

TOUCHED BY A

Caregiver

There are four kinds of people in the world: those who have been caregivers, those who are currently caregivers, those who will be caregivers, and those who will need caregivers.

—Rosalynn Carter

Chances are, your life—or the life of someone you know—is touched each day by a caregiver (a direct-care worker). Direct-care workers (DCWs) provide over 80 percent of the “hands-on” support their clients need to eat, dress, bathe, groom, toilet, take medications and exercise. Because of their concern, compassion, and companionship, they are often viewed as “family” by those they care for. As the population ages in Iowa, there is an increasing need for direct-care workers, yet a decreasing number of people are entering—and staying in—the workforce. Why?

Direct-care workers leave their jobs due to low pay, poor health care and other benefits, lack of initial and ongoing training, few advancement opportunities, and the emotional and physical demands of the work. Yet we are increasingly dependent on these paid direct-care workers to provide care and supportive services to meet consumers’ expectations of consistent quality care.

Below are the stories of two Iowa direct-care workers. Both reflect the struggle faced by many workers who love their job and their clients, but find it difficult to remain in this field without health benefits. Imagine if you, or your spouse, or your children were one of these Iowans. What would you do?

My job is important. I make a difference in a life every day.

I am a Certified Nurse Aide working in home care since 2002. I have Medicaid for myself and two children.

It is so hard to work home health with the low pay we get for the life-giving work that we do. We don't make enough money for what we do, but I know when I go home at night that I took care of people who had no one to care for them. Without me that day, someone somewhere would be all alone, not eating, not taking care of themselves, not finding the comfort of human kindness.

My job is important. I make a difference in a life every day. It helps me to raise my own children, knowing that someday I may receive the same care I gave to someone else.

We need help with health insurance; I really don't think that's too much to ask considering what we do in a day. Would you do it?

...these conditions are considered “pre-existing,” and I've been refused coverage.

My husband was killed in an automobile accident about one and a half years ago at the age of 50, and our family always relied on him for our health insurance through his employment. That's all changed.

Since his death, I've had a terrible time finding insurance that would accept me or that I could afford. Before his death, I had chest pain.

My doctor ordered some tests, including an angiogram that was normal. After he died, my doctor also treated me for depression and a bout with high blood pressure but nothing that called for medication or treatment. Now, because the angiogram was performed, because of the high blood pressure, and because of the depression, these conditions are considered “pre-existing” and I've been refused coverage.

What can be done?

Iowans need to use what they are known for—good old common sense. If Iowans value those who care for and support their friends, neighbors, and loved ones, and if they want to encourage people to enter and stay in the direct-care field, they must call on elected leaders (and candidates) to improve the quality of direct-care jobs. For example, our leaders can create ways for direct-care workers to attain professional status, increased wages, and improved access to affordable and meaningful health care coverage.

The Iowa Caregivers Association is working to address many of these factors through the following policy priorities for 2008:

- Expand access to quality and affordable health care coverage for direct-care workers and all Iowans.
- Bring attention to the Health and Long Term Care Workforce Report (as required by HF 909 in 2007) and assist in the effort to implement the report's recommendations.
- Work with the Department of Public Health on the implementation of the Direct Care Worker Task Force report recommendations.
- Ensure that the Direct Care Worker Registry is maintained and expanded.

For more information

Contact John Hale at the Iowa Caregivers Association (see below) to learn more about the programs and strategies to improve direct-care jobs being explored in Iowa—and in other states—and how the ICA can help you become more informed and involved in addressing these crucial issues.

The Iowa Caregivers Association (ICA) advocates for Iowa's 60,000 direct-care workers. ICA staffs Health Care for Health Care Workers—Iowa, one of several state campaigns to improve access to affordable, quality health care coverage for direct-care workers. These campaigns are supported by the PHI national Health Care for Health Care Workers initiative (see www.coverageiscritical.org).



IOWA Caregivers
A S S O C I A T I O N

 **HEALTH CARE for
Health Care Workers**
An Initiative of PHI

Who are Iowa's direct-care workers?

- *We are over 60,000 Iowans who work on the front lines in nursing homes, assisted living centers, hospices, private residences, hospitals, and other settings throughout the state.*
- *We provide "hands-on" support to help clients and residents eat, dress, bathe, groom, toilet, take medications, and exercise. Because of our concern, compassion, and companionship, we are often viewed as "family" by those we care for.*
- *We are among Iowa's least compensated workers: certified nurse aides (CNAs) earn an average of \$10.77 per hour and home care aides earn on average \$9.65 per hour.*
- *We lack access to affordable health coverage: one in four CNAs has no health care coverage, and 12 percent rely on public assistance for health care coverage. Further, many of us have health coverage from which we get little value due to limited benefits, high deductibles, and co-pays.*
- *We work under the direction of licensed nurses and other health and long-term care professionals.*

Health Care for Health Care Workers—Iowa

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