



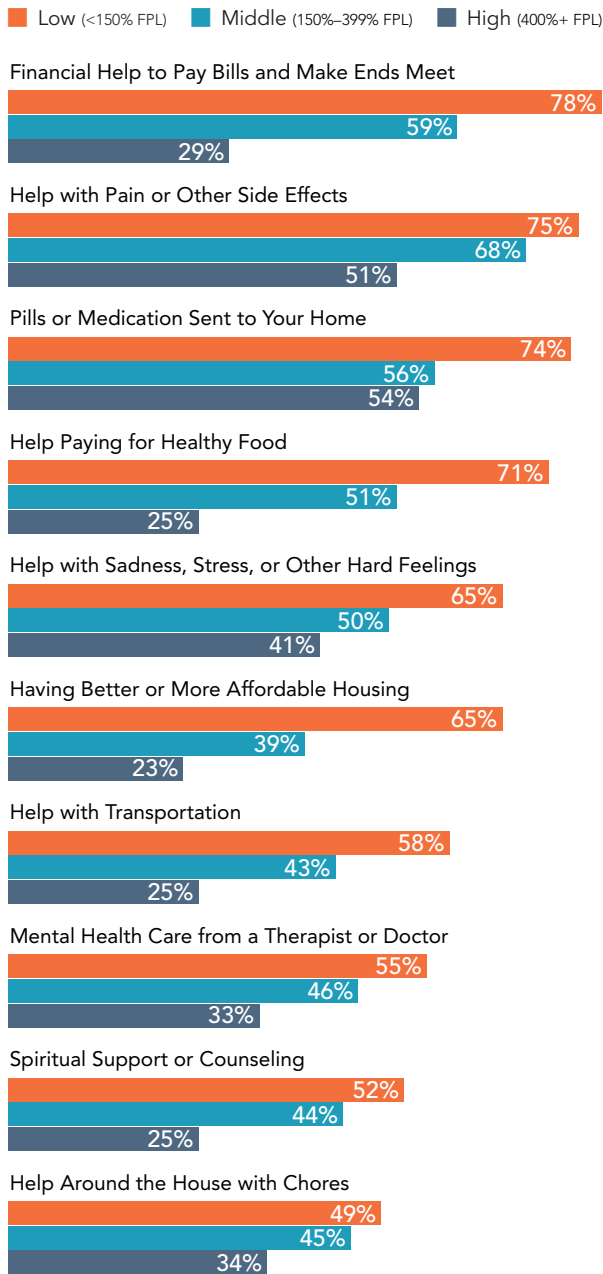
Extra Support Most Helpful to Low-Income Californians with Serious Illness

Interest in support beyond disease treatment is strongest among Californians with low incomes.¹ Many people living with a serious illness, such as cancer, heart failure, or chronic obstructive pulmonary disease (COPD), face not only the physical symptoms and treatment burdens of their illness but also significant emotional impacts from their disease. These may include feeling anxious and confused, or experiencing loss of control, psychological or spiritual distress, or isolation. For people with serious illness, especially those with low incomes, financial burdens can compound these emotional impacts.² In 2017, nearly one-third of California adults lived in low-income families.³

In a recent survey of Californians, low-income adults with a serious illness⁴ reported the highest level of interest in getting extra help on top of regular medical care, such as assistance dealing with pain or other side effects, handling stress or other hard feelings, or learning how to live better with their illness. When asked if they would like this type of extra help, 48% of low-income respondents said “definitely yes” and 34% said “probably yes.” In contrast, 27% of high-income respondents said “definitely yes” and 42% said “probably yes.”

The majority of low-income Californians with serious illness are interested in variety of supports. Among Californians with a serious illness, the perceived helpfulness of supports beyond disease treatment was greatest among those with low incomes. Across all 10 supportive services described in the survey, a higher percentage of low-income respondents with serious illness reported that the service would be very or somewhat helpful compared to respondents with higher incomes (Figure 1).

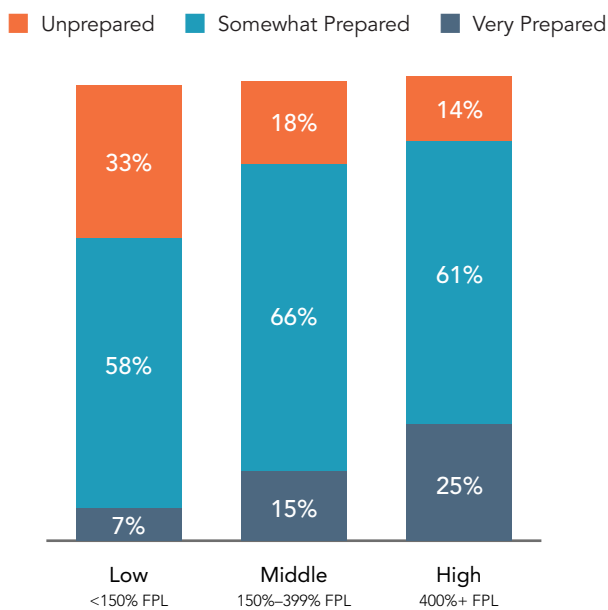
Figure 1. Percentage with Serious Illness Reporting Service as Very or Somewhat Helpful, by Income Level



Note: In 2019, the federal poverty level (FPL) was \$12,490 for a single person and \$25,750 for a household of four.

Low-income Californians are less likely to feel prepared or have caregiver. Low-income Californians with a serious illness reported feeling less prepared to deal with their illness if it got worse in the future. Less than 1 in 10 (7%) of low-income Californians felt very prepared to deal with their illness if it got worse, compared to 1 in 4 high-income Californians with serious illness. And 1 in 3 low-income Californians with serious illness reported feeling unprepared. See Figure 2.

Figure 2. Level of Preparedness to Deal with Illness if It Gets Worse, by Income Level



Notes: *Unprepared* includes *not at all prepared* and *not very prepared* responses combined. In 2019, the federal poverty level (FPL) was \$12,490 for a single person and \$25,750 for a household of four. Segments may not total 100% due to non-response or rounding.

For most people living with a serious illness, family members and friends serve in the critical role of caregiver and provide essential emotional, physical, and practical support. Just over half (52%) of low-income Californians with a serious illness had someone in their life who could take care of them if they were no longer able to work or take care of themselves; in contrast, nearly three-quarters (73%) of high-income Californians with a serious illness reported having a potential caregiver.

Palliative care can help provide many of these necessary supports. Palliative care, which is specialized medical care for people living with a serious illness, focuses on improving quality of life. It can help relieve physical and emotional suffering at all stages of serious illness and can be provided alongside curative treatment. Palliative care specialists provide support to both the patient with the serious illness and the patient’s caregivers and either directly address or help connect patients and families to resources for the services that survey respondents indicated would be helpful. In California, Medi-Cal (Medicaid) managed care plans are required to provide access to palliative care for patients that meet certain eligibility criteria. Despite the clear fit of palliative care to address these needs and the availability of these services, only one in five low-income survey respondents had ever heard of palliative care.

TAKEAWAY Low-income Californians with a serious illness desire support beyond treatment of their disease, such as help with pain and side effects and the emotional impacts and practical challenges of living with a serious illness. Palliative care can help to provide this level of support to patients and their families and caregivers.

Endnotes

1. In this brief, *low income* is defined as less than 150% of the federal poverty level (FPL), *middle income* is 150%–399% FPL, and *high income* is 400% FPL and above. In 2019, the FPL was \$12,490 for a single person and \$25,750 for a household of four.
2. *Health Care in America: The Experience of People with Serious Illness*, The Commonwealth Fund, October 2018, [features.commonwealthfund.org](https://www.commonwealthfund.org/features).
3. Defined as having family income less than 150% of the FPL. Source: Custom data request, State Health Access Data Assistance Center, University of Minnesota, received August 29, 2019.
4. Respondents who reported having one or more of the following diagnoses: emphysema or COPD, heart failure, cancer, a stroke, HIV/AIDS, cirrhosis or late-stage liver disease, or chronic or end-stage kidney disease.

This fact sheet is based off of the 2019 survey *Californians’ Attitudes Toward and Experiences With Serious Illness and End-of-Life Care* by PerryUndem. This statewide survey included 2,588 adult Californians. Detailed survey results and additional resources are available at www.chcf.org/helpwanted.