

UNIVERSAL COMMUNITY CARE



Full Policy

Maya Wiley's **Universal Community Care model** is an ambitious interagency plan that rebuilds economic growth in sectors dominated by women of color and ensures that these jobs are good jobs, addresses the crisis of affordable childcare and eldercare, and fights for fair wages and protections for workers in the care economy. Universal Community Care recognizes that care exists in many forms: from paid childcare and elder care to direct services provided by frontline nonprofit workers to care provided within the home by family, to neighbors helping neighbors. This model will redirect \$300 million in diverted resources from incoming NYPD and DOCCS cadet classes to give 100,000 high need informal caregivers a \$5,000 annual stipend to compensate them for their labor. Using the Universal Community Care Model, a Wiley administration will also build community centers providing free childcare, eldercare, and other services in each neighborhood. And it will create strong, meaningful worker protections for our city's care workers. **The Community Care Model is based on three principles: 1) Care work is community work 2) Care starts at home and 3) Care jobs should be good jobs. Universal Community Care Proposal** *'The only way we survive is by taking care of each other'* – Grace Lee Boggs The care economy, which includes paid and unpaid work across a variety of sectors is the fastest growing industry for workers, particularly for women of color. Home healthcare is projected to grow at a breathtaking pace by 2026. According to the U.S. Bureau of Labor Statistics, employment in the sector will grow by 54%, adding 738,200 jobs, compared to the average employment growth in all industries projected at 7%. However, the pandemic has devastated female-dominated fields while increasing the unpaid caregiving responsibilities that women disproportionately shoulder. The U.S. economy lost 140,000 jobs in December, all of them were held by women. In the months of August and September alone, more than 800,000 women left the formal workforce, largely due to caregiving challenges. An estimated 93% of families with young children cannot afford center-based care for their infants and toddlers, and 80% cannot afford somewhat less expensive home-based care, according to a new analysis from Citizens' Committee for Children of New York (CCCNY). In December, when employers cut 140,000 jobs with women accounting for all losses, a Bureau of Labor Statistics [survey](#) showed that Black and Latina women lost jobs, while white women made gains. New York is faced with four concurrent challenges:

- The decimation of sectors that employ a majority female, majority BIPOC, heavily immigrant workforce, including the hospitality industry, the domestic care industry, direct service work within nonprofits, and the early childhood education sector
- A rising crisis of unaffordable childcare and an exodus of women of color from the workforce, with the potential for a [generational set back](#) in progress won by women of color in the workforce toward equal pay and representation. Additionally, this puts working class women of color in particular at risk of food insecurity and eviction
- A rise in uncompensated and often unsafe labor conditions for those who remain employed. This includes lack of PPE for home health aides and domestic workers and new overtime roles for childcare providers
- A growing but inequitable home care industry, employing a majority minority workforce

Investment in the care economy has historically been used throughout crises to bolster the economy. The first federal and state subsidized child care programs were part of a [WPA job creation strategy](#). However, the commitment to these programs are often time limited to a period of crisis, and sectoral growth strategies outside of these government models have been increasingly inequitable. New York has an opportunity now to truly invest in an economic development strategy that not only centers women of color, but centers all its residents as a result. Investment in care work should be recognized as not only a viable economic development strategy, but crucial to our city's recovery. We have the opportunity to radically reimagine economic development by centering a workforce that keeps our city running: women, in particular women of color, who made up 88% of the City's [paid care workforce](#), and 77% of its [unpaid kinship caregivers](#) in 2017. **When we care for each other, we care for our city.** We will do this through a **Universal Community Care model**: an ambitious interagency plan that rebuilds economic growth in sectors dominated by women of color and ensures that these jobs are good jobs, addresses the crisis of affordable childcare and eldercare, and fights for fair wages and protections for workers in the care economy. Universal Community Care recognizes that care exists in many forms: from paid childcare and elder care to direct services provided by frontline nonprofit workers to care provided within the home by family, to neighbors helping neighbors. This model will redirect \$300 million in diverted resources from incoming NYPD and DOCCS cadet classes to give primary caregivers an annual stipend to compensate them for their labor. Using the Universal Community Care Model, a Wiley administration will also build community centers providing free childcare, eldercare, and other services in each neighborhood. And it will create strong, meaningful worker protections for our city's care workers. **The Community Care Model is based on three principles: 1) Care work is community work 2) Care starts at home and 3) Care jobs should be good jobs.**

1) Care Work is Community Work: An Innovative Model for Comprehensive Service Delivery

Living in New York City creates a special burden on families to support the needs of the children, parents, and extended family. At the same time, the density of our collective needs puts NYC in a position to relieve those burdens in a unique way. We need regular childcare while parents are at work and intermittent care when a child or parent is ill; elder care for senior family members whose needs range from help with errands and chores to frequent attendance to assist with

performance of the activities of daily living; home support for a sick or disabled family member; help with household chores, especially if working excessive hours or shifts; and transportation – e.g., picking kids up at afterschool; taking an elder to the doctor in the afternoon. **Community Care Centers (CCCs) will be community multi-service centers which house conventional community programs from health care, jobs and training programs, activities for seniors, school children and teens, counseling, social services and cultural activities.** While service centers exist for families, for seniors, and for children across the city in the form of Family Enrichment Centers, HRA centers, and senior centers they are limited in services, hard to access, and exist in a piecemeal fashion. We will build on the success of Family Enrichment Centers, which offer childcare and services at three sites in the city. FECs are designed as warm, home-like spaces where neighbors can connect, contribute to their community, and find resources. We will place a community care center (CCC) in communities of greatest need, with small clusters of 3-4 facilities supported by larger hub centers. CCCs will add necessary services including elder care by licensed home health aides, benefits counseling through partnerships with community based organizations, food pantries, and adult education classes. They will act as a neighborhood gathering center, a multi-generational convening space, and a place where neighbors can organize community meetings and volunteer activities. A Wiley Administration will:

- Develop CCCs in all five boroughs, with small clusters of centers in communities with the highest need
- Serve 300,000 New Yorkers annually in the program's first year of implementation and nearly 1 million people once fully launched- approximately the total population of New York's family caregivers
- Create good, local, union jobs. Center personnel will include City workers, as well as non-profit service providers

Each center will be able to serve between 5k and 15k unique visitors, or roughly 300k New Yorkers annually. Once fully developed, this network could serve nearly 1 million people, which lines up with NYC's population of family caregivers. A spoke and hub model allows the network to be easily scaled up with additional centers or through partnering organizations. Residents would be surveyed to identify the initial scope of services, and programs would begin within 12 months. Locations will be identified and built in schools, existing community centers, and New Deal New York sites. New Deal New York will inject \$10B in capital infrastructure that supports social infrastructure- like our neighborhood centers. Targeted hire will be implemented in both the construction and staffing. *Administration and Implementation* The program will be established by Executive Order. It will be managed by, and its director will report directly to, a Deputy Mayor designated in such Executive Order. The program will be implemented through an inter-agency partnership involving the Department Of Social Services, Department for the Aging, Administration for Children's Services and Department of Youth and Community Development. Additional offices, such as the Paid Care Division of the Department of Consumer Affairs and Worker Protection, will provide their expertise and support.

2) Care Starts at Home: A Care Income for Family Caregivers

New York City is home to an estimated 900,000 to 1.3 million caregivers, or around 15% of the population. Many of these caregivers are women of color, or older adults, who provide at least 30 hours of care each week to their loved ones in their homes, and have formal jobs. Traditional expectations are that caring for children, the elderly, and the unwell, should be done for free within the family structure, but this ignores the time spent away from the formal labor market, the lost earnings, and the attendant costs associated with caregiving. In January 2020, Oxfam released a report stating that if American women earned minimum wage for the unpaid work they do around the house and caring for relatives, they would have made \$1.5 trillion the previous year. Paying family caregivers directly, or implementing a care income, builds on what global feminist organizations have been advocating for for decades. The care income, based on the recognition of the necessity of caring activities, often undervalued or invisible and overwhelmingly performed by women, would provide social and financial recognition to carers. [According to the Organisation for Economic Co-Operation and Development](#), American women spend 243 minutes doing unpaid labor every day, or roughly 28.4 hours a week. **The [Bureau of Labor Statistics](#) reports that Americans earn an average of \$26.82 an hour, meaning that if women were compensated for their unpaid labor, they would earn an extra \$761.69 a week, or nearly \$40,000 a year.** A care income would make clear that New Yorkers see caring for others as essential to the wellbeing of our communities, and should be valued as essential work. Part of valuing this work involves remunerating caregivers in ways that allow them to live with dignity. Families should be able to choose an avenue that works best for them, either by paying for care or administering it themselves. New York City can be a leader by building a program that adequately supports caregivers and recognizes their role in our city's economy. In addition, a care income would address the current crisis facing poor families, who are being criminalized for poverty. Like the criminal justice system, the [child welfare system overwhelmingly pulls in poor Americans](#), a disproportionate number of whom are people of color. In Hunts Point, in 2017, 10% of families were subject to [child welfare investigations](#), and between 2010-2014, nearly a third of families in Brownsville experienced child welfare cases. In 2018, the Child Welfare Organizing Project reported that 93% of the 11,500 youth in NYC's child-welfare system were black and Latinx. In 2017, lawyers from the Bronx Defenders found that while the Bronx was 40% white, almost [100% of the families they represented were black or Latinx](#). Today, the number of children in foster care in the Bronx accounts for close to [a third of the total](#), where the poverty rate is 26.4% as compared to the rest of the city, where it is 16% . A care income would reorient our efforts away from criminalizing poor families, and toward supporting their material needs. Failing to do this will mean even our best attempts to prevent families from entering the system will fail, as they will continue to exist within an environment in which [poor parents are treated as criminals](#). **Who would be Eligible for a Care Income?** 100,000 of the most high need families would be eligible for an annual \$5,000 grant to use toward caregiving expenses. This amount could be used for:

- Informal Childcare Providers: Family, Friend and Neighbor (FFN) caregivers who provide in home, family-based, informal childcare
- Family caregivers: those who provide care for the very young, elderly and disabled family members

Informal, home-based child care is a widely used form of early care and education in New York City. The [National Study of Early Care and Education](#) estimates that close to three million unpaid home-based caregivers or family, friend, and neighbor caregivers care for children ages 0 to 5 in the U.S. The majority of FFN caregivers are unlisted and unpaid providers, and include grandparents, aunts and uncles, elders, older siblings, friends, neighbors, and others. About [half of home-based child care providers](#) are located in moderate- or high-poverty density areas, and less than one third are paid for providing care. These FFN childcare providers are performing societally beneficial labor, and should be compensated for their work. In addition, the majority of FFN caregivers have no specific training in child care, child development, or parenting. Providing FFN caregivers with a variety of voluntary support and training opportunities, tailored to different types of FFN caregivers in different communities, will be an accompaniment to the Care Income provision.

3) Care Jobs should be Good Jobs: Fair Wages, Better Enforcement, and New Protections for Care Workers

Care work, while crucial to our economy as the fastest growing sector in the city, remains undervalued and dangerous. The Paid Care Division of the NYC Department of Consumer Affairs has not done sufficient enforcement of minimum wage, and paid leave benefits. The office is under resourced and understaffed. We will invest in enforcement and education, and expand protections where needed, and advocate for higher wages for care workers. Increasing wages for care workers not only makes care jobs good jobs, it also stimulates our economy. A soon to be released report by the CUNY School of Labor and Urban Studies finds that an increase to wages for home health workers, for example, would lead to a \$7 billion economic gain at the state level. To do this,, we will work with community leaders and state elected officials to fight for a total reform of the CDPAP program, a State Medicaid program which currently provides resources for family members to get paid for loved ones with disabilities. A Wiley administration will:

- Grant more enforcement authority to the Paid Care Division of the NYC Department of Consumer Affairs
- Expand the definition of care workers covered by Paid Care Division enforcement to include case managers, early childhood education workers, and other direct service providers employed by nonprofit organizations
- Allocate resources to expand the Paid Care Division of the NYC Department of Consumer Affairs
- Prioritize direct service workers, including nonprofit case managers, in COVID vaccination efforts
- Ensure adequate PPE for all frontline care workers
- Support the Invest in Quality Care campaign and fight for a minimum staffing requirement in NYS nursing homes
- Hold subcontractors accountable for wage theft, including in nursing homes
- Advocate for fair pay home care workers at the state level
- Invest in a portable benefits program for domestic workers

Funding Universal Community Care & Care Income

The City can take on this program without incurring additional costs. The bulk of cost represents the Care Income payments. This represents a total cost of \$500 million offset by state and federal dollars through Childcare Community Development Block Grant, which the City has consistently underspent. The proposal would allow for \$200 million in additional federal CCDBG funding. It would also use \$300 million in diverted resources by reducing the future hiring of police officers and corrections officers. Freezing incoming NYPD and Corrections classes for two years diverts \$225 million and \$75 million from each department respectively to the care income, while reducing NYPD headcount by 2,250 officers and Correctional headcount by 750 officers.