U.S. HOME CARE VORKERS



U.S. HOME CARE WORKERS

Nearly 2.3 million home care workers provide personal assistance and health care support to older adults and people with disabilities in their homes and other community-based settings across the United States.¹

Within the next decade, from 2016 to 2026, the home care sector will need to fill 4.2 million home care worker job openings.² This estimate includes one million new jobs that will be created due to rising demand for home care services, continuing a dramatic trend: the home care workforce already doubled in size from 2008 to 2018.³ This employment growth is caused by the rapid expansion of the older adult population, paired with an ongoing shift in the provision of long-term services and supports from nursing homes to private homes and communities.

The other 3.2 million job openings will be created when workers leave the field,⁴ often because of poor job quality. With a median hourly wage of \$11.52 and inconsistent work hours,⁵ home care workers typically earn \$16,200 annually.⁶ One in six home care workers lives below the federal poverty line and more than half rely on some form of public assistance. If these trends continue in the years ahead, home care employers will struggle to recruit and retain enough workers to fill projected job openings.

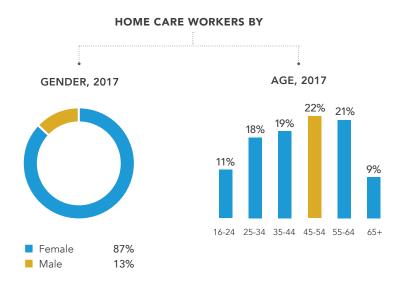


Chart Source: Ruggles, Steven, Sarah Flood, Ronald Goeken, Josiah Grover, Erin Meyer, Jose Pacas and Matthew Sobek. 2019. *IPUMS USA: Version 9.0.* Minneapolis, MN: IPUMS, University of Minnesota. https://doi.org/10.18128/D010.V9.0; analysis by PHI (July 8, 2019).

WHO ARE HOME CARE WORKERS?

Home care workers are direct care workers (**personal care aides**, **home health aides**, and **nursing assistants**) who assist older adults and people with disabilities in their homes.

• Nearly 9 in 10 home care workers are women, and their median age is 46.

Home care roles generally have low legal and employer-based requirements for education, experience, and training. As a result, workers may find opportunities in home care when they would otherwise encounter language, educational, or discriminatory barriers.

- While people of color make up just over one-third of the total U.S. workforce,⁷ they comprise 62 percent of all home care workers.
- Immigrants constitute 31 percent of the home care workforce,⁸ compared to 17 percent of all workers in the U.S.⁹ Thirty-seven percent of home care workers born outside of the U.S. report speaking English "not well" or "not at all."
- Half of home care workers have completed no formal education beyond high school.

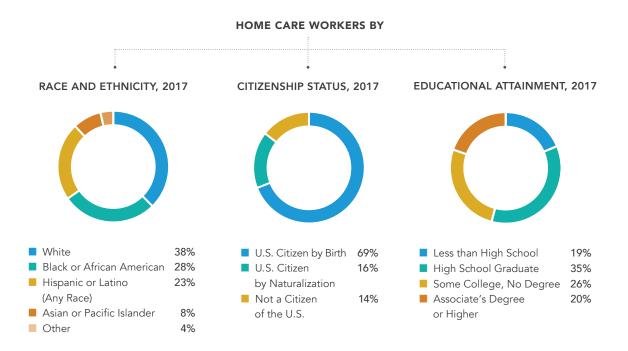


Chart Source: Ruggles, Steven, Sarah Flood, Ronald Goeken, Josiah Grover, Erin Meyer, Jose Pacas and Matthew Sobek. 2019. *IPUMS USA: Version 9.0.* Minneapolis, MN: IPUMS, University of Minnesota. https://doi.org/10.18128/D010.V9.0; analysis by PHI (July 8, 2019). "Hispanic or Latino" refers to people of any race who identify as Hispanic or Latino; these individuals are excluded from all other race/ethnicity categories.

THE ROLE OF HOME CARE WORKERS

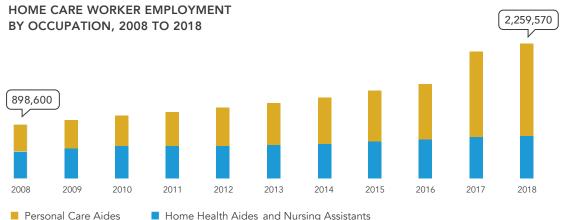
All home care workers assist older adults and people living with disabilities with daily tasks such as eating, dressing, and bathing, while other responsibilities differ across occupational groups. Personal care aides also provide other household assistance and/or social support to help individuals remain active in their communities. **Home** health aides and nursing assistants perform certain clinical tasks under the supervision of a licensed professional. (See Notes on Occupational Titles and Industry Classifications on page 9 for more details.)

 The home care workforce more than doubled in size over the past 10 years, from nearly 899,000 in 2008 to almost 2.3 million in 2018.

Personal care aides accounted for 81 percent of this growth, reflecting the increasing demand for non-medical in-home support.

• It is very difficult to accurately estimate the number of home care workers who are directly hired by consumers as "independent providers." PHI estimates that at least one million independent providers are employed through Medicaid-funded consumer-directed programs, given the most recent survey data on consumer enrollment in these programs.¹⁰

A proportion of independent providers are now captured by the Bureau of Labor Statistics Occupational Employment Survey, due to a 2017 methodological change. However, the accuracy of this data varies by state, and likely excludes many independent providers. In all cases, these data exclude home care workers who are hired directly by consumers through the "gray market."



Home Health Aides and Nursing Assistants

Chart Source: U.S. Bureau of Labor Statistics (BLS), Division of Occupational Employment Statistics (OES). 2019. May 2008 to May 2018 National Industry-Specific Occupational Employment and Wage Estimates. https://www.bls.gov/oes/current/ oessrci.htm; analysis by PHI (July 2, 2019).

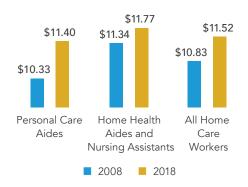
- Home care workers constitute 51 percent of the total direct care workforce, which also includes workers who are employed in nursing homes and a range of other settings.¹¹ The total number of direct care workers across all industries tracked by the Bureau of Labor Statistics is 4.5 million workers.
- Home care jobs are predominantly government-funded. **Payments from public programs (primarily Medicare and Medicaid) constitute two-thirds to threequarters of total home care industry revenue.**¹²

THE CHALLENGES FOR THIS WORKFORCE

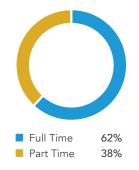
• Home care workers' wages have risen slightly over the past 10 years: inflationadjusted median hourly wages were \$10.83 in 2008 and \$11.52 in 2018. This means that the purchasing power of home care workers' wages has improved slightly over time.

Personal care aide wages rose by \$1.07 over that decade, while wages for home health aides and nursing assistants working in home care increased by \$0.43. However, personal care aide wages remain lower than home health aide and nursing assistant wages, at a median wage of \$11.40 compared to \$11.77.

• Two in five home care workers work part time, defined as fewer than 35 hours per week. Thirty-one percent work part time for "noneconomic reasons," which include personal or family obligations and health problems. Seven percent work part time for "economic reasons," which means they are not able to find full-time work due to business conditions at their workplaces or economic pressures in the broader labor market. HOME CARE WORKER MEDIAN HOURLY WAGES ADJUSTED FOR INFLATION, 2008 TO 2018

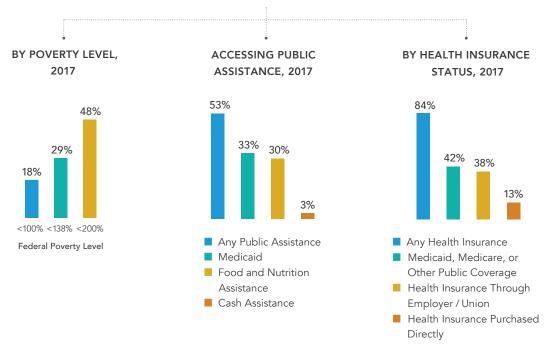


HOME CARE WORKERS BY EMPLOYMENT STATUS, 2018



Charts Source: U.S. Bureau of Labor Statistics (BLS), Division of Occupational Employment Statistics (OES). 2019. May 2008 to May 2018 National Industry-Specific Occupational Employment and Wage Estimates. https://www.bls.gov/oes/ current/oessrci.htm; analysis by PHI (July 2, 2019); Flood, Sarah, Miriam King, Renae Rodgers, Steven Ruggles and J. Robert Warren. 2019. IPUMS, Current Population Survey: Version 6.0. Minneapolis, MN: IPUMS, University of Minnesota. https://doi.org/10.18128/D010.V9.0; analysis by PHI (July 8, 2019).

- Twenty-eight percent of home care workers did not work year-round in the previous year.¹³
- Altogether, over half (55 percent) of the home care workforce report working part time or for part of the year in the previous year.
- Because of low wages and inconsistent schedules, the median annual income for home care workers is \$16,200.¹⁴
- Low incomes lead to high poverty rates among home care workers: **nearly one in five lives in a household below the federal poverty line and nearly half (48 percent) live in low-income households.**¹⁵
- Because of high poverty rates among home care workers, more than half receive some form of public assistance.
- Sixteen percent of home care workers lack health insurance. Forty-two percent rely on public health care coverage, most commonly Medicaid.



HOME CARE WORKERS

Chart Source: Ruggles, Steven, Sarah Flood, Ronald Goeken, Josiah Grover, Erin Meyer, Jose Pacas and Matthew Sobek. 2019. *IPUMS USA: Version 9.0.* Minneapolis, MN: IPUMS, University of Minnesota. https://doi.org/10.18128/D010.V9.0; analysis by PHI (July 8, 2019).

FUTURE DEMAND FOR HOME CARE WORKERS

- From 2016 to 2026, the home care workforce will have 4.2 million openings: 1.8 million workers will leave the labor force, 1.4 million workers will move into other occupations, and over one million new positions will be created.¹⁶ This workforce will rank among the top five occupations for projected job openings, and two out of three openings will be personal care aide positions.
- The home care workforce is projected to add more new jobs than any other single occupation in the U.S. Most new jobs in home care (60 percent) will be personal care aide positions.

OCCUPATIONS WITH THE MOST JOB OPENINGS, 2016 TO 2026

OCCUPATIONS WITH THE MOST JOB GROWTH, 2016 TO 2026

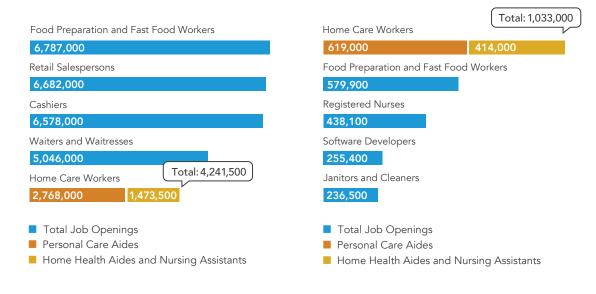
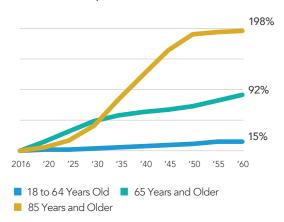


Chart Source: U.S. Bureau of Labor Statistics (BLS), Employment Projections Program (EPP). 2017. Employment Projections: 2016–26, National Employment Matrix - Occupation. https://www.bls.gov/emp/; BLS, EPP 2017. Employment Projections: 2016–26, Occupational Projections Data. https://www.bls.gov/emp/; analysis by PHI (July 15, 2019). Separations include job openings due to labor force exits and occupational transfers, meaning workers who leave the sector for jobs in other fields.

PROJECTED POPULATION GROWTH BY AGE GROUP, 2016 TO 2060



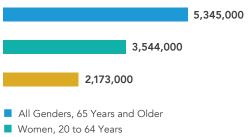
 From 2016 to 2060, the population of adults aged 65 and older will nearly double, from 49.2 million to 94.7 million.

The number of adults aged 85 and older is expected to nearly triple over the same period, from 6.4 million to 19 million. This demographic shift is the primary driver of employment growth for home care workers.

• In contrast to the rapid growth of the older adult population, the population of adults aged 18 to 64—who are most likely to fill caregiving roles—is expected to remain relatively static. Currently, there are 31 working-age adults for every adult over age 85; by 2060, that number will drop to 12.

 The number of women aged 20 to 64, who currently comprise the majority of the home care workforce, will increase by 3.5 million from 2016 to 2026. During the same period, 2.2 million more men will join the labor force, and the number of older adults participating in the labor force will increase by 5.3 million. Given the projected number of home care job openings in the years ahead, employers will need to recruit new workers from across all these segments of the labor force.

INCREASE IN LABOR FORCE PARTICIPATION BY GENDER AND AGE, 2016 TO 2026



Men, 20 to 64 Years

High turnover and soaring demand will create millions of home care worker job openings over the coming decade. However, current vacancies are already difficult to fill. To ensure older adults and people with disabilities receive the services and supports that they need, it will be necessary to improve the quality of home care jobs. Recruitment and retention of home care workers will be strengthened by higher wages and benefits, stable schedules and full-time hours, better training and advancement opportunities, and improved working conditions.

Chart Sources: U.S. Census Bureau. 2017. National Population Projections Tables, Table 2. Projected Age and Sex Composition of the Population. https://census.gov/data/tables/2017/demo/popproj/2017-summary-tables.html; U.S. Bureau of Labor Statistics (BLS), Employment Projections Program. 2017. Employment Projections: 2016–26, Table 3.4. Civilian Labor Force by Age, Sex, Race, and Ethnicity, 1996, 2006, 2016, and Projected 2026. https://www.bls.gov/emp/tables.htm; analysis by PHI (July 10, 2019).

NOTES ON OCCUPATIONAL TITLES AND INDUSTRY CLASSIFICATIONS

OCCUPATIONAL TITLES

The direct care worker occupational categories used in this report are defined by the Standard Occupational Classification (SOC) system developed by the Bureau of Labor Statistics (BLS) at the U.S. Department of Labor (DOL). Under this classification system, workers are classified based on their on-the-job responsibilities, skills, education, and training. Occupation definitions can be found at: http://www.bls.gov/SOC. In practice, state regulations, employer norms, and other factors determine the roles and responsibilities associated with occupational titles in home care.

TITLE	OTHER TITLES	JOB DESCRIPTION
Personal Care Aides (SOC 39-9021)	Personal Care Attendant, Personal Assistant, Direct Support Professional (for people with intellectual and developmental disabilities); also includes Independent Providers (who are employed directly by consumers)	In addition to assisting with activities of daily living (ADLs), personal care aides often help with housekeeping, chores, meal preparation, and medication management. They also help individuals go to work and remain engaged in their communities, and they advise on nutrition, household maintenance, and other activities.
Home Health Aides (SOC 31-1011)	Home Hospice Aide, Home Health Attendant	In addition to assisting with ADLs, home health aides also perform clinical tasks such as wound care, blood pressure readings, and range-of- motion exercises. Their work is supervised by licensed nurses or therapists.
Nursing Assistants (SOC 31-1014)	Certified Nursing Assistant, Certified Nursing Aide, Nursing Attendant, Nursing Aide, Nursing Care Attendant	In most states, nursing assistant credentials are portable to home- and community-based settings. In the context of home care, nursing assistants perform the same work as home health aides.

HOME CARE INDUSTRIES

Home care industries are defined by the North American Industry Classification System (NAICS) developed by the Office of Management and Budget (OMB). Business establishments are coded based on their primary activity. Industry definitions can be found at https://www.census.gov/eos/www/naics/.

TITLE	EXAMPLES	INDUSTRY DESCRIPTION
Home Health Care Services (NAICS 621610)	Home Health Care Agencies, Visiting Nurse Associations, In-Home Hospice Care Services	This industry comprises establishments that provide personal care, homemaking, and companionship services. These establishments also provide skilled nursing care and a range of other home-based medical services.
Services for the Elderly and Persons with Disabilities (NAICS 624120)	Non-Medical Home Care Providers, Homemaker Service Providers, Self-Help Organizations, Companion Service Providers, Adult Day Care Centers, Activity Centers for Older Adults and People with Disabilities	This industry comprises establishments that provide social assistance services to improve the quality of life for older adults, persons diagnosed with intellectual and developmental disabilities, or persons with disabilities who live in their homes and communities. Services include non-medical personal care and homemaker services.

DATA SOURCES AND METHODS

The analyses in this fact sheet include personal care aides, home health aides, and nursing assistants who are employed in two home care industries: Home Health Care Services and Services for the Elderly and Persons with Disabilities. All numbers are rounded to the nearest whole number unless shown otherwise.

Wage and employment trends were sourced from the Bureau of Labor Statistics (BLS) Occupational Employment Statistics (OES) program, and employment projections were sourced from the BLS Employment Projections program.

Home care worker wages were calculated as a weighted average of median hourly wages for each occupation in each industry. In this context, median wages are preferable to mean wages, which are skewed by a small proportion of atypically high-paid home care workers. The Consumer Price Index for All Urban Consumers (Current Series) was used to adjust wages for inflation to 2018 dollars. Home care worker demographics, annual earnings, poverty status, reliance on public assistance, and health insurance status were sourced from the U.S. Census Bureau's American Community Survey (ACS). Current employment status was sourced from the basic monthly U.S. Census Bureau's Current Population Survey (CPS). Data on hours and weeks worked in the previous year were sourced from the CPS March Supplement. Since the ACS and CPS do not provide data at the level of the Services for the Elderly and Persons with Disabilities industry, the parent industry (Individual and Family Services) was used for these analyses instead.

NOTES

1. U.S. Bureau of Labor Statistics (BLS), Division of Occupational Employment Statistics (OES). 2019a. *May 2008 to May 2018 National Industry-Specific Occupational Employment and Wage Estimates*. https:// www.bls.gov/oes/current/oessrci.htm; analysis by PHI (July 2, 2019).

2. U.S. Bureau of Labor Statistics (BLS), Employment Projections Program (EPP). 2017. Employment Projections: 2016–26, National Employment Matrix -Occupation. https://www.bls.gov/emp/; analysis by PHI (July 15, 2019).

3. BLS OES, 2019a.

4. BLS EPP, 2017.

5. BLS OES, 2019a.

6. Ruggles, Steven, Sarah Flood, Ronald Goeken, Josiah Grover, Erin Meyer, Jose Pacas and Matthew Sobek. 2019. *IPUMS USA: Version 9.0.* Minneapolis, MN: IPUMS, University of Minnesota. https://doi.org/10.18128/D010. V9.0; analysis by PHI (July 8, 2019).

7. Ruggles et al., 2019.

8. The unrounded numbers for U.S. citizens by naturalization and non-citizens are 16.47 percent and 14.46 percent, which is why this summary percentage (31 percent) does not align directly with the percentages shown in the figure on citizenship status.

9. Ruggles et al., 2019.

10. Edwards-Orr, Merle and Kathleen Ujvari. 2018. *Taking It to the Next Level: Using Innovative Strategies to Expand Options for Self-Direction*. Washington, D.C.: AARP Public Policy Institute. https://www.aarp.org/ppi/ info-2018/taking-it-to-the-next-level-using-innovativestrategies-to-expand-options-for-self-direction.html. **11.** BLS OES, 2019a; BLS, OES. 2019b. May 2018 National Occupational Employment and Wage Estimates. https:// www.bls.gov/oes/current/oessrci.htm; analysis by PHI (July 2, 2019). Other industries employing direct care workers include (but are not limited to) continuing care retirement communities, assisted living facilities, residential facilities, employment services, and vocational rehabilitation services.

12. This estimate is drawn from two sources. According to the U.S. Census Bureau's Service Annual Survey, payments from public programs constituted 65 percent of revenue in the Home Health Care Services industry in 2017. According to the 2012 Economic Census (the most recent year of this survey), public payments accounted for 79 percent of industry revenue in the Services for the Elderly and Persons with Disabilities industry. U.S. Census Bureau. 2018. Service Annual Survey, Table 4: Estimated Sources of Revenue for Employer Firms: 2013 through 2017. https://www.census.gov/data/tables/2017/ econ/services/sas-naics.html; U.S. Census Bureau. 2012. Economic Census of the United States, Health Care and Social Assistance: Subject Series - Misc Subjects: Receipts/Revenue by Type of Social Assistance for the U.S.: 2012. https://factfinder.census.gov/bkmk/table/1.0/ en/ECN/2012_US/62SXSB6//naics~62412; analysis by PHI (July 16, 2019).

13. Flood, Sarah, Miriam King, Renae Rodgers, Steven Ruggles and J. Robert Warren. 2019. *IPUMS, Current Population Survey: Version 6.0.* Minneapolis, MN: IPUMS, University of Minnesota. https://doi.org/10.18128/D010. V9.0; analysis by PHI (July 8, 2019).

14. Ruggles et al., 2019.

15. Federal poverty thresholds, which are updated each year, can be accessed here: https://www.census.gov/data/tables/time-series/demo/income-poverty/historical-poverty-thresholds.html.

16. BLS EPP, 2017.

PHI works to transform eldercare and disability services. We foster dignity, respect, and independence for all who receive care, and all who provide it. As the nation's leading authority on the direct care workforce, PHI promotes quality direct care jobs as the foundation for quality care.

Drawing on 25 years of experience working side-by-side with direct care workers and their clients in cities, suburbs, and small towns across America, PHI offers all the tools necessary to create quality jobs and provide quality care. PHI's trainers, researchers, and policy experts work together to:

- Learn what works and what doesn't in meeting the needs of direct care workers and their clients, in a variety of long-term care settings;
- Implement best practices through hands-on coaching, training, and consulting, to help long-term care providers deliver high-quality care;
- Support policymakers and advocates in crafting evidence-based policies to advance quality care.

For more information, visit PHI at PHInational.org and 60CaregiverIssues.org.



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