

Home-Based Care Provider Health

Research Findings

Comparison of BRFSS Data Between Home-Based Care Providers and Health Care Support Workers in Clinical Environments in Washington State

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Overview

The health care industry in the United States is changing, and the locus of care is shifting from clinical settings to private homes.

There is increasing demand for workers who provide health care support services in the home, such as home health aides, home care aides, and personal care aides.

Little is known about the health of support workers who provide homebased health care.

This study used Washington
Behavioral Risk Factor Surveillance
System (WA BRFSS) data from 2011
to 2016 to compare the health of
home-based care support workers
with other health care support
workers.

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Research for Safe Work

The SHARP Program at the Washington State Department of Labor & Industries partners with business and labor to develop sensible, effective solutions to identify and eliminate industry-wide hazards. Learn more at www.Lni.wa.gov/Safety/Research

Key Findings

Most home-based health care workers were women (83.1%).

Compared to health-care support workers in clinical settings:

- More home-based workers were:
 - Older (mean age 44.9 years vs. 37.5 years)
 - o Obese (35.8% vs. 23.2%)
 - Current cigarette smokers (31.3% vs. 15.4%)
- More home-based workers had chronic health conditions:
 - Arthritis (33.2% vs. 18.6%)
 - o Diabetes (9.4% vs. 3.1%)
 - Depression (32% vs. 30.5%)
- Home-based workers had more days in poor physical health in the past month (mean 4.2 days vs. 2.1 days).

Impact

The results of this study suggest that home-based health care support providers may have different underlying health issues than other health care occupational groups. The health of home-based workers is an important factor in their ability to remain in their jobs and delivery quality care. Limited data on the factors that may contribute to occupational injuries makes it difficult to inform the development of injury prevention strategies for this working population. Occupational safety and health programs should be developed that are tailored to the unique needs of these workers.

Find the article here:

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