Frontline Caregivers: Still Struggling

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Flora Johnson takes care of her adult son Kenneth, who suffers from cerebral palsy. She used to work as a cashier at a unionized grocery store and made enough to buy a home in the Washington Square neighborhood on the South Side of Chicago. After she retired, her home became her workplace; she was paid by the State of Illinois to be the primary caretaker for her son. The state also helped her afford a lift to enable Kenneth to enter and leave their house in his wheelchair as well as to install safety bars in the bathroom.

But home care is low-wage work, and Johnson found she lacked funds to make additional home improvements to keep her son healthy. She obtained a second mortgage to pay for such upgrades as replacing a leaky roof and removing the carpet, a constant impediment for Kenneth. Trapped in the predatory loan market that fed on black neighborhoods, she took on a second mortgage with a balloon trigger that soon escalated her payments from around $900 to over $1,400 a month. Eventually, she faced foreclosure on her home. "It would have been devastating if I had lost it," she explains. "I just couldn't see myself being in an apartment with him. They won't let you add a lift and things like that." As the former president of her union local, the seventy-eight-year-old Johnson knew how to fight back.

When Johnson became a full-time care provider, she joined a Service Employees International Union local, now known as SEIU Healthcare Illinois, which had its roots among community organizers who had long fought predatory lending. Together with allies in a neighborhood group called Action Now, she confronted the bank that would strip her and others like her of their homes.

In the late spring of 2010, a dozen community activists accompanied Johnson to a local branch of Countrywide, the giant mortgage firm that held her note. When the bank representative claimed there was nothing to be done, a leader from Action Now emphasized the importance of Johnson's home as a necessary locus of caring, insisting, "Oh yes, you can do it. She has a son with cerebral palsy. She needs to stay in her own home." Turning that into particular moral and political claim, backed by collective action, they succeeded in forcing Countrywide to eliminate the higher interest rate, bring the mortgage more in line with actual home value, and reduce monthly payments to what she could afford. Over the past two years, Johnson and her fellow and sister activists have repeated this tactic at dozens of banks that threaten the homes of other poor and working-class Chicagoans.

The Great Recession has hit home-based workers like Johnson with a triple whammy. The housing and mortgage crisis threatened their very workplace—their homes or the homes of those they cared for; the fiscal crisis of the state led to cuts in funds that paid their wages through long-term care programs; and the conservative political backlash and Republican ascent of 2010 opened an assault on their hard-won collective bargaining rights, wage increases, and recognition as "workers."

Poor black women like Johnson have long cared for the elderly, ill, and disabled—whether in their own homes or in the residences of others. Sometimes, they do it out of love; many have referred to care work as "a calling." Often, it is the best job they can find. Elsewhere in the United States, Latinas and other recent immigrants make up a third of those who perform daily tasks—bathing bodies, brushing teeth, putting on clothes, cooking meals—that enable people to live decently in their own homes. But in Chicago, African Americans still dominate this workforce. They mostly care for elderly and disabled people who qualify for Medicaid and SSI (Supplemental Security Income).

These workers are America's frontline caregivers. They number over 1.7 million nationwide. Home care workers earn just a bit more than the minimum wage and historically have had little or no job security, health benefits, or even workers' compensation. Government programs began subsidizing home care in the 1930s. Yet in every decade since then, policymakers and welfare administrators have acted on the presumption that the intimate labor of caregiving should be the loving and unpaid duty of wives, mothers, and daughters. So home care aides, defined as elder companions rather than workers, are still excluded from the nation's primary wage-and-hour law, the Fair Labor Standards Act, more than seven decades after it was enacted in 1938. Moreover, because they are often poor women taking care of people receiving public assistance, the suspicion and taint of "welfare fraud" has been used to cut their hours of service or pay in times of fiscal anxiety.

Since the late 1970s, however, hundreds of thousands of caregivers have demanded recognition of their worth as well as more funding for their clients—and achieved some notable successes. In Illinois and California, the SEIU took the lead in organizing this workforce. In New York, first Hospital Workers Local 1199 and then the SEIU obtained better reimbursement rates from state legislatures for vendor agencies, which in turn led to improved worker pay through more robust collective bargaining contracts. Elsewhere, the American Federation of State, County, and Municipal Employees (AFSCME) and the Communications Workers helped home care workers achieve similar gains. About 500,000 home health workers are unionized. At least 275,000 home child care providers also have moved into unions. Where they are state-recognized, home care unions have achieved density, that is, they represent nearly all workers in the sector.

Their most critical demand is for an adequate income. In the late 1950s and 1960s, home care workers became public employees, with standard hours and benefits. Yet once they joined with the rising militancy of other public sector workers, local and state governments in the 1970s increasingly turned to contracting out the service to private agencies or classifying the workers themselves as independent contractors, leading to greater casualization of the job. A worker employed by a nonprofit (or, after 1981, a for-profit) firm could never count on a fair wage for hours worked; indeed, it was difficult to even get enough hours to add up. She might be assigned to help an elderly person to get out of bed in the morning, get dressed, and eat breakfast, and then travel, at her own expense, to tend to another client for a few hours. And if it took her longer to finish her tasks, she wouldn't receive overtime.

The insecurity of the work fueled unionization campaigns in the late 1970s and 1980s. Tens of thousands of home care workers began to win some of the standard features of employment most Americans take for granted: a regular paycheck, workers' compensation, and grievance procedures.

Unions developed a strategy that gradually changed the way state authorities treated home care workers. To overcome the lack of a common workplace and exclusion from national labor laws, organizers marched on state capitols and lobbied their representatives. They sought to elect legislators and governors who would improve working conditions that also enhanced the quality of care. They formed coalitions with relatives of their clients, with disability rights activists, and with advocates for senior citizens. The outcome of this long struggle was the recognition in many states of home-based care workers as quasi-public employees, paid from public revenues. In some states, unionization efforts preceded a change in policy, whether executive order or legislation. In others, governors signed executive orders allowing for (and thus sparking) union elections.

Where the union developed a grassroots culture, it transformed working for these state programs into a collective experience that turned caregivers into workers and workers into trade unionists. Amanda Carles, a California woman who cared for an adult daughter with Down Syndrome, explained that she had "become much more aware of all the things you do [for the person you're taking care of]. Once you actually have to document your hours to get paid. . .you see how much work you do." The union became the place where, one Russian-speaking immigrant told us, "you can step forward, have a voice, you can have free speech." Bay Area home attendant Rosie Byers became a shop steward and eventually a union vice-president in the 1980s. The union trained Byers and her co-workers to organize others and read contracts. "We started telling people. . .you'll be able to speak up and speak out about the contract. You can even have a say on the contract," Byers said. "That really had a big impact." They were able, in the words of many union members, to "come out of the shadows" and be "invisible no more."

All these efforts depended on the ability, as well as the desire, of politicians to devote public resources to workers' welfare. But the Great Recession has jeopardized these advances. Even as home care has become one of fastest growing sectors of the economy, the major achievements of union members—greater employment security and benefits for clients—are threatened by reductions in hours and funding.

Barack Obama's economic stimulus helped stabilize programs and wages through 2010, but major reductions in hours (and thus income) began in 2011. Through unions, workers and clients had learned to use tactics like fair hearings to push for something closer to full-time work; now they're just defending the existence of their programs.

Agency employees in Illinois, for example, average only twenty hours of paid work a week. Fewer workers have clients who require more assistance. Those taking care of family members can't extend their hours because they can't leave a homebound relative to go to another person's residence. State agencies are recalculating what family members would supposedly provide anyway, thus recalibrating the allotment of support based on expanding the range of unpaid labor. They are also reducing the hours a worker is allowed to spend with each client.

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These cutbacks can take subtle but insidious forms, such as undercounting the time it takes to give a bath or do laundry. Workers can't leave their charge in the middle of a bath because the allotted minutes are up, but they don't get paid for the "extra" time. Some workers use their own money to buy food for clients or take them to the doctor. States exploit the fact that it's an intimate, relational job.

Some states are also narrowing what kinds of labor they will compensate. In particular, they have targeted housekeeping. There's always been an ambiguity about which aspects of home care should be paid: bodily services and personal care; housekeeping; the emotional labor of chatting, sharing stories, spending time, and being a friend. When judges, agency administrators, and politicians previously sought to deny state responsibility for the conditions of employment, they renamed the job—as visiting housekeeper, homemaker, home attendant, or home aide—in order to get another federal program or level of government to pay for the service. Workers saw through that ruse and testified before courts, congress, and public agencies that no matter what they were called, the work was the same, part manual and part emotional, personal tending and house-keeping. Over time, they won payment for cleaning houses as well as people. The current economic crisis has given state officials an opportunity to constrict this broader recognition and thereby reduce hard-won gains.

More ominously, the conservatives who now govern several states in the Midwest have taken aim at home care unionism as part of their general offensive against organized labor. In early 2011, Governor Scott Walker and the Republican majority in the Wisconsin legislature stripped all bargaining rights for home-based care workers as part of their larger rollback of rights for public employees. Walker already had abolished the Quality Home Care Authority, the agency created in 2009 to handle negotiations between workers and private contractors.

Rick Snyder, Michigan's Republican governor, recently settled a case brought for five home child care contractors, providers who didn't want to pay union dues and were willing to partake in a test case brought by the National Right to Work Legal Defense Fund. This group of anti-labor lawyers claimed that the state had no basis to treat these twenty thousand state-subsidized workers as public employees. In accepting such premises, Snyder scuttled an agreement between former Democratic governor Jennifer Granholm and an AFSCME-United Automobile Workers alliance that won the right to collective bargaining. The Michigan Department of Human Services defunded the Home Based Child Care Council and ended pay check withholding of union dues. In Ohio and Indiana, Republican governors rescinded previous executive orders permitting unionization.

Even Governor Jerry Brown of California, a Democrat who relied on union support for his victory in 2010, got the legislature to cut funds for home care and vetoed a bill giving bargaining rights to home-based child care providers. In California, the SEIU, the main union seeking recognition for home-care workers, had been weakened by a bitter internal battle. The housing crisis also made it difficult to mobilize workers. With people moving around and losing their landlines, "keeping up with members is a job in itself," sighs one SEIU organizer.

As Flora Johnson can testify, care workers and recipients are equally threatened by the collapse of the housing bubble. Since 2008, Cook County has experienced over 40,000 home foreclosures every year. In 2010, Cook County recorded a historic high with 50,000 foreclosures initiated. In Roseland, Englewood, and South Shore, neighborhoods near Johnson's Washington Square, "you drive down a block and you might see only two houses occupied and all the others boarded up. People just can't afford it," one union official explains.

Care workers are struggling to hold onto their homes amid increasingly dangerous conditions; yet they must stay in them. For years, the independent-living movement has emphasized the right to live at home and in the community—winning these rights through political action and court cases. For child care providers, state licensing often required that they make modifications to the home; these workers have a significant investment in the home. It is their workplace and essential to carry out their work.

But Johnson and other home care workers are not ready to surrender. Last August, hundreds of protestors blocked traffic in downtown Chicago during a Friday evening rush hour, making a human chain—with disabled protestors in wheelchairs—across a busy street. In other marches, protestors called attention to proposed cuts in rental vouchers, heating assistance to the poor, and elimination of vouchers for homeless veterans—all of which have a direct effect on home care workers and their clients.

The Great Recession and Republican ascendancy are shaking the very programs that made home-based services possible. Can we let these forces make life more precarious for all of us?

In October, Action Now and union protestors entered a branch of Bank of America with bags of garbage to show what's piling up in their neighborhoods, since the bank refuses to maintain, rehab, or sell vacant buildings. But while Bank of America acted in violation of a new Vacant Property Ordinance, won last year by activists, the City stood by helplessly—or hopelessly. Meanwhile, the bank called the authorities to arrest protestors—five mothers between the ages of fifty-five and eighty, who didn't want to see their communities taken over by drug dealers, gangs, and rats.

"Home care workers are part of whatever goes down," Johnson says with determined pride. "Because we're together. Whatever is our neighborhood, we're connected." Less dramatically, Action Now has sent out "field foreclosure coordinators"—its own employment program for the jobless—to locate people whose homes are in jeopardy and to assist them before they lose their property. Its activists marched to demand that the city direct money to their neighborhoods from the federal Neighborhood Stabilization Program, established to retain the population of communities suffering from foreclosures and abandonment.

Faced with cuts in programs and stripped of their bargaining rights, home care workers are trying to maintain the activist vigor of their scrappy past, which won union recognition and contracts from reluctant state authorities. Johnson and her sister workers took heart from the Occupy Wall Street protests that swept Chicago this last fall. "We're tired of these big banks and the rich people getting rich and poor people getting poorer. But we're sending a message." Her union members are even willing to go to jail for the cause. After all, their houses are not only homes but also their workplaces; without homes, there can be no home care workers and thus no fight for better work. This merger of home and work turns the foreclosure threat faced by other poor people into a particularly acute crisis.

As a nation, we seem to believe that only through cheap labor can we "afford" to provide long-term care. We think about the needs of recipients but not about those who do the work. The Great Recession and Republican ascendancy are shaking the very programs that made home-based services possible. Can we let these forces make life more precarious for all of us? A majority of Americans will at some point depend on a care worker, often one who has long labored in poverty and struggled to balance her own and others' social needs. The absence of public support and labor standards may hasten the day when no one will be available to care.

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