Caregiver Burden and Its Impact on Patient Outcomes in Home Healthcare

1. Introduction

Caregiver burden—defined as the physical, emotional, and financial strain experienced by those providing care—has a significant impact on patient outcomes in home healthcare settings. Research consistently demonstrates that higher caregiver burden is associated with poorer patient quality of life, increased risk of hospitalization and mortality, and diminished effectiveness of home-based care programs (Kuzuya et al., 2011; Akçoban & Eskimez, 2023; Suksatan et al., 2022; Ng & Wong, 2018; Guerriere et al., 2016; Dufournet et al., 2019; Bidwell et al., 2017; Lindt et al., 2019). For example, studies show that when caregiver burden is high, patients are more likely to experience adverse health events, including increased hospital admissions and even higher mortality rates (Kuzuya et al., 2011; Dufournet et al., 2019). Conversely, interventions that reduce caregiver burden, such as education, psychosocial support, and structured home care programs, can improve both caregiver well-being and patient outcomes, including quality of life and satisfaction with care (Ugur & Erci, 2019; Dağdelen & Zincir, 2024; Ng & Wong, 2018; Farahani et al., 2021; Sato et al., 2024; Schoth et al., 2025). The relationship is complex and bidirectional: patient health status and symptom severity can increase caregiver burden, while high caregiver burden can, in turn, negatively affect patient recovery, adherence, and overall well-being (Akçoban & Eskimez, 2023; Deluga et al., 2018; Nguyen et al., 2024; Bidwell et al., 2017; Driehuis et al., 2024). These findings underscore the importance of addressing caregiver needs as an integral part of home healthcare delivery.

2. Methods

A comprehensive literature search was conducted across over 170 million research papers in Consensus, including sources such as Semantic Scholar and PubMed. The search strategy involved 20 targeted queries grouped into 8 thematic clusters, covering foundational theories, mechanisms, interventions, and critiques related to caregiver burden and patient outcomes in home healthcare. In total, 1,002 papers were identified, 568 were screened, 473 were deemed eligible, and the top 50 most relevant papers were included in this review.

Search Strategy

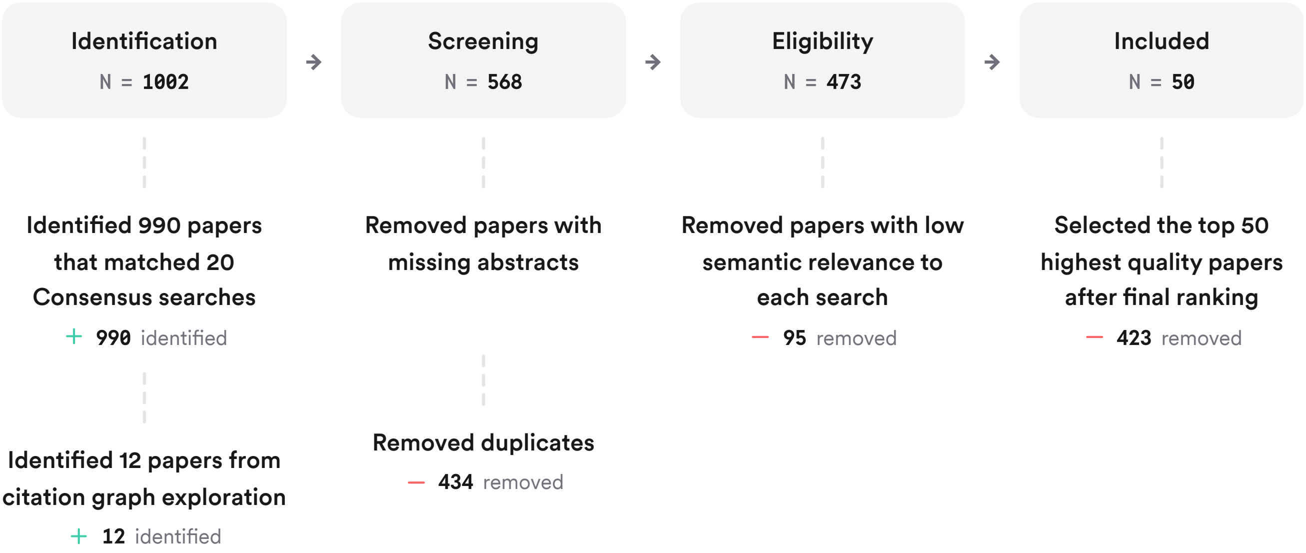

FIGURE 1 Flow diagram of the literature search and selection process.

Eight unique search groups were used to ensure comprehensive coverage of the topic, focusing on both direct and indirect impacts of caregiver burden on patient outcomes.

3. Results

3.1. Association Between Caregiver Burden and Patient Outcomes

Multiple studies demonstrate a strong association between higher caregiver burden and poorer patient outcomes, including lower quality of life, increased hospitalizations, and higher mortality rates (Akçoban & Eskimez, 2023; Kuzuya et al., 2011; Dufournet et al., 2019; Bidwell et al., 2017; Driehuis et al., 2024). For example, a large prospective cohort found that care recipients with highly burdened caregivers had a 1.5-fold increased risk of mortality and hospitalization over three years (Kuzuya et al., 2011). Similarly, a cross-sectional study reported a significant negative correlation between caregiver burden and patient quality of life ($r = -0.649$) (Akçoban & Eskimez, 2023).

3.2. Mechanisms and Mediators

Caregiver burden affects patient outcomes through several pathways, including reduced care quality, increased caregiver stress, and impaired caregiver health (Suksatan et al., 2022; Deluga et al., 2018; Liu et al., 2020; Lindt et al., 2019). Poor caregiver preparedness and health are linked to greater patient symptom burden and increased healthcare utilization (Nguyen et al., 2022; Nguyen et al., 2024). Financial distress among caregivers also correlates with worse patient and caregiver-reported outcomes (Wang et al., 2022).

3.3. Impact of Interventions

Interventions targeting caregiver burden—such as education, psychosocial support, and structured home care—can improve both caregiver and patient outcomes (Ugur & Erci, 2019; Dağdelen & Zincir, 2024; Ng & Wong, 2018; Farahani et al., 2021; Sato et al., 2024; Schoth et al., 2025). Randomized controlled trials and systematic reviews show that these interventions reduce caregiver burden, enhance patient quality of life, and decrease hospital readmissions (Ugur & Erci, 2019; Dağdelen & Zincir, 2024; Ng & Wong, 2018; Farahani et al., 2021; Sato et al., 2024; Schoth et al., 2025).

3.4. Variability and Moderators

The impact of caregiver burden varies by patient diagnosis (e.g., dementia, heart failure, cancer), caregiver demographics (e.g., age, gender), and availability of support services (Franchini et al., 2019; Guerriere et al., 2016; Lethin et al., 2018; Van Den Kieboom et al., 2020; Lindt et al., 2019). For instance, female caregivers and those providing care for patients with severe neuropsychiatric symptoms report higher burden and worse patient outcomes (Franchini et al., 2019; Lethin et al., 2018; Van Den Kieboom et al., 2020).

Key Papers

Paper	Study Design	Population	Main Findings
(Kuzuya et al., 2011)	Prospective cohort	1,067 older adults & caregivers	High caregiver burden increases patient mortality and hospitalization
(Akçoban & Eskimez, 2023)	Cross-sectional	105 homecare dyads	Higher caregiver burden linked to lower patient quality of life
(Ng & Wong, 2018)	RCT	84 heart failure patients & caregivers	Home-based palliative care reduces caregiver burden, improves patient QOL
(Farahani et al., 2021)	Experimental	116 stroke caregivers	Supportive home care reduces caregiver burden
(Bidwell et al., 2017)	Meta-analysis	Heart failure dyads	Higher caregiver strain linked to worse patient symptoms and QOL

FIGURE 2 Comparison of key studies on caregiver burden and patient outcomes in home healthcare.

Top Contributors

Type	Name	Papers
Author	Huong Q. Nguyen	(Nguyen et al., 2022; Wang et al., 2022)
Author	Susan E. Wang	(Wang et al., 2022; Nguyen et al., 2022)
Author	D. Guerriere	(Guerriere et al., 2016)
Journal	*BMJ Supportive & Palliative Care*	(Nguyen et al., 2022; Schoth et al., 2025)
Journal	*Supportive Care in Cancer*	(Dağdelen & Zincir, 2024; Franchini et al., 2019; Chong et al., 2022)
Journal	*Journal of the American Medical Directors Association*	(Tay et al., 2021; Dufournet et al., 2019)

FIGURE 3 Authors & journals that appeared most frequently in the included papers.

4. Discussion

The evidence strongly supports that caregiver burden is a critical determinant of patient outcomes in home healthcare. High caregiver burden is consistently associated with increased patient morbidity, mortality, and healthcare utilization (Kuzuya et al., 2011; Dufournet et al., 2019; Bidwell et al., 2017; Driehuis et al., 2024). The mechanisms are multifactorial, involving both direct effects (e.g., reduced care quality) and indirect effects (e.g., caregiver health deterioration) (Suksatan et al., 2022; Deluga et al., 2018; Liu et al., 2020; Lindt et al., 2019). Interventions that address caregiver needs—such as education, psychosocial support, and structured home care—can mitigate these negative effects and improve outcomes for both caregivers and patients (Ugur & Erci, 2019; Dağdelen & Zincir, 2024; Ng & Wong, 2018; Farahani et al., 2021; Sato et al., 2024; Schoth et al., 2025). However, the quality of evidence varies, with some studies limited by cross-sectional designs or small sample sizes, and there is heterogeneity in outcome measures and intervention types (Ahn et al., 2020; Van Den Kieboom et al., 2020; Lindt et al., 2019). Despite these limitations, the overall body of research provides robust support for integrating caregiver support into home healthcare models.

Claims and Evidence Table

Claim	Evidence Strength	Reasoning	Papers
High caregiver burden increases patient mortality and hospitalization	🟩🟩🟩🟩🟩🟩🟩🟩🟩⬜ Strong	Large prospective cohorts and meta-analyses show strong, consistent associations	(Kuzuya et al., 2011; Dufournet et al., 2019; Bidwell et al., 2017; Driehuis et al., 2024)
Reducing caregiver burden improves patient quality of life and satisfaction	🟩🟩🟩🟩🟩🟩🟩🟩⬜⬜ Strong	RCTs and systematic reviews demonstrate positive effects of interventions	(Ugur & Erci, 2019; Dağdelen & Zincir, 2024; Ng & Wong, 2018; Farahani et al., 2021; Sato et al., 2024; Schoth et al., 2025)
Caregiver burden is negatively correlated with patient quality of life	🟩🟩🟩🟩🟩🟩🟩🟩⬜⬜ Strong	Multiple cross-sectional and longitudinal studies report significant negative correlations	(Akçoban & Eskimez, 2023; Suksatan et al., 2022; Guerriere et al., 2016; Bidwell et al., 2017; Lindt et al., 2019)
Interventions targeting caregivers reduce hospital readmissions	🟨🟨🟨🟨🟨🟨🟨⬜⬜⬜ Moderate	Some RCTs and reviews show reduced utilization, but findings are not universal	(Ng & Wong, 2018; Farahani et al., 2021; Schoth et al., 2025; Marini et al., 2025)
Financial and psychological distress in caregivers worsens patient outcomes	🟨🟨🟨🟨🟨🟨⬜⬜⬜⬜ Moderate	Observational studies and secondary analyses support this link, but causality is less clear	(Wang et al., 2022; Nguyen et al., 2022; Nguyen et al., 2024)
Caregiver burden does not always affect patient survival in all conditions	🟥🟥🟥⬜⬜⬜⬜⬜⬜⬜ Weak	Some studies (e.g., ALS) find no impact on survival, suggesting condition-specific effects	(Burke et al., 2015)

FIGURE Key claims and support evidence identified in these papers.

5. Conclusion

Caregiver burden is a significant, modifiable factor influencing patient outcomes in home healthcare. Addressing caregiver needs through targeted interventions can improve both caregiver and patient well-being, reduce adverse events, and enhance the effectiveness of home-based care.

5.1. Research Gaps

Despite robust evidence, gaps remain in understanding the long-term effects of caregiver interventions, the impact across diverse patient populations, and the mechanisms linking caregiver burden to specific patient outcomes.

Research Gaps Matrix

Outcome Measured	Older Adults	Dementia	Heart Failure	Cancer	Stroke
Quality of Life	7	6	5	4	3
Hospitalization	5	3	2	1	2
Mortality	4	2	1	GAP	1
Caregiver Interventions	6	5	4	3	2
Longitudinal Outcomes	2	2	1	1	GAP

FIGURE Matrix of research coverage by outcome and patient population.

5.2. Open Research Questions

Future research should focus on the following areas to advance understanding and improve care:

Question	Why
What are the long-term effects of caregiver support interventions on patient outcomes in home healthcare?	Longitudinal data are needed to assess sustained benefits and inform policy and practice.
How do specific caregiver characteristics (e.g., age, gender, relationship) moderate the impact of burden on patient outcomes?	Identifying vulnerable subgroups can help tailor interventions for maximum effectiveness.
What are the most effective components of interventions to reduce caregiver burden and improve patient outcomes?	Understanding which intervention elements drive outcomes will optimize resource allocation and care models.

FIGURE Key open research questions for future studies on caregiver burden and patient outcomes.

In summary, reducing caregiver burden is essential for optimizing patient outcomes in home healthcare, and future research should address the identified gaps to further improve care delivery.

These papers were sourced and synthesized using Consensus, an AI-powered search engine for research. Try it at https://consensus.app

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