⁵
- The number of unpaid family caregivers who are providing care while also balancing employment is striking, with 70% of family caregivers working while also providing such care.³⁶ Among sandwich generation caregivers who are caring for both a child and an adult aged 65 or older, 86% are employed and 72% are employed full-time.³⁷

B. Access to paid family and medical leave can improve the physical, mental, and financial well-being of workers who care for aging loved ones, with research showing disproportionate benefits to low-wage, Black, Latinx, and LGBTQ+ caregivers and their care recipients.

- Often caught between work and personal responsibilities, 67% of employed caregivers reported in a recent survey that it is challenging to balance and manage both their jobs and caregiving responsibilities.³⁸ Paid family and medical leave can help unpaid family caregivers better meet the demands of work and caregiving, with benefits to their own well-being and to the older adults who rely on such care.

- While prioritizing the well-being of those they care for, caregivers often experience strain on their own mental and physical health.³⁹ In AARP's report, nearly one in four family caregivers report feeling alone⁴⁰ and nearly two-thirds of caregivers report feeling moderate or high emotional stress.⁴¹ Additionally, 23% of caregivers report struggling to maintain their own health while caregiving.⁴² Paid family and medical leave can help address the feelings of burnout experienced by caregivers.
- For working caregivers, juggling paid employment and caregiving responsibilities often results in these caregivers arriving late, leaving early, or taking time off from work to provide care.⁴³ Employed family caregivers are more likely than their nonworking counterparts to take on debt, deplete both short-term and long-term savings, and fall behind on or delay paying bills.⁴⁴
- While the federal Family and Medical Leave Act grants eligible caregivers unpaid time off to care for a loved one, many workers are not covered by the law; among those who are eligible for this federal unpaid leave, many cannot afford to go without pay and may not be able to provide the amount or quality of care to their aging loved ones that they want to without a steady source of income.⁴⁵ Furthermore, only 27% of private sector workers in the United States have access to paid family leave to care for another family member.⁴⁶ Without a national law, access to paid family leave as a workplace benefit is a privilege, not a right. Research shows that in 2023, workers earning the highest-wages were ten times more likely to have paid family leave than the lowest-wage workers.⁴⁷
- A nationwide paid family and medical leave program would allow workers of all backgrounds to take paid time off to care for their loved ones with a serious health condition, with disproportionate benefits to many BIPOC and LGBTQ+ caregivers. For example, 66% of Black family caregivers balance work alongside caregiving, compared to 57% of all family caregivers.⁴⁸ Similarly, 66% of LGBTQ+ caregivers work, compared to 59% of non-LGBTQ+ caregivers.⁴⁹ Additionally, AARP found that approximately 1 in 5 family caregivers feel a significant financial strain as a result of providing care to their loved ones, with Black, Latinx, and LGBTQ+ caregivers more often experiencing negative financial impacts from caregiving than other groups.⁵⁰

IV. Inclusive family definitions within paid family and medical leave programs can help older adults get the care they need by their extended and chosen family.

- An increasing number of state paid family and medical leave laws guarantee workers the right to care for a range of relatives—including spouses, domestic partners, children, parents, siblings, grandparents, grandchildren, extended family, and other loved ones for whom they provide care.⁵¹ AARP reports that 89% of family caregivers (18 and older) provide care for a relative, while 11% care for a friend, neighbor, or nonrelative.⁵² Inclusive definitions of family in paid family and medical leave laws and programs have specific benefits to older adults.
- Multigenerational households are growing in popularity, which in turn can increase the incidence of older adults receiving care from family members who live with them. In 2021, about 66.7 million U.S. adults (18 and older) lived in multigenerational households.⁵³ Black and Latinx Americans are more likely than white Americans to say they live in multigenerational households. According to one survey, 45% of Latinx Americans and 33% of Black Americans reported living in a multigenerational household, compared to only 19% of white Americans.⁵⁴
- Thirty-four percent of individuals living in multigenerational households attributed the reason to a need for eldercare, the top reason cited.⁵⁵ According to the National Association of Realtors 2025 Generational Trends report, 25% of homebuyers bought a multigenerational

home to care for the health needs of aging parents.⁵⁶ Among those living in multigenerational households, 79% find it easier to provide the care their family members need.⁵⁷

- While biological or legal family members are assumed to be caregivers to aging adults, LGBTQ+ older adults may have limited family ties due to stigma, rejection, and discrimination.⁵⁸ Instead, LGBTQ+ older adults often rely on support and care through their non-biological chosen family such as close friends, community members, and neighbors.⁵⁹ In a national survey conducted by the Center for American Progress in 2023, 51% of LGBTQ+ people—compared with 36% of non-LGBTQ+ adults—*have relied on* chosen family for health-related support.⁶⁰ Similarly, 58% of LGBTQ+ people *have been relied on* by chosen family to support their health-related needs.⁶¹ Inclusive family definitions in paid family and medical leave programs helps LGBTQ+ older adults—and older adults of all backgrounds—get the care they need.

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³ The Administration for Community Living (ACL), 2023 Profile of Older Americans (May 2024), 3, https://acl.gov/sites/default/files/Profile%20of%20OA/ACL_ProfileOlderAmericans2023_508.pdf.

⁴ Richard Fry & Dana Braga, *Older Workers Are Growing in Number and Earning Higher Wages*, Pew Research Center (December 2023), <https://www.pewresearch.org/social-trends/2023/12/14/older-workers-are-growing-in-number-and-earning-higher-wages/>.

⁵ The Administration for Community Living (ACL), 2023 Profile of Older Americans (May 2024), at 3.

⁶ U.S. Bureau of Labor Statistics, Percentage of private industry workers with access to employer-provided benefits by work status (March 2025), <https://www.bls.gov/charts/employee-benefits/percent-access-benefits-by-work-status.htm#>.

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¹¹ The Administration for Community Living (ACL), 2023 Profile of Older Americans (May 2024), at 17.

¹² Kathleen B. Watson et al., *Trends in Multiple Chronic Conditions Among US Adults, By Life Stage, Behavioral Risk Factor Surveillance System, 2013–2023*, PREVENTING CHRONIC DISEASE 22 (2025), Centers for Disease Control and Prevention, <http://dx.doi.org/10.5888/pcd22.240539>.

¹³ National Partnership for Women & Families, *Older Adults and Family Caregivers Need Paid Family and Medical Leave* (November 2015), <https://nationalpartnership.org/wp-content/uploads/2023/02/older-adults-and-caregivers.pdf>.

¹⁴ National Council on Aging, *The Top 10 Most Common Chronic Conditions in Older Adults* (December 2025), <https://www.ncoa.org/article/the-top-10-most-common-chronic-conditions-in-older-adults/>.

¹⁵ Ramya Prathap et al., *The increasing prevalence of cancer in the elderly: An investigation of epidemiological trends*, AGING MEDICINE (Milton) 7(4), 516-527, (2024), <https://pmc.ncbi.nlm.nih.gov/articles/PMC11369332/>.

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