

Study details poverty, lack of health insurance among female health care workers

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A study carried out by researchers at Massachusetts General Hospital (MGH) and the Perelman School of Medicine at the University of Pennsylvania finds that low wages and poor benefits leave many female health care workers living below the poverty line. The report that will appear in the January issue of the *American Journal of Public Health* has been published online.

"Every day in the clinic and in the hospital, my colleagues who work in low-wage positions—as cleaners, dietary workers, medical assistants and nurse's aides—make vital contributions to the care of our patients." says Kathryn Himmelstein, MD, lead and corresponding author of the paper. "These workers should not have to go home to poverty or be unable to afford health care for themselves and their families." A resident in the MGH Department of Medicine and postdoctoral fellow at Harvard Medical School, Himmelstein initiated the study as a medical student at the University of Pennsylvania.

The authors note that more Americans are employed in health care than in any other industry, and three quarters of them are women. Their analysis of data from the 2017 Annual Social and Economic Supplement to the Current Population Survey, conducted by the U.S. Census Bureau and the Bureau of Labor Statistics, found that 18 percent of employed women responding to the 2017 survey and 23 percent of employed Black women work in health care, many of them in low-paying jobs.

Although the average hourly wage for female health care workers of



more than \$19/hour was higher than the average of around \$16/hour for all other industries, it was almost 25 percent lower than the average for men working in health care. The data suggested that 34 percent of female health care workers, and nearly half of the Black and Latina women working in the health sector, earned less than \$15/hour. While the largest number of health care workers making less than \$15/hour were employed by hospitals, such workers made up a larger share of the total workforce in home health care and at nursing homes and other residential care facilities. Relatively few women and even fewer women of color worked as physicians or managers.

Projecting the survey's results across the entire U.S. population suggests that 5 percent of all women health care workers—including 10.6 percent of Black and 8.6 percent of Latina women health care workers—live in poverty, the authors note. Overall, 1.7 million women health care workers and their children lived below the poverty line in 2017, accounting for nearly 5 percent of all people living in poverty in the U.S. The researchers also found surprisingly high numbers of the female health care workers surveyed lack health insurance. Overall, 7 percent—projected to represent more than 1 million women nationwide—were uninsured, including more than 10 percent of Black and Latina women employed in health care.

The researchers also projected the potential impact of raising the minimum wage to \$15/hour, a policy already implemented in several cities and some medical centers. They found that adopting such a policy nationwide would decrease poverty rates among female health care workers by up to 50 percent, while increasing U.S. health care costs by less than 1.5 percent.

Himmelstein says, "Public health experts have been urging hospitals and other health care providers to focus on the 'social determinants' of ill-health, and these institutions should start by addressing their own



employment practices. But we shouldn't just leave that up to health care employers; lawmakers have a tremendous opportunity to lift millions of people out of poverty and promote racial and gender justice in health care employment by raising statutory minimum wages."

Senior author Atheendar Venkataramani, MD, Ph.D., assistant professor of Medical Ethics and Health Policy at the Perelman School of Medicine, adds, "Wage inequality in the health care sector reflects what we are seeing in other sectors of the economy in the United States. In that spirit, these findings should inform active debates around the role of new policies—for example, raising minimum wages, expanding the Earned Income Tax Credit or expanding access to higher education—that seek to address widening income inequality and diminishing opportunities for upward mobility."

More information: Kathryn E. W. Himmelstein et al, Economic Vulnerability Among US Female Health Care Workers: Potential Impact of a \$15-per-Hour Minimum Wage, *American Journal of Public Health* (2018). DOI: 10.2105/AJPH.2018.304801

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