# High-Fidelity Caregiving Motion Data to Empower Humanoid Robots

#### Introduction

Caregiving for aging loved ones has become a widespread responsibility that carries profound personal and societal costs. At the same time, advances in robotics hint at a future where humanoid robots could assist with eldercare tasks – but a crucial gap in real-world motion data has held back progress. This white paper discusses the **societal impact** of the caregiving burden, the **innovation gap** preventing humanoid robots from entering assisted living, and how **MotionCare Analytics** is bridging that gap. We detail the **challenges** of capturing high-fidelity caregiving motion data and MotionCare's unique advantages in doing so, the **quality** and realism of our dataset, our **ethical** approach to data collection, and our **future vision** for integrating humanoid caregiver robots in real facilities. Throughout, we illustrate why MotionCare's mission and technology can catalyze a new generation of assistive humanoid robots trained with unparalleled real-life data.

#### The Societal Impact of Caregiving

Millions of Americans are being thrust into the role of family caregivers for elderly or disabled loved ones, often with life-altering consequences. An estimated **53 million U.S. adults** now provide unpaid care to a spouse, elderly parent, or special-needs child – up sharply from 43.5 million just a few years prior (2023 Study — Caregiving in America, Statistics on Family Caregivers and Beyond | Guardian). Broadly, over **100 million Americans** (about 40% of adults) are caring for a loved one in some capacity (New Study Finds More Than 40% of Americans Provide Unpaid Care - Caring Across Generations). This responsibility frequently disrupts caregivers' own plans and careers. Many must reduce work hours or leave jobs, which in turn causes financial strain. In fact, caregiving duties have led to a loss of over **650,000 jobs** in the U.S., contributing to an estimated **\$44 billion** in lost economic productivity (2023 Study — Caregiving in America, Statistics on Family Caregivers and Beyond | Guardian). Beyond finances, caregivers often endure high emotional and physical stress, with burnout and health issues common.

This burden is only increasing as America's population ages. By 2030, **1 in 5 Americans will be 65 or older** (<u>The Impact of America's Aging Population on Healthcare - Trualta</u>), and the number of seniors is projected to rise from about 58 million in 2022 to 82 million by 2050 (<u>Fact Sheet: Aging in the United States | PRB</u>). With families smaller and dispersed, there are fewer hands to share caregiving. The demand for elder care and assistance with daily activities is reaching a critical point.

Robotic caregivers have emerged as a promising solution to relieve this pressure. In theory, a humanoid robot assistant could help an aging person with tasks like mobility, bathing, dressing, or medication reminders – thus *reducing the load on human caregivers and increasing the* 

*independence of both parties*. Early trials with assistive robots show that they can indeed **take on routine daily tasks and provide guidance, which reduces burden on caregivers while promoting seniors' independence** (The Future of Aging: AI and Robotics Are Transforming Senior Care). For example, a robot might safely help transfer a patient from bed to wheelchair, or handle meal delivery and reminders, giving family caregivers much-needed respite. By filling in for some duties, robotic aides could enable family members to regain time for their careers and personal lives without compromising their loved one's care. In addition, patients benefit from more continuous assistance and oversight, enhancing their safety and autonomy at home.

In summary, caregiving is a massive societal challenge – but one that robotic technology has the potential to alleviate. Enabling that potential requires overcoming key barriers currently holding back humanoid robots in eldercare settings. MotionCare Analytics aims to do exactly that, by providing the critical data needed to train robots to perform caregiver tasks with skill and humanity.

#### The Innovation Gap in Humanoid Robotics for Caregiving

Despite the clear need, **humanoid robots have struggled to enter assisted living and eldercare in practice.** Numerous pilot programs and prototypes have promised "robot nurses" or helper robots, yet if you walk into an average nursing home today, you will find *very* few robots assisting with care. There are several reasons for this innovation gap. First, building a robot that can handle the complexity of caregiving tasks – which range from physical support to social interaction – is extremely challenging. Early social robots like SoftBank's **Pepper** generated excitement and were even tested in nursing homes, but they proved limited. These robots are **expensive** for care facilities to purchase and maintain, and require staff training, yet often **cannot perform enough useful tasks to justify the cost** (Whatever Happened to All Those Care Robots? - The Atlantic). In trials, humanoid robots like Pepper could converse or entertain seniors but *still relied heavily on humans for actual physical care*, and showed **little evidence of truly lightening caregivers' workloads** (Whatever Happened to All Those Care Robots? - The Atlantic). In some cases, they even added work – needing oversight, setup, and frequent charging.

Another major barrier has been a lack of robust real-world training data for caregiving interactions. Modern AI-driven robots learn many of their skills from data (through machine learning, imitation of human demonstrations, etc.). However, **there is no high-quality motion capture dataset designed specifically for caregiver-patient interactions** available to researchers or companies. Robots have learned to walk, grasp objects, or navigate using large datasets of human motions and environments – but the nuanced motions a caregiver uses to, say, safely lift an adult from a chair, or reposition someone in bed, are not part of standard robotics datasets. This data scarcity means assistive robots are often trained either in simulation or on very limited demonstrations, which don't capture the full complexity of human caregiving tasks.

Indeed, prior research in robotic assistance acknowledges that collecting motion data from real assisted-care scenarios is difficult. For example, studies in assistive dressing have used motion capture on patients' range of motion, but note that the **requirement of an expensive motion capture system and custom user data collection has been a key barrier to scaling up** 

**caregiving robots** (<u>GRACE: Generalizing Robot-Assisted Caregiving with User Functionality</u> <u>Embeddings</u>). In short, it's not that we lack ideas or hardware for caregiving robots – we lack the *data and examples* to teach humanoid robots how experienced caregivers move and act. This is the **innovation gap** MotionCare Analytics is stepping forward to fill.

**MotionCare Analytics addresses this gap by building the first high-fidelity motion dataset tailored to caregiving.** We collect detailed motion capture data directly from professional caregivers as they perform authentic care activities with patients. By focusing on real caregiver– patient interactions, we provide the *missing link* that can train humanoid robots to actually perform those interactions. Our data gives robotics companies and researchers a foundation to develop robots that move with the skill, caution, and empathy of a human caregiver. In effect, MotionCare is transforming invaluable human know-how into a digital form that robots can learn from – enabling a new wave of innovation in assistive humanoid robotics.

### The Challenges and Uniqueness of Capturing Caregiving Motion Data

Capturing realistic motion data for caregiving scenarios is a complex and resource-intensive endeavor. Unlike generic motion capture (e.g. recording someone walking or doing sports), caregiving involves **two individuals interacting** – often physically supporting each other – and a variety of assistive tools or furniture. Recreating this in a lab is non-trivial. One must recruit **professional caregivers** who know proper techniques for safe transfers, bathing, feeding, etc., as well as willing **elderly or disabled participants** (or realistic patient stand-ins) to receive care during recordings. The environment also matters: a home or assisted-living setting with beds, wheelchairs, walkers, and other elements is needed to reflect real conditions. All of this means the logistics and cost of obtaining high-quality caregiving motion data are steep. It requires:

- **Expert Human Talent:** Training a robot for caregiving demands data from *experienced caregivers*. These professionals' time is valuable, and coordinating their schedules for motion capture sessions can disrupt ongoing care work. Unlike hiring an actor for a mocap studio, here we need skilled nurses or aides performing genuine care tasks. Their movements must be precise and safe, adding to the complexity of staging each capture.
- Specialized Equipment & Setup: High-fidelity motion capture typically uses sensor suits or multi-camera systems to track body movement in 3D. Setting this up in a caregiving context is challenging. The caregiver and patient may both need to wear sensors so that the interaction is fully recorded (e.g. how a caregiver's movements correlate with the patient's position). Furthermore, the capture system must handle close contact between people and possibly occlusion (when one person's body blocks the view of the other), all without sacrificing accuracy. This is a more demanding use-case than capturing a single person's motion. The equipment is also **expensive** professional inertial motion suits and optical tracking rigs can cost tens of thousands of dollars, and require technical expertise to operate. Prior work has cited these costs as a barrier, noting that needing an **expensive motion-capture setup and custom data collection** has hampered progress in caregiving robotics (<u>GRACE: Generalizing Robot-Assisted</u> <u>Caregiving with User Functionality Embeddings</u>).

• **Controlled Yet Real Environment:** Caregiving tasks need to be captured in realistic settings (a bedroom, a bathroom with grab bars, etc.) to include all the small maneuvers a real home environment imposes. However, bringing delicate capture gear into such spaces or simulating them in a studio adds further difficulty. There are also privacy and dignity concerns when recording care activities (for instance, during hygiene-related tasks), which require careful handling and often limit what can be recorded or how.

Given these challenges, it's no surprise that **no one has assembled a large-scale motion database of caregiver-patient interactions** until now. This is where MotionCare Analytics has a rare and significant advantage: the company's founder is the owner of multiple assisted living facilities. This built-in connection to real care environments dramatically lowers the barriers to data collection. **MotionCare can capture data in actual assisted living homes** with minimal disruption – the rooms, equipment, and expert staff are already in place. We have ready access to scenarios that would be costly to reproduce elsewhere, from caregivers helping residents out of bed in the morning to guiding them through physical therapy exercises.

Furthermore, our close partnership with these facilities fosters trust and smooth logistics. Caregivers employed at the facilities can participate as part of their normal work schedule (with full consent and compensation, as discussed later), rather than having to travel to a lab. Residents who volunteer are in a familiar setting, which improves comfort and authenticity. Essentially, MotionCare operates a living laboratory across its assisted living homes, something that would be extremely difficult for an outside team to replicate without similar institutional access. This real-world data collection approach is **unique** – it means we are not confined to artificial simulations or a few staged demonstrations, but can gather *volumes of rich data* from day-to-day caregiving activities.

In summary, capturing caregiving motion data is challenging due to human, technical, and environmental factors. MotionCare's strategy of leveraging in-house care facilities and staff gives us an unprecedented ability to surmount these challenges. Our dataset is born from authentic care moments, recorded with state-of-the-art technology in real settings – a combination that sets us apart from any previous data collection in this field.

# **Data Quality and Fidelity**

MotionCare Analytics is uncompromising in the **quality and fidelity** of the data we collect, because training a humanoid robot to be a capable caregiver demands nothing less than lifelike detail. We employ advanced motion capture suits on caregivers (and when appropriate, on care recipients or on proxy dummies for certain tasks) that record joint movements with millimeter precision. These inertial suits are supplemented by visual data: we record video and depth sensor footage synchronized with the motion data. The result is a comprehensive record of each interaction, from the caregiver's exact posture and hand placement to the context of the room and patient movement.

The **accuracy of our motion data is superior** to common datasets used in robotics. Each recording captures subtle aspects of caregiver technique – for instance, the slight bend in the knees and straight back posture when lifting someone safely, or the gentle pacing and arm

guidance when assisting a walking elder. Such nuances are critical for a robot to learn proper balance and force to use in physical assistance. Our system also tracks the dynamics of *two bodies moving together*, something generic motion libraries do not contain. This means a robot trained on our data can infer, for example, how shifting a patient's weight corresponds to counter-balancing motions by the caregiver – exactly the kind of embodied knowledge needed for safe human-robot interaction.

Moreover, MotionCare's dataset doesn't stop at raw motion capture points. Because we include synchronized video, we provide a rich ground truth for robot developers: they can see the environment and the outcome of the motion. This is invaluable for developing AI models. For instance, a robotics team can use our data to simulate what the robot's sensors (cameras, etc.) would perceive and then train the robot's control system to mimic the caregiver's motions in response. High-fidelity data like this enables training of control policies that result in **smooth**, **human-like movements**, instead of the jerky or rigid motions that robots often exhibit when trained on lower-quality or purely simulated data.

Importantly, motion capture provides a *concise and precise representation* of movement that is far easier for algorithms to learn from than raw video alone (MoCapAct: Training humanoid robots to "Move Like Jagger" - Microsoft Research). By recording the exact 3D coordinates of key points on the body over time, MoCap data distills an activity into a sequence that an AI can readily analyze and imitate. This fidelity is crucial for humanoid robots: if we want a robot to perform a caregiver's job, it must train on data that truly reflects how humans move in those scenarios. Lifelike movement data leads to lifelike robotic movement. A robot that learns from our high-resolution dataset will, for example, learn to walk beside an elder at a careful matching pace, to adjust its arm trajectory naturally when handing over an object, or to support an unsteady person with the same gentle steadiness a human caregiver would use. These are precisely the behaviors that will make robots effective and trustworthy assistants in eldercare.

In summary, MotionCare Analytics delivers data with unmatched realism: the **fine-grained motion fidelity and contextual richness** needed to train humanoid robots in the delicate art of caregiving. We believe this quality of data will accelerate robotics development and result in machines that move and act in harmony with human caregivers and patients, rather than like robots stuck in an uncanny valley of awkward motions. It's the difference between a clumsy mechanical aide and a robotic caregiver that genuinely moves *like* a caregiver.

# **Ethical Considerations and Compliance**

At MotionCare Analytics, we recognize that working with real caregivers and elder participants carries profound ethical responsibilities. Our data collection process is built on a **consent-based**, **transparent approach** that respects the dignity and privacy of everyone involved. Both the caregiving staff and the resident care recipients **participate voluntarily** in our motion capture program. We obtain informed consent from the care recipients (or their legal guardians/families, when appropriate) and from the caregivers for each recording session. Participants are thoroughly briefed on what data is being collected, how it will be used, and their right to withdraw at any time.

We prioritize privacy by carefully controlling the data and its usage. Personal identities of residents are protected – for example, video data may be blurred or de-identified as needed, focusing on body motion rather than facial identity. All data is stored securely and used solely for the development of caregiving robotics and related research, in line with the consent given. We also comply with relevant health data regulations (such as HIPAA in the U.S.) to ensure that our practices meet or exceed the legal standards for handling any potentially sensitive information.

Our program has an **inbuilt charitable and ethical dimension**: participating residents receive tangible benefits in return for their contributions. MotionCare provides **free care services or subsidies** to residents who volunteer for the motion capture sessions. In practice, this might mean a resident's monthly fees are reduced or certain services (therapy, amenities) are provided at no cost as a "thank you" for their help. This not only compensates them for their time and any inconvenience, but it aligns our project with the well-being of the individuals. We are essentially reinvesting in the care of those same people our technology ultimately aims to help. Caregivers who participate may similarly receive bonuses or recognition, though many are also motivated by the opportunity to improve eldercare through innovation.

By ensuring that all parties are willing and see benefit, we create a **virtuous cycle**: caregivers take pride in contributing their expertise to advance technology, residents feel empowered that they are helping future seniors (and enjoy improved care now), and the company builds its data in an ethical manner. We have an oversight process in place as well – an ethics committee reviews our data collection protocols and consent materials, and we adapt based on feedback from participants. For example, if a resident is uncomfortable being recorded during a certain activity, we adjust or avoid that scenario.

In summary, MotionCare Analytics is committed to an ethical framework that **respects autonomy, ensures privacy, and gives back to participants**. Collecting motion data from vulnerable populations (older adults, some with health conditions) is done with the utmost care for their rights and comfort. We believe this consent-driven, participant-first approach is not only the right thing to do, but it also strengthens our data quality – because when caregivers and residents are comfortable and engaged, the interactions we record are natural and genuine. Our mission is founded on improving eldercare, and that principle guides our data practices from start to finish.

# **Future Vision**

MotionCare Analytics has a bold vision for the future of caregiving and robotics. In the near term, we are scaling up our data collection efforts dramatically. We plan to deploy **additional motion capture suits and sensors** across more of our assisted living partner facilities, thereby increasing the volume and diversity of captured interactions. With more suits, we can record multiple caregiver–patient pairs simultaneously and cover a wider range of activities. Our dataset will continue to grow in breadth – from basic mobility assistance and transfers to nuanced tasks like guided exercises, cognitive support activities, and even emergency interventions (e.g. how a caregiver helps a resident who has fallen). Each new participant and recorded scenario adds

value, helping to ensure that robots trained on our data can generalize to assist many different individuals under various conditions.

On the horizon is our **long-term goal to create living laboratories where robotics companies can test their humanoid caregiver robots in real-world care settings**. By collaborating with our network of assisted living facilities, we envision a program where vetted prototype robots can be brought in to work side by side with professional caregivers and residents. This would allow robotics developers to move beyond simulations and lab demos into *practical trials* in a safe, supervised environment. Early steps in this direction are already visible in the industry – for instance, researchers have begun deploying social robots like Pepper in nursing homes on a trial basis (Whatever Happened to All Those Care Robots? - The Atlantic), primarily for companionship and monitoring. MotionCare wants to take this further: imagine a humanoid robot, trained on our motion data, being tested to physically assist residents under the watch of human staff. Our facilities could host such trials, providing feedback and iterative data to refine the robots' performance.

The benefits of this approach would be tremendous for robotics companies. They would gain access to a real care home environment – something that otherwise is very hard to arrange – along with our expertise to guide integration. They could see how their robot interacts with actual residents, learn from any mistakes in a controlled setting, and leverage our continued motion capture to compare the robot's motions against human best-practices. For the care facilities and residents, this program would introduce cutting-edge technology with plenty of human oversight, ensuring safety and offering the opportunity to influence robot design with on-the-ground insights. We believe this collaborative testbed model will accelerate time-to-market for viable caregiver robots and ensure those robots are truly fit for the realities of eldercare.

In the far future, MotionCare Analytics sees a world where **humanoid caregiver robots are commonplace** in assisted living centers and private homes – not replacing human caregivers, but augmenting them. Routine tasks and heavy lifts could be handled by robots, while human caregivers focus on higher-level care, emotional support, and companionship. Our role will be to continuously feed the loop of learning and improvement for these robots. As they get deployed, we will capture new data on how they perform and how humans respond, and channel that back into making the AI smarter and more responsive. The ultimate measure of success will be when a family caregiver can confidently say that a robot (trained on MotionCare data) is effectively caring for their loved one and allowing the family to regain normalcy without worry.

**In conclusion**, MotionCare Analytics is building the foundation for this future by solving today's data problem. We are turning the art of experienced caregiving into a scientific dataset, and then into real robotic capabilities. For robotics companies interested in training humanoid robots for caregiving, partnering with MotionCare offers a critical asset – the data that makes the difference between a robot that *theoretically* can help and one that has *learned from the best*. Together, we can relieve millions of caregivers, enhance the independence and dignity of elderly persons, and usher in a new era where growing old does not have to mean an overwhelming care burden on families. MotionCare's high-fidelity motion analytics, ethical practices, and future-focused collaborations are paving the way for **smarter, kinder robots in the service of human care**.