

## General Convention of The Episcopal Church 2022 Archives' Research Report

**Resolution No.:** 2022-D023  
**Title:** Support for Care Workers  
**Proposer:** Ms. Sarah Lawton  
**Topic:** Health

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### Directly Related: (Attached)

2018-D032 Advocate for Gender Equity, Including Reproductive Rights, in Healthcare  
2015-C048 Support Living Wage and Increase in the Minimum Wage  
2009-C071 Urge Advocacy for Comprehensive Healthcare Coverage  
2009-D048 Urge Passage of a Universal Health Care Program  
1991-A099 Call for a System of Universal Access to Health Care

### Indirectly Related: (Available in the [Acts of Convention](#) database, searchable by resolution number)

2018-C041 Advocate for Policies Supporting Nutrition, Healthcare, and Housing as Human Rights

*In preparing this report, the Archives researched the resolutions in the Acts of Convention database for the period 1973 through 2018, selecting “direct” resolutions that have a substantive bearing on the proposed legislation. The “direct” resolutions are attached and “indirect” resolutions are available in the Acts of Convention database. Committee members who require other research assistance should contact the Archives through the [Research Request Form](#) or call 800-525-9329.*

# D023 - Support for Care Workers

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**Final Status:** Not Yet Finalized

**Proposed by:** Ms. Sarah Lawton

**Endorsed by:** Mr. Joe McDaniel, Ms. Laura Russell

**Requests New Interim Body:** No

**Amends C&C or Rules of Order:** No

**Has Budget Implications:** No

**Cost:**

**HiA:** HD

**Legislative Committee Currently Assigned:** 08 - Social Justice & United States Policy

**Completion Status:** Incomplete

**Latest House Action:** N/A

**Supporting Documents:** No

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## Resolution Text

*Resolved*, the House of \_\_\_\_\_ concurring,

That this 80th General Convention acknowledge the tremendous toll that the global COVID pandemic has had on caregivers of all kinds, including unpaid family members and paid caregivers who provide childcare, support for people with disabilities, and elder care, recognizing that this global crisis has revealed both the fragility of our systems of caregiving and also the degree to which our society as a whole relies upon caregiving in order to function at all; and be it further

*Resolved*, that this Convention acknowledge that care work is undervalued and undercompensated, and is disproportionately carried out by women, especially working-class women, women of color, and immigrant women; and be it further

*Resolved*, that this Convention acknowledge that care work is the labor necessary to sustain and nurture human life, and is embedded in our scriptural call to love our neighbor and to care for the widow, the orphan, and the stranger, as well as in our baptismal promise to respect the dignity of every human being; and as such, care work deserves to be recognized, valued, and supported by this Church; and be it further

*Resolved*, that this Convention support public policies at the local, state, and national levels in all our countries to support caregiving labor, including policies to:

- Raise minimum wage standards to levels that can support a family;
- Provide universal access to health care, so that caregivers, both paid and unpaid, are not reliant on their employment or on family members for health insurance;

- Extend Social Security retirement credit to unpaid family caregivers;
- Establish and provide funding for paid sick leave, parental leave, and family leave for all workers, as well as paid vacation;
- Provide exemptions for income earned for care work for family members when calculating public benefit eligibility;
- Raise and enforce labor standards for all paid care workers, including the right to paid sick and family leave; meal and rest breaks; good health and safety conditions and equipment; reasonable working hours, scheduling, and overtime pay; protection from workplace harassment; and written agreements with employers;
- Increase public investment in paid care work to support training, career ladders, safety standards, reduction of turnover, living wage standards, and ultimately, a higher quality of care;
- Support the right of care workers to organize in unions to have a voice in their working conditions and collective bargaining, and to seek innovative solutions to the problem of organizing worker voice in an industry with multiple employers;
- Seek innovative ways to provide benefits to care workers across many employers, such as pooled, publicly administered paid sick leave and retirement funds for care workers;
- Increase public investment in long-term care insurance plans to fill the gaps not covered by Medicare and Medicaid to provide care in aging;
- Support, to the extent possible, independent living and maximum agency in decision-making for people with disabilities and elders, and increase Social Security disability benefits and long-term care benefits to a sustainable level to hire caregivers, while also maintaining and enforcing high labor standards for care workers;
- Include the voices of care workers and people receiving care in public policy making, and set up systems to ensure that public investments reach the care workers themselves rather than intermediary employers, and to ensure the public monies support improved quality of care.

## Explanation

The burdens on caregivers during the pandemic have been both well described yet also underreported. Nursing home workers and residents were among the first to get sick from COVID, and many suffered from isolation as care facilities shut their doors to visitors. Home care workers and other domestic workers, such as home cleaners and nannies, either continued to work under adverse conditions or were told not to come to work—often with no pay and no recourse to seeking unemployment or other benefits, as so many work “off book” for multiple employers. Meanwhile, as schools and child care centers shut down, in many cases for over a year, parents, usually women, struggled to carry an unpaid burden of child and elder care, helping children navigate remote schooling, keeping house with everyone home all the time, all while maintaining their own jobs both in and outside the home. Many women found these burdens unsustainable and left their paid work to manage care work at home, further straining family income and curtailing careers.

During the pandemic, supplemental unemployment benefits and a child benefit allowance helped support households and avert a deeper pandemic recession, but the pandemic

spotlight on caregiving systems has revealed a system under strain. Our caregiving systems are spread thin. They are both too expensive (for people needing care) and too cheap (for those providing care). Turnover and burnout are high, which also means that quality of care suffers. The pandemic has shown us both how much we need robust caregiving systems, and also how fragile they are.

Caregiving is underpaid (often unpaid) and undervalued. As a society we pay lip service to care work, but in an economic system that values short-term profit, the needs of children, elders, and people with disabilities are too often disregarded as costing money rather than bringing it in. Our economic system does not value caregiving and has failed to sustain a functioning market system for care, as it is both deeply unaffordable and deeply underpaid. As Christians we must speak, counterculturally, to this deeply rooted attitude that elevates money over people, and lift up with conviction our understanding that every person is beloved of God and worthy of care, nurture, community, and love.

Care work is also largely carried out by women, especially poor and working-class women, women of color, and immigrant women, all of whom bear the burden of care work and themselves being undervalued.[i] A few statistics illustrate this point:

- **Wages:** On average, child care workers in the U.S. are paid **\$13.51**/hour and home health care workers are paid **\$13.81**/hour—roughly half what the average U.S. worker is paid (**\$27.31**).
- **Benefits:** While **52.2%** of all workers have employer-sponsored health coverage, only **25.8%** of home health care workers and only **20.7%** of child care workers do.
- **Gender:** Women make up **88.6%** of the home health care workforce and **94.0%** of the child care workforce.
- **Race/ethnicity:** Women of color make up **17.8%** of the workforce overall but **54.6%** of the home health care workforce and **40.9%** of the child care workforce.[ii]

Federal public investments in the care system already exist in the United States, through systems such as Medicaid and the Child Tax Credit; and some states and local systems are making efforts to bolster paid sick leave and subsidize home care, disability support, and child care. But these systems are inadequately funded and often require navigating stringent eligibility requirements.

Deeper public investment in caregiving would provide an opportunity to raise both labor standards and quality of care across our caregiving systems. Universal benefit schemes, including broader access to health care and Social Security credit for unpaid family caregiving, would provide recognition and support for the very real labor that family caregivers provide to keep the economy flourishing. Some states and local governments and unions are already seeking innovative solutions to the problem of multiple employers by creating pooled sick leave funds[iii] and multi-employment retirement funds under federal ERISA laws;[iv] we should support such efforts.

Child care workers across the country are seeking union representation[v] as states have opened up to collective bargaining for care workers who have been excluded from collective bargaining in the National Labor Relations Act—largely because, when the law was passed

during the New Deal, the workers were (and still are) disproportionately Black women; this is a racist legacy. But states have the ability to grant those rights, and about a third of U.S. states have done so. Home care workers in many states, shut out of state labor organizing rights, have pressed for state laws to create public authorities that allow home care workers as independent contractors to unionize and bargain with those public authorities over wages and job standards.[vi] Other workers have organized through cooperatives and worker centers to push for policy changes and find solidarity with each other.[vii] The Episcopal Church, through General Convention, is on record as supporting the right of workers to organize and form unions.[viii] Passing this resolution would sharpen and deepen our position to focus on a greatly underrepresented set of workers that historically has been excluded from labor organizing both by law and in practice.

Let us lift our collective voice as the Church to support the care workers, whether within or outside the home, who do the hard “reproductive labor” that supports, sustains, and nurtures human life and maintains kin and community ties that bind us together.

[i] For a searing description of the situation of nursing home workers during the pandemic, read “Low-wage workers prop up the nursing home industry. They’re quitting in droves,” by Rebecca Tan, Washington Post, January 22, 2022. <https://wapo.st/3ArcLdD> (retrieved January 22, 2022).

[ii] “Setting Higher Wages for Child Care and Home Health Workers is Long Overdue,” report by Asha Banerjee, Elise Gould, and Marokey Sawo. Economic Policy Institute, November 18, 2021, p. 1. <https://www.epi.org/publication/higher-wages-for-child-care-and-home-health-care-workers/#> (retrieved January 18, 2022).

[iii] “San Francisco Passes Measure Requiring Sick Leave for Domestic Workers – ‘First of Its Kind’,” by Julie Remer. Labor and Employment Law Blog, December 31, 2021.

<https://www.laboremploymentlawblog.com/2021/12/articles/wage-and-hour/san-francisco-passes-measure-requiring-sick-leave-for-domestic-workers-first-of-its-kind/> (retrieved January 18, 2022.)

[iv] SEIU 775 retirement benefits page. <https://www.myseiubenefits.org/retirement/> (retrieved January 18, 2022).

[v] “In California, Child Care Workers Vote to Unionize,” by Harold Meyerson. The American Prospect, July 28, 2020. <https://prospect.org/labor/california-child-care-providers-vote-to-unionize/> (retrieved January 18, 2022).

[vi] “Upholding Labor Standards in Home Care: How to Build Employer Accountability Into America’s Fastest-Growing Jobs,” by Sarah Leberstein, Irene Tung & Caitlin Connolly. National Employment Law Project, 2015. <https://s27147.pcdn.co/wp-content/uploads/Report-Upholding-Labor-Standards-Home-Care-Employer-Accountability.pdf> (retrieved January 18, 2022).

[vii] See Mujeres Unidas y Activas (“Las Muas”) for one regional example: <https://mujeresunidas.net/>. On the national level, the National Domestic Workers Alliance is leading the way: <https://www.domesticworkers.org/>.

[viii] See General Convention resolutions: 2006-C008; 2006-D047; 2009-D039; 2012-D028; 2018-D017.



**Resolution Number:** 2018-D032  
**Title:** Advocate for Gender Equity, Including Reproductive Rights, in Healthcare  
**Legislative Action Taken:** Concurred as Amended  
**Final Text:**

*Resolved, That the 79th General Convention of The Episcopal Church acknowledge the need for universal and equitable access to good quality health care that allows for equal utilization for those with equal need; and be it further*

*Resolved, That this Convention acknowledge that equitable access to women's health care, including women's reproductive health care, is an integral part of a woman's struggle to assert her dignity and worth as a human being; and be it further*

*Resolved, That The Episcopal Church call for women's reproductive health and reproductive health procedures to be treated as all other medical procedures, and not singled out or omitted by or because of gender; and be it further*

*Resolved, That The Episcopal Church support health care that takes into account the specific health care needs of all persons, including women; and be it further*

*Resolved, That this Convention direct the Office of Government Relations and the Episcopal Public Policy Network to urge all Episcopalians to advocate for government to address the specific needs of health care for everyone, especially women's and girls' health care, by:*

- *Supporting legislation that creates equal utilization of health care for those in equal need, regardless of ability to pay, and reject reasons for unequal use as well as strategies that promote unequal access to health care;*
- *Advocating for everyone to have the right to make decisions about their bodies and those decisions should be between themselves and their provider (reaffirming 1994 A054: That The... "Episcopal Church express its unequivocal opposition to any legislative, executive or judicial action on the part of local, state or national governments that abridges the right of a woman to reach an informed decision ... or that would limit the access of a woman to safe means of acting on her decision.);*
- *Ensuring equal access to every health care service regardless of gender (reaffirming 1994 A055: that the... "General Convention urge adequate government funding and support for research and development, prevention and treatment in matters affecting the health and quality of life of women, including domestic violence, AIDS, heart disease, breast, ovarian and endometrial cancer, safe and effective contraceptives, and other methods of pregnancy prevention, maternity care, menopause and chronic illnesses unique to or prevalent among women);*
- *Ensuring health care is equal in coverage and cost regardless of gender.*

**Citation:** General Convention, *Journal of the General Convention of...The Episcopal Church, Austin, 2018* (New York: General Convention, 2018), p. 442.



**Resolution Number:** 2015-C048  
**Title:** Support Living Wage and Increase in the Minimum Wage  
**Legislative Action Taken:** Concurred as Amended  
**Final Text:**

*Resolved, That the 78th General Convention reaffirms resolution 2003-A130, “Support the Establishment of a Living Wage,” which confirms that “it is the policy of The Episcopal Church and its dioceses and congregations to provide employees with a living wage;” and that the church “continue to support living wage campaigns in the cities and counties of every diocese;” and be it further*

*Resolved, That The Episcopal Church, at all levels, engage in and advocate for increasing the minimum wage to \$15.00 an hour or a living wage; including increasing the minimum wage for tipped employees to a level that also enables them to earn a living wage.*

**Citation:** General Convention, *Journal of the General Convention of...The Episcopal Church, Salt Lake City, 2015* (New York: General Convention, 2015), p. 328.





**Resolution Number:** 2009-C071  
**Title:** Urge Advocacy for Comprehensive Healthcare Coverage  
**Legislative Action Taken:** Concurred as Amended  
**Final Text:**

*Resolved, That the 76th General Convention call on its congregations to undertake discussions within the parish of the issue of healthcare coverage in the United States, including:*

- a) recognition that health is multi-dimensional, with spiritual, social, environmental and mental elements as well as physical
- b) reminder of personal responsibility for healthy life choices and concern for maintaining one's own health
- c) proclaiming the Gospel message of concern for others which extends to concern for their physical health as well as spiritual well-being
- d) responsibility as a parish to attend to the needs (including health-related needs) of others, both other members of the parish family and those of the wider community, the nation and the world
- e) recognition that there are limits to what the healthcare system can and should provide and thus that some uncomfortable and difficult choices may have to be made if we are to limit healthcare costs; and be it further
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*Resolved, That The Episcopal Church urge its members to contact elected federal, state and territorial officials encouraging them to:*

- a) create, with the assistance of experts in related fields, a comprehensive definition of "basic healthcare" to which our nation's citizens have a right
- b) establish a system to provide basic healthcare to all
- c) create an oversight mechanism, separate from the immediate political arena, to audit the delivery of that "basic healthcare"
- d) educate our citizens in the need for limitations on what each person can be expected to receive in the way of medical care under a universal coverage program in order to make the program sustainable financially
- e) educate our citizens in the role of personal responsibility in promoting good health; and be it further
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*Resolved, That this resolution be distributed to all Provinces and dioceses of The Episcopal Church for their consideration and support.*

**Citation:** General Convention, *Journal of the General Convention of...The Episcopal Church, Anaheim, 2009* (New York: General Convention, 2009), p. 177.



**Resolution Number:** 2009-D048  
**Title:** Urge Passage of a Universal Health Care Program  
**Legislative Action Taken:** Concurred as Amended  
**Final Text:**

*Resolved, That the 76th Convention of The Episcopal Church urge passage of federal legislation establishing a “single payer” universal health care program which would provide health care coverage for all of the people of the United States; and be it further*

*Resolved, That the General Convention direct the Office of Government Relations to assess, negotiate and deliberate the range of proposed federal health care policy options in the effort to reach the goal of universal health care coverage, and to pursue short-term, incremental, innovative and creative approaches to universal health care until a “single payer” universal health care program is established; and be it further*

*Resolved, That The Episcopal Church shall work with other people of good will to finally and concretely realize the goal of universal health care coverage; and be it further*

*Resolved, That church members and the Office of Government Relations communicate the position of The Episcopal Church on this issue to the President and Members of Congress, and advocate passage of legislation consistent with this resolution.*

**Citation:** General Convention, *Journal of the General Convention of...The Episcopal Church, Anaheim, 2009* (New York: General Convention, 2009), pp. 360-361.



**Resolution Number:** 1991-A099

**Title:** Call for a System of Universal Access to Health Care

**Legislative Action Taken:** Concurred

**Final Text:**

***Resolved, That the 70th General Convention decries the inequitable health care delivery system of the United States of America and calls upon the President, the Congress, Governors and other leaders to devise a system of universal access for the people of our country.***

**Citation:** General Convention, *Journal of the General Convention of...The Episcopal Church, Phoenix, 1991* (New York: General Convention, 1992), p. 610.