

**TO: The Center for Equity**  
**FROM: Hart Research Associates**  
**DATE: February 2022**



**RE: The Voices of Black Women Working as Long-Term Caregivers: Identities, Wellness, Systemic Racism, and Improving Quality of Life**

In January 2022, Hart Research Associates conducted a multi-day online discussion forum including 17 Black women working as long-term caregivers<sup>1</sup>. About half of participants are in their 60s or older. Almost all are home care workers, and two-thirds care for a family member. Virtually all participants are highly active union members.

The key findings of this research are summarized below. It is important to remember that this is qualitative research and these results come from an in-depth conversation among a relatively narrow group of women. They do not necessarily represent the views and experiences of all caregivers. Therefore, caution is warranted when interpreting differences between different groups (e.g., between nursing home and home care workers) as well as in generalizing these findings to long-term care workers broadly.

1. As long-term caregivers, participants see themselves as loving, patient, and heroic; they are “ordinary people doing extraordinary things.” But, home care workers believe that many people see them more negatively. One wrote, “The impression I get is they think we sit around chatting, watching TV, and relaxing all day. They don’t think we work hard.”
2. As Black women, participants see themselves as strong, hardworking, and resilient pillars of their families and communities. One noted, “We are strong, we can build something out of nothing, we don’t give up, we have to make a difference for our children.” But, participants know that many people think of them as lazy, unintelligent, and loud. One summarized, “[People think that Black women] are less than. Less smart, less pretty, and just less than.”
3. About two-thirds of participants have some familiarity with the concept of systemic racism and identify deeply rooted inequities in health, employment, criminal justice, and other areas. Many described first-hand experiences with racial discrimination. Compared with participants in their 60s and older, younger participants are less familiar with systemic racism and report less racial discrimination.

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<sup>1</sup> Participants were recruited by SEIU Local 2015.

4. Several participants believe that systemic racism affects how IHSS and other employers value their work. One wrote, "The people who make important decisions don't think of this as a viable job. They relate our job to the work done by slaves for many years." Another remarked, "Well if this were a job held by thin blue-eyed blonde-haired women, we would all be in Forbes magazine."

Several participants also reported that systemic racism affects their overall career trajectory (e.g., wages and advancement).

5. Most participants report that they have good physical wellness; they get exercise and successfully manage chronic conditions. To a degree, participants' optimism about their own physical health is informed by their generally positive outlook on life and religious faith. Given that most participants are in-home caregivers for family members, it is unsurprising that many are concerned about the physical wellness of their loved ones.
6. When reflecting on their emotional wellness, many participants describe themselves as joyful, content, and blessed. They emphasize the importance of family and faith, and take pleasure in their day-to-day activities. However, other caregivers struggle with their emotional wellness, pointing to issues such as an overwhelming amount of tasks and worries about family. Compared with participants in their 60s and older, younger participants struggle more with emotional wellness.
7. Some participants report better financial wellness than others. About half report that it is a fairly/very big challenge to save money for important life goals; get affordable, quality housing; and cover monthly bills and expenses. Compared with participants in their 60s and older, younger participants struggle more with financial wellness (e.g., access to reliable transportation and child care).
8. The majority of participants entered the caregiving field in order to meet a family member's needs, and their occupational wellness is profoundly informed by their passion for the work. One noted,

I had a cousin that was doing IHSS for some years and she had asked me to come check it out. So I did and fell in love with my clients. I had the opportunity to care for family members and non-family members. The non-family clients became my family and it was hard work, but I loved it. It was a bond that we developed. One of my clients shared with the social worker that if it wasn't for me, he would have died.

However, these caregivers are at a high risk for burnout. They describe having too many caregiving tasks to do, being asked to do chores that are not in the recipient plan, and suffering indignities at the hands of clients and their family members.

9. Participants are deeply frustrated with two issues. First, they are concerned that their clients do not receive enough hours to get the level of care that they need. Second, they believe that they are not appropriately compensated for their work. In addition, most participants are not adequately protected from COVID-19.

10. Participants report that their quality of life would be most improved by policies such as a living wage floor, guaranteed pensions, paid sick/family leave, and guaranteed hours.

Compared with participants in their 60s and older, younger participants are especially in need of policies providing housing assistance, universal healthcare, universal child/elder care, and transportation assistance.

All participants need greater enforcement of sexual harassment and workplace laws.

11. Half of participants have undergone some form of occupational training, ranging from basic CPR and first aid to in-depth courses about specific care and safety protocols. All participants believe that there should be opportunities for paid on-the-job training.

12. Participants believe in the power of numbers and are passionate about the union. One wrote,

Taking care of my Dad drew me to this career, but joining the union and meeting other care providers kept me in this field. I learned the denied needs of providers and my advocacy was born. I now enjoy advocating and fighting for all rights of care providers and will continue this fight until I can no longer fight or until our needs are taken care of, which ever one comes first.

13. Participants appreciate union advocacy and protection. They are also grateful for how the union promotes their personal development. One noted, "SEIU 2015 allows me to develop skills that I have wanted to hone. Like having difficult conversations, utilizing dialogue, learning negotiations, learning to speak to the Board of Supervisors. I've been encouraged to learn more about civics."