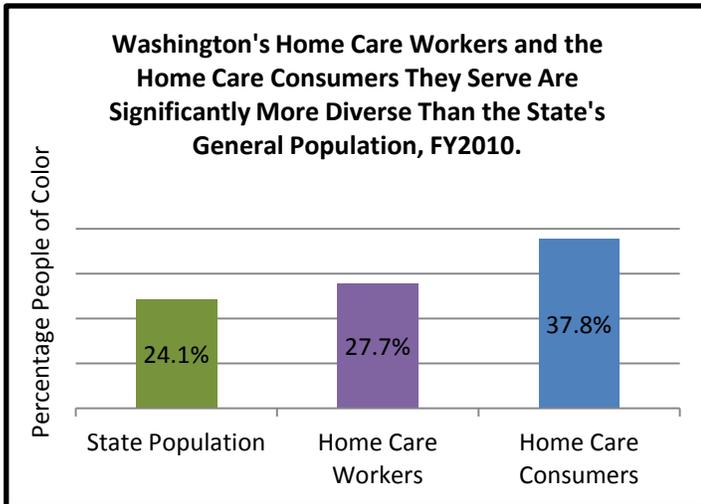


Advancing Racial Equity and Protecting Washington's Home Care Program

August 2012

People of Color in Home Care

Cuts to home care especially affect people of color – given the diversity of both home care consumers and the workers that serve them. One in five Washington home care workers is foreign born. More than one in four home care workers is a person of color. These workers serve a home care consumer population that is made up of 38 percent people of color. In contrast, the state's general population is less than a quarter people of color.



In FY2010, there were about 21,000 people of color receiving long-term care in their own homes, nursing facilities, assisted living facilities, adult residential care, and adult family homes, of which about 70 percent (or 14,500 people of color) received home care services. In contrast, of the approximately 56,500 White people receiving long-term care services, only 43 percent elected to receive their long-term care in their own homes.

Washington's Aging Population is Increasingly Diverse and Growing Fast

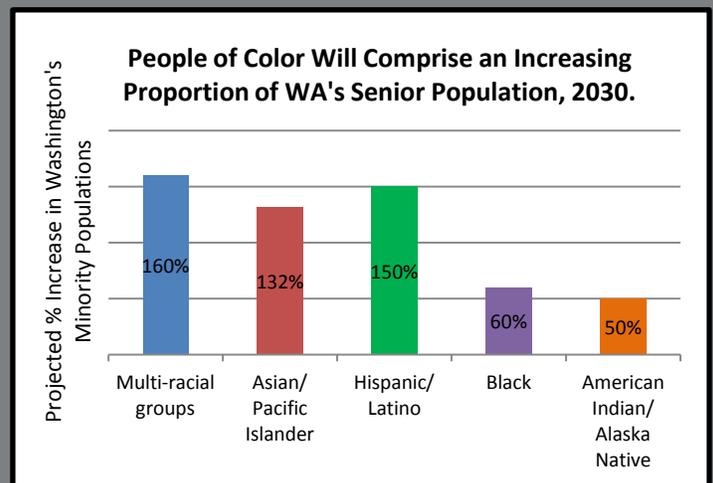
Washington's home care system faces significant challenges in recruiting and retaining home care workers. The problem is expected to worsen significantly as demand for qualified home care workers increases. The Institute of Medicine's *Retooling for an Aging America* identified an unstable home care workforce as a primary challenge for the growing number of aging "baby boomers."

Washington's population aged 65 and older has grown more than 22 percent since the 2000 census. The aging generation threatens to overwhelm our long-term care infrastructure. The number of people aged 65 or older is expected to more than double by 2030. By 2030 the number of individuals aged 65 and older will represent one-fifth of the state population.



"My client depends on me. With the continued cuts to home care hours, I've had to look for another job. There aren't many jobs out there. In the end, it's the clients who suffer." – June Tapatuo

People of color will comprise an increasing proportion of the senior population as a more diverse cohort of Americans reaches age 65. Washington's Aging and Disability Services Administration (ADSA) 2010 report states, "Minority populations in Washington all show notably faster rates of increase than their white non-minority counterparts." ADSA estimates that by 2030, nearly one in three residents will be a minority, with Asian/Pacific Islander and Hispanic populations constituting the largest and fastest growing minority groups.



These trends are expected to continue and will generate an increased requirement to deliver culturally relevant and competent long-term services in Washington, especially in home care, the primary long-term care setting of choice for people of color.

Importance of Cultural Competency

Cultural competence in health care describes the ability of systems to provide care to consumers with diverse values, beliefs and behaviors, including tailoring delivery to meet consumers' social, cultural and linguistic needs. Cultural competence is an important tool for increasing access to quality care for all consumer populations. Health care experts have found a clear connection between cultural competence, quality improvement and the elimination of racial/ethnic disparities.

Cultural Competency in Home Care Training

Cultural competency currently is included in basic training for Washington's home care workers in two ways. First, it is infused in all training through carefully chosen examples and case studies that are representative of the diverse populations home care workers serve. Second, there is direct instruction on cultural competency as part of each of the population-specific tracks. The module, "Respecting Differences," is designed to improve a worker's ability to work successfully with a consumer who is from a different background and culture. It teaches workers about how their cultural beliefs, behaviors, and assumptions influence their relationships with others and increases their understanding of cultural differences and how to provide culturally sensitive home care.

The SEIU Healthcare NW Training Partnership continues to work toward improving cultural competency among the home care workforce. Currently, basic training and the home care aide exam and certification are offered in 6 languages: Spanish, Russian, Korean, Vietnamese, Cantonese and English. Continuing education classes are offered in the above languages as well as Cambodian, Lao, Mandarin, Somali and Amharic. The Training Partnership also is working with the Cross Cultural Health Care Program to create 3 new e-learning continuing education courses focused on cultural competency.

Recommendations

We recommend Washington advance its core values of increasing equity and shared prosperity by:

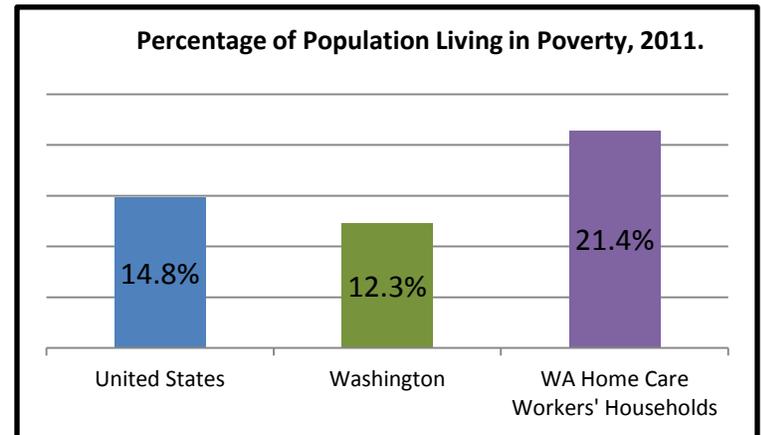
1. Rejecting cuts to services that disproportionately impact communities of color;
2. Raising new revenue to promote equity and prosperity for all Washingtonians;
3. Ensuring delivery of culturally relevant and competent long-term care services, including ensuring access to training in workers' primary languages; and
4. Investing in sound retention strategies (such as living wages, improved benefits, and retirement security) that help lift home care workers out of poverty.

The Impact of Cuts to Home Care Services

Washingtonians value equity and shared prosperity. Since 2008, Washington State's economic crisis has tested these core values. The state has been making devastating cuts to Medicaid services that serve seniors and people with disabilities. Home care consumers and their caregivers have, on average, lost 14.1 percent of their service hours from their 2008 level.

For consumers, this loss means less assistance with their activities of daily living – like medication management, transfer, bathing, dressing, transportation to medical appointments and meal preparation – essential to having their needs met and allowing them to safely remain at home.

For their caregiver, this loss results in burdensome deductions to caregivers' household income. For about 60 percent of home care workers, wages from home care comprise their household's primary source of income.



In 2011, 21 percent of Washington's home care workers and their families lived in poverty (less than \$22,350 for a family of four). This level of poverty among Washington home care households is 6.6 percent higher than the national average and 9.1 percent higher than the statewide average.

If the higher cost of living in urban Washington locales were taken into account, the poverty rate would be even higher. Further, about 43 percent of Washington's home care worker families live at or below 133 percent of the federal poverty rate.

The Medicaid programs that suffered and continue to suffer cuts are the very programs communities of color and low-income communities rely on. As such, the burden of budgetary cuts is disproportionately affecting people of color. It is likely that the 2012 budget will continue to devastate communities of color and low-income people across the state.