



Counting on Care Work

Human Infrastructure in Massachusetts

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*This research was made possible by
a grant from the Creative Economy
Initiative of the University of
Massachusetts President's Office.*



Full report available at
www.countingcare.org

In Massachusetts, as in every other place in the world, all children need to be cared for and educated, everybody has physical and mental health needs that require attention, and some individuals need assistance with the daily tasks of life because of illness, age, or disability. The labor of meeting these needs – which we call *care work* – is a complex activity that has profound implications for personal, social and economic well-being. Care work is not just a cornerstone of our economy – it is a rock-bottom foundation. Care work provides the basis for our human infrastructure, and we need it to navigate through life as surely as we need our roads and bridges.

This report measures the role of care work in the Commonwealth in 2007 by examining in detail three intersecting spheres: paid care work, unpaid care work, and government investment in care. We include in the *care sector* the labor and resources devoted to the daily care of Massachusetts residents, especially children, the elderly and those who are disabled; the provision of K-12 education; and the administration of health care to both the well and the sick, regardless of age.

The Care Sector in Massachusetts

- In 2007 paid care work accounted for 22 percent of the Commonwealth's paid labor force (800,000 workers).
- Care industries generated a total value of \$46.8 billion, making up 13 percent of Massachusetts' state Gross Domestic Product (GDP).
- Commonwealth residents 16 years and older spent an average of 4.8 hours a day providing unpaid care or supervising those who need care.
- All together, Massachusetts residents perform 24.9 million hours a day of unpaid care work (the equivalent of 3.1 million full-time workers).
- Valuing unpaid care work at the typical wages for paid care workers, the total value of unpaid care time is \$151.6 billion annually.
- If the value of the Massachusetts GDP were expanded to include unpaid labor, unpaid and paid care work together would account for 36 percent of the total.
- Women comprise 75 percent of paid care workers and provide 64 percent of all time devoted to unpaid care activities.
- In fiscal year 2007, state and local governments in Massachusetts spent \$24 billion on the care sector.
- State and local government spending accounts for just under half (49 percent) of the total value of paid care services in the Commonwealth.

Why Care?

There are at least three important and related reasons to identify the care sector as a distinct segment of economic activity.

The combined successful outcomes of health, education, and other types of care work define our overall well-being and allow us to function effectively as a society.

Like our physical infrastructure, a well-developed human infrastructure is critical for other economic and social activity in the state to thrive. In order to work, to be an active part of families and communities, and to participate in the political process, people have to be fed, nurtured, educated, and have all of their daily needs met.

Because care work has benefits that extend beyond the individual directly receiving the care, market mechanisms do not always work to effectively provide the quantity or the quality of care we need.

The market is not well-equipped to deal with transactions that fall outside of the realm of individual exchange. Care, whether paid or unpaid, creates sizable benefits beyond those who are directly involved. Therefore, public policy and government fiscal support play a critical role in maintaining the well-being of this sector.

The majority of care work is labor that is closely linked to personal relationships.

Nurses, social workers, teachers, day care providers, and home care aides provide intimate care directly to the residents of the Commonwealth. Parents care for children and adult children care for aging parents in the context of complex relational interactions. The central role of emotional attachment and relational obligation in care work makes the labor of care unique, and further complicates market dynamics.

An Investment in the Future

Maintaining the human infrastructure of the Commonwealth is socially and economically vital. In addition, the unique characteristics of care work require thoughtful public and employer policies and sustained public financing.

Governments and employers must work together with the market to assure that care workers receive fair pay.

To attract and retain talented people to fill the expanding number of jobs in the paid care sector, the jobs at the top of the pay scale must be competitive with other jobs that require similar levels of education and commitment. And those workers who are at the bottom of the pay scale must be assured a living wage and decent working conditions. Formal worker protections are especially important for this group of workers who are particularly vulnerable due to the relational context of their work.

Increasing pressures on families from paid work require thoughtful government and employer policies to facilitate the ability to deliver unpaid care work.

The adoption of paid leave and paid sick days policies as well as employer and employee negotiated worktime flexibility are imperative to allowing families to continue to make this critical contribution to the state. The provision of viable part-time options – including access to health insurance for part-time workers – is also critical to giving families support for unpaid care work. Ironically, many of the workers who fall into this part-time category are paid care workers, stretched between care obligations at work and at home.

The maintenance of the Commonwealth's human infrastructure requires sustained and adequate public financing.

Spending on care is indispensable to the effective development and utilization of the human capabilities of all of the residents of Massachusetts. Investing in the education of children leads to a better educated workforce for us all. Investing in the care of those with disabilities enables their greater participation in work and community life. And investing in the care of the elderly provides all of us with the security of knowing we will be cared for as we age – a fundamental motivator to labor force and community participation.

Efforts to promote healthy and sustainable economic development on the state level are likely to intensify but it is unclear whether states have the fiscal capacity to handle adequate funding of the care sector or if families have the physical and financial capacity to handle care needs. What is clear is that the paid and unpaid care that our families and communities rely upon will continue to require special attention from both federal and state policy makers. Our economic well-being depends on it.