

# Health aides seek \$16 million boost

## Rural program asks Congress for help

The Community Health Aide Program, the means by which nearly 50,000 rural Alaska Natives receive primary health care, is in grave trouble despite financial help from Congress last year, according to Debra Caldera, the program's director.

In early 1988 the Alaska Native Health Board became concerned about Alaska's CHAP and commissioned a study of the program to identify problems contributing to program instability and to develop a plan for stabilizing it.

The report, *Alaska Community Health Aide Program In Crisis*, reported that the program had significant problems resulting in compromised quality of care at the village level.

The main problems were:

- A community health aide attrition rate of 33 percent of the work force.
- A lack of health aide training needs — 57 percent of the aides working had not completed basic training but were responsible for the provision of care.
- The program was funded at 25 percent of the level needed.

At a time when the program was funded at about \$7 million, the document demonstrated a need for a bare bones, no frills program at \$28.7 million.

The Alaska Native Health Board and members of the Native community appealed to Congress to raise the level of program funding to \$28.7 million. Congress responded to letters from health aides, village residents served by the program and other concerned individuals by raising the level of funding by \$5 million for Fiscal Year 1989.

This brought the current level of funding to \$12 million, or 41 percent of the level needed, Caldera said, and the unmet need is still \$16.7 million.

According to Caldera, strengthening the health aide program remains the top priority of the Alaska Native Health Board and all those associated with and served by the program. This can only be accomplished through achievement of full funding for the program.

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Congress is now considering the budget for FY 90. Both the House and Senate have submitted budget proposals for FY 90 which differ in dollar amounts allocated to the program.

The House budget proposal does not include any increase to the health aide program for FY 90 while the Senate budget includes a \$7 million increase.

The Senate increase is a result of the efforts of Sen. Ted Stevens, R-Alaska, Caldera said.

A conference will be held after the Labor Day recess during which congressional members of both the House and Senate appropriations committees will consider the budget proposals.

The House Senate Conference Committee must produce a single budget which will be submitted to President George Bush for his signature.

The community health aide program is seeking assistance in urging legislators to increase the program's funding for FY 90.

According to Caldera, letters and telegrams to legislators from all levels of the Native community were important last year in achieving a program increase.

That same effort is needed again this year to secure another increase, she said.

The \$7 million increase is needed to continue to stabilize the program and improve the quality of care provided in rural Native communities, she said.

The funds, Caldera said, would be used to:

- Reduce health aide stress and burnout through adding aide positions and implementing a reasonable work schedule.

- Expand health aide training programs to provide basic training of a minimum of 10 weeks to all health aides.

- Provide better support to the health aides.

- Raise health aide salaries to compensate them fairly for the tremendous responsibility they carry.