

The Caregiver Research (CARE) Project: A study of wage theft within Santa Clara County caregiving industry

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ABSTRACT

Through both qualitative and quantitative analysis using community-based participatory research methods, participant observation, and interviews of Filipino caregivers for the elderly and disabled, this study examines the living and working conditions of caregivers in Santa Clara County, with a particular focus on wage theft. It finds that employers utilize a variety of schemes to steal wages from caregivers, including pay below minimum wage; lack of payment for hours worked; excessive deductions for food, housing, and medical insurance, sometimes without the provision thereof; and payment with bounced checks. All workers interviewed in this study have faced or are facing some form of wage theft, yet only a handful have filed legal cases against their employers due to fear of retaliation. PAWIS recommends that the County and its cities adopt and implement policies to hold unscrupulous employers accountable and ensure fair pay for all workers.

BACKGROUND AND METHODOLOGY

This study reports on the living and working conditions of Filipino caregivers for the elderly and disabledⁱ in Santa Clara County. These findings are based on data from the Caregiver Research (CARE) Project and the author's participant observation notes as the coordinator of said project and a community organizer with the Pilipino Association of Workers and Im/migrants (PAWIS).

PAWIS officially launched the CARE Project, a community-based participatory research (CBPR) project, in August 2012 due to the large number of caregivers seeking advice about exploitation and abuse in the workplace. Of a general population of 7,039,362 in the San Francisco, San Jose, and Oakland, CA region, where Santa Clara is one of nine counties, Filipina/os make up 379,196.ⁱⁱ In the same region, 6.4% of Filipina women and 2.0% of Filipino men are employed in the healthcare support industry, which includes caregivers.ⁱⁱⁱ

PAWIS chose the CBPR model because it engages and empowers the people most affected by and most aware of the issues within the caregiving industry: caregivers themselves. This service project sought to establish foundational data about the under-researched caregiving industry, pertinent to gaining legitimacy for community organizations' advocacy for caregivers' rights and protection. But more than that, it trained caregivers themselves to conduct this research in order that they can value their own stories and lived experiences, build their own skills

and capacity, build the capacity of their organization, and reach out to workers who might join, contribute to, and/or receive services from PAWIS. Through the CARE Project, the organization also aimed to establish stronger ties with individuals and organizations within the community for future collaboration.

Project Format

The CARE Project was split into three phases: (1) research trainings and preparation, (2) outreaching to workers and conducting interviews, and (3) organizing results and projecting research findings:

- Phase 1: Preparation and Training: We enlisted volunteers from other local organizations, such as Stanford University's Pilipino American Student Union (PASU) and Anakbayan Silicon Valley (ABSV), both local youth organizations. The caregivers and these volunteers participated in qualitative research trainings. In these trainings, we collectively brainstormed and compiled a list of questions based on the caregivers' experiences to be asked of fellow caregiver interviewees; with these, we created interview sheets to be used in the next phase.
- Phase 2: Interviews: Workers who participated in the trainings used their networks of family, friends, and previous and current co-workers to find interviewees for the CARE Project who could share about their experiences as caregivers. CARE Project participants also interviewed one another, such that the stories of the caregivers who took part in the trainings also contributed their own data to the CARE Project. Caregivers interviewed one another either individually at locations they themselves chose or at planned group gatherings known as *kwentuhans* ("storytelling" in Filipino).
- Phase 3: Data Analysis and Dissemination: The compilation and analysis of data, reflected in this report, were conducted by the author.

CARE project researchers collected a total of twenty-four interviews of caregivers working in group care homes for the elderly and disabled (including developmentally disabled children), in adult daycare programs, in adult daily assisted living facilities, or as domestic workers caring for single patients via agencies. The interviews were conducted between December 2012 and March 2014. Although caregivers often maintain two jobs—one or both part-time—participants in these interviews focused on positions that were recent (within the past year), stable (at least several weeks of continuous employment), and in Santa Clara County.

The author transcribed partly or fully all interviews. He performed both qualitative analysis and quantitative analysis of the data; he used the qualitative data analysis software Dedoose for the former and Microsoft Excel for the latter.

All names in this document have been falsified to protect the workers' identities.

Study Limitations

PAWIS collected a relatively small number of interviews (twenty-four). We do not have a large enough sample size to assert that the statistics in the following section are representative of all Filipino caregivers the Bay Area. However, the findings shed light on common issues faced by the interviewees and their co-workers, family members, friends, and fellow community members.

Many of those interviewed had approached PAWIS about problems in their workplaces. For this reason, caregivers who are not experiencing problems in the workplace may be less likely to be represented in the findings. On the other hand, there are also caregivers that refuse to participate in PAWIS activities due to fear of retaliation from their employers. Such caregivers, often in particularly dire circumstances, may not be fully represented either.

FINDINGS

QUANTITATIVE ANALYSIS: EXPERIENCES IN THE CAREGIVING INDUSTRY

The following statistics are represented as percentages using available data. It should be noted that not all caregivers answered each question. In some cases, caregivers did not answer particular questions because the interviewer(s) neglected to ask them or because the interviewees did not feel comfortable answering (e.g., questions on wages). In other cases, certain questions did not apply to a caregiver; for example, a live-out caregiver would not have had her wages deducted for housing, so she would not have been asked about such a deduction. Lastly, some data points did not stem from questions included in the original interview sheet but emerged as patterns in multiple caregivers' unprompted explanations. Please note number of respondents in parentheses below.

Information on Interviewees

- Live-in or Live-out (of 24 respondents)
 - 70.8% are live-in caregivers
 - 29.2% are live-out
- Place of Work (of 24 respondents)
 - 79.2% work in a residential group care home
 - 8.3% work in a daycare program
 - 8.3% work in a daily assisted living facility
 - 4.2% work with a single patient in a private home
- Number of Years in US (of 24 respondents)
 - Average: 8.34 years
 - Range: 3.5 to 20 years
- Work in Other Countries (of 24 respondents)

- 83.3% have not worked in any country other than the US and the Philippines
- 16.7% worked in at least one other country prior to first immigration to US
- Last Employment in Philippines Prior to First Emigration (# of respondents who held position, if more than one) (of 21 respondents):
 - barangay captain (Philippine local government position)
 - building coordinator
 - factory worker
 - farmers (2)
 - legal researcher
 - lawyer
 - manager
 - kagawad (Philippine local government position)
 - military official
 - office worker
 - retired
 - service worker (2)
 - small business owners (3)
 - supervisor
 - teacher (2)
 - unemployed (2)
 - veterinarian
- Financial Dependents (of 24 respondents)
 - 100% remit money to the Philippines to provide for the basic necessities of family members there

Stressors of Caregiving Work

- Physical Abuse (of 24 respondents)
 - 79.2% have experienced physical abuse from clients with mental disabilities; some forms of physical abuse cited are biting, punching, pushing, pulling hair, and pulling clothes
 - 20.8% have not experienced physical abuse
- Verbal Abuse (of 21 respondents)
 - 85.7% have experienced verbal abuse from clients or employers
 - 14.2% have not experienced verbal abuse
- Racism and Discrimination

- Five caregivers mentioned that they have experienced racism and discrimination, citing racist remarks and epithets, and otherwise ill treatment due to their ethnic, cultural, and/or linguistic backgrounds
- Other Duties (of 23 respondents)
 - 95.7% must spend time during workday on activities other than taking care of patients; these activities include cleaning, laundry, cooking, driving, and gardening
 - 4.3% focus solely on caring for patients
- Time Spent on Other Duties (of 11 respondents)
 - Average: 3.1 hours per day per caregiver
 - Range: 1 to 5.5 hours per day per caregiver
- Staffing (of 20 respondents)^{iv}
 - 85% feel that their care homes are understaffed, leaving too many patients in the hands of too few workers
 - 15% feel that their care homes are sufficiently staffed

Health and Safety

- Uninterrupted Meal Breaks (of 19 respondents)
 - 78.9% do not receive uninterrupted meal breaks and must attend to their patients while eating
 - 21.1% are given meal breaks during which they are not interrupted by their patients
- Company Health/Medical Insurance (of 22 respondents)
 - 63.6% are not offered health/medical insurance
 - 36.4% can or do receive health/medical insurance from their employers
- Current medical needs (# of respondents who held position, if more than one) (of 10 respondents)
 - Diabetes
 - High blood pressure
 - Tooth pain
 - Eyes
 - None (6)
- Mental Health (of 21 respondents)
 - 100% have experienced stress, anxiety, loneliness, and/or other mental health issues at work

Wages

- Deductions for Food (of 17 respondents)
 - 70.6% do not have food deducted from their pay
 - 29.4% have food deducted from their pay
- Deductions for Room and Board (of 16 respondents)
 - 56.25% have room and board deducted from their pay
 - 43.75% do not have room and board deducted from their pay
- Unpaid Work at Night (of 16 respondents)
 - 87.5% must attend to and care for their patients at night without due compensation
 - 12.5% of live-in caregivers are able to sleep through the night without being interrupted by patients
- Holiday Pay (of 23 respondents)^v
 - 82.6% do not receive holiday pay
 - 17.4% receive holiday pay
- Overtime Work (of 22 respondents)
 - 77.3% work over 8 hours per day
 - 22.7% work 8 hours a day or fewer
- Overtime Pay (of 23 respondents)
 - 60.9% do not receive overtime pay for overtime hours worked
 - 39.1% receive overtime pay for overtime hours worked
- Sick Leave (of 22 respondents)
 - 77.3% are not given paid sick leave when they are sick
 - 22.7% are given paid sick leave when they are sick
- Decrease of Hours (of 23 respondents)
 - 78.3% lose hours when patients die or are transferred from their workplaces
 - 21.7% do not lose hours when patients die or are transferred from their workplaces
- Monthly Wage (of 10 respondents)
 - Average monthly wage: \$1,345
 - Range: \$900 to \$1,600
- Daily Wage (of 2 respondents)
 - Average: \$62.50
 - Range: \$50 to \$75
- Hourly Wage (of 8 respondents)
 - 5 respondents were paid minimum wage current at time of interview
 - 1 respondent was paid \$0.15 per hour above minimum wage current at time of interview

- 1 respondent was paid \$1 per hour above minimum wage current at time of interview
- 1 respondent was paid \$0.50 below minimum wage current at time of interview
- Wage Claim (of 6 respondents)
 - (A) Average wage claim amount, calculated by workers and their attorneys to seek compensation for total amount of unpaid wages according to total number of real hours worked: \$82,750
 - (B) Average number of months working for employers against whom workers filed wage claims with the Labor Commissioner's Office^{vi}: 75.33
 - **Average claim (A) / average number of months (B) = \$1098.45 in unpaid back wages^{vii} per month per caregiver**
- Sufficient Pay (of 23 respondents)
 - 73.9% feel that they are insufficiently compensated for their work as caregivers due to wage theft and/or the strenuous nature of their work
 - 26.1% feel that they are sufficiently compensated for their work

QUALITATIVE ANALYSIS: EMPLOYERS' SCHEMES TO STEAL WAGES AND KEEP THEM

This study finds that wage theft—the illegal underpayment or non-payment of workers' wages by employers^{viii}—is particularly prevalent in the caregiving industry. Examples of wage theft include not paying minimum wage or overtime, misclassifying employees as independent contractors, forcing workers to work off the clock, not providing final paychecks, and not paying workers at all.^{ix, x}

Employers committing wage theft utilize a variety of schemes to steal wages from caregivers. **One way is to simply pay workers below minimum wage.** One worker interviewed in this study, Maria, stated that her employer paid her \$7.50 per hour when the minimum wage in San Jose was \$8.00. In fact, during the interview, she showed the interviewer and me a document that plainly showed she was being paid at this rate, below the city's legal minimum wage.

A particularly common scheme is to pay employees only for a certain number of hours worked. As seen in the statistics above, 77.3% of caregivers work overtime, yet only 39.1% receive overtime pay. Several workers explained that they work as many as 16 hours a day—not including waking up in the middle of the night constantly to attend to patients who want to go to the bathroom, walk around, or try to escape—but are only paid for 7.5 or 8 hours.

Reynaldo stated:

"On our weekends and holidays, count the 10-5 schedule [on top of our normal weekday schedule]. No one is on duty at night. That's 10 at night until 5 in the morning. On the

weekend, it's working straight because no one comes in, right? That's 17 hours. But she pays us only for 8 hours. And then she makes us sign that. She says that if we don't sign what she wants us to sign, then she opens to the door and tells us to leave."

In Reynaldo's statement above, he shows that employers deliberately pay their workers for only a fraction of the total hours they work and attempt to cover their tracks via false documentation, threats, and blackmail. Added to the fact that workers are entitled to wages 1.5 times the normal rate after 8 hours and to double wages once they have passed the 12-hour mark, caregivers can potentially lose tens of thousands of dollars over the course of several months.

Employers also use deductions for food, housing, and/or medical insurance to withhold wages from their employees. One interviewee (and interviewer of other caregivers), Jeffrey, explained that his employer deducted food and housing from his pay only sometimes, when she needed extra money. Originally, they had agreed that she would deduct neither from his wages. Employers such as Jeffrey's use workers' vulnerable financial situations to help themselves to arbitrary—and often excessive, in violation of state law—amounts of deductions from their employees.

Furthermore, workers sometimes do not benefit from such payroll deductions. For example, Andrea, like at least one other worker, said that "even though [her] employers took \$60 from [her] wages for medical insurance every month, they did not actually provide medical to [her]. [She] had health issues while [she] was working [for the daycare program] and had to go to the hospital. But [she] was the one who had to pay [her] bill." Only when this incident occurred did they give her back some money to enroll in her own health insurance policy; having her enroll in her own policy was cheaper than enrolling her in a company policy.

Lastly, workers are often paid late and/or with bounced checks. Maria expresses her frustration with her employer's pattern of this below:

"She doesn't say, 'Don't cash it yet.' Of course, if she doesn't say, 'Don't cash it,' you get excited. When you get there, 'Oh, there are no funds.' And then we say to her, [makes noises]. It's like that. Instead of saying sorry, she even gets mad at you. Would I say to my family in the Philippines, 'Don't eat for now because I haven't gotten paid yet'? I can't say that to my family, right? I'm the one that they're counting on. Well, you're working, right? You're working so that you have something to send home. And then you even have a bounced check? 'I didn't give you a bounced check!' It's 35 dollars if you have a bounced check, so she should have told us that it would bounce so that we would not try to cash it."^{xi}

Many of the workers noted that their employers are themselves in dire financial straits, largely because of such vices as gambling. They therefore use delaying tactics and bounced checks to avoid timely payment to their employees.

Because of these and other rampant forms of wage theft, caregivers have increasingly filed cases against exploitative employers. For example, Jeffrey, noted above, filed a case with the California Labor Commission. He worked with his attorney to calculate a total of about \$220,000 owed to him in unpaid wages due to illegal deductions and lack of payment for all of the hours he worked, which amounted to almost 24 hours a day when factoring in his unpaid nighttime hours assisting clients.

Although some enforcement mechanisms are available to workers, they are not sufficient, and collecting unpaid wage judgments can be extremely difficult. The agencies that enforce wage and hour laws face severe limitations on their ability to effectively ensure compliance with employment laws. For example, the Department of Labor Standards Enforcement (DLSE, or “Labor Commissioner”), which processes the vast majority of wage claims in California, lacks the resources to collect on workers’ successful claims. In 2012-2013, the Labor Commission offices in San Jose and Salinas awarded \$8,413,242 to workers through hearing awards for wage theft violations. Of this amount, workers could collect only \$2,817,589—about one-third.^{xii} Another arm of the Labor Commissioner that conducts workplace-wide investigations awarded \$39,772,344 in penalties for labor violations in 2012- 2013, but could collect only 20 percent of these penalties.^{xiii} The Labor Commissioner collected an even smaller amount (10 percent) of penalties for minimum wage and overtime violations.^{xiv}

Another agency that investigates the incidence of wage theft in workplaces is the Wage and Hour Division (WHD) of the U.S. Department of Labor. The WHD is typically successful in collecting back wages for exploited workers when it has found violations. According to a multiyear compliance assistance and enforcement initiative conducted by the WHD, it has recovered over \$6.8 million for more than 1,300 workers at Bay Area residential care facilities and nursing homes.^{xv} However, it has far too few investigators to cover all of the workplaces where workers are not getting paid properly, and the money its investigators negotiate for workers is often only a small fraction of the value of the wages stolen from them. **The insufficiency of current enforcement mechanisms breeds a culture of noncompliance among abusive employers.**

With more and more caregivers fighting for their back wages and educating other workers on how to do the same, employers often retaliate to deter workers from reporting them. At least two of the workers mentioned a secret “blacklist” of group care home workers *not to be hired*, for they will fight for their wages if they are being unjustly stolen from them. Gabriela, who at one point was being paid \$250 a *month*, successfully won a highly publicized case against a group care home owner. She not only became known by local caregivers whom she inspired to fight for their own rights, but also by local employers who condemned her as a threat to their

businesses. It has been three years since she won her case, but until now she is having a hard time finding a new job and hears about a “blacklist” of which her name is at the top. It is unclear whether such a list actually exists. But, given the small community of residential care home owners, it is likely that they regularly communicate with one another about potential hires.

Unscrupulous employers also use immigration status and the threat of firing to discourage people from fighting for their wages. Employers hold great power over their workers, who are dependent on steady incomes in order to provide for their families in the Philippines. If they are threatened with the loss of a job, workers must assess whether taking action against their employers is worth an indefinite period of unemployment; many workers decide that it is not. This is especially true of workers without legal authorization to reside or work in this country, for whom it is much more difficult to find new jobs. Though they are entitled to workers’ rights regardless of their immigration status, they fear that losing one job could mean never finding another one and being unable to support their families. Abusive employers especially leverage the undocumented workers’ vulnerability against them, often paying them less or otherwise treating them more poorly than other workers from the very beginning of their employment.

DISCUSSION AND RECOMMENDATIONS

The Philippines is a country plagued with widespread poverty, landlessness, and corrupt government officials. Through its Labor Export Policy (LEP), it incentivizes its citizens to live and work abroad, and send remittances that keep the Philippine economy afloat, rather than building national industries in the Philippines and implementing genuine land reform. With few sufficiently paying jobs or opportunities in the Philippines, an average of 6,092 Filipinos a day^{xvi} make the difficult decision to separate from their families, leave the country, and support their loved ones by working abroad. But many of the workers interviewed explained that the United States, what they expected to be a land of freedom and rights, turned out to be a land of abuse and exploitation.

Caregivers, especially live-in caregivers in group care homes, work long hours with little pay. They not only care for too many patients in care homes that are often severely understaffed, but are also expected to perform other duties around the house outside their job titles, such as cleaning, cooking, driving, and gardening. Caring for clients with mental disabilities and illnesses, they often experience physical and verbal abuse. They are not given proper meal/rest breaks or, for live-in caregivers, proper sleep; from the minute they walk into their facilities to the minute they step out, they are made to work.

One of the most prevalent issues plaguing this industry is wage theft. Few caregivers get overtime pay, holiday pay, or sick leave. This report approximates that unscrupulous employers steal \$1098.45 from each caregiver per month, on average. In Santa Clara County, according to a recent study commissioned by the Santa Clara County Board of Supervisors, there are 51

nursing homes and 600-plus residential care facilities for the elderly^{xvii, xviii}—not counting daily assisted living facilities, daycare programs, and private homes employing domestic workers. Considering the growing population of these workers who provide care to some of the most vulnerable individuals in this society, the total amount of money stolen from them—money that could go into taxes and the local economy, and help low-wage workers avoid becoming dependent on county assistance—is staggering. The U.S. Department of Labor’s Wage and Hour Division, just one of the agencies enforcing against wage theft, recovered nearly \$7 million for Bay Area caregivers between 2011-2014.^{xix}

Fortunately, more caregivers are filing cases against unscrupulous care home owners and employers in recent years. Ultimately, though, the stream of workers who must grapple for back wages that should have been paid to them in the first place will not end until Santa Clara County and its cities, California, and the United States take a stand against wage theft—not only in the caregiving industry, but in all industries where workers do not receive proper pay.

PAWIS, as a member of the Santa Clara County Wage Theft Coalition, recommends that the County and its cities take action to execute the following:

- The enactment and implementation of an ordinance in Santa Clara County providing for the suspension of health permits, particularly of restaurants committing wage theft. The Santa Clara County Department of Environmental Health has existing Health Code authority to suspend the permits of wage theft violators until they come into compliance. The District Attorney has the power to prosecute egregious wage theft cases.
- The implementation by San Jose and other Santa Clara County cities of ordinances or other legislative measures providing for the disclosure of wage theft judgments and revocation and/or nonrenewal of business licenses, permits, and certificates for businesses with unpaid wage theft judgments.
- The implementation by San Jose and other cities of measures that require disclosure of wage theft judgments by city contractors or subcontractors and revocation or suspension of contracts for unpaid wage theft judgments.
- Support for the outreach, education, and assistance that legal service organizations and community-based organizations like PAWIS provide. Workers often turn to community organizations for culturally competent assistance when they experience wage theft. Such organizations are crucial in empowering low-wage workers to file complaints about working conditions and to share information about workers’ rights to others who may be experiencing the same issues. Advocates at these organizations also provide essential support to overburdened state and federal agencies.
- The convening of a formal or informal working group of relevant county and/or city departments, other enforcement agencies, constituent organizations, and especially

low-wage workers themselves. This group would coordinate efforts to address wage theft, educate workers and businesses, and ensure the proper implementation of adopted wage theft policies.

On a larger scale, the people must continue to fight against unequal economic relations between migrant-sending countries like the Philippines and migrant-receiving countries like the United States. They must continue fighting for national industrialization, genuine land reform, and an end to political corruption in the Philippines. Only in this way can Filipinos find dignified, decent livelihoods without having to work thousands of miles away from their families and homeland.

ⁱ In this study, the term “caregiver” will refer to a worker at a residential care facility for the elderly (RCFE), non-medical facilities that serve individuals age 60 and older and provide room, meals, housekeeping, supervision, storage and distribution of medication, and personal care assistance with basic activities like hygiene, dressing, eating, bathing and transferring; a daily assisted living facility, a non-residential facility that houses patients with less severe conditions; or a daycare program. We have also included those who work in a private home to care for one person, often referred to as “one-on-one.” Such people would technically be considered domestic workers under California law and are covered by different wage and hour regulations. We have included all of these types of workers because members of the Filipino community typically refer to all of them as caregivers.

ⁱⁱ Peter Chua, *Ating Kalagayan: The Social and Economic Profile of U.S. Filipinos*. Woodside, NY: National Bulosan Center (2009). This is official census tally, which does not include undocumented residence and people who are not officially counted. Considering that, according to Chua, 24% of the Filipino population in the U.S. is undocumented, there would be a substantially higher estimate if counting Filipinos without legal residence.

ⁱⁱⁱ Ibid.

^{iv} Please note that this does not necessarily match the percentage of workers in care homes that follow state-enforced health standards for such facilities. The interviewees made these assessments from their own experiences caring for patients and/or performing other duties on the job.

^v It should be noted that California state law does not mandate that an employer pay an employee a special premium for work performed on a holiday, Saturday, or Sunday, other than the overtime premium required for work performed in excess of eight hours in a workday or 40 hours in a workweek. For more information, please see California Department of Industrial Relations, “Holidays,” available at: http://www.dir.ca.gov/dlse/faq_holidays.htm.

^{vi} Also known as the California Department of Labor Standards and Enforcement.

^{vii} “Back wages” are wages not paid to victims of wage theft.

^{viii} As required by the Fair Labor Standards Act (FLSA), the Davis-Bacon Act and the California Labor Code. Definition from Interfaith Worker Justice Center, “Wage Theft,” available at: <http://www.iwj.org/issues/wage-theft>.

^{ix} Annette Bernhardt, et al., “Broken Laws, Unprotected Workers: Violations of Employment and Labor Laws in America’s Cities.” (Jul. 2009).

^x Abel Valenzuela, Jr., et al., “On the Corner: Day Labor in the United States” (Jan. 2006); see also MUA, LRCL, and DataCenter, “Behind Closed Doors: Working Conditions of California Household Workers” (Mar 2007) and Bernhardt A, et al., “Confronting the Gloves-Off Economy” (Jul. 2009).

^{xi} Michael Tayag, “By the People, For the People: The role of community-based participatory research in building leadership and capacity of workers,” Undergraduate Honors Thesis, Stanford University (2013).

^{xii} Shannon Gleeson, et al., “Santa Clara County Wage Theft Report” (2014).

^{xiii} Ibid.

^{xiv} Ibid.

^{xv} United States Department of Labor, “US Labor Department conducts compliance and enforcement initiative in Bay Area nursing homes, residential care facilities” (Apr. 2015), available at: www.dol.gov/opa/media/press/whd/WHD20150137.htm

^{xvi} IBON Foundation, 2015 data.

^{xvii} See footnote i for definition.

^{xviii} Santa Clara County Department of Aging & Adult Services, et al., “Santa Clara County Seniors’ Agenda: A Quality of Life Assessment” (Apr. 2012), available at: http://www.sccgov.org/sites/ssa/Department%20of%20Aging%20-%20Adult%20Services/Documents/2012_04_quality_of_life.pdf.

^{xix} United States Department of Labor, “US Labor Department conducts compliance and enforcement initiative in Bay Area nursing homes, residential care facilities” (Apr. 2015), available at: www.dol.gov/opa/media/press/whd/WHD20150137.htm