

# Majority of California's Medi-Cal caregivers live in or near poverty

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The demand for caregivers is growing rapidly as California's population ages, but the majority of state's Medi-Cal caregivers earn poverty or near-poverty wages and have poor access to health care and food, a new study from the UCLA Center for Health Policy Research has found.

Fifty-seven percent of paid Medi-Cal caregivers - and almost half of all 450,000 paid caregivers in the state - have incomes that leave them in [poverty](#) or near poverty, according to the study, "Hidden in Plain Sight: California's Paid Medi-Cal Caregivers Are Vulnerable." Medi-Cal is the state's public health insurance program for low-income seniors or adults with long-term illnesses or disabilities.

"Paid caregivers do a lot but get paid very little," said Geoffrey Hoffman, the study's lead author. "They play a critical and complex role caring for our aging or disabled parents, grandparents, friends and neighbors yet can earn only a little more than minimum wage."

With recent state budget cuts, the situation for caregivers is already more precarious; it could worsen now that the state's Adult Day [Health Care](#) (ADHC) program has transitioned into a different program, and if further cuts are made to In-Home Supportive Services (IHSS), Hoffman noted.

The study is based on the 2009 California Health Interview Survey, which is administered by the UCLA Center for [Health Policy Research](#) and is the nation's largest state health survey.

An estimated 6 million caregivers in California provide much-needed services for a family member, friend or other individual with a long-term illness or disability. Of these caregivers, about 450,000 are paid for the services they provide, and two-thirds of them - approximately 290,000 - are paid Medi-Cal caregivers.

The study found:

- Paid Medi-Cal caregivers earn the least  
The average monthly income for paid Medi-Cal caregivers was \$1,970, compared with \$4,222 for caregivers who were not paid for the assistance they provided.
- Average wage for paid caregivers is low

Paid Medi-Cal caregivers reported providing an average of 43 hours of care per week, which, at an approximate monthly income of \$1,970, translates to a little more than \$11 per hour. In contrast, the median hourly wage in the state in 2010 was \$18.13.

- Many paid caregivers can't afford basic necessities  
Paid Medi-Cal caregivers who earned less than \$21,660 a year (which is below 200 percent of the federal poverty level) had rates of food insecurity that were twice those of low-income unpaid caregivers. Food insecurity refers to reducing meal sizes or skipping meals due to a lack of sufficient resources to buy food.
- Paid caregiver turnover is high  
Among paid Medi-Cal caregivers, nearly 16 percent were at their current job for less than one year and only about 18 percent had been at their job for more than 10 years. (Close to one-third of both unpaid caregivers and employed non-caregivers reported being at the same job for more than 10 years.)
- Paid caregivers more likely to be uninsured  
Paid Medi-Cal caregivers were almost twice as likely as non-caregiving adults to be currently uninsured (31 percent vs. 18 percent).

"When we talk about caregiving, we should be thinking not only of the supportive services we provide to older adults but also the vulnerable people providing those services," Hoffman said.

The downsizing of the Adult Day Health Care program, which started on April 1, when the state transitioned to the new Community-Based Adult Services (CBAS) program, and a proposed 20 percent cut to In-Home Supportive Services workers' hours, which is currently blocked by a federal court, could have a devastating impact on seniors and people with disabilities, Hoffman noted.

Adult Day Health Care offers social, health and therapeutic services to frail older adults to help them remain independent in the community; In-Home Supportive Services helps older low-income adults and people with disabilities pay for services such as cleaning, cooking, running errands, help taking their medicines and other tasks.

"Cuts to state programs for seniors will come at the expense of California's seniors, but they will also harm paid [caregivers](#)," Hoffman said. "What is needed is more support for these economically vulnerable Californians so that they can take better care both of older care recipients and themselves."

Provided by University of California - Los Angeles

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