LOOKING BACK ON THE PANDEMIC

How the COVID-19 policy response deepened inequity in the workforce and what workers are doing about it

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INTRODUCTION

LOOKING BACK ON THE PANDEMIC

How the COVID-19 response deepened workforce inequality and what workers are doing about it

Nearly three years have passed since the first cases of COVID-19 were detected in the United States. After a series of shutdowns halting much of normal life, the largest federal stimulus package in U.S. history, and a mass vaccination campaign, policymakers and pundits were quick to agree that the worst of the pandemic was behind us. Despite this messaging, U.S. COVID-19 cases were higher in the early-2022 Omicron wave than at any other point during the pandemic.¹ As the narrative shifted to living with endemic COVID and going back to work,²,³,⁴ temporary safeguards for workers throughout the pandemic, such as increased unemployment benefits, were removed.

While a roller-coaster labor market has at times favored workers during the pandemic, the lows were low, and the highs were offset by inflation⁵ paired with the removal of federal economic supports that had kept people afloat early in the pandemic. Despite this, policies that will make the labor market even worse for working people are on the horizon.⁶ The care economy has become untenable for patients, their loved ones, and care workers alike. A lack of safeguards for workers amid the pandemic has created dangerous workplaces and led to unsustainable attrition, and the care burden placed on families is keeping people — particularly women and especially women of color — out of work.

All of these choices — sending vulnerable workers back in the midst of a pandemic; letting an under-regulated and underfunded care industry erode; and removing economic safeguards that kept low-wage workers from financial peril — have created an environment for working people that further entrenches structural inequities. Although the pandemic brought to light the roots of an economy that relies on worker vulnerability and exploitation, moving beyond a return to “business as usual” will require a continued examination of how poor people, Black
and Brown people, women, and people at the intersection of these identities are a central part of America's essential workforce yet still disproportionately bear the brunt of exploitative and inhumane work conditions.

Making progress will require that working people demand that their employers value, respect, and protect them. Many people have been able to pursue additional education and training needed to move to more stable and less dangerous careers. Federal supports and extended unemployment benefits, although short-lived, have given us a glimpse of a system that can support people during hard times. And faced with a callous disregard for their safety and health, working North Carolinians and others around the country have stood together and walked out, gone on strike, formed unions, and otherwise demanded that employers do better for working people.

Workers have given policymakers a blueprint for how to support them — by maintaining a safety net that allows marginalized workers to take care of their basic needs; by reducing the caregiving burden of working people; by providing well-paid, dignified jobs for people working as caregivers; and by helping workers build power in their workplaces and in our democracy to protect themselves, their coworkers, and their families. If we follow this blueprint, we can build a more just North Carolina.

Two years in: COVID exacerbated the effects of an inhumane economy

Unprecedented support: Federal coronavirus relief programs

COVID-19 revealed an economy that relies on worker exploitation and precarity, but the pandemic also showed the potential of public policy to alleviate economic hardships and create infrastructures to support workplace health and safety. Studies tracking the impacts of federal COVID-relief programs report that these programs kept more than 25 million people out of poverty.\(^7\)

The impacts of these programs can be seen across the country; poverty measures for 2021 were lower than those recorded prior to the pandemic.\(^8\) In North Carolina, there was a 3.2 percent decrease in
poverty measures when comparing the Census Bureau’s Supplemental Poverty Measures (SPM) in 2017-2019 and 2019-2021. The widespread relief generated by social support programs indicates that poverty and workplace inequities are not only rooted in the structures of an inhumane economy but are bolstered and supported by public policy choices.

Unemployment Insurance (UI)

North Carolina has one of the worst-ranked UI systems in the country in terms of both the benefit amount and the duration of payments. In 2013, North Carolina made unprecedented cuts to its UI program — shortening the benefit period from 26 to 12 weeks, reducing the maximum weekly payment from $535 to $350, and eliminating state appropriations for the UI program. Because of these policy decisions, only 9 percent of North Carolina’s unemployed workers received UI benefits prior to the start of the pandemic.

Pandemic unemployment insurance programs were a lifeline for workers, giving them some financial stability for meeting their basic needs while searching for work. The Coronavirus Aid, Relief, and Economic Security Act (CARES) provided Pandemic Unemployment Assistance to workers who were ineligible for traditional UI. This included contract, gig, and self-employed workers.

The CARES Act also provided an extra $600 per week (later reduced to $300 per week) to UI recipients and extended UI benefits by up to 13 weeks for a limited period of time. Researchers at the Economic Policy Institute estimate that across the United States, the UI expansions in the CARES Act and the increase in the amount of regular UI payments reduced the number of people in poverty by 7.2 million in June 2020.

The need for federal emergency UI benefit programs during the pandemic also revealed gaps and inadequacies in state-run UI programs. In North Carolina, emergency federal UI programs accounted for 80 percent of UI income.

The expiration of emergency federal UI benefits in September 2021 thrust North Carolina job seekers back into a system that disproportionately disadvantages Black people, people of color, women, and people who occupy the intersections of these identities.

“I’d never made so much money in my life as I did on unemployment [during the pandemic]. I was like, is this what normal people get to do? They just have money to pay bills and buy groceries and things?” — Jen, restaurant worker, Asheville, N.C.
Paid Sick Leave

Prior to the implementation of federal pandemic emergency response programs, 27 percent of all U.S. employees could not take paid sick leave. This number is much higher in the food and accommodation industries where over 50 percent of all employees could not take a sick day with pay. North Carolina is one of 30 states with no state or local paid sick leave laws. Research conducted prior to the COVID-19 pandemic showed that “employees who lack paid sick leave are more likely to go to work sick, have financial hardships, skip preventative health care, and spread contagious diseases.” The Families First Coronavirus Response Act (FFCRA) allowed almost all employees to take two weeks of COVID-19-related paid emergency sick leave. The bill also extended UI benefits and allowed parents to take up to 12 weeks of paid family leave to care for children during the closure of schools and childcare facilities.

Research shows that information about FFCRA programs did not make

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**Paid sick days with strings attached**

Mikeya is a call center worker in Winston-Salem, N.C. Her employer provides paid sick days but uses a so-called “point system” where employees can be punished for calling out sick. Mikeya describes how the point system works:

“Although we have paid sick time, if you call out sick, it’s considered a point. If you get three points, then you’re moved to what’s called an attendance level. Your supervisor talks to you about [your attendance].”

“We have three different levels. If you get to level three, you’re only allowed to get one more point. Now, the points stay with you for 12 months. So you’re basically only allowed to be out sick once in an entire year when you get to that point. If you get sick a second time, you’re up for termination.”

“What’s worse is that, with the points system, if I were to call out because my son was sick, it counts as two points instead of one. So we have paid sick days, but we get penalized for using them.”
it to all workers. One study quantified that less than 50 percent of workers knew about emergency COVID-19 sick leave, with service and hospitality workers being the least likely to know about these programs.19 Despite that, studies also concluded that the implementation of federally mandated paid sick leave in states that lacked their own policies resulted in a significant decrease in COVID-19 cases.20

Although experts predicted that the pandemic could normalize the paid sick day, the same culture of work that has devalued the health of workers in the past has persisted. Workers who were able to work from home felt pressured to keep working while sick with COVID, making their recoveries much harder.21 FFCRA paid sick leave expired at the end of 2020, leaving sick workers who did not have the option to work from home grappling with the decision to stay home without pay or go to work sick. The culture and policy regulating workers’ ability to recover from illness remains largely unchanged, despite clear evidence that paid sick leave improves worker health and reduces workplace spread of contagious illnesses.

Unprecedented need: Intersecting economic and health crises

COVID-19 impacted all aspects of the economy. Workers lost jobs when COVID containment strategies led many industries to close. Workers in occupations deemed “essential” put their health at risk by reporting to work every day, often in work environments that lacked adequate protections.

COVID-19 and workplace safety

COVID-19 work-related fatalities accounted for 33.8 percent of all work-related fatalities in North Carolina in 2021. Over 68 percent of the COVID-19 work-related fatalities were associated with employees within the service industry, and the majority were in healthcare.22

In North Carolina, 25 workplace deaths were attributed to the virus in 2021 and 26 deaths in 2020. The numbers reported by the N.C. Department of Labor (NCDOL) likely do not include the many workers who later died because they contracted COVID at work. (NCDOL doesn’t have jurisdiction over many workers such as federal employees.) Vast numbers of workers had to report to work while sick because they lacked paid sick days, and locations where workers had been deemed essential became hot spots for COVID-19 transmission.23
The fact that COVID-19 could be identified and quantified as a cause of worker death in the first place speaks to the lack of workplace protections and worker supports. A 2021 Cornell study found that “despite federal provisions aimed at protecting workers, instances of sick people being unable to take time off tripled during the pandemic and fewer than half of workers were aware that emergency COVID-19 sick leave was available.”

The study found that awareness of FFCRA emergency paid sick leave was lowest among service and hospitality workers and that women (who make up a larger share of the workforce in these industries) had a 69 percent higher chance of not having their sick leave needs met.

**Essential workers: Women, people of color at front lines bear brunt of pandemic’s consequences**

The hazards of the pandemic have disproportionately impacted the daily work lives of all workers who were unable to shift their jobs to their homes. At the start of the COVID-19 pandemic, the U.S. Department of Homeland Security classified several occupational categories as essential workers. Within the essential worker classification, certain workplaces, including meat processing plants, transportation industries, and healthcare facilities, became hot spots for COVID-19 transmission and death.

Essential workers who survived the initial stages of the pandemic carried the stress and trauma of these dangerous and precarious work conditions. The American Psychological Association reported that 29 percent of essential workers indicated that their mental health had worsened during the pandemic.

Essential workers were also more than twice as likely to have received treatment from a mental health professional compared with non-essential workers and were nearly three times as likely to have been diagnosed with a mental health disorder.

The pandemic took a particularly large toll on women workers who not only faced challenging conditions on the job but also took on greater care responsibilities at home. In March 2021, the U.S. Census report on Women and the Gender Pay Gap During...
COVID-19 found that “34 million women work in jobs officially classified as essential.”28 Women have played a particularly important role in occupations addressing everyday needs associated with COVID-19, such as education, childcare, and retail.

Despite carrying the lion’s share of the burden in these three essential industries during a time of high risk, women continued to earn less than their male counterparts in their industries. (See Figure 3 on page 13.) In 2022, women across the United States accounted for 73 percent of healthcare practitioners and technical healthcare occupations, and women made up an even larger proportion (86 percent) of essential healthcare support workers. Eighty percent of elementary and middle-school teachers and 97 percent of preschool and kindergarten teachers were women. Women also represented 95 percent of childcare workers.

These national trends are also seen in North Carolina where women made up the majority of the workforce in education, health, food service, and personal care occupations in 2020.30 However, despite making up most of the workforce, women are still paid less than their male counterparts in these essential positions. Table 1 shows the difference between median pay for men and women in several essential positions in North Carolina.

**FIGURE 1:** Men & Women in Essential Occupations

*Number of North Carolina Workers*

![Bar chart showing the number of North Carolina workers in various essential occupations by gender.](chart)
### TABLE 1: Women Essential Workers in North Carolina

*Median Income (2016-2020 ACS five-year average)*

<table>
<thead>
<tr>
<th>Occupation</th>
<th>Women</th>
<th>Men</th>
<th>Income Difference</th>
<th>Women’s earnings per $1 earned by men</th>
</tr>
</thead>
<tbody>
<tr>
<td>Educational instruction &amp; library occupations</td>
<td>$36,533</td>
<td>$46,679</td>
<td>$10,146</td>
<td>$0.73</td>
</tr>
<tr>
<td>Healthcare practitioners &amp; technical occupations</td>
<td>$51,466</td>
<td>$74,904</td>
<td>$23,438</td>
<td>$0.76</td>
</tr>
<tr>
<td>Health diagnosing &amp; treating practitioners &amp; other technical occupations</td>
<td>$60,616</td>
<td>$110,662</td>
<td>$50,046</td>
<td>$0.75</td>
</tr>
<tr>
<td>Health technologists &amp; technicians</td>
<td>$36,410</td>
<td>$43,176</td>
<td>$6,766</td>
<td>$0.77</td>
</tr>
<tr>
<td>Healthcare support occupations</td>
<td>$23,118</td>
<td>$26,331</td>
<td>$3,213</td>
<td>$0.88</td>
</tr>
<tr>
<td>Food preparation &amp; serving-related occupations</td>
<td>$13,303</td>
<td>$15,777</td>
<td>$2,474</td>
<td>$0.51</td>
</tr>
<tr>
<td>Personal care &amp; service occupations</td>
<td>$16,324</td>
<td>$19,679</td>
<td>$3,355</td>
<td>$0.73</td>
</tr>
</tbody>
</table>

Data Source: 2020* 5-year ACS estimates, Tables S2411 and S2402

* Median Income in 2020 inflation-adjusted dollars
Unemployed during a pandemic: How North Carolina workers fared

Like the rest of the U.S., North Carolina experienced a spike in unemployment during the initial peak of the COVID-19 pandemic. While overall unemployment in North Carolina was lower than the national average, a staggering number of North Carolinians lost their jobs due to COVID-19. In March 2020 there were 339,885 total claims for unemployment insurance in North Carolina, and 83 percent of these claims were attributed to COVID-19. In comparison, there were 12,766 initial claims for unemployment insurance in February 2020.

High unemployment levels throughout the pandemic affected workers in service industries and other low-wage jobs the most, and unemployment rates have remained higher for women workers and workers of color. In February 2020, the majority of unemployment insurance claimants were men (51.3 percent). In March 2020, women made 20 percent more unemployment claims than men (60.8 percent vs. 39 percent). Unemployment insurance claims from women continue to outnumber those from men. In June 2022, 57.9 percent of unemployment insurance claims in North Carolina were filed by women.
**FIGURE 3:** Median Hourly Wages by Gender & Industry

<table>
<thead>
<tr>
<th>Industry</th>
<th>Women</th>
<th>Men</th>
</tr>
</thead>
<tbody>
<tr>
<td>Food Preparation &amp; Serving Related</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Farming, Fishing &amp; Forestry</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Building &amp; Grounds Cleaning &amp; Maintenance</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Personal Care &amp; Service</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Material Moving</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Sales &amp; Related</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Healthcare Support</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Transportation</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Protective Service</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Production</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Office &amp; Administrative Support</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Construction Trades</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Installation, Maintenance, &amp; Repair</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Community &amp; Social Services</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Education, Instruction, &amp; Library</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Arts, Design, Entertainment, Sports, &amp; Media</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Business &amp; Financial Operations</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Management</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Healthcare Practitioners &amp; Technical</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Computer &amp; Mathematical</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Life, Physical &amp; Social Science</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Architecture &amp; Engineering</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Legal</td>
<td></td>
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</tr>
</tbody>
</table>
**FIGURE 4:** Quarterly Unemployment 2019-2022

![Graph showing quarterly unemployment rates from 2019 to 2022 for North Carolina (NC) and the US, with a peak in 2020.](image)

Source: IPUMS CPS

**FIGURE 5:** Second Quarter Unemployment, 2020-2022

![Bar chart showing second quarter unemployment rates for different groups from 2020 to 2022, with a focus on Black Men, Black Women, Hispanic Men, Hispanic Women, White Men, and White Women.](image)

Source: IPUMS CPS
The impacts of the pandemic on trends in unemployment were first seen in the data from March through June 2020. The data show the disproportionate impact on Black and Hispanic/Latinx workers. Although unemployment rates have decreased for all workers, Black workers and Hispanic women continue to have the highest levels of unemployment. North Carolina’s Latinx and Black communities saw disproportionately high levels of COVID-19 infections and deaths, and workers in these communities had to make difficult choices without paid sick leave, many opting to go to work while sick.\cite{33,34} As new variants of the COVID-19 virus emerged, North Carolina’s Black and Latinx communities continued to show higher rates of infections and hospitalizations. Following the Omicron surge in winter 2022, N.C. Department of Health and Human Services (NCDHHS) reported a 50 percent higher rate of infections in the Black population and a 57 percent higher rate of infections in the Hispanic population compared with the non-Hispanic white population.\cite{35}

**FIGURE 6: Weekly Initial Claims for Unemployment Insurance**

*North Carolina claims, January 2020 through July 2022*

SOURCE: Department of Labor Employment & Training Administration
Recovery for some: What is new, what isn’t, and how ‘the new normal’ affects people differently

The pandemic resulted in a massive collapse in employment. Nationally, roughly 20 million new UI claims were filed in the first four weeks of the pandemic-induced shutdowns, including more than a half-million in North Carolina.36

In July 2022, the U.S. Department of Labor announced a milestone in economic recovery from the pandemic with the number of employed Americans exceeding pre-pandemic numbers.37

However, losses and gains in employment have not been consistent across all industries, and racial, ethnic, and gender unemployment gaps remain. In October 2022, employment in North Carolina was 4.3 percent above the pre-COVID high employment recorded in February 2020.38 But, as participation in the labor force is increasing, so is unemployment. In October 2022, North Carolina’s unemployment rate climbed to 3.6 percent — 0.2 percentage points above the historically low unemployment rate recorded in April, May, and June 2022.

North Carolina workers are seeing a steady but uneven recovery from pandemic job losses. Notably, five major industries have not reached pre-pandemic employment levels: management, mining and logging, state government, local government, and accommodation and food services.

Other industries have grown beyond pre-pandemic employment levels, but employment within those industries also has recovered unevenly. For example, employment in the healthcare and social services industry rose nearly 6 percent above pre-pandemic levels, but a number of care-related positions are understaffed, as we discuss later in this report.
The workforce behind the workforce

The pandemic has left little doubt as to the necessity of a fully functional caregiving industry. However, North Carolina’s public investment in the kinds of services provided within the care economy — like childcare and elder care — has failed to keep up with the need for years, inadequately funding financial assistance programs for working families and reimbursing providers at rates that don’t reflect the actual cost of care.

This means fewer working people can afford the services they need for their families. It also means providers are struggling to keep employees due to the low wages afforded by the reimbursement rate and the pressures of short staffing.

Charmayne runs an in-home childcare center in Garner, N.C. She strives to keep her center afloat while providing care for five preschool-aged children whose parents are able to access childcare through the childcare financial assistance voucher program.

“I accept the voucher. The rate is terrible, but what can you do? If we close, nobody can go to work,” Charmayne said. “We need the legislature to understand that we are the first teachers these kids have. The first five years are very important. It’s 2022. Why are we getting paid [the market rate] for 2018? Pay us what we’re worth, so we can concentrate on teaching the children instead of worrying about whether we’re going to be able to stretch [the reimbursement] to pay our bills.”

Charmayne said she is unable to keep another provider on staff due to the low reimbursement rate. She has seen other centers struggle to keep staff and stay open. “A lot of providers are closing because they don’t have teachers. I have a friend whose center doesn’t have an infant room teacher, so she can’t take any more infants. Staff are leaving because they figure, ‘I can make more working at Walmart.’ How many more childcare places have to close before our legislature realizes that we need to take care of childcare now?”
The Care Economy is affecting entire labor market

Before the pandemic, the state of the care economy was in disarray. Half of U.S. families reported difficulty finding childcare, and mothers were 40 percent more likely than fathers to feel the negative impacts from childcare duties on their participation in the labor force.  

The Center for American Progress found that in 2018, 44 percent of North Carolina families lived in a “child care desert” — a ZIP code where there were at least three times as many children under 5 as spaces in childcare centers — and childcare deserts were more common in rural and suburban areas.

When childcare is available, its cost is burdensome to most families. North Carolina families with young children spend approximately 25 percent of their income on childcare.

At the opposite end of the age spectrum, options for elder care are similarly costly and stressful, with U.S. workers relying more heavily on unpaid, informal care than other developed countries. This care burden again falls more on women. Before the pandemic, more than 19.2 percent of working-age women in North Carolina were unpaid caregivers for a person over the age of 65; compared with 14.2 percent of men.

When the pandemic hit, closures of childcare facilities and restrictions in elder care facilities increased the burden on families to provide that care themselves, with many having to choose between delivering vital care and going to work.

“It was hard and heavy because a lot of direct care workers had exited the industry, and the ones that stayed were overworked and underpaid,” said Shara, a healthcare worker in Charlotte, N.C.

“I cared for about five or six people in a day,” Shara said. “I was driving from one end of the city to the next. It was draining. I was gone from eight in the morning until eight at night. Burnout came around February 2022.”

In general, essential workers have faced increasing work burdens and a much higher risk of COVID mortality than non-essential workers. Elder care and childcare jobs have continued to take a significant toll, causing many workers to leave the industry.
Today, the care industry is characterized by many job openings, increased wait times for families seeking care services, and workers who face larger workloads and find it difficult to deliver adequate care.

The result: Care is more unaffordable than ever.

During the pandemic, care disruptions hurt women workers and workers of color the most. The Household Pulse Survey collected data on childcare and barriers to employment and found that on average, more than 350,000 North Carolina workers had faced childcare barriers in any given sample period between December 2021 and August 2022.

The childcare burden on women was much more substantial — women were more than 20 percent more likely than men to report childcare disruptions. Black and Hispanic respondents also were more likely to report childcare disruptions than White respondents.

Figure 7 shows the specific effects of a lack of childcare access on men and women in North Carolina. In particular, many more women than men left a job, did not look for work, or supervised children while working.

**FIGURE 7: Childcare Effects by Gender**

*Average number of people affected per category in North Carolina*

- Paid Leave
- Unpaid Leave
- Lost Job
- Left Job
- Did Not Look for Job
- Supervised Children While Working

![Bar chart showing the average number of people affected by childcare disruptions by gender.](chart)

**SOURCE:** U.S. Census Household Pulse Survey Phases 3.3-3.5, 12/1/21 - 8/8/22
“If not for COVID, they wouldn’t have realized, ‘Oh, you’re essential.’ Before that, we were just the lady down the street that takes care of kids,” said Charmayne, a childcare provider in Garner, N.C. “If we close, nobody can go to work.”

The increasing stress and difficulty of these jobs has forced more workers to leave these industries, furthering the care crisis for families and worsening working conditions for the workers who remain. Employment levels are down significantly in almost every sector of caregiving.

Compared with 2019, annual average employment levels in the private sector are down by more than 18 percent in nursing care facilities, and annual average employment levels are down between 9.5 and 16 percent in other residential care facilities, continuing care assisted living facilities, vocational rehabilitation services, and child day care services. (See Table 2 on the next page.)

In a survey by the Centers for Medicaid and Medicare Services, 42 percent of North Carolina nursing homes were experiencing shortages in a critical staffing area, up from 26 percent the year before. They are receiving few to no applicants for open positions, despite the fact that 91 percent of nursing homes have raised hourly pay, and more than 95 percent have begun paying recruitment, retention, or shift bonuses.49

These factors have created a vicious cycle in the care economy, wherein employees who remain are experiencing increased work burnout and are unable to provide adequate care for an increasing burden of patients and residents. This leads to worse outcomes for patients and further attrition from the industry, which only serves to exacerbate these problems.

The Charlotte Observer conducted a series of investigations into North Carolina nursing homes, telling stories of workers, patients, and their families and the deepening crisis affecting nursing homes. Nurse aides told stories of caring for as many as 80 residents with just two workers on shift, highlighting the extreme situations that can unfold in a state that has no minimum staffing requirements in nursing homes.50

Only about one in five North Carolina nursing homes meet the U.S. Department of Health and Human Services recommended minimum staffing ratios.51

“If not for COVID, they wouldn’t have realized, ‘Oh, you’re essential.’ Before that, we were just the lady down the street that takes care of kids. If we close, nobody can go to work.”
— Charmayne, childcare provider, Garner, N.C.
### TABLE 2: Percent change in annual average employment levels in select private sector industries, 2019-2021

<table>
<thead>
<tr>
<th>Industry</th>
<th>Percent change</th>
</tr>
</thead>
<tbody>
<tr>
<td>Nursing care facilities, skilled nursing</td>
<td>-18.6 percent</td>
</tr>
<tr>
<td>Other residential care facilities</td>
<td>-16.0 percent</td>
</tr>
<tr>
<td>Continuing care, assisted living facilities</td>
<td>-12.0 percent</td>
</tr>
<tr>
<td>Vocational rehabilitation services</td>
<td>-11.1 percent</td>
</tr>
<tr>
<td>Child daycare services</td>
<td>-9.5 percent</td>
</tr>
<tr>
<td>Residential mental health facilities</td>
<td>-7.8 percent</td>
</tr>
<tr>
<td>Home healthcare services</td>
<td>-2.8 percent</td>
</tr>
</tbody>
</table>

Source: Authors’ analysis of the Bureau of Labor Statistics Quarterly Census on Employment and Wages (QCEW)

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### Long COVID in the workplace

Long COVID describes a wide range of symptoms that can last weeks, months, and possibly longer after the end of a COVID infection. The symptoms include malaise, fatigue, breathing challenges, cardiovascular abnormalities, migraines, and mental health impairments.

Based on data from the Household Pulse Survey, more than 16 million Americans had long COVID symptoms during the summer 2022 data collection period. Long COVID symptoms are more likely to affect women, and consequently, women are more likely to suffer work-related impacts. Nationwide, nearly twice as many women as men reported long COVID symptoms in the summer of 2022.

As workers suffered from the effects of long COVID, employers lagged in adapting to their new reality. In a survey by Power, a patient platform for clinical trials that surveyed 1,000 people who had COVID, only 55 percent of workers said their employer had accommodated employees experiencing long COVID symptoms. The survey also found that nearly half of affected workers exhausted their sick days; workers experiencing long COVID needed an extra six days off work; 44 percent of workers experiencing long COVID reduced their work hours; and 29 percent quit a job.

More conservative estimates of work impacts still spell out a major problem.
A study by the Minneapolis Federal Reserve\textsuperscript{57} found that 26 percent of adults with long COVID symptoms saw a reduction in work hours or a change in employment status as a result. Other surveys across different populations of adults found up to 22 percent of adults with long COVID were unable to work at all.

Using these estimates and the figures from the Household Pulse survey, we can estimate that as of summer 2022, roughly 2 million to 4 million Americans dropped out of the labor force due to long COVID.\textsuperscript{58}

In North Carolina, the prevalence of long COVID during summer 2022 was similar to that nationally, with an estimated 550,000 North Carolinians experiencing symptoms during this period.

North Carolina women also faced a higher burden of long COVID than men — more than 370,000 women were experiencing long COVID symptoms compared with 180,000 men, and the percentage of all women (11.2 percent) experiencing symptoms of long COVID was nearly double that of men (5.8 percent).

Although we don’t know for certain what the trajectory of long COVID will look like, it will be harder to rebuild North Carolina’s workforce without adequate sick leave available to workers who suffer from these long-term impacts.
Positive adaptations for some workers: Union membership and working from home

During the pandemic, union membership and the ability to work from home allowed some workers to adapt to changing workplace conditions rather than lose their jobs. Overall, job loss was lower for union workers compared with non-union workers.\(^{59}\)

Union membership not only protected workers from mass layoffs but facilitated other work arrangements such as work-sharing and short-time compensation. In some cases, work-sharing arrangements encouraged employers to temporarily reduce the work hours of their employees to save jobs and avert layoffs.

In situations where employees were unable to report to work due to COVID, union members were more likely to receive pay for hours not worked during the pandemic.\(^{60}\)

Unions also helped secure the health and safety of workers. Unionized workplaces were 30 percent more likely to be inspected for health and safety violations.\(^{61}\)

In 2019 an estimated 6.7 percent of North Carolinians worked from home. In 2021 this estimate rose to 18.8 percent.\(^{62}\)

The Census Bureau reported that 2021 marked the highest national percentage of people working from home ever recorded since they began asking this question on the American Community Survey in 2005.\(^{63}\)

Overall, nearly a third of U.S. households reported shifting to working from home during the pandemic; however, the ability to make this switch varied across socioeconomic groups and professions. Households with members reporting higher levels of income and education were far more likely to be able to switch to telework than those with members reporting lower incomes and lower educational attainment.\(^{64}\)

“With my union I knew that I had a chance to keep my job. A lot of other jobs don’t have those privileges and that’s why I look for jobs where I have union representation, because I know for a fact I would not have a job right now if I didn’t have a union.” — Mikeya, call center worker, Winston-Salem, N.C.
FIGURE 9: Telework Frequency by Income

Number of Days Teleworking in the Last 7 Days

<table>
<thead>
<tr>
<th>Income Level</th>
<th>0%</th>
<th>25%</th>
<th>50%</th>
<th>75%</th>
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</thead>
<tbody>
<tr>
<td>Less than $25K</td>
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<td></td>
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<tr>
<td>$25-35K</td>
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<tr>
<td>$35-50K</td>
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<td>$50-75K</td>
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<tr>
<td>$75-100K</td>
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<tr>
<td>$100-150K</td>
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<td>$150-200K</td>
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<tr>
<td>More than $200K</td>
<td></td>
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</tbody>
</table>

SOURCE: U.S. Census Household Pulse Survey, Phase 3.6, 09/14/22 - 10/17/22
The workforce responds

The State of Organizing in North Carolina

Working North Carolinians and the organizations collaborating with them to win expanded rights broadly acknowledge that the problems described in this report are not new, but rather have been exacerbated by the COVID-19 pandemic. For three years in a row now, North Carolina has ranked dead last (#52) in Oxfam America’s annual Best and Worst States to Work Index because of its lack of workplace protections, weak wage laws, and the absence of policies that support worker organizing.

Joining North Carolina at the bottom end of the rankings are several other Southeastern states: South Carolina (#47), Alabama (#49), Georgia (#50), and Mississippi (#51). North Carolina also isn’t unique in its low number of unionized workers; deunionization has been a key trend contributing to job quality erosion nationwide for several decades.

However, the pandemic also added fuel to the fire for another, more hopeful trend. Low-wage workers who received federal supplemental

**FIGURE 10: Union Coverage, United States & North Carolina**

![Graph showing annual union coverage rate from 1980 to 2020 for all states and North Carolina.]

SOURCE: unionstats.com, database compiled by Barry T. Hirsch and David A. Macpherson using CPS monthly data.
unemployment benefits experienced — some for the first time in their working lives — what it feels like to make ends meet. The implementation of federal emergency paid sick time and paid leave meant that many working people learned what it means to be able to stay home and recover from illness without worrying about lost pay. 

At the same time, people working in jobs deemed essential during the pandemic grappled with the contrast between the growing public esteem for their work and the low wages, meager benefits, and lack of basic dignity afforded by those jobs.

These factors contributed to the emergence of a new wave of workers who refuse to go back to pre-pandemic working conditions. Some are leaving unsafe and unsatisfactory jobs in search of greener pastures, finding new jobs with better pay, going back to school, and enrolling in training programs to increase their competitiveness in the job market.

Other workers are joining new and existing organizing campaigns across a variety of industries from food service to online retail to elder care and childcare. These campaigns are demanding safe workplaces, livable wages, expanded benefits, and the right to be recognized under a union contract.
Leveling up

Many working North Carolinians found their livelihoods disrupted during the COVID-19 pandemic. For some, the shutdown brought about a re-evaluation of work lives and professional possibilities, and many chose to improve their skillset through apprenticeships or other job training programs. Breniecia, a computer programmer and DJ living in Raleigh, N.C., shares her apprenticeship experience:

“I’ve always been interested in a job in tech, but a lot of the tech boot camps out there cost a lot of money,” she said. “Some of them have scholarships, but for the most part they’re expensive. There have been times when I wanted to go to bootcamps, but I didn’t have a co-signer. My credit sucked. Nobody in my family could co-sign for me. … There were all these different circumstances. I got into Iron Yard a few years ago, got a scholarship and I was really excited, but then they filed for bankruptcy the week I was supposed to start. …”

“When COVID hit, I started going to Wake Tech [Community College] to take my tech classes that way. I heard about an apprenticeship, so I applied to the boot camp. It was eight weeks long. They taught us the basics of [the programming platform]. I was one of the first people in the state to do the technical apprenticeship with [the company]. The apprenticeship program placed us with [the company], so we were basically taking classes at night and working all day. So it was a lot of work.”

“I graduated from the apprenticeship in February of this year. I’m still working for [the company]. The apprenticeship was nice because usually when you go through a boot camp, you don’t get job placement. A boot camp will teach you the skills, but you don’t necessarily get a job afterward.”

“The apprenticeship gave us on-the-job experience. I was placed
Another positive trend in North Carolina is the increase in workers finding ways to add new skills and open pathways to less precarious employment. One positive example is the North Carolina Community Colleges’ apprenticeship program, ApprenticeshipNC, which is reaching almost twice as many workers as it did five years ago.

The community college system took control of the state’s apprenticeship program in 2018, and the number of participants has increased in each of the first few years under their control, from 8,207 in fiscal year 2017 to 15,657 in 2020 and 16,894 in 2021. Although the first decline in participation occurred in 2022 (13,377), the program is still serving more participants than before the pandemic.

Another sign of shifting worker power was the Great Resignation — the term coined to describe the surge in workers quitting their jobs starting in 2021. Many workers put off quitting their jobs amid the uncertainty of the early pandemic, but this trend reversed in 2021. Seasonally adjusted totals of workers who quit exceeded 4 million per month across the United States in most of 2021 and 2022. Although annual quit rates were
down from 2017 through 2019 levels by more than 10 percent in 2020, these rates skyrocketed to nearly 20 percent over that same baseline in 2021.

In North Carolina, an average of more than 150,000 people per month quit their jobs in 2021 and during the first 8 months of 2022. The quit rate is higher in North Carolina than in the rest of the nation — in 2021 and 2022, an average of 3.3 percent of workers quit their jobs each month, compared with 2.8 percent quitting across the United States.68
Signs of Movement
Excerpts from conversations with workers and advocates

For this report, the Workers’ Rights Project interviewed several worker leaders and organizers engaged in organizing campaigns in North Carolina. Interviews have been edited for length and clarity.

Asheville Food & Beverage United

Jen Hampton is a restaurant worker and an organizer with Asheville Food & Beverage United, a worker-led coalition that formed in 2021 to advocate for the needs of restaurant and bar workers in Asheville’s booming tourism economy. She has lived in North Carolina for 16 years and is a grandmother of six.

Workers’ Rights Project: How did you get your start in service industry work?

Jen: I’ve been in food service since I was 18 and got a job as a waitress at a truck stop outside of San Antonio (Texas). That’s just what I’ve always done. I mean I went to school and almost finished my third year in college, majoring in math and minoring in Spanish, but I wasn’t able to finish because I had kids. It was just too much work by the time I got to that level of school. I’ve worked every position there is in restaurants; bartender, manager, dishwasher, cook. All the things. I was a barista for Starbucks for eight years. It’s just always been, you know, a job that you can get at any time. You can always count on food service because people gotta eat.

WRP: What do you feel has kept you in food service?

Jen: I think there’s a certain camaraderie in food service. We see people from a different perspective because we are servicing the people who work normal schedules, Monday through Friday, during the daytime. So we occupy a different space. Our weekends are usually Monday and Tuesday or Tuesday and Wednesday. So we’re out doing our life during that time. I think it’s a different perspective. I think that we really bond over that. It just feels like a good support system.

WRP: How did you get involved in organizing?

Jen: During the pandemic, we formed this Facebook group and started
talking about our issues with each other. I started realizing that the struggles I had been facing my whole life in this industry were absolutely not unique to me. Then somebody posted in the group saying that if we were interested in organizing the restaurant industry to come meet up, and 30 people showed up. And I just kept going to the meetings and that’s how I got involved.

**WRP: What kinds of things are you seeing within your industry that make you feel there’s an urgent need to organize?**

**Jen:** Paid sick days are always the first thing that comes to mind because we don’t have paid time off. We have to go to work sick all the time, even before the pandemic. You know, I remember being at work so sick with the flu, waiting on customers when I was a server or when I was a barista at Starbucks because what else can I do? What are your options? Unless you literally cannot stand up, you have to go to work sick because you gotta feed your family. You gotta pay your bills. You can’t afford to miss a whole shift, especially when relying on tips.

I’ve also always thought that the scheduling issue is awful. I started talking to other workers with the same experience. So many managers will wait until the day before the schedule starts for the week to post it. So you have no idea what time you’re going to be off that week and you can’t make any plans. And people are just fed up with that. That’s so disrespectful, you know — how dare you? My life does not belong to this company.

Wages are a big one for me, too. I lived in Seattle, Washington, in 2004 for six months, and I was a server at Applebee’s. Up there, there’s no sub-minimum wage. That’s one of the states where you have to make at least the state minimum wage, which in 2004 was $10 or $12 an hour there. My mind was blown. I made a real actual paycheck from waiting tables and
also made really good tips. So I know that it’s possible. It just enraged me when I came back and worked for the same company in Texas after I lived in Seattle. Barely made $2 an hour.

**WRP: What does your organizing work look like right now?**

**Jen:** We are working hard on coalition building with other organizations in the area, building relationships and networks of solidarity. And we are working to educate ourselves and other workers on what their rights are. I think that’s where all of the progress is going to come from because people don’t know what’s allowed and what isn’t. They don’t know what their rights are. I didn’t even know how to have conversations about organizing. I felt like, “Is it OK to just get my coworkers together and talk about our issues? Is it legal to talk about what you’re paid?”

**WRP: Why do you feel it’s especially important for service industry workers to organize?**

**Jen:** Well, for my whole life working in this industry, it’s kind of been stigmatized like a job of last resort. People are like, “Oh, you can’t do anything else. I guess you can just go work at a restaurant” in this disrespectful way, like we don’t have any skills. But the customer service skills that I need for this work? They’re stellar. I think that’s key to my organizing because I can talk to people from all kinds of diverse backgrounds, so that is a skill. Cooking, plating, dish washing, all of that stuff is a skill.

I feel like if we start standing up for ourselves and demanding respect and dignity, then that is going to attract more people back into the field and reduce that stigma. You know, we’re important too. You’re not gonna treat us like this anymore or you can serve yourself.
Carolina Amazonians United for Solidarity & Empowerment

Carolina Amazonians United for Solidarity & Empowerment, or C.A.U.S.E., is a worker-led organization campaigning to unionize employees at the Amazon RDU1 Fulfillment Center in Garner, N.C. For this report, we interviewed an Amazon employee involved with C.A.U.S.E. Their name and identifying information have been redacted from this report to protect them from possible retaliation from their employer.

Workers’ Rights Project: What are the main issues that have motivated Amazon workers in Garner, N.C., to organize?

C.A.U.S.E.: In every Amazon Fulfillment Center, there are going to be different issues. A big issue is racism when it comes to management. That is pretty much all over the country. You saw a lot of that in Bessemer (Alabama). The amount of white people in management and the amount of Black and Brown people who are Tier 1 employees is so disproportionate. The first time I walked into that Amazon warehouse, it’s the first thing that I noticed. I wasn’t even organized at that point. But the first thing that I noticed is I have more Latinos around me and more Black people around me, and we are marching up to a white operations manager, who’s essentially guiding us and telling us what to do.

Based on the Amazon handbook, the only way to get promoted — it’s written in stone — is that your manager has to go to their supervisor and say, “This person deserves a promotion.” And all the managers are white. You’re essentially instituting a culture of favoritism and a culture where a largely Black and Brown workforce needs to be vouched for by white managers [to get promoted].

WRP: We have heard a lot from workers about health and safety concerns within Amazon’s packing facilities. Are you seeing those kinds of issues in the Garner warehouse?

C.A.U.S.E.: People more than once have gotten their finger stuck in the conveyor belt. The section where I work has the highest rates of injury because people are lifting packages and things like that. The two most common injuries that happen in the section where I work are back
injuries and hand injuries. So either broken hands, broken fingers or back issues. But we don’t know about the extent of it because we are so compartmentalized. You can only stay within the section that you’re working in for your entire shift. So if somebody gets hurt two stations down, I would never know about it. They have their way to get ambulances over there without anybody being able to see except for the people in the line.

Another health and safety issue is the way they handle people that require accommodation to do their jobs. Every single person I know that has required accommodation has had issues. One of my coworkers is very upset because she was out on short-term disability and can’t come back to work because Amazon says they can’t find a job for her. But they’re hiring, right now, for the exact job she was doing before.

WRP: What are some of the challenges that you face while trying to organize your coworkers?

C.A.U.S.E.: There’s a lack of transparency about company structure. It’s one of the recurring themes at Amazon, that everything is so compartmentalized that you don’t really see the big picture. You can’t go to other parts of the warehouse. They don’t give you a full tour, and you don’t know who you work with, so I don’t even know what department I work in.

I’ve never met my manager before in my life. I’ve been there for months now. On the app in my phone, she’s listed as my manager. I could not tell you what that woman looks like. What you do is you show up, and you go to your workstation, which is told to you by a TV or a program assistant.
And then you’re being watched, essentially the whole time that you’re there because there are cameras everywhere in the warehouse. So you can’t really go anywhere except the bathroom where there’s no cameras [at least we think are no cameras]. We’re not allowed to have our phones.

**WRP: When you think about your organizing efforts, what is making you feel hopeful or excited right now?**

**C.A.U.S.E.:** When I entered the workforce, it was a very different time for workers. You were supposed to just keep your head down and say, “My pay is my pay and my benefits are my benefits.” But something happened. I don’t know why, but it feels like it happened for a reason. You know a hundred years have passed since the last major labor moment, and I think we’re past due for another one.

I’m just very excited about the prospect of feeling powerful for once, against the powerful. We were all put in this warehouse for some type of reason. Everybody just kind of melds together. We all have our different skill sets and ways of thinking. I honestly think that if we don’t win, we’re at least gonna give them a big fight. I’ve never seen a more ready group of people to take on the second largest corporation in America.

“I’ve never seen a more ready group of people to take on the second largest corporation in America.” — C.A.U.S.E. member at an Amazon warehouse in Garner, N.C.
National Domestic Workers Alliance

Chanelle Croxton is the North Carolina organizing director for the National Domestic Workers Alliance. The NDWA advocates for the rights and dignity of more than 2.2 million domestic and care sector workers, which is 91.5 percent women and predominantly immigrant women and women of color.

Workers’ Rights Project: Can you share a bit about your work and the people you organize?

Chanelle: We are a national and locally based organization that represents care workers across different sectors. We’re talking about the folks who clean and care for our homes, nurture and educate our children, and care for elderly and disabled folks. We are based around the country. You have affiliates who are in various cities, and then we also have our own chapters. North Carolina is one of them. From the beginning the work in North Carolina has really focused in on two primary occupations: direct care workers who are caring for elderly and disabled folks, childcare professionals who are doing work within childcare centers and family childcare homes, as well as some who work as nannies.

WRP: We’re seeing from the data that the entire care industry, and the home care sector in particular, took a huge hit over the last two years, even as the demand for those services continues to rise. How is NDWA working to improve conditions for folks in direct care work?

Chanelle: Traditionally in North Carolina, personal care service providers who employ workers get paid a certain rate from the state. In North Carolina that rate has been lower than the national average, and that’s really prevented providers from being able to raise wages. We recognize the need to up that investment and to ensure that the increase providers are seeing goes directly into the pockets of direct care workers. So we’ve been working with aging advocates, provider agencies, policy folks and administrative folks in the care economy and aging to get an increase in the 2021 state budget.

In 2021 we did get a rate increase, and we did get language on one side that requires a certain percentage of the increase go to worker wages, but on the other side it was more of a suggestion. So in 2022 we’ve been focused on enforcement and implementation, working to educate direct
care workers about the legislation, what it does, what it doesn’t do, who qualifies, and gathering feedback to see exactly how this legislation is going. Are providers actually passing on this money? And if not, we’re collecting that information to push for stronger enforcement [of the wage provision]. We’ve been doing outreach to direct care workers so that they understand what’s happening and can organize if they’re not seeing that money, to make demands of their employers and to reclaim the money that is intended for them.

WRP: Childcare is another field that’s really feeling the loss of workers who have left for higher paying jobs elsewhere. What kind of challenges are you seeing in the childcare space, and how is your organization working to address them?

Chanelle: One looming crisis is that the stabilization grants that childcare facilities have been able to access throughout the pandemic are coming to an end in 2023. Those grants allowed centers to increase teacher
compensation, covered operational costs and other expenses providers have incurred due to COVID-19, and those have been a real lifeline. As those grants come to an end, there’s this question of what is going to happen to the childcare industry. We have to get a commitment from the state to back up the childcare industry. Increased public investment in childcare is one way we’re going about it, but it’s a long-term campaign that our members are leading.

In particular, we have been organizing family childcare providers who have centers within their homes. They’re small business owners, but they’re also employees; they do everything while making severely low wages, working really long hours. [In-home centers] are a subset of the childcare industry that is often overlooked, and the majority of the providers are Black women.

**WRP:** The other side of the public discourse on this is, of course, that many working parents can’t afford the out-of-pocket cost, and the wait list for childcare financial assistance is quite long. How do we address the needs of providers and parents?

**Chanelle:** Providers are limited by the subsidy and by what parents are paying, and we already know that childcare is unaffordable as it is. Families literally can’t afford to pay more, and that all falls on the provider, so how are they making up the difference? For family childcare providers specifically, the wages are super low. And when you account for hours, sometimes they’re making less than minimum wage because they’re doing all-hours care, like drop-in hours and after-hours care. They’re working around parents’ schedules, so when you really calculate what they’re making, it’s not a living wage whatsoever.

The bottom line is that parents can’t afford to pay more, and childcare providers can’t afford

**SOURCE:** SHARON, CHILDCARE WORKER

Childcare personnel are under pressure as public investment falls short of working parents’ needs, and more childcare workers leave the industry. “We would have multiple callouts. Oh, I hated the callout because then we would have to rearrange classrooms to stay in [an appropriate] child-to-teacher ratio,” Sharon said. “We’ve seen a huge turnover because a lot of people left, and then trying to find people to staff rooms was unbelievable because at that point in time, during the pandemic, I mean, there were no qualified candidates.”
Worker leaders in the care economy gather for a group photo at a National Domestic Workers Alliance organizing event.

to charge less. Childcare is a basic human right, that everyone should have access to, and that the people doing the work should be well compensated and have high-quality standards on the job. It’s just like public education. The right to an education is something that has been recognized as a fundamental right for all people, and this is the earliest form of education, in some of the most crucial years. The responsibility does not lie with providers to just fall on the sword and charge less, and it’s not for parents to go broke because they’re already paying a third of their salary. It really is the responsibility of the state to step up and say “you know, in order for us to have a functioning economy, we have to put money behind this.”
Policy road map for a post-COVID world

The pandemic worsened the persistent problems already facing working North Carolinians. The labor market has been tumultuous, with instability affecting workers differently based on their industry, their status as a worker, their race, their ethnicity, and their gender. Workers in the care economy face barriers to health, safety, and economic security, while workers in other industries struggle to afford care for their families in order to participate in the labor force. A growing population of working-age North Carolinians continue to feel the effects of long COVID on their bodies and minds, while policy supports that could have allowed people to better navigate medical issues while holding a job — like paid family and medical leave and paid sick days — died on the vine in Congress and in the N.C. General Assembly.

At the same time, the circumstances created by the pandemic led to a number of truly positive developments. Laid-off North Carolinians were stabilized immensely by emergency federal investments in unemployment assistance, showing the effectiveness of adequate unemployment benefits for job seekers, their families, and the economy. Many low-wage workers who received UI benefits experienced economic security for the first time in their careers. The impact of federal emergency paid sick days and paid leave on COVID-19 rates, and the extent to which working people relied on paid days off while they were available, showed beyond a shadow of a doubt that those common-sense policies are necessary, sought-after, and achievable.

Looking forward, policymakers can learn from the highs and lows of the pandemic to build policy that protects and empowers workers. Below is a high-level summary of recommended policy changes to combat workplace inequality and ensure economic security for all working people in North Carolina.
► Improve wages and benefits for workers so that they can meet the needs of their families.

- Raise the North Carolina minimum wage.
- Ensure everyone in North Carolina has access to paid family and medical leave to welcome the birth or adoption of a child, provide extended medical care for a sick loved one, and recover from serious illness.
- Expand and codify existing paid leave policy for all state employees, including public school teachers.
- Guarantee workers a minimum number of paid sick days to care for themselves, sick children, and other loved ones.
- Adopt a kin care policy clarifying that workers can use existing paid or unpaid sick time for preventative healthcare and for family caregiving needs.
- Pass a safe time policy allowing workers who are survivors of sexual assault, domestic violence, and stalking to use their existing paid or unpaid sick time to seek necessary services and support.
- Establish an inclusive definition of family in any legislation for paid leave, paid sick days, kin care, and safe time.
- Adopt fair scheduling requirements to ensure workers receive timely, clear information regarding their working hours.
- Ensure equal pay for workers doing substantially similar work regardless of gender.

► Increase public investment in direct care services.

- Increase funding for childcare subsidies to reduce the wait list for working parents who seek childcare financial assistance, raise the wages of childcare providers, and ensure market rates reflect the true cost of childcare.
- Raise the reimbursement rate for direct care services provided through Medicaid.
- Require a portion of the increased funding to be used to improve worker pay and benefits.
Reform North Carolina’s Unemployment Insurance program to support workers and insulate the broader economy.

- Increase the duration for receiving benefits to 26 weeks.
- Increase the weekly benefit amount.
- Restore the maximum weekly benefit amount; index it to the state’s wage growth.
- Keep workers employed by establishing a Work-Sharing Option for employers.
- Increase the Earnings Allowance/Earnings Disregard.
- Re-establish eligibility for leaving work because of family hardship.
- Repeal waiting weeks for benefits.
- End Overpayment Collections when claimant is not at fault.
- Ensure language access for claimants with limited English proficiency.

Make work safe.

- Guarantee that pregnant workers will be offered reasonable accommodations in order to continue working safely throughout their pregnancy.
- Adopt legislation requiring employers to follow CDC guidelines for airborne infectious diseases that pose a public health emergency.
- Implement additional protections for farm workers living in shared migrant housing to include separate housing for symptomatic and ill workers during a public health emergency.

Ensure that workers have the ability to impact their working conditions through collective bargaining and the freedom to move between jobs.

- Increase job mobility by limiting the use of restrictive employment agreements.
- Ensure the rights of all private employees to engage in collective bargaining to improve their workplaces.
- Establish collective bargaining rights for public employees.
Looking forward

The past two years have exposed — and deepened — inequities within North Carolina’s workforce. Workers faced incredible pressures both in unsafe and underpaid essential jobs, particularly for women and workers of color. Mass closures and layoffs resulted in historic levels of unemployment from which many working people are still trying to recover. The direct care sector threatened to collapse under the strain of low wages and understaffing and is facing even more challenges in the absence of adequate public investment. Family caregivers are taking on expanded roles as caregivers for their children, elders, and disabled loved ones at home due to the disruptions in this vital industry.

Racial and gender disparities persist in wages, benefits, and access to jobs. In some cases, the effects of the pandemic have widened these gaps. Inequities in how we responded to the pandemic have left many low-wage workers, workers of color, women workers, and workers at the intersection of these identities wondering if continued efforts to recover from the pandemic will ever include them or their peers.

Working people, particularly those in low-wage jobs that were deemed essential, realized their worth and started a new and energized wave of organizing efforts across the state and nation. Others saw the pandemic as a catalyst for professional growth and went back to school or secured new jobs that offered better pay and benefits. Although the labor market has become less volatile than during the most uncertain days of the pandemic, working people have flexed their power in a way not seen in a century, proving their willingness to take risks by organizing their workplaces or leaving a job in the pursuit of better lives. These encouraging trends signal that the coming years will indeed be an exciting time for the rights of working people.
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