

Transportation Solutions for Structural Inequities Affecting Home Healthcare Workers and the Older Adults and Caregivers Served in Diverse Communities: A Novel Stakeholder-Partnered Approach

O. Okereke^{1,2}, V. Anable Eme¹, K. Totten³, A. Simmons⁴, N. Carpenter⁴, J. Locascio⁵, E. Smith¹, D. McCauley⁶, T. O'Malley⁷, M. Cantor⁸, A. Weiner¹

Background

Home health aides (HHAs)

- Provide on-site support for homebound older adults with cognitive impairments
- Lessen strain on familial caregivers.
- Face challenges of structural inequities in work-related transportation

Method

MGH researchers partnered with community and corporate stakeholders to inform a study using on-demand transportation for HHAs via Uber rides to:

- 1) Improve metrics among HHAs (total visits, total unique patients, hours/week and days/week worked, missed visit/no-show rates, work satisfaction);
- 2) Increase racial, ethnic, socioeconomic and geographic diversity of older adults with cognitive impairments receiving home care

	Parking	Payment Handling	Range	Time Cost	Central Coordination
Personal Vehicle	Required	Up front by HHA (gas & parking)	Unlimited	Time needed for driving & parking	Not available
Bus	Not required	Up front by HHA (fares)	Limited	Lengthy; unreliable schedule	Not available
Train	Not required	Up front by HHA (fares)	Limited	Lengthy; unreliable schedule	Not available
Uber Health	Not required	None by HHA	Unlimited	Least; more time for other tasks	Standard
Taxi	Not required	Up front by HHA or Voucher	Partial; depends on area	Depends on area	Not available

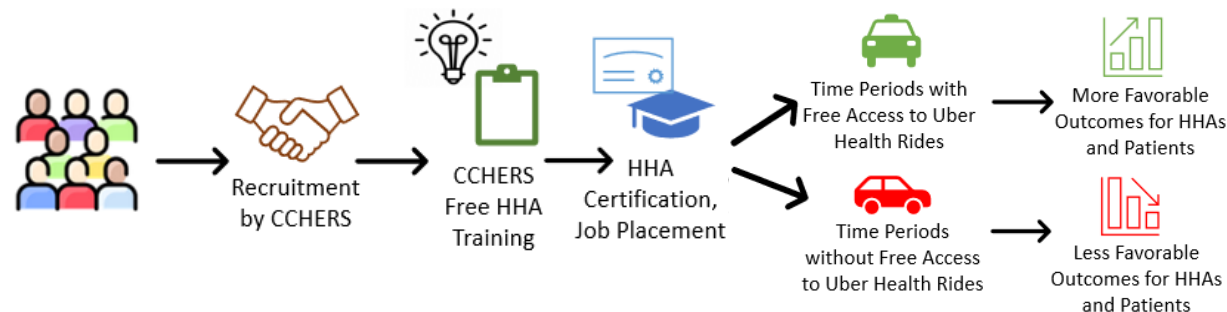
Results

Expected findings



Stakeholders/Partners

- **CCHERS** (Center for Community Health Education Research Services) helps residents of public or publicly-assisted housing in high-need areas of Boston to get training and employment as HHAs
- **CCHERS and community partners:** Mothers for Justice & Equality, HomeCare Aide Council, Mass HomeCare Alliance → **Most-cited structural barrier** affecting HHAs and equitable homecare delivery: **lack of affordable, accessible, reliable transportation**
- **Uber Health:** Preliminary social-impact case studies found central ride-coordination preferred by Black and Hispanic women in the 18-45y age group (~80% of the local HHA workforce)



Conclusion

Community-engaged approach, innovative partnerships, and focus on equity objectives led to a study with strong potential for local impacts and future implications for policies to provide high-quality, equitable homecare through transportation solutions for structure barriers.

Affiliations: 1. Geriatric Psychiatry Clinical and Research Program, Department of Psychiatry, Massachusetts General Hospital, 2. MGH Psychiatry Center for Racial Equity and Justice, Department of Psychiatry, Massachusetts General Hospital, 3. Pear Associates, 4. Center for Community Health Education Research and Service (CCHERS), 5. Department of Neurology, Massachusetts General Hospital, 6. Division of Clinical Research, Massachusetts General Hospital, 7. Department of Medicine, Massachusetts General Hospital, 8. Uber Health