ELDERCARE & ECONOMIC GROWTH

The health care sector is a major engine of economic growth in the U.S. In fact, in some states, health care has been the only employment field that has grown over the last five years, while all other sectors have declined or remained flat.\(^1\) According to the Bureau of Labor Statistics, the health care labor market is expected to generate more than 3.2 million new wage and salary jobs by 2018, more than any other industry, largely in response to the rapid growth in the elderly population.\(^2\)

WHO WILL CARE?

Creating enough jobs to revitalize our economy requires examination of sectors where demand is strong. Currently more than 35 million Americans are over 65 and more than 6 million are over 85. An estimated 90 percent of them have one or more chronic conditions. Many of these people require person-centered, coordinated care that helps them to live in a home or community-based setting for as long as possible. Eldercare services are in demand – a demand that will only grow as our older adult population surges. We need policies which attract and train people to provide quality care and jobs that offer livable wages and benefits that help to retain people in the field.

IT TAKES A TEAM

We know that the best way to care for older adults with multiple chronic conditions is through interdisciplinary team care. To optimize effectiveness and efficiency, a wide range of health care providers - physicians, nurses, direct-care workers, psychologists, social workers, pharmacists, physical therapists - along with consumers and family caregivers at the center of the team, must all work together to provide quality care. But with too few people entering these professions and receiving the training to provide this unique team care, we will fail our nation’s older adults - and miss an opportunity to provide meaningful employment for millions of Americans.

SUPPORTING OUR ECONOMY BY SUPPORTING FAMILIES

U.S. businesses lose up to an estimated $33.6 billion per year in lost work days and diminished employee productivity from full-time caregiving employees.\(^3\) Without investments that strengthen the workforce, family and other informal caregivers and, indirectly, their employers, will suffer. Family caregivers can face physical, emotional, mental, and financial challenges in their caregiving role. A well-coordinated eldercare team can help address these challenges by supporting these families and allowing Americans to be more productive while keeping their loved ones at home, or in the appropriate care setting. Building a strong workforce will create jobs and help businesses.
SOLUTIONS

Strengthening the eldercare workforce will strengthen America’s economy. We must incorporate the need for a well-trained eldercare workforce into our job creation policies. Drawing people into the fields of eldercare, including geriatrics and gerontology can generate jobs and address our looming crisis in care. We recommend supporting these efforts by:

1. **Providing Quality Care through Quality Jobs.** Direct-care workers provide critical support to older adults in need of long-term care, providing eight out of every ten hours of paid services delivered. This field, which is increasing at three times the rate of other jobs within the U.S. economy, provides the best opportunity for caring individuals to obtain vital employment positions. To ensure that all direct-care workers are able to provide the highest-quality care to all long-term care consumers, these positions should offer comprehensive training, certification, and career advancement opportunities; have livable, family-sustaining wages; affordable health insurance and other benefits; as well as full-time hours if desired and balanced workloads.[1]

2. **Avoiding recommendations which eliminate jobs.** The direct-care workforce is a powerful engine for job creation in the U.S. Totaling 3.2 million in 2008, the number of direct-care workers exceeds the number of registered nurses, school teachers (K-12), cashiers, and fast food workers. Employment projections predict the need for an additional 1.1 million direct-care jobs by 2018. Medicaid is the primary source of funding for these jobs. If Medicaid reduces payments for long-term services and supports (LTSS), the workforce will shrink, thereby increasing unemployment, hurting local communities, and limiting access to the long-term services and supports needed by many older adults and people with disabilities.

3. **Supporting Title VII and VIII Training Programs.** Despite the growing need for services, there is a current and future shortage of health professionals and direct-care workers with specialized training in geriatrics and an even greater shortage of the geriatrics faculty needed to train the entire workforce. Title VII Geriatrics Health Professions programs are the only federal programs that increase the number of faculty with geriatrics expertise in a variety of disciplines and offer critically important geriatrics training to the entire healthcare workforce. Title VIII Geriatrics Nursing Workforce Development Programs are the primary source of federal funding for advanced education nursing, workforce diversity, nursing faculty loan programs, nurse education, practice and retention, comprehensive geriatric education, loan repayment, and scholarship. Nursing jobs are expected to grow by more than 20 percent between now and 2018. These programs are essential to having the faculty needed to train providers.

4. **Maintaining funding for implementation of health care workforce provisions of the Affordable Care Act (ACA).** The National Health Care Workforce Commission, established by the ACA, plays a central role in formulating a national strategy for bolstering the health care workforce in order to meet the needs of the burgeoning numbers of older Americans. In addition, the ACA reauthorized and built upon essential training and education programs in geriatrics, which are critical to ensuring that older adults receive quality health care. It is estimated that by 2030, 3.5 million additional health care professionals and direct-care workers will be needed in order to meet growing demand for care.

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**Demand for Health Care Jobs**

<table>
<thead>
<tr>
<th>Expected Growth Rate</th>
<th>Percentage of Expected Job Growth from 2008 - 2018</th>
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<tbody>
<tr>
<td>Rapid</td>
<td>60%</td>
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<tr>
<td>Faster than average</td>
<td>40%</td>
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<tr>
<td>As fast as average</td>
<td>20%</td>
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*For all health care providers, not just eldercare.* [1]

* BLS data includes individuals with bachelors, masters, and doctoral degrees; a doctoral degree is usually considered entry-level for independent practice as psychologists.

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FOR MORE INFORMATION

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The Eldercare Workforce Alliance is a project of The Advocacy Fund

The positions of the Eldercare Workforce Alliance reflect a consensus of 75 percent or more of its members. Statements reflect the consensus of the Alliance and do not necessarily represent the position of individual Alliance member organizations.