

**Future of Work Commission**  
**Report on Stakeholder Conversation with Care Worker Organizations**

In furtherance of the effort to ensure all voices are represented and heard, Commissioners Mariana Viturro, Deputy Director at the National Domestic Workers Alliance, and Betty Yee, California State Controller, met with a group of care worker and consumer advocates and organizers on **Thursday, March 26, 2020**.

The session was designed to solicit a robust and candid discussion with representatives from care worker and consumer groups about pay, benefits, working conditions, the role of government, and the impact of COVID-19. We were pleased that the discussion was open, candid, and robust. The discussion lasted 90 minutes and was conducted over Zoom video conferencing.

Prior to the start of the discussion, Controller Yee shared several slides (all of which had previously been shared with the Commission) to provide a brief overview of the purpose of the Future of Work Commission. Those slides included:

Slide 1: Wages decoupled from productivity: Illustrating increasing productivity and flat wage growth over the past 40 years.

Slide 2: Gap between productivity and a typical worker's wages: a more comprehensive illustration of Slide 1, including statistics for changes between 1948-1979 (equal) and 1979-2018 (extremely divergent).

Slide 3: 1/5 of low wage workers in CA have a college degree: A segmented illustration of educational attainment and earning above and below \$15 per hour.

Slide 4: Job quality factors: all of the factors that inform our conception of worker protections, beyond pay and stability alone.

**Given the robust dialogue, we were only able to ask the following questions:**

1. Who are home care workers, what does this workforce look like, and what are some of their struggles?
2. How can government be used and proactively correct issues around pay and perception for these workers?
3. What are the critical policies you want government to continue to make progress on?
4. Given the current moment of COVID-19, what mechanisms could be used to provide immediate emergency relief specifically for this workforce and for families in need of care?
5. Many elements of this work cannot be replaced by technology, but technological tools are available to support workers. How can technology augment human work for care workers?

**Meeting Participants:**

Seven representatives of organizations participated in the convening. These individuals were advocates and organizers of both worker and consumer groups. Participants include:

- Kristina Bas Hamilton, United Domestic Workers
- Nina Weiler-Harwell, AARP

- Susannah Dyen, Caring Across Generations
- Lindsay Imai Hong, Hand in Hand
- Amanda Ream, United Domestic Workers
- Aquilina Soriano Versoza, Pilipino Workers Center
- Julia Figueira-McDonough, Open Society Foundations

## **Observations:**

### *Background:*

1. In Home Supportive Services (IHSS) workers represent an important part of the care workforce. Their hourly wages are \$13.43, and only 10% of these workers represented by the United Domestic Workers are able to access healthcare through their employer. Further 120,000 of these providers are not eligible for unemployment insurance because they care for their spouse or child. The original Social Security Act specifically excluded domestic workers and farmworkers; a relic of that exclusion is the limitation on parent and spouse care providers to access unemployment, social security, and healthcare benefits.
2. Private sector workers represent the other major portion of the care workforce. They are not paid through the IHSS program, but rather, the savings of individuals or the long-term care insurance that few families have. Most of these workers are immigrants. Increasingly, household workers or nannies are asked to step into the role of caregiving as their clients age. One issue is that workers, in particular live-in workers, are frequently not paid hourly, but daily, at a rate that comes to \$5 per hour or less with no overtime pay. Agencies that send out these workers conceive of working days as 12 or 16 hours, but often workers have to provide 24 hours of care.
3. The lack of transparency is an issue in this fragmented, under-regulated industry. Many families see themselves as partners with the workers they employ but don't know about the benefits that these workers should receive. A [UCLA Labor Center study](#) found that employers would pay more, but affordability is an issue—making public investment critical.

### *Role of Government:*

4. One role government can play is to provide a universal long-term services and supports (LTSS) benefits based on a social insurance model. This benefit would be funded by payroll contributions or an income tax to pool small contributions from all workers. When a person qualifies because they need help with Activities of Daily Living, they could access these benefits, which could be used to cover various costs including home care and home modification. This solution would allow the state to create a payment system and enter the market as a purchaser of long-term services and supports on the private market, elevating standards in a meaningful way. This benefit is important for families just above the IHSS income test, who don't qualify for any assistance at all. Note: The California Aging and Disability Alliance (CADA) has advocated for a LTSS proposal with its member organizations, many of whom represented in this stakeholder convening.
5. Another role government can play is increasing the number of sick days workers receive in IHSS. Right now workers earn one day of paid leave, which is expected to increase to 16 hours next year pending the minimum wage rate off-ramps tied to the economy.
6. Government can help dispel misinformation for families seeking care. Families don't know what benefits are covered. There is a false assumption that Medicare dollars will cover in-home care. There is a false notion that you can spend down to become eligible for MediCal. The simplest, fastest government response is a public awareness campaign.
7. Government can support worker cooperatives that are owned by the workers themselves. The Pilipino Workers Center has incubated one of these cooperatives, which gives workers more control over compensation and other conditions.
8. Government can not only encourage high road employers, but raise the standards for companies permitted to do business in California, especially if they are serving the state's vulnerable populations.

*Technology Tools:*

9. The Pilipino Workers Center has an app that allows home care workers to ask about basic rights and minimum wage laws with an AI that learns the answers and can quickly get information out. The database is being expanded for what to do in emergencies. The app could address the lack of training for caregivers, by sharing best practices and other support. The app has chatrooms, AI, and experts that respond to questions. This is currently a pilot that will be scaled up statewide this year.
10. The National Domestic Workers Alliance created the Alia benefits platform. The platform was launched for housecleaners but is expanding to all domestic workers to allow workers with multiple employers to aggregate benefits.

*COVID-19 Impacts:*

11. In this COVID-19 pandemic, we need to recognize that while hospital workers are frontline workers, homecare workers are the other frontline workers. These workers are largely hidden, and lack the same prestigious degrees as doctors, but should be recognized for their value.
12. Paid sick leave is a potential mechanism to help weather the crisis. There is a call for increased wage replacement, which is currently at 60-70% but should be 100%.
13. Given that the care workers are often first responders in this crisis, we should consider supports for both the caregiver and the person they're caring for. Home care workers should not be left out of the call for medical supplies and safety equipment during this crisis. Another option is providing food care boxes to individual homes, for both the care worker and their client.