

Why Care About Care?

OUR ECONOMY DEPENDS ON IT





Asset Funders Network



This primer was developed by AFN and EOF to elevate the intersectional and intergenerational issues associated with the care economy and the challenges facing low-income women of color who make up the care workforce. This primer is designed to provide funders with responsive strategies and policy solutions which center low-income women of color and ultimately build a healthy and resilient economy for us all.

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Executive Summary

The pandemic has laid bare the devastating economic and personal costs of our country's failure to adopt a care infrastructure. For too long, we have left families to shoulder the burden of caregiving and working, taking double and triple shifts, without common-sense protections like universal paid leave, high quality, affordable child care, and home- and community-based services.

In fact, unpaid caregivers, predominately women, provided approximately \$470 billion worth of care a year, even before the COVID-19 pandemic.¹ When you combine the 53 million family caregivers providing that care with the nearly 5.7 million people working in the care sector, for low wages and often in poor working conditions, and the people who benefit from that care, the scope of the issue becomes clear: **the care economy impacts everyone.**

Building a robust care infrastructure—a publicly funded system that recognizes care as both an individual and social responsibility, values and better compensates care workers, and supports family members to both care and provide financially for each other—will support economic recovery, growth, and prosperity; racial and gender equity; and family economic well-being. This effort will require cultural shifts, policy change, and philanthropic investments from a range of leaders and organizations engaging a rich set of strategies and tactics.



53M

53 million unpaid family caregiversⁱ



5.7M

5.7 million working in low-paying care sector jobsⁱⁱ

CARE ECONOMY IMPACTS EVERYONE

This brief was developed specifically with grantmakers in mind. The intent is to lay out a vision for shared care values and identifies the cultural changes needed to achieve the transformation necessary to build a care infrastructure in the United States. This transformation begins with shifting from seeing care as an individual responsibility to understanding care as a collective responsibility and a public good, like roads, bridges, or K–12 education, that must be supported with public dollars.

Those public dollars will not only support the needs of children, families, people with disabilities, older adults, and the care workforce, but also undergird a healthy economic recovery, bolster family economic security and asset building, promote gender and racial equity, and prioritize the needs of the women of color who make up a disproportionate percentage of the care workforce. That's a pretty significant return on investment.

Investing in care infrastructure yields millions of jobs in the care sector and supports the employment of caregivers, including parents. One study found that **investing \$77.5 billion annually in the care economy would support over 2 million new jobs each year at an average cost of \$34,496 per supported job, and 22.5 million new jobs over 10 years; translate into \$220 billion in new economic activity annually;** and create or support over 81,000 jobs in food services and 45,000 in retail—industries predominantly staffed by women of color and low-paid workers who lost over 500,000 jobs in December 2020.² And these numbers do not even account for the millions of additional parents and family caregivers who will be able to increase work hours or return to work when they have access to safe, nurturing care options for their loved ones. This support is crucial for economic recovery.

The failure to invest in care has many negative effects. Paying for care, providing care to family members, and working in the care sector all have detrimental

impacts on family economic security and the ability to build wealth. The lack of a public care infrastructure and the undervaluing of care work contribute to significant gender and racial inequities and both contribute to and reflect ageism and ableism.

The good news is that addressing these issues will reverse these impacts. Building a comprehensive child care and early learning system; enacting paid family and medical leave; ensuring every family has long-term services and supports, including home- and community-based options; and improving working conditions and supporting family caregivers will support an inclusive, equitable economy in which everyone can thrive.

The moment for philanthropists to engage is now. Throughout the nation, organizations are collaborating to advocate for policy change on the national, state, and local level; shift narratives and change culture; implement the American Rescue Plan and other care-related policies; and provide the grassroots organizing, direct services, and research needed to support all aspects of the work.

With a new federal administration, mature legislative proposals working their way through Congress, cultural norms shifting, and greater public awareness fueled by the COVID-19 crisis, the moment to build a healthy care economy may finally have arrived. Strategic, high-return philanthropic engagement at this crucial moment can support and expand this opportunity, taking advantage of this moment to build the foundations of a care economy that supports family caregivers; raises incomes and ensures protections for professional caregivers; improves the affordability, availability, and quality of care; reshapes cultural norms; and builds opportunity for long-term economic security for women who provide most care, in families and as paid caregivers. This transformational change will yield benefits for generations to come.

Who Supports Our Care Economy

THE RESPONSIBILITIES ON OUR CAREGIVERS



6/10

CAREGIVERS
ARE WOMENⁱⁱⁱ



CARE SERVICE
WORKERS

\$11.17

MEDIAN PAY

Median pay for child
care workers is \$11.17/hr
and pay for direct care
workers is \$12.20/hr^{vi}

9/10

Underpaid professional
caregivers are women &
are disproportionately
Black, Latinx, & Asian
immigrant women^{iv}

20%

Live in
poverty

40%

Rely on public
assistance^{vii}

-\$20B

Lost a year by working
women due to care needs^v

\$470 B

Worth of unpaid care
provided each year

30M

of ALL workers lack access
to a single paid sick day^{viii}

ONLY 20%

of ALL workers have
paid family leave through
their employer^{ix}

Introduction

At some point, every one of us will need care or need to provide care. Infants become school-aged children who care for younger siblings, and then teenagers who care for grandparents and young adults who care for their own children and, as middle-aged adults, care for their parents. The 53 million unpaid family caregivers work alongside the nearly 5.7 million people who call caregiving their profession. Together, they are the heart of the care economy. This brief lays out how care impacts economic recovery, family economic security and asset building, equity and justice, and the well-being of children, older adults, and people with disabilities. It highlights the policies needed around child care and early education, paid leave, long-term services and supports (LTSS), and related issues and the ways philanthropy can engage to support the organizations and coalitions working to build the healthy care economy America needs.



Care: The range of services and supports needed to meet needs related to age, disability, health, or illness. Care can be provided by loved ones, institutions, or professionals. Other terms for care include “family care” (commonly used by research or advocacy organizations) and “dependent care” (commonly used by government entities).



Caregiving: The activity or profession of attending to the basic and developmental needs of children or assisting a person who is sick, elderly, or living with a disability. Caregiving can include unpaid or paid assistance with activities of daily living (bathing, dressing, eating, and mobility), medical and nursing tasks, and financial support.



Family Caregiver: An unpaid person, usually a family member but sometimes a partner or friend, who provides caregiving to a child or a person who is sick, elderly, or living with a disability.



Professional Caregiver: A paid person, such as a child care worker or direct care provider, who provides caregiving to a child or a person who is sick, elderly, or living with a disability.



Child Care: The care of children, including infants, toddlers, and school-aged children. Early education is an important component of child care that involves teaching and fostering healthy brain development. Common child care employment options include center-based child care and home-based child care, in addition to nannying.



Direct Care: The care of older adults and people living with disabilities. Direct care workers include personal care aides, home health aides, and nursing assistants. Personal care aides help their clients with activities of daily living, housekeeping, errands, and appointments. Home health aides and nursing assistants perform clinical tasks, such as blood pressure readings and assistance with range-of-motion exercises.



Long-Term Services and Supports (LTSS): The range of services and supports used by individuals of all ages who need assistance with activities of daily living because of disabling conditions or chronic illnesses, including adult care and elder care. LTSS is also known as “long-term care.”³

CARE IS A PUBLIC GOOD



53M unpaid family caregivers work alongside nearly **5.7M** professional caregivers^{xi}

Together, they are the heart of the care economy, impacting economic recovery, family economic security and asset building, equity and justice, and the well-being of children, older adults, and people with disabilities.

WHY CARE ABOUT CARE?

OUR ECONOMY DEPENDS ON IT.

A Vision of Shared Values

The current U.S. care economy is rooted in cultural norms that view caregiving as an individual family matter that is most easily addressed by the commitment of a female family member, underpaid labor of a worker, or, historically, unpaid labor of an enslaved person.

Developing a clear vision for a culture that views care as a community matter that requires a collective investment is a crucial first step in disrupting the sexist, racist, classist status quo.

CURRENT REALITY...	THE VISION...
Care is the responsibility of individuals, families, and women.	Care is a collective responsibility, supported by public dollars.
Caring for children, seniors, people with disabilities, and oneself are separate issues.	We can transform the way we care for one another at every age and every life stage.
Care work is underpaid.	Care work is valued. Care jobs are well-paid, safe, family-supporting jobs.
Care responsibilities are inconsistent with paid work.	The workplace accommodates the needs of caregivers because caregiving is important and caregivers should be able to remain connected to the workplace.
Family caregivers are unpaid and must sacrifice their short- and long-term financial security.	Family caregiving is valued, and therefore family caregivers are provided with some level of stable income and long-term economic security.
Care is a niche issue.	Care is core to economic recovery and prosperity.
Caregiving is seen as unskilled, low-wage labor.	Caregiving is a skilled profession and should be paid as such.

Care is

an Economic Recovery Issue

Investing in care infrastructure will yield millions of jobs in the care sector and support the employment of caregivers, including parents. These elements are crucial for economic recovery.

The care economy is as central to our broader national economy as the retail or real estate industry. The COVID-19 pandemic of the last year has only highlighted the importance of caregivers, as parents have become remote learning facilitators and professional caregivers have become front-line workers. Without a significant public investment in care, parents will struggle to manage work and parenting, and other family caregivers will struggle with their care and work challenges, while the workforce faces a combination of unemployment and health risks. Making care infrastructure the foundation of our recovery is key not only to addressing historic inaction, but also to increasing the employment rate and ensuring a faster recovery by creating jobs and making work possible. It is also fundamental to long-term, sustainable, and equitable economic prosperity. A robust and well-functioning care infrastructure will require government

investment on an unprecedented scale, but that investment will pay for itself many times over.

The investment is similar to the investments we make in roads, bridges, and other physical infrastructure, but care investments can have a more immediate economic impact without requiring as much time to deploy funds, labor, and services. And, because of the care sector's high labor intensity, investment there can generate twice as many jobs per dollar as physical construction does.⁴ If we met the demand for these services, and if the compensation of providers reflected their contributions to society, we would increase the wages and benefits of millions of workers, who are predominantly women of color, and create millions more quality jobs that cannot be outsourced.



COVID-19 highlighted the importance of caregivers, as parents have become remote learning facilitators and professional caregivers have become front-line workers.

Investing \$77.5 billion per year in the care economy would support more than two million new jobs—22.5 million new jobs over 10 years. And that number does not include return of family caregivers to the workforce, enabled by adequate support.⁵

A \$77.5 billion annual investment in new jobs translates into \$220 billion in new economic activity.⁶

Care is

a Family Economic Security and Asset-building Issue

Paying for care, providing care to family members, and working in the care sector all have detrimental impacts on family economic security and the ability to build wealth.

The lack of collective care solutions and workplace rules that are not designed with caregivers in mind create work-related challenges for millions of people across the economy. In addition, those working in the care economy, providing child care and early learning as well as LTSS, are underpaid, and few have health coverage, workplace protections, paid leave, or retirement security. Moreover, they often experience inconsistent and unpredictable work hours and limited opportunities for career growth.⁷

Paying for care and providing it directly to loved ones has a significant effect on family economic security and financial well-being. For families who pay for care, child and long-term care prices are high, and some families are forced to spend down assets to get government support for long-term care. Families who must pay high prices for child care (ranging from nearly \$3,000 to over \$20,000 per year) often make tough budgetary tradeoffs (including cutting into their economic and retirement security).⁸

Those who can't afford these costs or cannot find convenient or affordable alternatives may have to sacrifice care quality, embrace piecemeal solutions, or leave the workforce altogether. Individuals who leave the workforce or reduce work hours to provide care experience both immediate effects, in loss of income and sometimes health insurance coverage, and longer-term effects, in not being able to accumulate wealth and losing out on future earnings and ultimately retirement security. The lack of a national paid family and medical leave policy to provide pay during shorter-term care needs further exacerbates these challenges. Adult children over 50 who care for aging parents lose an estimated \$300,000 over their lifetimes as a result of leaving the labor force early to provide care.⁹ Similarly, each year a parent stops working to care for a child can cost the family significantly more than three times that parent's annual salary in lifetime income.¹⁰

The insufficient pay for professional caregivers also robs them of financial security and the ability to build assets. There are 1.2 million workers employed in child care, and 4.5 million workers in direct care for adults.¹¹ Many of these workers are paid less than a living wage, and wages in these sectors have remained stagnant over the last decade.¹² Few have health coverage, paid leave, or retirement security. They are often forced to work multiple jobs, struggle to manage care for their own family members, and face the vulnerabilities of working in one-on-one situations, often without the workplace rights and protections afforded to other workers. Moreover, they often experience inconsistent and unpredictable work hours and limited opportunities for career growth.¹³ The result is that many of the members of the care workforce—which is disproportionately Black, Latinx, Indigenous, and immigrant women—live in poverty and rely on public assistance.¹⁴

Paying for care, providing care, and working in care hurt a family's economic security and wealth-building ability

\$3K - \$20K

Spent on Child Care per year^{xii}

\$300K

Lost over time due to missed work^{xiii}

Care is

an Equity and Justice Issue

The lack of a public care infrastructure and the undervaluing of care work contribute to significant gender and racial inequities.

The undervaluing of caregiving is linked to who is doing the caregiving. Most caregivers are women and most paid caregivers are women of color. **Immigrant women, Black, and Latinx women, and mothers of all races bear the weight of our nation's care economy on their proverbial hips.**

An estimated 6 in 10 family caregivers are women.¹⁵ Despite increasing numbers of women in the labor force, including in high-demand careers, and men increasing their share of care for children and adults, the responsibility of care still falls disproportionately on women. The COVID-19 pandemic exacerbated matters and stunted gender equity gains in caregiving. The pandemic's negative impact on schools and child care programs has forced women to reduce work hours, or leave the workplace altogether, to care for children at twice the rate of men.¹⁶

Indeed, the responsibility for child care, in particular, fell disproportionately on mothers even before the pandemic. Women regularly do more of the unpaid work within the home, including spending more time caring for children than men—even men with similar demographic backgrounds and parental status.¹⁷ Women are more likely than men to take time out of the workforce or reduce hours to care for children or loved ones. **Working women lose more than \$20 billion each year to care responsibilities and lack of paid leave, as compared to men's \$11.5 billion loss.**¹⁸ And female caregivers under the age of 50 have 30 percent less retirement wealth than those who did not provide care. Those over 50 have 58 percent less retirement wealth than those who did not provide care.¹⁹ Thus, the gender wage gap, wealth gap, and retirement gap—whereby women have 32 percent less saved for retirement than their male counterparts—can be traced, in large part, to caregiving.²⁰

At the same time, 9 out of 10 professional caregivers are women and those women are disproportionately African American and Black, Latinx, and Asian.²¹ Latinas provide 21 percent and Black women provide 20 percent of professional caregiving compared to White women's nearly 17 percent—

UNPAID CAREGIVING

6/10

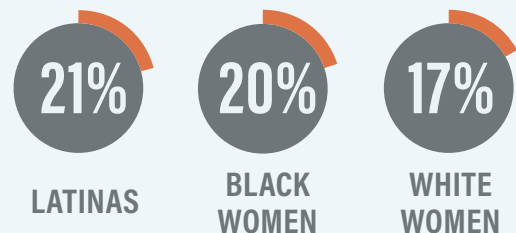
FAMILY CAREGIVERS
ARE WOMEN



PROFESSIONAL CAREGIVING

9/10

Underpaid professional caregivers are women & are disproportionately Black, Latinx, & Asian immigrant women



Source: Dyvonne Body, The True Cost of Caregiving, Aspen Institute, June 2020, <https://assets.aspeninstitute.org/content/uploads/2020/06/The-True-Cost-of-Cargiving-ES.pdf>

FINANCIAL IMPACT OF CAREGIVING

↓ **\$300K**

Average income lost by unpaid caregivers over their lifetime.^{xiv}

↓ **30%**

Female caregivers under 50 years old have 30% less retirement wealth than those who don't provide care.^{xv}

↓ **58%**

Female caregivers over 50 have 58% less retirement wealth than those who don't provide care.^{xvi}

↓ **75%**

When caregivers reach retirement age, non-White households average \$30,000 in savings while White households average \$120,000.^{xvii}



despite the fact that White women make up a larger share of the population.²² And many of these women face a double care burden, providing both unpaid and underpaid caregiving. Black mothers, for example, are by far the most likely to be the primary source of economic support for their families—they are more than twice as likely as White mothers to be their family's primary breadwinner.²³

The undervaluation of caregiving is rooted in a patriarchal system that expects women to be physiologically predisposed to be caregivers centered on the home. Historically, when women—especially Black and immigrant women—were permitted to work outside the home, they were often limited to domestic or caregiving roles, which were viewed as an extension of their natural abilities and kept them from competing with men.

Because women's wages were not believed to be essential to family economic security, caregiving and other professions

with a high concentration of women were historically undervalued. This undervaluation persists, even though more than 55 percent of women are in the labor force working for pay,²⁴ and **64 percent of mothers are considered the breadwinner or co-breadwinner for their families**.²⁵

The undervaluation of caregiving is also rooted in the system of brutal racial and ethnic discrimination that provided the foundation for the United States: chattel slavery. Black women served as domestic workers, forced to nurse and care for the children of White landowners and the landowners themselves. Once slavery formally ended, the system evolved to limit Black and immigrant women to working as caregivers and domestics and pay them as little as possible to do so while denying them basic workplace protections.²⁶ While our labor laws have changed, the undervaluation, undercompensation, and underprotection of professions with high concentrations of women of color—like caregiving—persists today.

Care is

a Children's, Aging, and Disability Issue

Breaking down care silos and supporting care across generations yields benefits for children, older adults, and people with disabilities and addresses ageism and ableism.

The lack of a care infrastructure and failure to meet the needs of caregivers directly impacts children, seniors, and people with disabilities. Fewer than one in three children have a full time stay-at-home parent.²⁷ Sixty-one million adults with disabilities, injury, or illness need care provided by a family member or professional caregiver.²⁸ Quality, consistent care from skilled and stable early educators, caregivers, and direct support professionals is critical to the health and success of both children and adults.

WHO NEEDS CARE?

61M

adults with disabilities, injury or illness that need care^{xviii}

10,000

baby boomers turn 65 each day and will eventually require long term care^{xix}

33.6M

families have children under age 18^{xx}

48M

adults aged 65 and older^{xxi}



Good child care supports healthy brain development and school preparedness, as well as social emotional health. Brain science confirms that early experiences affect all aspects of children's development, and that children need a safe, enriching child care setting to support them in developing foundational skills that set the stage for their future success.²⁹ In addition, high-quality child care programs have been associated with positive health benefits, including higher immunization, screening, and identification rates; improved mental health; and reduced smoking.³⁰ Unfortunately, too often, good child care options are limited to wealthy families and communities, leaving behind many children and creating learning disparities early in life that will persist. Sometimes older siblings are asked to care for younger siblings, disadvantaging both. Investing in good child care policies is key to valuing those just beginning their lives. Raising compensation and improving conditions for the people providing the care will improve the quality of care, by creating better opportunities for recruitment, retention, and economic stability.

The need for policies that support people with disabilities and ensure greater equity is also significant. Our policies should support the long-term needs of people with disabilities to live independently and be treated with dignity and equality. **Adults living with disabilities make up approximately 12 percent of the working-age population, yet account for nearly half of those living in long-term poverty.**³¹

Finally, investing in a care economy that values care, supports, and services for older people would redress the effects of age discrimination based on cultural norms that are heavily biased toward youth. Providing greater choices, especially to age with dignity at home, would show greater respect and honor as well.³² These changes are even more important as the baby boomers age and our older population grows. Experts estimate that about 10,000 baby boomers turn 65 each day.³³ To keep up with that demand, **the home care industry will likely need to fill at least 4.2 million more caregiver jobs by 2026.**³⁴ In fact, **by 2050, 19 million people will be 85 or older, and many will require help to live with comfort and a modicum of dignity.**³⁵

Good LTSS also help aging adults and people with disabilities live independently and age with dignity. Half of all adults turning 65 today will need LTSS, and about two in five people who need LTSS today are under 65 years old.

Many of those may require the support over their lifetimes.³⁶ Yet, today, public policy leaves the responsibility of providing LTSS to family and friends. When paid services are needed, families primarily pay out of pocket.³⁷ The government's divestment from its responsibility to provide this public good results in financial, health, and well-being costs to older adults, people with disabilities, and the family and friends who support them.

THE ADDED COST

OF THE LACK OF CARE

\$50K - \$90K

A YEAR FOR LONG TERM CARE

Median annual cost of Long Term Services and Support: home care services and residential care to nursing home care^{xxii}

35% OF INCOME USED FOR CHILD CARE

For low-income families, child care for children under five eats up 35% of their income^{xxiii}



\$31.9B LOST

Prior to the pandemic, the total estimated cost to workers due to a lack of access to affordable child care and comprehensive paid family and medical leave had increased to \$31.9 billion in annual lost wages^{xxiv}

Key Policies and Programs

TO ADDRESS THE ECONOMIC INEQUITIES ARISING FROM CARE ECONOMY ISSUES

The Biden-Harris Administration has demonstrated its support for the care economy through speeches, op-eds, and the American Rescue Plan, which included billions of dollars in support for child care relief and home- and community-based services. Most recently, the administration outlined national plans—the American Jobs Plan and the American Families Plan—that contemplate infrastructure as more than bridges and roads. The plan includes investments in the care infrastructure, including child care and early education, paid family and medical leave and funding for home health care jobs that pay higher wages and provide better benefits.

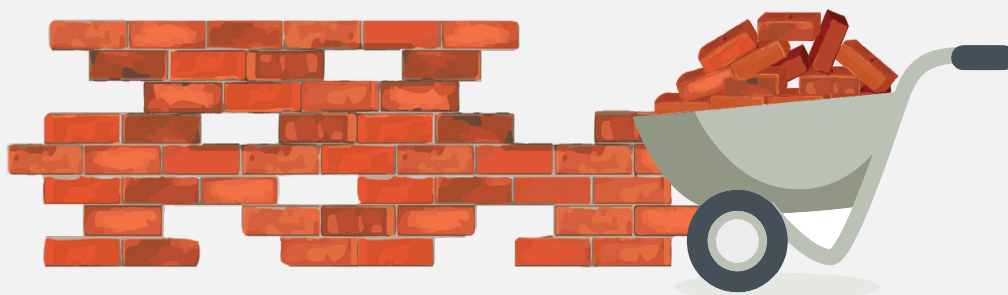
A robust care infrastructure and meaningful workplace justice policies could have reduced the spread of COVID-19, supported parents and other family caregivers so that they could continue working while caring for loved ones, reduced nursing home deaths, and supported essential workers. The lack of such policies reminds us that care is a public good that should be valued as such. Like investments in clean water, safe food, and good public schools, investing in the care economy ensures that children, families, employers, and communities can thrive. The care infrastructure includes child care and early learning, paid leave, LTSS, and policies that value both the paid workers and unpaid family members who provide care.

In addition, **corporations** have an important role to play alongside the government and families. They can start by implementing model policies for paid family and medical leave and paid sick days. Organizations like Paid Leave for the U.S. (PL+US) have helpful [tools and guidelines](#) for implementing these policies. Corporations can also work to build a culture that supports caregivers by training managers and having their leaders model the behavior by taking leave time for their own family members and being transparent about it. Recently, [TIME'S UP](#) launched the [Care Economy Business Council](#) a diverse coalition of nearly 200 businesses across industries with a mission of reimagining the country's caregiving infrastructure to help get people back to work and ultimately build a stronger and more resilient economy for us all. Notably the council will:

- Build momentum for public policy solutions that center caregiving,
- Advance best practices and policies around caregiving,
- Insist on the right to take paid leave so that people aren't forced to choose between a job and taking care of their families; and
- Recognize that caregiving can no longer be seen as personal responsibility for workers to solve on their own.

CARE IS A PUBLIC GOOD

The COVID-19 pandemic highlighted the gaping holes in America's response to care. Building a robust care infrastructure—a publicly funded system that recognizes care as both an individual and social responsibility, values and better compensates care workers, and supports family members to both care and provide financially for each other—will support economic recovery, growth, and prosperity; racial and gender equity; and family economic well-being.



Building a Care Infrastructure

A historic investment in America's care infrastructure, combined with new workplace policies, will help overturn generations of systemic sexism and racism and accrue benefits to our entire society and economy. Investing in the care infrastructure will create immediate care jobs and keep people in, or return people to, the workforce, driving the economic activity and stability our country needs.

Building a robust care infrastructure—a publicly funded system that recognizes care as both an individual and social responsibility, values care workers, and supports family members to both care and provide financially for each other—will support economic recovery, growth, and prosperity and support racial and gender equity and family well-being.

Such a commitment must include care across the lifetime, from birth through old age. Families do not experience these issues in silos, and our policies must recognize that reality. On the federal, state, and local level, policy makers can take a number of steps to achieve these goals.

Child Care and Early Learning for All: All families must be able to afford safe, high-quality, convenient child care in their own homes, family care homes, or child care centers, including through mixed-delivery universal preschool for three- and four-year-olds. Child care workers and early educators must be well compensated. The Child Care for Working Families Act, introduced in Congress, is a good model for how to address these needs for children from birth through age 12 and for older children with disabilities. States and localities can also work toward these solutions; Washington, DC, provides a model in its Birth to Three for All³⁸ and universal preschool³⁹ programs. However, good policies require a significant public investment, which makes it more important that federal dollars are included.

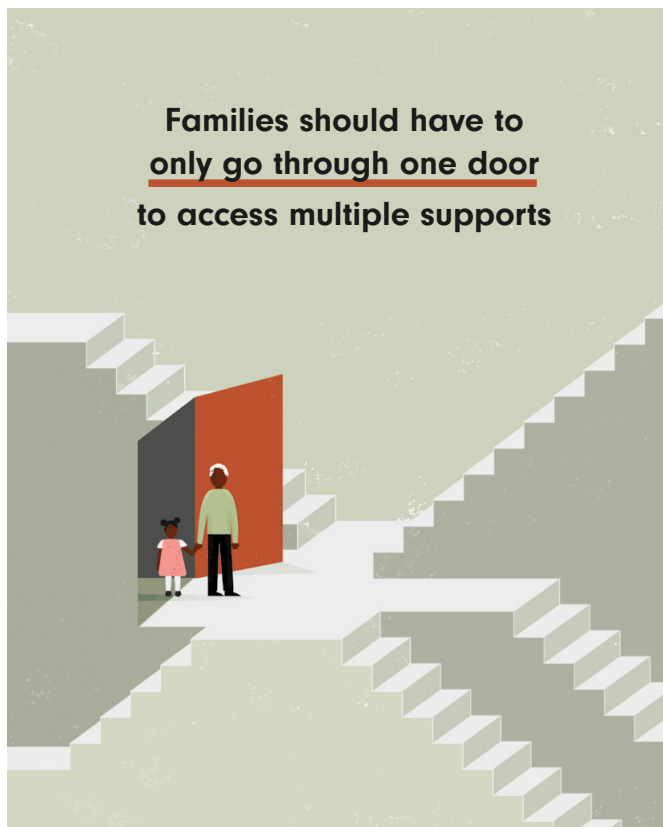
Paid Leave for All: We need elected leaders to advance paid family and medical leave policies for all—including parents, individuals with serious illnesses, and individuals whose loved ones have serious illnesses or are in the military—to ensure that everyone can meet their care obligations without risking their financial security. Now that Congress has let the emergency paid leave provisions for COVID-19 expire, establishing a permanent paid leave policy is more important than ever. The FAMILY Act is a good starting point. States and localities have already led the way; 9 states and DC have paid family and medical leave laws, and more than 50 localities and states have established paid sick days.⁴⁰ Congress should follow their lead to require paid sick and safe days for survivors of sexual assault, domestic violence, and stalking, as well as those providing care, regardless of the size of their employer. The Healthy Families Act outlines these requirements.

LTSS: On the federal and state level, policy makers must build a new, holistic system of long-term care that expands on Medicaid and Medicare to provide sustainable supports and services and guarantee the respect, dignity, and recognition that home care workers and other care workers deserve. This effort must include investments in home- and community-based services that correct Medicaid's bias toward institutional care while also ensuring everyone has affordable, accessible, safe housing. Members of Congress are working on new proposals to address this issue. In addition, Washington state's long-term-care policy, the first such state-level policy, is a good model for other states to follow.

Public Policies Must Value the People Who Care: The Domestic Workers Bill of Rights would raise standards and ensure dignity for domestic workers and other care workers. Ten states have passed their own Domestic Workers Bill of Rights as well. In addition, policy makers at the national and state levels must support family caregivers and the sandwich generation through training, financial compensation, and health assistance, as well as policies like the Social Security Caregiver Credit Act, which would allow family caregivers to receive Social Security credit for up to five years of caregiving for dependent relatives.

Related Policies

In addition to the framework described above, a number of related policy ideas, as well as principles and programmatic solutions, can ensure fair access to and usage of the care infrastructure. For example, **policies should be portable across jobs and employers; families should have to only go through one door to access multiple supports; technology should be deployed to foster efficiency without harming access; and culturally sensitive coaches or navigators can help families understand what they are eligible for and gain access to that support.**



Connecting care across the lifespan can also provide benefits. A number of models suggest how this kind of universal approach might be designed. Under this model, child care, paid leave, and LTSS would be part of one system that supports care needs across the lifespan. For instance, Caring Across Generations, a long-time leader in advocating for connecting care issues across the lifespan, has proposed **Universal Family Care**, and the National Academy of Social Insurance has mapped state-based options to cover care needs across the spectrum.⁴¹ Other universal approaches include **Universal Basic Income**—a guaranteed income to support families’ financial stability—and **Universal Child Allowances**—a cash benefit provided to all families with children without regard to their income, earnings, or other qualifying conditions, both of which would help ensure families could meet child and adult care needs.

A more targeted approach could be channeled through the Earned Income Tax Credit (EITC). The **EITC Modernization Act** would expand eligibility for this refundable tax credit to include family caregivers, including those who have low or no income and setting a minimum baseline payment of \$1,200 a year. It would also provide a rapid credit for parents of new children. Under this proposal, recipients already getting a monthly credit who give birth to or adopt a new baby can file for an increase in the monthly payment right away, rather than waiting until tax time. Many states also have EITC policies that could be replicated or expanded.

In addition, because workplace norms were not developed with caregivers in mind, they are often inconsistent with caregiving responsibilities. In addition to providing for paid leave, we will have to address the mismatch between school and work schedules and policies that lack predictability and flexibility and devalue caregiving. The **Schedules that Work Act** and the **Part-Time Workers Bill of Rights** are two bills that would begin to address these issues.

Strategies for Philanthropy

A successful care economy campaign will require bringing together strategic communications and culture change with grassroots organizing, power building, and leadership development built on a strong foundation of smart policy, research, and service delivery. Effective coalitions, networks, and tables; public-private partnerships; and coordinated federal-state-local tactics are also important to success.

FUND POLICY ADVOCACY THROUGH NATIONAL CARE COLLABORATIONS

Funders have a variety of options to support the work of building the care infrastructure. Looking at the incredible work already happening is a good place to start.

Promising Practices

A group of major foundations working across the care continuum have launched a collaborative care fund, called The Care for All with Respect and Equity (CARE) Fund. The goal of the fund is to expand and align philanthropic resources at the pace and scale needed to emerge from the COVID-19 crisis with a robust care economy that works for all. The fund will meet the immediate moment for transformative change and build the infrastructure to sustain it. The collaboration, which brings together a wide range of funders with different issue and constituency focuses, presents an excellent opportunity to have a significant impact. Current participants include:

- The **#CareCantWait Campaign** convened by Caring Across Generations is a joint campaign working to maximize advocacy across child care and early education, paid family and medical leave, and LTSS to bring about real, lasting change to the care infrastructure. Disability, racial, gender, and economic justice are essential to their success and will be advanced by the collaborative work.

- The **Paid Leave for All** campaign is a growing collaborative of organizations fighting for paid family and medical leave for all working people. The campaign leverages the groups' policy expertise and research, partnerships, and grassroots memberships, as well as storytellers and communications tools, to drive enactment of a comprehensive and inclusive federal paid family and medical leave program by 2023.

- **Child Care for Every Family** is a new network that seeks a transformed national child care system that provides universal access to high-quality, affordable child care with a diverse, well-paid, and well-supported workforce, so that parents can work and children can thrive. The network is a critical element in a transformative child care policy agenda. Complementary to existing coalition tables, the network structure will bring together diverse stakeholders at the grassroots, state, and national levels to respond dynamically to changes in the political and social environment and advance long-term culture and policy change.

Another impactful collaborative supporting efforts to build a care infrastructure is **Closing the Women's Wealth Gap (CWWG)**, a multiracial/ethnic network of nonprofit, philanthropic, and public- and private-sector leaders working to transform public policies and systems to advance gender economic equity and close the gender wealth gap. In 2021, CWWG is focusing on advancing policies to build an equitable care infrastructure as part of the national Care Can't Wait campaign.

FUND STATE AND LOCAL INITIATIVES

Many state and local coalitions are organized into national networks, such as Family Values @ Work, Community Change and Caring Across Generations. State and local policy wins can materially improve the lives of the people who live in those localities, while also building momentum and models for federal legislation. In addition, investing in policy implementation can ensure that good policies yield the intended results. COVID-19 has cast a spotlight on the care economy and highlighted the important role of government, public education, and grassroots organizing at the federal, state, and local level.

Promising Practices

- In 2020, largely as a result of the organizing work of groups like Family Values @ Work, 9to5 Colorado, and A Better Balance, **Colorado became the 10th state to pass paid family and medical leave**. However, Colorado's process was different from other states: it was the first state to pass its law through a ballot initiative. Under Proposition 118, Colorado will now require that employers provide 12 weeks of paid time off for childbirth and family emergencies.
- In **Massachusetts**, the Common Start Coalition has come together to support **Common Start** legislation that would dramatically increase the affordability and quality of early education and child care for all Massachusetts families. This coalition is an outgrowth of the group that previously won paid family and medical leave and paid sick day laws in the state; it is building on that success to organize, educate, and advocate for major policy change.
- In the **South**, A Better Balance and partners are leading the way in the push for paid family leave, among other issues, in the most conservative areas of the country. They have obtained these important benefits for state and municipal employees, where women and people of color are disproportionately employed. Successful policies were passed in Nashville and Shelby County, Tennessee, and bipartisan initiatives were introduced in multiple Southern states in 2021.
- 9to5 has led the Georgia Job/Family Collaborative since its founding in the early 2000s. The collaborative is made up of more than 50 local and statewide organizations, including

child care, health advocacy, women's, faith-based, labor, and community groups. Its goal is to build support for public policies that strengthen communities by ensuring that working families can balance their responsibilities at home and on the job. In 2017, the coalition successfully advocated for passage of the Family Care Act, which extended the ability to use existing sick days to care for self or family. It is building on that success by leading campaigns to win family care days, paid family leave, and family-supporting jobs; affordable and accessible child care; and pregnant workers' rights. The collaborative uses organizing, civic engagement, advocacy, coalition-building, and leadership development strategies to build power among women of color and change public policy.

FUND RESEARCH

Research is key to any policymaking effort to achieve a healthy care economy. Some important areas for research across issues include:

- Identifying the costs and benefits of policy options and revenue sources to pay for them.
- Defining the impact of job loss among women of color today on their future income and assets.
- Describing how the lack of care infrastructure makes asset building harder for families and individuals, especially women of color.
- Evaluating the impact of federal relief funding on family economic security and wealth building, with an eye toward child care relief, home- and community-based services funding, and the child tax credit.
- Engaging BIPOC women in participatory research that gathers insights about what it means to truly center the needs of BIPOC women and families in care economy policy solutions.
- Quantifying the economic impact of caregiving responsibilities on young, school-age caregivers.
- Mapping incremental policy change in the context of the bold vision: what are the smaller steps that state and federal governments can take to build toward the big vision of a care infrastructure, if they cannot get to bold changes immediately?

FUND CULTURE CHANGE STRATEGIES

Culture change strategies are central to moving policy forward and making sure that new policies are implemented well once they are passed. Driving culture change includes messaging research to confirm the most effective ways to talk about caregiving issues to activate and persuade stakeholders around public policy change.

Promising Practices

- Funders can support **creative strategies**, like a campaign focused on engaging men in the fight for care infrastructure. For example, **Caring Across Generations** launched the “[Man Enough to Care](#)” campaign with actor Justin Baldoni to highlight the 20 million male and male-identifying caregivers in the United States. In a series of videos, male caregivers shared their stories and experiences with Baldoni, while also advocating for the community of caregivers and their loved ones. The series features former NFL player Devon Still, actor Nathan Kress (iCarly, Star Wars Rebels), comedian and writer Zach Anner (Speechless), Robert Espinoza (advocate and expert on care), and Caring Across’s Ai-jen Poo. Watch them [here](#).
- [Times Up](#) is launching **Caregiving Diaries**, a regular online column in which caregivers, both paid and unpaid, share a week in their lives. The series will focus on their routines, costs associated with caregiving, and the impact of their caregiving responsibilities on their lives and careers. The purpose is to normalize caregivers’ experiences and illustrate the critical role they play in keeping our economy and society afloat. Caregivers have struggled in the shadows for too long. Bringing their stories to light can prompt nuanced conversations about what caregivers need and how supports for caregivers and women in the workplace can be strengthened. The Caregiving Diaries will inspire thousands of people to take action to support the transformation our care economy—and our economy as a whole—needs.

FUND POLICY IMPLEMENTATION

AND DIRECT SERVICES

In addition to policy and culture change work, serving families directly and ensuring that the people eligible for existing assistance receive it are also crucial. Funding direct service, education, outreach, and implementation work is an important piece of the puzzle.

Promising Practices

- Walter and Elise Haas Fund supports **Legal Aid at Work (LAAW)**, the oldest legal aid organization in the West. The Work and Family Program works to advance the rights of low-income pregnant workers, new parents, caregivers, those experiencing family and medical crises, and survivors of domestic violence. LAAW provides both direct services and conducts public policy efforts, including administrative advocacy, to ensure equitable access to paid leave. Among other activities, the organization educates low-wage workers about paid family leave and related rights by hosting trainings, distributing multilingual educational materials, and conducting outreach to health and social services providers. It also provides legal counseling, advocacy, and representation to low-wage workers through in-person clinics and the Work and Family Helpline and Survive Helpline.
- **Mississippi Low Income Child Care Initiative (MLICCI)** is a statewide, nonprofit public policy advocacy organization working to strengthen women’s economic security in Mississippi by making child care affordable for low-income working moms, achieving gender and racial equity in the workforce, and making the safety net work for women. The W.K. Kellogg Foundation supports MLICCI’s **Employment Equity for Single Moms** project, an initiative to align the job training, education, and child care systems to support low-income single moms’ ability to pursue living-wage career pathways. MLICCI works with a network of child care providers, state agencies, workforce development entities, and advocacy partners to ensure that mothers in their program are enrolled in education or job training programs that lead to well-paying jobs, and that they have vouchers and other support to access high-quality child care for their children.

FUND GRASSROOTS ORGANIZING

Organizing care workers, and care workers and consumers together, is an important strategy to build power and community and fuel collective action. From worker centers to unions to the National Domestic Workers Alliance and Hand in Hand, many organizations are doing this work to bring people together to fight for, and make, change. Examples include supporting organizations and initiatives focused on:

- Building power through unions and other worker and community-based organizations
- Building capacity to organize workers and caregivers
- Working toward repeal or restriction of “right-to-work laws”
- Building and executing campaigns around wage increases, wage theft, and similar issues

♥ Promising Practices

- The **Early Care and Education Network** brings together diverse national organizations across the country that are united by a commitment to grassroots organizing to expand affordable child care and early education and the implementation of an economic, racial, and gender justice lens. The network has started a grassroots movement for child care and early education, which has held three assemblies to bring together parents, providers, experts, and activists to build power, community, collaboration, and capacity.
- **Family Forward Oregon** is a membership-based organization focused on building an intersectional movement centered on care to fight for economic and reproductive justice for all mothers and caregivers in Oregon. By organizing mothers and other caregivers across a range of identities, building community, providing leadership development opportunities, and supporting anti-oppression learning, Family Forward Oregon helps its members take meaningful action to support systems change. Its organizing efforts were instrumental to passing one of the most robust state paid family and medical leave laws in the country in 2019.



Valuing care workers and supporting family members to care for each other supports economic recovery, growth, and prosperity.

And in 2020, Family Forward helped pass a universal preschool ballot initiative that prioritizes access for children of color and raises wages for teachers.

The W.K. Kellogg Foundation is supporting Family Forward Oregon’s work to build grassroots power to promote access to high-quality care for children and involve mothers and caregivers in fighting for economic security focused on:

- Ensuring mothers and caregivers are involved in shaping the design and implementation of the paid family and medical leave and universal preschool laws;
- Using organizing, communications, and other strategies to educate the public about how these programs will work and how to access them;
- Supporting regional teams organizing mothers and caregivers for systems change work; and
- Supporting the growth and work of a robust child care coalition.

Building a Care Economy Infrastructure

POLICIES THAT CENTER & SUPPORT CAREGIVERS

Support Families

Support Care Workers



Paid Family & Medical Leave

Better Living Wages & Benefits

Affordable Quality Childcare

Long-Term Services & Supports

Next Steps

The COVID-19 pandemic highlighted just how inadequate U.S. cultural norms and public policies are when it comes to collective responses to care. Too many leaders and communities are focused on individual needs or the needs of corporations over the collective needs of communities, families, and caregivers. Building a robust care infrastructure—a publicly funded system that recognizes care as both an individual and social responsibility, values and better compensates care workers, and supports family members to both care and provide financially for each other—will support economic recovery, growth, and prosperity; racial and gender equity; and family economic well-being. The philanthropic sector now has an opportunity to show its commitment to the idea that we are all in this together and must treat each other as such. Creating a care structure that reflects those beliefs will require investing in bold ideas, strategic campaigns, grassroots organizing, leadership development, and organizational capacity building to move care, and a robust care infrastructure, into the future.

Endnotes

1. Susan Reinhard, Lynn Friss Feinberg, Ari Houser, Rita Choula, Molly Evans, “Valuing the Invaluable 2019 Update: Charting a Path Forward,” AARP Public Policy Institute, November 14, 2019, https://www.aarp.org/ppi/info-2015/valuing-the-invaluable-2015-update.html?cmp=RDRCT-VALUN_JUN23_015
2. Lenore Palladino & Rakeen Mabud, *It’s Time to Care: The Economic Case for Investing in a Care Infrastructure*, Times Up, February 2021, <https://timesupfoundation.org/work/times-up-impact-lab/times-up-measure-up/its-time-to-care-the-economic-case-for-investing-in-a-care-infrastructure/>.
3. Adapted from Dyvonne Body, *The True Cost of Caregiving*, Aspen Institute, June 2020, <https://assets.aspeninstitute.org/content/uploads/2020/06/The-True-Cost-of-Cargiving-ES.pdf>.
4. Indivar Dutta Gupta & Sarita Gupta, America must build a caregiving infrastructure to help our families, *The Hill*, February 8, 2018, <https://thehill.com/opinion/finance/372966-america-must-build-a-caregiving-infrastructure-to-help-our-families>.
5. Palladino & Mabud, *It’s Time to Care*.
6. *Ibid.*
7. Body, *The True Cost of Caregiving*.
8. Maya Pendleton, “A Closer Look at Universal Child Care,” *Policy Perspectives*, May 6, 2019, <https://policy-perspectives.org/2019/05/06/a-closer-look-at-universal-child-care/>.
9. Generations Home Care, “Family Caregivers Lose \$300,000 in Income Over Their Lifetime,” Retrieved March 2021, <https://home-caregenerations.com/family-caregivers-lose-300000-in-income-over-their-lifetime/>.
10. Michael Madowitz, Alex Rowell, & Katie Hamm, *Calculating the Hidden Cost of Interrupting a Career for Child Care*, Center for American Progress, June 21, 2016, <https://www.americanprogress.org/issues/early-childhood/reports/2016/06/21/139731/calculating-the-hidden-cost-of-interrupting-a-career-for-child-care/>.
11. Body, *The True Cost of Caregiving*.
12. *Ibid.*
13. *The True Cost of Caregiving: Executive Summary*, Aspen Institute, Retrieved March 2021, <https://assets.aspeninstitute.org/content/uploads/2020/06/The-True-Cost-of-Cargiving-ES.pdf>.
14. Molly Kinder, *Essential but Undervalued: Millions of Health Care Workers Aren’t Getting the Pay or Respect They Deserve in the COVID-19 Pandemic*, Brookings Institute, May 28, 2020, <https://www.brookings.edu/research/essential-but-undervalued-millions-of-health-care-workers-arent-getting-the-pay-or-respect-they-deserve-in-the-covid-19-pandemic/>.
15. Body, *The True Cost of Caregiving*.
16. Julie Kashen, Sarah Jane Glynn, & Amanda Novello, *How COVID-19 Sent Women’s Workforce Progress Backward*, Center for American Progress, October 30, 2020, <https://www.americanprog->

- ress.org/issues/women/reports/2020/10/30/492582/covid-19-sent-womens-workforce-progress-backward/.
17. Sarah Jane Glynn, *An Unequal Division of Labor, How Equitable Work Policies Would Benefit Working Mothers*, Center for American Progress, May 18, 2018, <https://www.americanprogress.org/issues/women/reports/2018/05/18/450972/unequal-division-labor/>.
 18. Sarah Jane Glynn, "The Rising Cost of Inaction on Work-Family Policies," Center for American Progress, January 21, 2020, <https://www.americanprogress.org/issues/women/news/2020/01/21/479555/rising-cost-inaction-work-family-policies/>
 19. E. Napoletano & Benjamin Curry, "How the Gender Income Gap Impacts Women's Retirement," *Forbes*, December 16, 2020, <https://www.forbes.com/advisor/retirement/retirement-gender-income-gap/>.
 20. "The Retirement Savings Gap: Why Retirement Planning Looks Different for Men & Women," *Financial Impulse*, April 11, 2019, <https://www.financialimpulse.com/retirement-savings-gap/>.
 21. Body, *The True Cost of Caregiving*.
 22. *Ibid.*
 23. Rasheed Malik, *Investing in Infant and Toddler Care to Strengthen Working Families*, Center for American Progress, October 21, 2019, <https://www.americanprogress.org/issues/early-childhood/reports/2019/10/21/475867/investing-infant-toddler-child-care-strengthen-working-families/>.
 24. Federal Reserve Bank of St. Louis, Labor Force Participation Rate—Women, *Fred Economic Data*, Retrieved March 2021, <https://fred.stlouisfed.org/series/LNS11300002>.
 25. Sarah Jane Glynn, *Breadwinning Mothers Continue to Be the U.S. Norm*, Center for American Progress, May 10, 2019, <https://www.americanprogress.org/issues/women/reports/2019/05/10/469739/breadwinning-mothers-continue-u-s-norm/>.
 26. Bryan Stevenson, *Just Mercy: A Story of Justice and Redemption* (New York: Spiegel & Grau, 2014).
 27. Sarah Jane Glynn, *Fact Sheet: Child Care*, Center for American Progress, August 16, 2012, <https://www.americanprogress.org/issues/economy/news/2012/08/16/11978/fact-sheet-child-care/>.
 28. Centers for Disease Control & Prevention, *Disability Impacts All of Us*, Disability and Health Promotion, Retrieved March, 2021, <https://www.cdc.gov/ncbddd/disabilityandhealth/infographic-disability-impacts-all.html>.
 29. Katie Hamm, Allegra Baider, Catherine White, Katherine Gallagher Robbins, Cathy Sarri, Megan Stockhausen, & Nina Perez, *America, It's Time to Talk About Child Care*, Case for Child Care, October 2019, <https://caseforchildcare.org/2020CaseForChildCare.pdf>.
 30. Taryn Morrissey, "The Effects of Early Care and Education on Children's Health," *Health Affairs*, April 25, 2019, <https://www.healthaffairs.org/doi/10.1377/hpb20190325.519221/full/>.
 31. National Council on Disability, "Highlighting Disability/Poverty Connection, NCD Urges Congress to Alter Federal Policies That Disadvantage People with Disabilities," press release, October 26, 2017, <https://ncd.gov/newsroom/2017/disability-poverty-connection-2017-progress-report-release>.
 32. Austin S. Kilaru & Rebekah E. Gee, "Structural Ageism and the Health of Older Adults," *JAMA Health Forum*, October 16, 2020, <https://jamanetwork.com/channels/health-forum/fullarticle/2772140>.
 33. America Counts Staff, "2020 Census Will Help Policymakers Prepare for the Incoming Wave of Aging Boomers," United States Census Bureau, December 10, 2019, <https://www.census.gov/library/stories/2019/12/by-2030-all-baby-boomers-will-be-age-65-or-older.html#:~:text=Born%20after%20World%20War%20II,be%20at%20least%20age%2065>
 34. Robert Holly, "Biden Announces \$775B Plan to Boost the Caregiver Economy, Support In-Home Care Providers," Home Health Care News, July 21, 2020, <https://homehealthcarenews.com/2020/07/biden-announces-775b-plan-to-boost-the-caregiver-economy-support-in-home-care-providers/#:~:text=Nationwide%2C%20aging%20experts%20estimate%20that,more%20caregiver%20jobs%20by%202026>
 35. Grayson K. Vincent and Victoria A. Velkof, "The Next Four Decades: The Older Population in the United States: 2010 to 2050," U.S. Census Bureau, May 2010, <https://www.aarp.org/content/dam/aarp/livable-communities/old-learn/demographics/the-next-four-decades-the-older-population-in-the-united-states-2010-2050-aarp.pdf>
 36. Benjamin W. Veghte et al., *Designing Universal Family Care: State-Based Social Insurance Programs for Early Child Care and Education, Paid Family and Medical Leave, and Long-Term Services and Supports*, National Academy of Social Insurance, 2019, https://universalfamilycare.org/wp-content/uploads/2019/06/Designing-Universal-Family-Care_Digital-Version_FINAL.pdf.
 37. *Ibid.*
 38. "Washington D.C. Passes Birth-to-Three for All DC Act of 2018," Zero to Three, September 24, 2018, <https://www.zerotothree.org/resources/2466-washington-d-c-passes-birth-to-three-for-all-dc-act-of-2018>.
 39. Rasheed Malik, *The Effects of Universal Preschool in Washington, D.C.: Children's Learning and Mothers' Earnings*, Center for American Progress, September 26, 2018, <https://www.americanprogress.org/issues/early-childhood/reports/2018/09/26/458208/effects-universal-preschool-washington-d-c/>.
 40. Timeline of Wins," *Family Values at Work*, Retrieved March 2021, <https://familyvaluesatwork.org/media-center/timeline-of-wins/>.
 41. Veghte et al., *Designing Universal Family Care*.

- i Deborah Schoch, "1 in 5 Americans Now Provide Unpaid Family Care," AARP, Updated June 18, 2020, <https://www.aarp.org/caregiving/basics/info-2020/unpaid-family-caregivers-report.html>
- ii Dyvonne Body, The True Cost of Caregiving, Aspen Institute, June 2020, <https://assets.aspeninstitute.org/content/uploads/2020/06/The-True-Cost-of-Cargiving-ES.pdf>
- iii *Ibid.*
- iv *Ibid.*
- v Sarah Jane Glynn, "The Rising Cost of Inaction on Work-Family Policies," Center for American Progress, January 21, 2020, <https://www.americanprogress.org/issues/women/news/2020/01/21/479555/rising-cost-inaction-work-family-policies/>
- vi Dyvonne Body, The True Cost of Caregiving, Aspen Institute, June 2020, <https://assets.aspeninstitute.org/content/uploads/2020/06/The-True-Cost-of-Cargiving-ES.pdf>
- vii Molly Kinder, "Essential but Undervalued: Millions of health care workers aren't getting the pay or respect they deserve in the COVID-19 pandemic," Brookings Institute, May 2020, <https://www.brookings.edu/research/essential-but-undervalued-millions-of-health-care-workers-arent-getting-the-pay-or-respect-they-deserve-in-the-covid-19-pandemic/>
- viii "Paid Leave for All," Paid Leave for All, Retrieved March 2021, <https://paidleaveforall.org/wp-content/uploads/2019/12/Hopewell-PLFA-Av1-one-pager-8.5x11-v4.pdf>
- ix *Ibid.*
- x Deborah Schoch, "1 in 5 Americans Now Provide Unpaid Family Care," AARP, Updated June 18, 2020, <https://www.aarp.org/caregiving/basics/info-2020/unpaid-family-caregivers-report.html>
- xi Dyvonne Body, The True Cost of Caregiving, Aspen Institute, June 2020, <https://assets.aspeninstitute.org/content/uploads/2020/06/The-True-Cost-of-Cargiving-ES.pdf>
- xii Maya Pendleton, "A Closer Look at Universal Child Care," Policy Perspectives, May 6, 2019, <https://policy-perspectives.org/2019/05/06/a-closer-look-at-universal-child-care/>
- xiii Generations Home Care, "Family Caregivers Lose \$300,000 in Income Over Their Lifetime," Retrieved March 2021, <https://www.homecaregenerations.com/family-caregivers-lose-300000-in-income-over-their-lifetime/>
- xiv Generations Home Care, "Family Caregivers Lose \$300,000 in Income Over Their Lifetime," Retrieved March 2021, <https://www.homecaregenerations.com/family-caregivers-lose-300000-in-income-over-their-lifetime/>
- xv E. Napoletano & Benjamin Curry, "How the Gender Income Gap Impacts Women's Retirement," Forbes, December 16, 2020, <https://www.forbes.com/advisor/retirement/retirement-gender-income-gap/>
- xvi *Ibid.*
- xvii Kelly Anne Smith, "America's Racial Wealth Gap in Retirement Savings," Forbes, September 2020, <https://www.forbes.com/advisor/retirement/retirement-racial-wealth-gap/>
- xviii Centers for Disease Control & Prevention, Disability Impacts All of Us, Disability and Health Promotion, Retrieved March 2021, <https://www.cdc.gov/ncbddd/disabilityandhealth/infographic-disability-impacts-all.html>
- xix America Counts Staff, "2020 Census Will Help Policymakers Prepare for the Incoming Wave of Aging Boomers," United States Census Bureau, December 10, 2019, <https://www.census.gov/library/stories/2019/12/by-2030-all-baby-boomers-will-be-age-65-or-older.html#:~:text=Born%20after%20World%20War%20II,be%20at%20least%20age%2065>
- xx The True Cost of Caregiving Executive Summary," Aspen Institute, Retrieved March 2021, https://assets.aspeninstitute.org/content/uploads/2020/06/The-True-Cost-of-Cargiving-ES.pdf?_ga=2.72950419.162942414.1603736043-1137365703.1603736043
- xxi *Ibid.*
- xxii Stephen Campbell, "We Can Do Better: How Our Broken Long-Term Care System Undermines Care," PHI, April 21, 2020, <https://phinational.org/resource/we-can-do-better-how-our-broken-long-term-care-system-undermines-care/>
- xxiii Rasheed Malik, "Working Families Are Spending Big Money on Child Care," Center for American Progress, June 20, 2019, <https://www.americanprogress.org/issues/early-childhood/reports/2019/06/20/471141/working-families-spending-big-money-child-care/>
- xxiv Sarah Jane Glynn, "The Rising Cost of Inaction on Work-Family Policies," Center for American Progress, January 2020, <https://www.americanprogress.org/issues/women/news/2020/01/21/479555/rising-cost-inaction-work-family-policies/>