Statement of Ai-jen Poo, Executive Director, National Domestic Workers Alliance and Caring Across Generations

December 8, 2021 Hearing before the U.S. House Select Committee on Economic Disparity and Fairness in Growth

“Growing our Economy by Investing in Families: How Supporting Family Caregiving Expands Economic Opportunity and Benefits All Americans”

Introduction

Chairman Himes, Ranking Member Steil, and distinguished Members of the Select Committee, thank you for the opportunity to testify on how investing in care infrastructure will fuel equitable, long-term economic growth through creating good jobs for care workers and making long-term care more accessible for consumers and family caregivers.

My name is Ai-jen Poo, and I am the Executive Director at the National Domestic Workers Alliance (NDWA) and Caring Across Generation (CAG). Founded in 2007, NDWA is the home for the 2.2 million domestic workers who work as nannies, home care workers, and house cleaners in private homes, providing care and cleaning services. Our community includes over 250,000 domestic workers in all 50 states, working to achieve economic security and opportunity.

Caring Across Generations was founded in 2011 to bring together family caregivers, care workers, people with disabilities and older Americans to advocate for a strong care infrastructure that would support us all to live, work, care and age with dignity. Caring Across Generations is working to create a culture that values care and caregiving, and policies that support universal access to long-term services and supports (LTSS), childcare, paid family and medical leave (PFML) benefits and a strong care workforce. We work with a diverse network of over 100 national, state and local advocacy organizations and unions, including caregiver, aging, disability rights and justice, disease-based groups, women’s organizations and more.

Together, NDWA and Caring Across Generations have worked for a decade to bring attention to the growing need for care, and the urgency of investing in Medicaid home and community-based services (HCBS) for older adults and people with disabilities and transforming care jobs into good jobs with family-sustaining wages and benefits. I believe we have a once in a generation opportunity to do precisely that -- to build the 21st century care infrastructure we need.

That is why I am so grateful that the House of Representatives passed the Build Back Better Act last month. This historic legislation will make the biggest investment in home
and community-based services in our country’s history. This legislation marks a transformative shift in our culture in the way we value family caregivers and care workers. Why is this momentum in the care economy so important, and how do we make sure we do it right?

I will explain how investments in human infrastructure have multifold advantages in terms of boosting economic security, job creation and retention, increased household savings and overall economic growth. I will explain why human infrastructure investments simultaneously provide a direct benefit to care workers and to workers who need reliable care infrastructure to themselves participate in the workforce. These investments particularly benefit the female labor force and historically undervalued sectors of the economy.

First, I would like to share my own personal story of caregiving. My grandfather, Liang Shao Poo, played a critical role in raising me. He lived a long and full life. He was a student and teacher of tai chi, a die-hard Wheel of Fortune fan, and an avid reader. He spent a lifetime working and caring for his family, including his wife of more than 40 years after she suffered a stroke. Towards the end of his 93 years, he lost his eyesight, and needed more support than my family was able to provide him at home. We could not find appropriate home care support, so my grandfather was placed in a nursing home against his wishes.

I visited him there and I will not forget it. He was in bed in a dark room with six other people, including several who cried out in misery. The lights didn't work. My grandfather was distressed, he had not eaten or slept in some time, he was frightened, and depressed. A shell of himself. The staff was overworked and struggling to manage all the people in their care. After just three months in the facility, my grandfather passed away. I will always regret that these were the conditions of my grandfather’s final days. Thinking about my grandfather, I know that we could have given him a much better quality of life --- living where he wanted to live surrounded by the people he loved. He would have had more freedom to set his own routine and do the everyday things that help us all feel like ourselves. My story is not unique but the difference is we now have a chance to give people like him a better choice. And in doing so, we can not only fuel economic growth, but grow sustainably, with equity, resilience and dignity for workers and their families.
Investing in Care Will Fuel Economic Growth

Supporting the Future of Work

Investing in the care economy makes sense from a future of work perspective. Direct care workers now belong to one of the fastest growing occupations in our economy, as the caregiving demand has skyrocketed with aging of Baby boomers and more individuals prefer to receive long-term supports and services (LTSS) in home and community settings. From 2019 to 2029, the home care workforce is projected to add one million new jobs, more new jobs than any other U.S. occupation. In the same time period, there will be 4.5 million home care job openings. Not only are there jobs that need to be filled, these jobs are here to stay, because they cannot be automated or outsourced.

Increased Job Creation and Labor Force Participation

Investing in the care economy through Build Back Better will result, first and foremost, result in economic gains in the home care sector. According to one estimate, the $150 billion investment in home and community-based services will create and support 390,000 new jobs each year over ten years -- nearly 300,000 of which are “living wage” care jobs. It will also add an estimated $4 billion in additional income for current workers and their families each year. Many of these good jobs will support the women and women of color that dominate the home care sector, serving to ameliorate structural economic inequality.

When we boost the productivity of the care worker force, we will see a ripple effect on the whole economy, and particularly the female labor force. As we saw during the pandemic, women dropped out of the labor force at a precipitous rate. By February 2021, women’s overall participation in the workforce fell to 57 percent -- the lowest level since 1988. As of November 2021, the same participation rate had only risen to 57.5 percent, with sluggish growth for women re-entering the workforce.


2 PHI, Direct Care Workers in the United States Key Facts, p. 11, (2021)


4 Id.


6 Morgan Smith, CNBC, It would take women more than 2 years to return to pre-pandemic employment levels at November’s jobs (Dec. 3, 2021) available at ratehttps://www.cnbc.com/2021/12/03/women-need-30-months-of-job-gains-to-recover-from-pandemic-losses.html
more COVID-19 related job loss in large part to having to shoulder the majority of caregiving and household responsibilities -- sharply exacerbated by school and childcare center closings.

Indeed, family care responsibilities were a strong predictor of reduced labor force participation. Mothers were more likely than fathers to take leave from work or drop out of the labor force.⁷ Mothers also increased their time spent on child care and were more likely to help their children with school during the pandemic.⁸ The highest concentrations of departures from low-wage jobs were among lower-earning women living with children.⁹

When family caregivers are forced out of the labor market, there are both short term and long-term consequences for their financial well-being more than losing out on income -- including being cut off health insurance, and diminished retirement savings and Social Security benefits. The resulting economic disparities will also hold back an equitable and full recovery until everyone who wants and is able to work can participate, and continue to stimulate spending in the economy.

Reducing Worker Shortages and Cost Savings

The cost of undervaluing care workers to American families and the economy is enormous. Low wages and lack of meaningful workplace protections has resulted in high turnover rates and chronic worker shortages in the home care industry, despite it being one of the fastest growing occupations. Stories from our home care workers and care recipients demonstrate how poor workplace conditions are driving people out of this workforce.

June S. from California

“In my first job, I was just being paid $120 for 24-hour work taking care of 5 elderly people who needed constant assistance. After a few months, I quit because of a back injury. I lived with a 280lbs elderly man with dementia and Alzheimers. The pain never stops ever since and it worsens every time I do caregiving. I have no health insurance so I cannot have myself treated. With all my experiences, I can say that the workplaces of caregiving work matter a lot to the welfare of the workers. As much as we want to

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⁷ Betsey Stevenson, Brookings Institute, Women, work, and families: Recovering from the pandemic-induced recession (Sept. 2021) available at https://www.brookings.edu/research/women-work-and-families-recovering-from-the-pandemic-induced-recession/. See also Federal Reserve, Women’s Labor Force Exits during COVID-19: Differences by Motherhood, Race, and Ethnicity, (2021) available at https://www.federalreserve.gov/econres/feds/files/2021067pap.pdf (finding that “all women living with children under age 6 and women living with children aged 6 to 12 who were working low-wage jobs were more likely to exit the labor force during the pandemic than women without children even after controlling for education, earnings, and COVID-19 occupation and industry measures.”)

⁸ Federal Reserve supra note 30.

⁹ Id.
work, if we feel we are not safe and protected, we end up quitting. That is why caregivers jump from one work to another to find the right space.”

Nafeesah R. from Georgia

“Several years ago, Nafeesah was making $8 per hour, and struggling to make ends meet. As a care worker, Nafeesah would make sure that elderly clients or clients living with disabilities were well taken care of. She would help with clean and bathing, preparing meals, cooking, cleaning, preparing medication, and providing emotional support through active listening. Through personal experience, she knows what it takes to help people - and that’s what made her passionate about care work. However, the low wages, lack of health insurance and paid time off, and overall scant benefits made her leave the profession that she loves and change career fields. She said, ‘I had to make the choice between buying gas to get to work and buying food for the week. This is a choice no one should have to make. I was constantly worrying and stressed if I’d be able to make ends meet.’”

Monique H. from California

“I was born with spasdic cerebral palsy, which has limited my mobility and impacted my ability to do things such as feed and dress myself. Thus, I have employed home care attendants for over 30 years. Attendants help me cook, clean and get ready for the day. With attendant support, I’ve been able to live on my own, have a career as a graphic artist, run my own business and raise my son… Personal care assistance is important work and the people who do it deserve good pay and benefits. Yet they aren’t compensated well. And this has driven many good people out of this career. As a result, there is a huge homecare worker shortfall leaving people like me without the support we need to live independently. I’ve been without an evening and weekend attendant for nearly a year.”

The constant turnover ultimately hurts the quality of care received by aging adults and people with disabilities and medical needs who need services. The turnover is costly to agencies that constantly need to hire and train new workers, and also leads to higher costs for taxpayer supported programs that fund home care services. For example, when the Obama administration enacted the home care rule, it finally extended minimum wage and overtime protections for over 2 million home care workers, it highlighted the direct connection between wages and worker retention.

The Department of Labor wrote,“Studies have shown that the low income of direct care workers continues to impede efforts to improve both the circumstances of the workers and the quality of the services they provide. Covering direct care workers under the [FLSA] is, thus, an important step in ensuring that the home care industry attracts and retains qualified workers that the sector will need in the future. These low wages are at least in part the result of the application of the companionship services exemption to a wide range of direct care workers who then may not be paid minimum wage for all hours
worked and likely do not receive overtime wages for hours worked over forty in a workweek.”

At the same time, investing in home and community-based services will save taxpayer dollars, and leave extra pocket money for individual families. According to the Congressional Budget Office (CBO), raising care worker wages via Medicaid reimbursement rates would help facilities retain workers “because of higher payment rates in home-based settings.” The Medicaid system itself would realize savings because it costs about $26,000 per person/per year to receive home care in contrast to $90,000 per person/per year in congregate settings. CBO additionally estimates that increasing access to HCBS would reduce out-of-pocket expenses on long-term care for both Medicaid beneficiaries and family caregivers.

Investing in Care Will Provide Economic Security and Mobility for Care Workers

By transforming care jobs into good jobs — with family-sustaining wages and real benefits — Congress will first and foremost improve what has traditionally been a workforce with depressed wages and few benefits and that has been treated without dignity.

Due to long standing systemic racial and gender discrimination in our society and labor market, work done inside the home - cooking, cleaning and caring - has been devalued and underpaid. This was codified during the New Deal era, when Congress enacted a set of legislation, including the Fair Labor Standards Act to raise wages and the National Labor Relations Act to guarantee employees the right to form labor unions. Domestic workers were explicitly carved out from these signature New Deal laws. Southern congressmen refused to support the labor law provisions of the New Deal if they covered domestic workers and farm workers, who were largely Black workers at the time.

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10 29 CFR Part 552,


13 Congressional Budget Office, supra note 34.


The throughline between this history of exclusion and the current socioeconomic status of domestic workers is evident. As when the New Deal was passed, the domestic workforce is still predominantly made up of women and women of color. It is made up of 90 percent women, over half women of color, and over a third of immigrants. Demographics vary among occupations as follows. 63 percent of home care workers, 67 percent of house cleaners, and 43.5 percent of in-home childcare workers are women of color.

Domestic workers are subject to steep gender and racial wage gaps and are also much more likely than other workers to be living in poverty. According to the Economic Policy Institute, the typical domestic worker is paid $12.01 per hour, which is 39.8 percent less than the typical non-domestic worker, who is paid $19.97.

Pay may be even lower within each specific domestic labor occupation. On average, house cleaners are paid $11.89 an hour, nannies are paid about $11.60 an hour, non-agency home care workers are paid about $11.89 and agency-based home care workers are paid about $12.08 an hour.

Several factors compound domestic workers’ lack of financial security. They are far less likely to get employer-provided benefits, like health insurance or paid time-off, and cannot access paid family and medical leave or paid sick days. Fewer than one in ten domestic workers are covered by an employer-provided retirement plan and one in five receives health insurance coverage through their job. In addition, wages have not kept up with the cost of living. Prices of staple foods, housing, and other

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18 Wolfe, supra note 3

19 Id.

20 Id.

21 Id.

22 Id.
goods have increased over the last 10 years.\textsuperscript{23} For example, according to PHI, the median hourly wage for home care workers only increased by a total of $1.75 between 2010 and 2020.\textsuperscript{24}

That has resulted in the reality that most domestic workers work incredibly hard, and still can’t make ends meet which is reflected in their income status. House cleaners have twice-poverty rates that are nearly 20 percentage points higher and nannies have twice-poverty rates over 10 percentage points higher than you would expect these rates to be if these workers were employed in nondomestic occupations. \textsuperscript{25} More than eighty percent of domestic workers going into the pandemic didn’t have a single paid sick day while living paycheck-to-paycheck.\textsuperscript{26} So missing out on even one day’s work meant no income without a safety net and job security.

Stories from our domestic workers underscore how the pandemic and ensuing recession left many workers - already in a tenuous economic position - financially devastated and unable to care for themselves.

Lee P. from California

“Lee is a professional caregiver who has been taking care of a 99-year-old woman since 2013. In January, she tested positive for COVID-19 after receiving the first vaccine dose. She was also diagnosed with stage two breast cancer this year and it was hard to find care for her cancer because she doesn’t have healthcare through the agency she works for. She has been out of work for a month now since the procedure. She has been taking care of the 99-year-old woman for a long time, along with other elderly folks, but forgot to take care of herself. When she was diagnosed with breast cancer, she realized that she also needs care.”

Kay from Georgia

“When Ms. Kay moved to Georgia in 2008, she saw that there was an urgent need for homecare and started working as a homecare worker. She knew that her family legacy of domestic work had given her the empathy and compassion to be a care worker. But


\textsuperscript{24} PHI, Direct Care Worker Median Hourly Wages Adjusted for Inflation, 2010 to 2020 available at http://phinational.org/policy-research/workforce-data-center/#tab=National+Data&natvar=Wage+Trends

\textsuperscript{25} Id.

\textsuperscript{26} Institute for Policy Studies, Rebekah Entralgo, The Fight for Equal Pay Must Include Domestic Workers (March 4, 2021), available at https://inequality.org/great-divide/equal-pay-domestic-workers/
when the pandemic hit, she worried about her own health and the health of her clients so she stepped back from homecare work and tried to piece together other jobs to keep up her income. At 60 years old, she worries about having enough savings to retire without having to burden her children and grandchildren. Her homecare jobs didn’t pay enough to build up any savings or provide retirement benefits so she made the decision to look for other work.”

Jennifer M. from Pennsylvania

“Jennifer used to provide care for more than one client, but during the pandemic she started caring for only one at a time because she wanted to make sure that she didn’t transmit the virus between clients and she worried about her own health and the health of her family. She used to work between 50 and 60 hours a week, but her hours are down to 40 hours/week and it’s now even harder to make ends meet with her bills. Until last year she was making only $10/hour. Her pay increased to $14/hour during the pandemic because she had to drive 60 miles a day to care for her client, so most of the additional money went to cover her gas.”

Real-time data that NDWA collected during the pandemic similarly reflects economic hardship across our membership. NDWA did a survey of 800 Black domestic workers in May and June 2020 from Massachusetts, Miami-Dade County, and New York. 70 percent of the Black immigrant domestic workers surveyed had either lost their jobs or received reduced hours and pay. Black undocumented workers were nearly twice as likely to be terminated than documented workers. NDWA also surveyed more than 20,000, largely Spanish-speaking domestic workers, from March to September 2020, and found that, by late March, 90 percent of workers lost jobs due to COVID-19.

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Investing in Care Will Meet the Rising Demands for Long-Term Services and Supports

Our nation’s population is rapidly aging, and seventy percent of people over 65 years-old will require long-term care in their lifetime. 29 88 percent of aging adults prefer to receive long-term services and supports (LTSS) in home and community-based settings. 30 But despite this growing need for care services, and therefore care workers, these services are out of reach for too many. Across the United States nearly 820,000 aging individuals and people with disabilities are on waiting lists for Medicaid Home and Community Based Services (HCBS). 31 People on waiting lists for Medicaid HCBS often wait years, sometimes decades to access these vital services. And we are facing an elder boom: by 2050, the population of people 65 and older will nearly double and 10,000 people will age into retirement per day. 32 For older Americans to live and age at home, we need a strong and long-lasting care infrastructure, including a robust workforce that can meet the growing demand.

The COVID-19 Pandemic, naturally, has exacerbated the situation. According to a recent survey of direct service providers conducted by the American Network of Community Options and Resources, there was a 70 percent increase between 2020 and 2021 of survey respondents who stated that their organization discontinued programs or services due to high turnover and vacancies among direct support professionals. 33 Likewise, there was a 17 percent increase in the same timeframe of respondents who stated that their organization had to turn away or stop accepting new referrals due to turnover and vacancies. 34 Investments in LTSS and HCBS would increase wages and quality of employment in order to meet the increased demand and lack of supply for care workers.


34 Id.
Investing in Care Will Benefit Family Caregivers

Investing in care jobs also benefits working families because these are job-enabling jobs. More than 50 million unpaid family caregivers are stepping in and juggling care for their loved ones while also managing full-time work outside the home. The majority of working family caregivers report having to make changes to their work status due to caregiving responsibilities, like reducing work hours, changing jobs, or leaving the workforce altogether. The burden is especially acute for sandwich generation family caregivers, who are the 11 million Americans providing care for an aging or disabled loved one while also raising and managing caring for children. If there is an adequate supply of paid caregivers, it enables millions of other working-age adults to go to work — in whatever industries they work in.

Policy Solutions to Building a Durable Care Infrastructure

First, Congress must pass the Build Back Better Act which includes a critical investment in the care economy, including $150 billion in Medicaid’s home and community-based services (HCBS). This meaningful investment would make it possible to both expand services to people with disabilities and older Americans and pay home care workers family-sustaining wages. As explained by the Congressional Budget Office, if enacted, “the number of workers providing [HCBS] services would grow, and their earnings would increase. Some people who are currently providing HCBS to family members would be paid for that work, and some would return to their primary occupations. In anticipation of lower costs for such services in the future, some people might save less today.”

I would also note that several provisions of Build Back Better would help lift care workers out of poverty and support their families. For example, Build Back Better, as passed out of the House of Representatives, would provide four weeks of paid family and medical leave. Given that the majority of care workers do not have access to any paid leave or sick leave, family and medical leave would support many of these working parents who are providing care to children and other loved ones. The renewal of the expanded Child Tax Credit (CTC) will also help care workers support their families. The CTC as included in the American Rescue Plan is expected to cut child

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38 Congressional Budget Office, supra note 34.

39 Wolfe supra note 3.
poverty levels for Black children by 52 percent, for Hispanic children by 45 percent and for Indigenous children by 61 percent. Given that the majority of domestic and care workers are women of color, it is important to build upon this progress. Build Back Better would additionally subsidize affordable childcare for low-earning families, such as in the care workforce, and free preschool for all three and four year-olds.

Congress should also enact the National Domestic Workers Bill of Rights, being led by Congresswoman Pramila Jayapal and Senator Kirsten Gillibrand. The National Domestic Workers Bill of Rights strikes the remaining FLSA exclusion for live-in domestic workers from overtime pay and establishes other baseline standards such as earned sick days, privacy protections, meal and rest breaks, safety and health measures, and fair scheduling provisions to protect domestic workers from substandard working conditions.

Over the last decade, NDWA’s organizing and advocacy have been critical to the passage of the Domestic Workers Bill of Rights Act in ten states and two major cities including Oregon, California, Connecticut, Illinois, New York, Massachusetts, Hawaii, Nevada, New Mexico and Virginia. In states like Virginia and New Mexico, domestic workers now finally enjoy the rights to state minimum wage law protections, and more domestic workers in Hawaii are covered under its state minimum wage law. In New York, Illinois, California and Oregon, domestic workers are entitled to overtime pay for the first time or are entitled to it at the same rate as other workers do. Other protections these local and state laws extend include protections against discrimination and harassment, paid time off, meal and rest breaks, a right to notice of termination, and enhanced retaliation protection. While local and state laws are critical to protecting domestic workers’ rights, much more is needed to establish a national baseline standard to ensure that all of our nation’s 2.2 million domestic workers are protected and enjoy the same rights and protections.

**Conclusion**

Congress has a profound moment of opportunity to rebuild and reset our economy to be more inclusive and equitable. The pandemic has only revealed and deepened inequity for care workers who were already struggling, and exposed how many care recipients and caregivers lack affordable and accessible long-term services and supports. By investing in home and community based services, including raising wages and improving the quality of low-wage care jobs, historically associated with women and women of color, we can secure working families, individuals who rely on care, enable

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42 Id.
working family caregivers to work outside the home, and turn poverty wage jobs into real pathways to economic mobility. In short, we can promote economic growth and equity from the bottom up. What will follow are better outcomes for the entire economy. Thank you.