

Congress of the United States
Washington, DC 20515

April 12, 2022

The Honorable Gene L. Dodaro
Comptroller General
U.S. Government Accountability Office
441 G. St. NW
Washington, DC 20548

Dear Mr. Dodaro:

We write to request the U.S. Government Accountability Office (GAO) conduct a study on minors under 18 years of age serving as a primary or secondary caregiver for a family member, also known as caregiving youth. Many caregiving youth assist parents or other relatives who are also caregiving. These youth face challenges balancing their caregiving responsibilities with their education, mental health, and wellbeing, yet they often do not have access to the resources and services available to adult family caregivers or other vulnerable youth populations, which are already limited. In order to better serve the caregiving youth population, we need more precise data on the actual number of youth in this population, what programs are currently available to them, what challenges they face, and how federal programs can better serve them.

A recent study by the National Alliance for Caregiving and AARP has indicated that there may be as many as three to five million young people in our country serving as a primary or secondary caregiver for a parent, guardian, grandparent, or sibling.¹ However, the actual number of youth in this population remains unknown due to limited data collection, and many families are reluctant to share information on caregiving youth.² Additionally, the ongoing COVID-19 pandemic has increased the number of young people caring for family members. Currently, only two states formally collect data on whether youth are involved in caregiving.³

Anecdotal evidence indicates that many caregiving youth put their own lives, including academic, extracurricular, and social engagements, on hold to provide necessary care for their family members, with potentially long-term consequences for their mental, physical, and emotional health, academic achievement, and future earnings. A 2006 study indicates that a fifth of students who drop out of high school do so to care for a family member.⁴ Yet these youth may

¹ National Alliance for Caregiving and AARP Family Caregiving, *2020 Report: Caregiving In the U.S.*, May 2021.

² National Alliance for Caregiving in Collaboration with United Hospital Fund. (2005). *Young Caregivers in the U.S.* Retrieved from <https://www.caregiving.org/wp-content/uploads/2020/05/youngcaregivers.pdf>.

³ Armstrong-Carter, E, Johnson, C, Belkowitz, J, Siskowski, C, Olson, E. From the Editor Intro for SPR 34.2 “The United States should recognize and support caregiving youth”. *Soc Policy Rep.* 2021; 34: 1– 24. <https://doi.org/10.1002/sop2.14>

⁴ Bridgeland, J.M., DiIulio, J.J., & Burke Morison, K. (2006). *The Silent Epidemic; Perspectives of High School Dropouts*. Civic Enterprises in association with Peter D. Hart Research Associates for the Bill & Melinda Gates Foundation. Retrieved from <http://www.ignitelearning.com/pdf/TheSilentEpidemic3-06FINAL.pdf>.

lack access to support services they need. For instance, existing federal programs administered by the U.S. Department of Health and Human Services (HHS) that provide support to family caregivers are aimed at adults 18 and older, and HHS and U.S. Department of Education programs that support vulnerable children are geared towards specific populations of at-risk youth, such as youth experiencing homelessness or those in the foster care system. Without designated support services, many caregiving youth will continue to prioritize their caregiving obligations at the expense of their own educational, emotional, and financial development.

To help better understand the scope of this problem and explore how federal programs can better support the growing population of caregiving youth, we are writing to request that GAO conduct a study to examine the following issues:

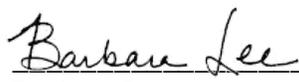
- 1) What is known about the number and characteristics of youth nationwide under the age of 18 that serve as a primary or secondary caregiver to a parent, guardian, or other relative? To what extent has the substance use crisis (including the opioid public health emergency) and the COVID-19 pandemic increased the number of youth caregivers?
- 2) What challenges do youth caregivers face? What additional resources do they need to help them address these challenges?
- 3) To what extent do federal caregiving programs and programs serving vulnerable minors assist caregiving youth, including with educational and mental health supports? How, if at all, could these efforts be expanded? Do federal agencies have existing authority to expand these programs to caregiving youth or would statutory changes be required?
- 4) How does HHS coordinate with other federal and/or state programs to support caregiving youth?

Thank you for your attention to this request. Please direct all official correspondence to Rasheedah Hasan, Chief Clerk, House Education and Labor Committee, at Rasheedah.Hasan@mail.house.gov, and any questions to Tanisha Wilburn, Director of Labor/Health Oversight, House Education and Labor Committee, at Tanisha.Wilburn2@mail.house.gov, Samira Damavandi, Office of Congresswoman Barbara Lee, at Samira.Damavandi@mail.house.gov, and Becca Flikier, Office of Congresswoman Lois Frankel at Becca.Flikier@mail.house.gov.

Sincerely,



Robert C. "Bobby" Scott
Chair
House Committee on
Education & Labor



Barbara Lee
Member of Congress



Lois Frankel
Member of Congress