



Stories from across the country that shine a light on how we can build a better future for families, businesses, and our economy

MomsRising.org

Dear Member of Congress,

A recent study found that finally building a care infrastructure would lift our country's long-term real GDP growth by 10-15 basis points as well as lower costs for families,¹ create millions of good care jobs, ignite hundreds of billions in economic activity,² and would enable parents to be in jobs that put food on the table for the children they're raising. It's time to do that, immediately.

Right now, moms and families in America face a wholly inadequate care infrastructure, a fact that the pandemic has laid bare, including: a lack of national universal policies relating to childcare, paid family and medical leave, living wages for care workers, home and community-based services, permanent improvements to the Child Tax Credit and Earned Income Tax Credit, access to unbiased health care and reproductive services, and a path to citizenship for immigrants, many of whom are caregivers. These are policies that people in most other industrialized nations take for granted, and are policies which Federal Reserve Chair Jerome Powell has noted we need to catch up with international competitiveness.³

Polling shows people across the political spectrum broadly support these changes. This is hardly surprising because families have been left to shoulder the burden of caregiving and working, often double and triple shifts, without common-sense protections that a care infrastructure provides; and through this all, people working as child care educators and care providers have been underpaid and without workplace protections like paid leave, too.

The numbers are stark and show the cost of decades of inaction: In the past year, 32% of women aged 25-34 were pushed out of much-needed jobs due to a lack of child care, proving how essential a strong care infrastructure is to the U.S. job market. In 2020, more than 2.3 million women lost their jobs —over 600,000 were Black; 618,000 were Latina.⁴

Our failure to invest in a care infrastructure is costing not only women and their families, but our economy overall. For example, the risk of mothers leaving the labor force and reducing work hours in order to assume caretaking responsibilities amounts to \$64.5 billion per year in lost wages and economic activity.⁵

In good news, we can boost families, businesses, and the economy, as well as create and sustain jobs by investing in our care economy.

It's not enough to go back to where we were. We need to build back better so women, moms, families, communities of color, caregivers, businesses, and our economy can thrive! Investments in the care economy will finally put us on the path to shared prosperity. In order for our families, communities, and economy to fully recover, leaders in Congress must quickly pass universal child care, adopt national paid leave for all, raise the minimum wage and enact fair pay legislation, make permanent enhancements to the Earned Income Tax Credit and the Child Tax Credit, invest in caregiving options for people with disabilities and aging adults, invest in supports for children and communities

- and a care infrastructure - instead of pouring critical resources into more police and a harmful carceral system, ensuring resources to and create a pathway to citizenship for immigrant workers, who have been crucial in combating the pandemic.

We are ONE in our demand for a strong care infrastructure. In the following pages, you'll read stories from families across the nation that highlight the need to fix the holes in our nation's safety net. We look forward to working with you on these issues in the months to come.

Sincerely,

Kristin Rowe-Finkbeiner, *Executive Director and CEO*, and the entire MomsRising team

1) <https://www.moodyanalytics.com/-/media/article/2021/american-families-plan-build-back-better-agenda.pdf>

2) <https://timesupfoundation.org/work/times-up-impact-lab/times-up-measure-up/its-time-to-care-the-economic-case-for-investing-in-a-care-infrastructure/>

3) <https://www.nytimes.com/2021/02/24/business/economy/fed-powell-child-care.html>

4) https://nwlc.org/wp-content/uploads/2021/03/Final_NWLC_Press_CovidStats_updated.pdf

5) <https://tcf.org/content/report/how-covid-19-sent-womens-workforce-progress-backward-congress-64-5-billion-mistake/>

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PAID LEAVE FOR ALL

FMLA only guaranteed that my job would still be here when I returned from leave. Had it not been for my family, I would not have had the opportunity to stay home with my son for 3 months.

I used all of my vacation and sick leave and went a month with no paycheck. Now for doctor's appointments, etc., for my son, I lose more time because I used all of my leave on maternity. Something needs to be done.

– **Courtney, Montgomery, AL**

I just exhausted all of my extended Family Medical Leave and am about to use all of my sick pay. Although we were paid while in lockdown I only received 60% of my pay the last few months which has been difficult. I would have made more on unemployment if they had laid off our department.

I am a single parent at home with a young child whose school has been shut down for nearly a year. The stimulus check, while very much appreciated went pretty quick on regular items like clothes and food. We've adapted so far to this new reality but am unsure of what security exists. My workplace wants to reopen but since it's a tourist destination I am very worried for the health and safety of myself and others.

We lost three family members due to COVID-19 and so for me, this pandemic is real and its danger very present.

– **Nina, Santee, CA**

I am expecting my first child in July. I work at a school and have recently found that my school district will not provide any paid family leave and even limits the amount of paid time off I can use towards maternity leave (which they have told me doesn't exist and is merely "time with your baby").

Many women I've spoken to have had to take unpaid leave just to take care of their baby since there is absolutely no support for employees. Additionally, employee childcare (which is a whopping discount of \$15 per week) does not start until the child is 1 year of age and costs almost \$2000 per month. I am irate at the disconnect between the lack of maternity leave and the outrageous child care conundrum.

This begs the question: "What are employees supposed to do if they are forced to go back to work after giving birth yet can't qualify for child care until 1 year after giving birth?" This is so disappointing, especially since the vast majority of our staff is female and this is disproportionately affecting women and forcing us out of our careers and into unfortunate financial situations.

– **Oona, Denver, CO**

PAID LEAVE SAVES JOBS & KEEPS WOMEN & CAREGIVERS IN THE WORKFORCE

Emergency family leave remains important as millions of families are struggling without child care or in-person school.



SOURCE: <https://nwlc.org/wp-content/uploads/2021/01/December-Jobs-Day.pdf>

After I had my son I had to quit my much needed job because I couldn't get ANY time off to care for my newborn. My husband also had no paid sick days, and the days he took were recorded as voluntary leave, which is looked down upon in his industry. We suffered enough to be evicted from our apartment and depended on WIC to feed the whole family.

If we had some paid leave, we would still be in our old apartment and we would have never needed the assistance in the first place. I'd be a working mom right now, but I needed to heal and parent my newborn, and my job didn't allow for that. In the most difficult time to find a job, I don't have one, while my son depends on me.

– **Lauren, Guilford, CT**

Due to the current federal guidelines when it comes to medical leave for employees, I was forced to make a decision on whether or not to use my Family Medical Leave Act to cover my physician appointments, which cut into the time I would have been able to bond with my infant. I made

the decision to not utilize my FMLA to cover my physician appointments, antenatal testing, and necessary medical treatments prior to delivery.

Due to this decision, my employer gave me a verbal warning about my attendance before I even had my child. I had a traumatic cesarean delivery and was glad I had a full 12 weeks to recover from the delivery. My blood iron levels were extremely low, almost low enough that I needed a blood transfusion. This led to extreme fatigue combined with sleep deprivation and I suffered greatly from postpartum depression.

I went back to work before I felt I was fully ready. Of course the nature of having an infant is child care for them and occasional illness in their first year. Again, due to absences from providing care to my child, my employer rewarded me with a written warning on attendance.

The real kicker is, I'm a professional health care provider myself. It's clear that our federal regulations protect employers and not employees who chose to become parents and try to provide quality care for their children. The system is broken and it needs to be fixed. I pray my daughter never knows the anxiety that having to choose between caring for her children and reporting for a job has caused me.

– Amanda, Union, KY

I gave birth to my first child last year, after undergoing two rounds of IVF at the age of 42. I was fortunate in that the state of Massachusetts allowed insurance to cover my IVF treatment up to the age of 42. After a double episiotomy, I needed to recover from the surgery after delivery. Again I was fortunate to have 6 weeks of FMLA at 60% pay. I then had to use my own benefit time which I had saved up, to cover another 6 weeks of full time paid leave.

After three months at home I returned to work at 30 hours/week, and by six months I was back to 40 hours full time in the office, pumping twice a day at work. My employer was supportive of me, but I know this is far from the norm, and many women do not have what I think of was the minimum time to heal from delivery, bond with my baby, and adjust through the most challenging first months of looking after a newborn.

– Aterah, Boston, MA

I am a single adoptive parent of one daughter. In January I was diagnosed with breast cancer just as my daughter began the last half of her senior year, a time with many demands on any high school senior and her parent - term projects for fields of study, college applications and the anxiety of decision to be made for a student's future, social and commemorative events, final exams, and inner coping with a life transition. I was granted paid leave from my



WORKING FAMILIES IN THE U.S. LOSE AT LEAST \$20.6 BILLION IN WAGES EVERY YEAR DUE TO A LACK OF ACCESS TO PAID FAMILY & MEDICAL LEAVE

Source: Sarah Jane Glynn and Danielle Corley, "The Cost of Work-Family Policy Inaction: Quantifying the Costs Families Currently Face as a Result of Lacking U.S. Work-Family Policies" (Washington: Center for American Progress, 2016), available at <https://www.americanprogress.org/issues/women/reports/2016/09/22/143877/the-cost-of-inaction/>

company so that I could focus on the medical decisions, two surgeries, radiotherapy, and fatigue encompassed in treating the cancer.

I am grateful for that leave and partial income. It assured me that I would not have the additional stress of maintaining our lives while coping with the challenge of cancer, at a time of normal stress of supporting a teenager managing the elements of important efforts, decisions, and transition.

– Stephanie, Rockport, ME

I have had to take unpaid medical leave from my job because I am in the high-risk category. I work in an elementary school lacking proper PPE or the ability to implement social distancing.

The shortfalls are not because of the school but rather the lack of funding and planning on both the state and federal level to ensure the safe opening of schools. Because I am a support staff and work under full-time, I am ineligible for any type of pay during this leave.

– Jenifer, Wyoming, MI

During my first pregnancy, I was so sick that I used up all of the sick leave and saved vacation time that I planned to use to cover part of my maternity leave. This left my husband and I without my income for the whole six weeks.

I really wished that I could stay at home longer, but I had to

go back, so that our bills didn't keep piling up. It was very difficult for us, when that precious time should have been spent getting to know our daughter and being together. My husband, of course, got no time off without also using his vacation time. We were both blessed to be working for companies at that time which even GAVE vacation time. Now I have zero.

– Heidi, St. Cloud, MN

I am a nurse who works for a private pediatric clinic. We get no paid sick time, or paid family medical leave. We only get 1.85 hours of PTO every 2 weeks. If we get sick, we either take it without pay or we have to use our PTO to supplement our missed hours. They own 3 private practices. It would be nice to see some paid sick leave. We are dealing with this COVID-19 crisis and not getting our full hours due to the low census because of this pandemic.

– Anonymous, Fayetteville, NC

Recently my mom was hospitalized because of a stroke. She has a brain tumor that needed to be looked after and will eventually be removed. I needed to take time off of work to care for her, but I am pregnant and trying to save up vacation time and sick time to use as maternity leave. I was forced to use vacation time and cut into what will be used as my maternity leave. Without paid family and medical leave, many folks in my generation will be forced to leave the workforce or face financial strain while they care for their parents and/or their children.

– Mackenzie, Dover, NH

Not having access to paid leave forced me to liquidate my retirement assets so I could care for my newborn. In addition, my husband not having access to support me at home during that time placed major emotional stress on our family.

Shortly after my son was born my older son began showing signs of his later diagnoses of Autism. I was home alone with my newborn and my two-year-old who was struggling with major behavioral challenges due to his Autism. If we had paid leave, we could have cared for both of our children better without liquidating future financial resources.

– Susan, Furlong, PA

I am a home care worker. We work with fragile, vulnerable persons – without a single day's sick leave. This means we are stuck with the choice between protecting our clients and a short paycheck and unpaid bills.

– Lynn, Cheltenham, PA

I work in community mental health and we see low income clients who have no sick leave or family medical leave. They

cannot take time off for themselves or their kids when they get sick. They struggle to get their kids to appointments, fearing they will lose their jobs. We need everyone to be able to have access to paid time off to care for themselves and their families.

– Dennis, Seattle, WA

In 2009, I learned tragically that my husband, Joe, was dying. I was told by his specialist that he had been exposed to chemicals over a 7-10 year period and that his bone marrow had been compromised as well as causing a grade 1 cancerous lung tumor. The specialist advised me that Joe was exposed to cancerous cleaning solvents to take rust off metal.

My husband was a machinist and had been since serving his country in Vietnam in the US Navy. This was a man who never took a pill in his life. The specialist said Joe's only chance was a bone marrow transplant. Joe was 63. The cutoff age for a transplant was 60. The specialist for my husband refused to be an advocate for my husband, so I fired him and chose a doctor in the same department and I became Joe's advocate.

Joe fought his battle valiantly but lost. I stayed by his side for three months while he was fighting an uphill battle to continue our life together. Joe and I were married four months short of 32 years the day he died in my arms. To be with me when he was taking his last breath was his dying wish. I used three months of paid leave to assist him fight a battle that he eventually lost.

– Christina, Coon Valley, WI

I have a family of four and I work at a gas station as well as working in home health care. I know I am at high risk of bringing COVID home to my family. I am very concerned if my 17-year-old son would get it from me that he would be in trouble since he has asthma. I have no paid sick days or vacation days.

– Amy, Washington, WV

I have been an occupational therapist for 25 years and have worked for my current establishment for 16 years. The hospital will not allow us to use our sick leave hours in this time of crisis. I have 380 hours of sick leave which I am not allowed to use and only 160 hours of PTO or paid time off which I am told I can use and then go into a negative balance for the hospital. We are not allowed to sign up for unemployment. In a crisis situation such as this pandemic and without paid leave, employers should be more willing to allow the use of sick days to not fall behind on mortgages, car payments, and every day living expenses.

– Veronica, Princeton, WV

UNIVERSAL CHILDCARE & EARLY LEARNING

I ran an in-home daycare for 15 years. People are desperately searching for affordable daycare and I gave it, never charging above what the state charged for subsidized daycare, even though I barely broke even and wound up owing debt to the IRS over it. I even took in a very disabled infant and didn't charge more, like other daycares would, because the family couldn't afford it. The need for affordable childcare is desperate, and must be addressed. These children are brought into the world and deserve all the amenities humans receive, and good childcare, food and loving care is part of that.

– **Patti, Anchorage, AK**

Childcare is scary and nerve-racking as a childcare worker. I'm scared every day of being told of a child or parent having COVID and then having to get tested and quarantined, the scare of getting sick, the scare of not being paid during that time, it would be a domino effect that would have a devastating impact.

It's also a big concern of not knowing what tomorrow will bring with enrollment being so low and no new families enrolling. The thought of the day 'we just don't have enough enrollment to get paid' is an anxiety-ridden reality every day. Being paid minimum wage and putting myself and my children at risk is unfortunately my reality every day.

– **Danielle, Tucson, AZ**

I am a first-time mom with a newborn. For the past few years, I have let my career take a backseat so I could complete my masters. Now that I'm looking to go back to work and finding a new job after having my baby and finishing my degree, childcare is a disaster.

I already lived in a childcare desert. I'm in a rural area. My town does not have any infant daycare. The closest one is 45 minutes away. The informal childcare providers who work as babysitters/nannies often come from families with essential workers or children who may go to school later in the year.

How am I supposed to keep my baby safe while also starting a brand new full time job, hopefully from home? Taking care of a small baby is all-consuming, and I fear my career next steps will be severely impacted by the state of childcare during the pandemic. This isn't to mention the absurd cost of childcare in this country due to lack of government action and support. As someone who has a degree in early childhood education and has worked in it before, I'm also deeply concerned about childcare workers. This was

50%
OF MINORITY-OWNED
CHILD CARE PROGRAMS
ARE CERTAIN THEY WILL
HAVE TO CLOSE WITHOUT
THE HELP THEY NEED



Source: Holding On Until Help Comes, July 13, 2020: https://www.naeyc.org/sites/default/files/globally-shared/downloads/PDFs/our-work/public-policy-advocacy/holding_on_until_help_comes.survey_analysis_july_2020.pdf

already a crisis in my community and county, and now it is devastating.

– **Elena, Pescadero, CA**

My family was homeless this summer due to my landlord selling our house during the height of the pandemic. He didn't give any notice except 60 days which was not enough. My family of three lived in a motel room for 2.5 months. We were blessed to find an apartment however the uncertainty of being unemployed still is scary. If PUA doesn't get extended, we may be back in a worse situation. With the \$600, we were paying our bills and I was able to save - little did I know I would be paying over \$2400 per month to stay at Motel 6.

Mentally I cannot survive being homeless again. It was tough explaining being homeless to a four-year-old. On top of all this my daughter's daycare has shut down twice due to having kids with COVID. I was told when I wanted to keep her home between the two incidents that I had to pay for her spot or bring her to daycare. In my mind I wanted to keep her home until I found another job and had to have care. So I was all prepared to take her back and then the

daycare alerted me to two more kids that were infected. I was told to keep her home. How can I get a job and keep one in this situation?

– **Latrish, Wilmington, DE**

Childcare is going horribly. I have been on waiting lists for a childcare center in the area that we can afford and will accept my child's age group since my second trimester of pregnancy. She is now 8.5 months old with no childcare still in sight. We cannot afford a nanny and are not willing to compromise for places with concerning levels of care to us.

It is limiting my options to devote time to graduate school classes, conducting research, and possibilities to help my family out financially by working part-time. The child development centers on the bases near us are only serving essential personnel parents with childcare and all others able to serve my baby's age range are still closed completely.

My husband is active-duty military, and we have no family support nearby to help us with any childcare support. It is possible I am now suffering from postpartum depression in part because of this pandemic, lack of support, and isolation occurring with the onset of this pandemic right after the newborn phase. It has been a strain on our family's emotional well-being. We need more care resources. Young families can not go on like this without care resources.

– **Genevieve, Milton, FL**

Before the pandemic, I was working two jobs. Then when COVID came, I lost both of my jobs and my partner got sick with coronavirus. He ended up passing away and I was left to take care of our daughter by myself. I lost both my jobs and got on unemployment. State unemployment was \$89 a week plus federal.

When the federal benefits were in, I was able to make ends meet and I was paying the rent easily. Then, when federal benefits ran out, I couldn't keep up with my bills and the rent. I have been paying the landlord a little by little and what I can afford. It has been very tough for me. My mama tries to help as much as she can but she is on a fixed income. I do a little yardwork here and there in the neighborhood but I am unable to leave my daughter alone. Besides, most people are more afraid to hire me because of fears of the pandemic.

– **Kishaundra, Augusta, GA**

I am a kinship guardian. Since 2016, I have been raising my cousin's two children. I am a single, working parent to two children with a trauma and neglect background and multiple disabilities. Professionally, I work with families at risk in the social services field.

"Quality childcare is already a scarcity. Parents everywhere rely on daycares in order to do jobs that support our communities."

– **Rachel, Latonia, KY**

I rely on daycare to care for, nurture, and teach my children while I am doing the same for other Northern Kentucky families. It has been a struggle to adjust to telehealth sessions and working only from home. When you add homeschooling, the loss of outpatient therapy support, and childcare on top of that, there have been moments in the recent weeks that have felt unmanageable.

I love my daycare now, the staff are well trained, they are trauma-informed, they are understanding and treat me as a human not a paycheck, they truly love and care about my children, they are clean, they follow state laws and procedures, they actively work to teach and love everyday of the week. Quality childcare is already a scarcity. Parents everywhere rely on daycares in order to do jobs that support our communities.

– **Rachel, Latonia, KY**

I quit my job to take care of my 19-month-old daughter because we just couldn't find good full-time childcare. It was hard to find good childcare where I live before the pandemic, but now with so many daycares closed or operating at a reduced capacity, it seems literally impossible.

– **Nika, Bath, ME**

At the age of three, my child was declared developmentally delayed by specialists. As a result, he was accepted into the only preschool program in the area funded by public funds. There are a few other preschools in the county, but are run by area churches that require membership in order to accept children into their programs.

By the time he entered elementary school, my child was at the same level of other kids in his class. At the age of seven, he made into the Venture program for gifted children. My child's is a success story. Without the support of childcare professionals, he would've never made it.

– **Julieta, Brandon, MS**

I found myself a single parent with two small children. I returned to college at the U of M, and got my bachelor's degree in social work. Without childcare resources, and the financial assistance I received with childcare, I would have been unable to go to college. Another issue related to this, is that day-care providers are one of the lowest paid segments of employment.

It is appalling to me that caring for children has been classified as a low-skill form of employment, and that day-care providers barely make enough to survive. Without state assistance, these important jobs would become even more marginal.

– **Rachel, Missoula, MT**

I'm a small business owner (therapist in private practice), and even though people are struggling with depression and anxiety due to COVID, I have not been able to see as many clients as usual because I have a child who only recently went back to in-person school and still has one day of remote learning and a shorter school day. I changed my entire practice setting to 100% telehealth, so this, too, affects how many people I can see as my clients are also experiencing difficulties with working from home and managing childcare.

– **Kayce, Wake Forest, NC**

My husband and I have a nine-month-old son. We both work full time, plus my husband also farms part time with his father. We are having a hard time finding quality, affordable daycare, so my mother watches our son 3 days a week and a friend of ours watches him the other 2 days. My mother doesn't charge us anything, our friend's rate is pretty reasonable.

We have been very fortunate to have this arrangement so far, but we will have to put our son in daycare soon, as my mother will not be able to watch him for much longer. I would prefer to stay at home with my son, but we cannot afford that either. I wish we had some better options.

– **Jennifer, Wahpeton, ND**

Childcare is not an option for me, it's too expensive. I'm a single mom. And with COVID and my child in elementary school, I NEED remote work. I have my Associate's degree in Business Administration and Management, so it's not totally easy to find a job. That needs to change.

– **Alexandra, Omaha, NE**

I am the owner of two childcare centers. The increased supplies and staffing needed to run the school safely, limited capacity, and increased cost of supplies have made it nearly impossible to even break even with our costs. We

THE RISK OF MOTHERS LEAVING THE LABOR FORCE & REDUCING WORK HOURS IN ORDER TO ASSUME CARETAKING RESPONSIBILITIES AMOUNTS TO \$64.5 BILLION PER YEAR IN LOST WAGES & ECONOMIC ACTIVITY



SOURCE: How COVID-19 Sent Women's Workforce Progress Backward: Congress' '\$64.5 Billion Mistake.' The Century Foundation, October 29, 2020.
<https://tcf.org/content/report/how-covid-19-sent-womens-workforce-progress-backward-congress-64-5-billion-mistake/>

will be able to run things like this temporarily, but this is not sustainable long-term for our business financially.

– **Kristen, Haddon Heights, NJ**

As a full-time Air National Guard family, we do not live near a large military base, but still have childcare needs for our two toddlers. We have struggled to find quality, affordable care that compares to anything like what we had on Active Duty. We have waited on year-long waitlists for our boys and during that time only one parent could be on military orders at a time while we waited for placement.

We had a nanny for a time since we had no other option, but her costs skyrocketed and we had to let her go. Childcare in our city is extremely hard to come-by and this isn't just for military members - this is for EVERYONE.

– **Tiffany, Reno, NV**

Our childcare center has been closed for months and as my husband and I are preparing to go back to work we have a lot of anxiety about where our children will go. There was already a shortage of childcare centers that would take our infant daughter but now there are even fewer options and we are also very concerned about the increased exposure.

Not only do these centers need extra funding to help them stay open, but they also need extra funding to allow them to put protocols in place that will help to keep the community

safe. Without safe and available daycare, I will not be able to go back to work.

– **Arielle, Rhinebeck, NY**

I receive child care assistance through my local DHS office. If I didn't get this assistance I could not work (even though I live paycheck to paycheck) and would have to apply for Welfare. I'm more than grateful for every penny I receive for child care. Without it I would have to pay \$120/week!

My daughter is learning so much from the program that is offered: she knows how to count, read (some small sentences), knows her alphabet, and knows how to draw. She is four-years-old.

– **Amanda, Tulsa, OK**

I moved to a new state just before COVID-19 hit. I left my job in January 2020 for the move which originated from a job opportunity for my husband. As a wife and mom of two children 4 and under, I had limited options and have now been without work for 1 year.

We are making it okay for now but can't afford the costs of the limited childcare options it would take to go back to work let alone the added risks that it involves. We are unequally affected by the lack of childcare options and added household needs.

– **Wendy, Tualatin, OR**

I am a nurse and have been working nights and weekends while my husband works weekdays. We don't have family that can help us permanently. This is not a long-term solution. Our daycare closed permanently. I can't go part-time because I carry the benefits and my husband's job doesn't allow part-time. No one wants to watch our kids because I am a nurse. We are at a loss, exhausted, and our children are in need of more.

– **Nicole, Philadelphia, PA**

I work part-time and support my family (my husband is a student), so I need reliable childcare for my two boys, ages four years and seven months. The cost of care for our older child, and three mornings/week of daycare for our baby, is more than our rent. The cost of childcare is outrageous.

– **Katherine, Providence, RI**

My family is a food industry family. When the pandemic hit, I was on unpaid maternity leave, after having my third child. I haven't been able to return to work because we live in Tennessee, where they don't take COVID-19 seriously. Even though so many are losing loved ones. Our family has lost two, one being our primary babysitter. So now my kids are

THE AVERAGE COST OF FULL-TIME CHILDCARE IN THE UNITED STATES IS \$9,000+

PER YEAR ACROSS
ALL STATES AND
AGE CATEGORIES



SOURCE: <https://www.childcareaware.org/our-issues/research/the-us-and-the-high-price-of-child-care-2019/>

in virtual school and I am a full-time mom. While I love being with my kids, the lost income is really making us struggle.

– **Kristina, Kingsport, TN**

As a self-employed parent, I have had to cut my billable work days from 4-6 days a week to 1-2 days because of the COVID-19 pandemic. Due to a lack of safe, reliable, and/or affordable childcare and a profession that is difficult to do remotely, my ability to work has declined dramatically.

– **M, Houston, TX**

I feel like continuing to work is so important as a mother, since I want to be a positive role model to my daughters and I don't want to feel dependent on my husband. However, I am deeply conflicted right now, since the daycare options for my youngest are so limited. M

My older daughter was cared for by family until she got into my employers' daycare at the age of two (this is the youngest age they are admitted). But with my youngest this will soon not be an option. The daycare options are frightening, and I am worried that I may need to quit working because I am too disappointed in the quality of the care available in our area. I think that it is a shame for our family, children, and society, that women are faced with this dilemma.

– **Erica, Ogden, UT**

I work at a large childcare center. At the moment 37 families, that is more than half of our community, is subsidized; that means even though they are working they can't afford child care on their own.

Probably another 10 families don't qualify for a subsidy but spend more than half of their income on childcare. Some families can't have their children in a quality center because it's too much for them. On top of that we have teachers with BA's who are working on MA's who make \$12 an hour. This insanity needs to stop!

– **Joanna, Burlington, VT**

I've had to quit both of my part time jobs to care for my children while my husband works in our bedroom. We are grateful to have some income but we need assistance as we have to support our kids and pay our mortgage with one paycheck and this is not sustainable.

– **Sarah, Seattle, WA**

I am a family child care provider who is unable to operate safely, but expected to remain open. Child care needs funding so that we survive this safely and are able to provide care for children once it is safe to do so. Our K-12 and secondary school teachers, staff, children, and their families were all protected.

Child care was thrown under the bus with a patronizing pat on the head saying "you are essential" yet we STILL are not recognized by society as essential workers. We are paid poverty level wages and no benefits. These first 5 years are the most important for development.

Our relationships with the children in our care will support the healing from the trauma of this pandemic. Yet, we are ignored, forgotten (except when being begged to stay open you know so those essential workers can work), and underfunded.

We need real investment now and in the future so our country can fully recover economically. We had lost thousands of programs since the 2008 recession and still hadn't recovered and this happened. What will happen to the children? What will happen to their parents' ability to choose how much they want to work and provide financially to the finances of their family (disproportionately on the mother)?

– **Corinne, New Glarus, WI**

As a working mom of two finding quality child care was a priority for me. I needed my children to be in a safe, nurturing stimulating environment and I was lucky to be able to find such places for my children. As a kindergarten teacher of 15 years I can also speak to the needs of the children walking through my classroom door each fall. Our

"I've had to quit both of my part time jobs to care for my children while my husband works in our bedroom. We are grateful to have some income but we need assistance as we have to support our kids and pay our mortgage with one paycheck and this is not sustainable."

– **Sarah, Seattle, WA**

students need places where they can get early learning foundational skills in safe, nurturing and stimulating environments. Language, reading and early math skills are invaluable to children. Experiences with other children, reading books, singing songs, fine motor, gross motor activities are just a few that can be gained in quality programs. It used to be said that 'everything you need to know, you learned in Kindergarten.' We need to give children a leg up before they even get there, to ensure their future success!

– **Michelle, Shepherdstown, WV**

Working in early childhood education I have first-hand experience with young parents who try to do the best for their children. When a parent earns minimum wage and has long hours, a good day care center with well qualified professional staff who earns a livable wage and can offer counseling and child rearing advice means all the difference to these fragile families.

Here in Wyoming, money is being spent on a new jail, remodeling and enlarging the senior center, but the day care center struggles along with bake sales, bazaars, and raffles for needed funds. Parents struggle to pay all the fees themselves. There is a huge waiting list. The staff barely earns minimum wage and must rely on their other family members for living expenses in their own homes.

Numerous studies have shown that early enrichment and care and guidance for the young child and his/her parents show great dividends in family stability, higher test scores and mental health.

– **Joanna, Buffalo, WY**

PERMANENT EXPANSION OF THE CHILD TAX CREDIT

I'm a single mom of 4 girls and one boy (due October 2021) and this tax credit has helped me to pay overdue bills, make sure my kids have school clothes, shoes, and supplies! It also has helped me to buy a bed for my oldest daughter so she no longer sleeps on an air mattress! I have also fixed problems with our van so that I can get my babies back and forth from the doctors, dentist, and eye examiners.

– **Jasmine, Hot Springs, AR**

We have been spending down our savings this summer to pay for child care. The payments will help us be able to afford care for our kids, both under 5, to afford preschool/daycare while we both work. I am a government employee, a GS 11, making \$74,000 a year, my husband is an archaeologist making around \$30,000. This year we had more income than other years, but we can still barely afford childcare for two kids, and not even full time childcare; my parents provide at least two days of free care a week. I would like to have a third child but I'm not sure that we can afford it, which is a heartbreaking feeling.

– **Lauren, Tuscon, AZ**

We've already received our first payment and it's allocated to some food, children's shoes, and gas. We are a small full-time working family of three, including our seven-year-old son who has bi-lateral high frequency hearing loss. Food and shoes are the start of what we need. We are trying to put out fires. Socks are next month! Our story is the norm, not the exception. As someone who grew up worried about where our meals would come from, it's devastating to pass along that trauma to him.

– **Jennifer, Menlo Park, CA**

I am a grandmother raising my grandchildren. They have special needs and many appointments. Therefore, it is almost impossible to work fulltime. I also have health problems which keep me from working full-time. It has been difficult to take in two children at my age and position. The Child Tax Credit helps me monthly so that I can raise these girls and provide for them. It is a blessing!

– **Elizabeth, Fort Collins, CO**

We will use the Child Tax Credit for education for my son as well as tutoring and buying groceries to put food on the



MAKING IMPROVEMENTS TO THE CHILD TAX CREDIT PERMANENT WILL CUT CHILD POVERTY BY MORE THAN 40%

SOURCE: <https://www.cbpp.org/blog/make-child-tax-credit-improvements-permanent-in-upcoming-recovery-legislation>

table. It will help buying a bus pass for me to get back and forth to work.

– **Denise, Temple Terrace, FL**

We are in the process of buying a house and sending our daughter to her second year of Pre-K at a private school. With a new mortgage as well as tuition increasing for the second year of school, the Child Tax Credit is going to help us so much. It'll help me save more money for food and other needs instead of being almost completely broke from tuition and a mortgage.

We want our daughter to have the best, even if it means we have basically nothing, but this tax credit is giving us the financial stability we need to have our own home and give our daughter the education she deserves.

– **Nichelle, Cumming, GA**

My family suffers with food insecurity and because of this we've fallen behind on bills. We have to go to the clothes closet instead of being able to buy new clothes for our

toddler. You never truly expect to feel like a terrible parent until your child asks for new pairs of shoes because their old pair hurt her feet and have to tell her we don't have the money to get new ones to keep food in the fridge. This extra \$300 will mean I won't have to tell my child no for essentials others take for granted.

– **Jennifer, Boone, IA**

With the Child Tax Credit, I will be able to buy my kids their school supplies, clothes, things they need to go back to school and be able to buy enough groceries. Not worry about not having enough money and only be able to buy some of the school supplies and some groceries.

– **Lydia, Grayslake, IL**

We had a new baby in November 2020 and when she starts daycare, we will be paying \$645 per week for her and our older daughter to attend full time. With dad finishing his masters degree this Fall, we're in for huge bills. This money will help with childcare and higher education in our family.

– **Lauren, Weymouth, MA**

We are small business owners, and the pandemic has slowed our popularity down quite a bit. The Child Tax Credit covers a good portion of our mortgage payment, which will just make life that much easier.

– **Stacy, Battle Creek, MI**

The newly expanded Child Tax Credit will make it much easier for our daughter to get the nutrition she needs. Due to allergies and sensitivities, we have found that the only baby formula she's comfortable drinking costs us between \$9 and \$12 a day (depending on the store that has it in stock). Even though it is medically necessary for her to be on specialized formula our health insurance will not help pay for it. The \$300 we'll be receiving thanks to the Child Tax Credit will go straight to this necessary cost.

– **Stephanie, Edison, NJ**

Most of my income goes to pay for daycare - about 80%, in fact. An additional \$300 per month will help me pay for other necessities for my growing toddler, like clothes that fit, healthy food, and toys and activities that will challenge her and promote learning. That money will take a significant load of stress off me in the decisions I have to make about what we can afford this month.

– **Chelsea, Reno, NV**

My son is special needs and a lot of his recommended therapy equipment isn't covered by insurance so this

"Most of my income goes to pay for daycare - about 80%, in fact. An additional \$300 per month will help me pay for other necessities for my growing toddler... That money will take a significant load of stress off me in the decisions I have to make about what we can afford this month."

– **Chelsea, Reno, NV**

money would definitely help me purchase the much needed therapy items for him.

– **Tabitha, Norwich, NY**

I have worked part-time, from home, for the last eleven years as we raise our family. It didn't make sense for me to work and put my entire paycheck (plus some) into childcare. So I took part-time work as a tutor at a local college, which meant I could always be home with the children.

But it also meant that I was without work every summer, winter/spring break, and any holiday. I took on seasonal retail jobs, but some years I couldn't get hired with the short amount of time I could work.

Many years, we would end up living off our credit cards by the end of summer, and putting all our Christmas expenses on there as well. We stopped buying presents for family. Just the kids (and some years we sold things to afford it). We piled on far more debt than we could pay off.

Every year at tax time, we would pay off as much as we could, and be right back where we started. My husband got a better job, and we are starting to pay off all our debts. But it's SLOW. And we were looking at another August without any pay for me.

We went to college. We have never been completely unemployed. We are trying to raise our children under the standards by which we were raised. We tried to do it all "right" and we still struggle so much. But now? Now we can buy all the kids' school supplies with our Child Tax Credit.

We can buy the "real" groceries instead of the "end of

summer” ones. We won’t fall behind and we will keep paying down our debts. We’ll have what we need each month instead of losing sleep over my lost income. This really will change so much, for the better.

– Cami, Kent, OH

We will apply our Child Tax Credit towards the cost of childcare for our son (currently \$1000/month and increasing in September). I am a PhD student and my husband works full time as an engineer, so childcare outside the home is essential for us to work. The CTC would also help us cover copays and other expenses related to doctor’s visits/ medical care.

– Brita, Cleveland, OH

My wife delayed starting a new job in order to care for her mother, who has been in the hospital for more than 2 months. We have 3 kids in daycare, a bill that runs more than double our mortgage.

The Child Tax Credit allows her to spend time with her mom, navigating the complex medical system and advocating on her behalf. That money will make a real difference in our lives while we get through this difficult period and hopefully get back to normal.

– Kyle, Portland, OR

We were finally able to get enough household cleaning items, kids hygiene, got loads of laundry done. The kids got few summer clothes and needed items. We are very very grateful and thankful for the CTC!

– Trisha, Eagle Butte, SD

I’ll be able to afford clothes and anything else my son needs when I don’t have the extra funds. I could really use the help, so I can make ends meet and pay for daycare as well.

– Kaylee, Memphis, TN

It will help me a lot while being a single parent and just got laid off of my job. It will help me to pay my rent and all my bills like my light, water, and phone. Also, I will buy necessities for my 3 year old: pampers, wipes, and things we need for our home like shampoo/ conditioner, toilet paper, paper towels, cleaning items, etc. Also gas right now is a necessity.

– Leticia, San Antonio, TX

Our Child Tax Credit money will go directly to our \$1400 month daycare costs. The cost of childcare has prevented us from purchasing a home. We are hoping that with the extra

“It’s like a lifesaver is being tossed to us since we dig into savings every month. We are now down to our last bit of savings and did not know what we were going to do until we realized that the Child Tax Credit would be coming our way. It’s going to make it so that we can stay afloat!”

– Adriana, Olympia, WA

assistance, we will soon be able to afford a mortgage!

– Dana, Salt Lake City, UT

Normally, at tax time, when I receive my refund courtesy of my child tax credit I use the money to catch up on past due bills and buy my children much need shoes and clothes. When I receive it monthly it allows me, to instead, keep up with my bills and make sure my children don’t go without through the year. My credit score will benefit from keeping up on the bills rather than playing catch up once a year.

– Rebecca, Madison Heights, VA

Our three children are disabled and we currently spend about \$2,800 per month in medical expenses NOT covered by insurance. This money will go toward those medical expenses. It’s like a lifesaver is being tossed to us since we dig into savings every month. We are now down to our last bit of savings and did not know what we were going to do until we realized that the Child Tax Credit would be coming our way. It’s going to make it so that we can stay afloat!

– Adriana, Olympia, WA

This monthly credit will give me a small amount of income security, for utilities, so I can finally take my 2 girls and leave an abusive marriage. It is helping pave the way for me to break a generational cycle of domestic violence and abuse in my family. It may be a small amount of money to some, but for me and my girls, it’s everything.

– B, Princeton, WV

ADDRESSING BLACK MATERNAL AND INFANT HEALTH DISPARITIES

At 39 weeks of pregnancy, my baby was transverse breech (sideways in the womb). He could not be turned and be born either healthy or even alive. My life was also seriously in danger. I was scheduled for surgery. Luckily, he turned into the proper position for birth. My surgeon, being ethical, canceled the surgery and my son was born 10 weeks later with no complications, healthy and beautiful. It was a scare and since then, I have been acutely aware of those who are not as lucky. Lucky is a relative term here. I never had another child because of the damage done to my reproductive organs.

– **Pauline, Huntsville, AL**

During my twin pregnancy in 2012, I developed preeclampsia and had to be hospitalized. I also experienced a significant postpartum hemorrhage following delivery of my twins via c-section. Thanks to attentive, expert care, both my twins and I are alive and well today in spite of these complications. We need to make the health of women and children a priority in this country. Every mother who develops complications deserves a happy outcome like ours.

– **Sharon, Phoenix, AZ**

I was twenty-years-old when I gave birth to my son. Young and strong. Still, it took me three days to deliver my son. I kept being sent back home and told not to eat anything heavy in case I needed a C section. I was admitted on the third day of nonstop contractions. I was tired and weak. The nurse making rounds came and checked me. She said, “You are ready to push. The baby is ready to come.” She looked at my husband and asked if we had taken any birthing classes. “Good you know what to do than. We have ten women in labor and only one doctor. Start pushing we will be back.”

She left us and I pushed with every contraction, but something was wrong. My husband explained, “The baby is not positioned correctly, I need to get a doctor. Hold on, don’t push.” He started calling for a doctor as I called out in pain. He was yelling, “My wife and baby are in trouble! I need a doctor now!” I felt faint and heard voices giving me instructions, but they were so far off. I fainted.

My son had been slightly slanted. Causing his shoulder to come out first and making it impossible for me to push him out. Something that could have been solved easily. I tore



**BLACK WOMEN
IN THE U.S. ARE
3-4 TIMES MORE
LIKELY TO DIE FROM
CHILDBIRTH
THAN WHITE WOMEN**

**This is independent of parity, age or education.
It produces one of the largest racial
disparities in women’s health.**

SOURCE: ProPublic

horribly. Needed to be hospitalized for three days. My son’s head was disfigured by the forceps that pulled him out. Our happiest day was our scariest.

– **Lizzette, Garden Grove, CA**

My first pregnancy occurred when I was 29-years-old. I was told that I was never going to be able to have kids because I have two uteri and two cervixes. Within three months of becoming pregnant, I had to go to bed rest due to a low amniotic fluid level and my daughter had a condition where most of the blood was diverted to her brain as a result of the low amniotic fluid level. So her body was smaller gestationally.

I had a pre-existing condition of high blood pressure. I acquired gestational diabetes. So I had to take pills to even out my blood sugar, monitor my blood sugar and cut out carbohydrates and sugars. I also had to go to the doctor 2 to 3 times a week to do non-stress tests. I also had to take steroids to develop my daughters lungs in case I delivered early. I ended up carrying her to term.

I tried to deliver her naturally, but after giving me all the pitocin they could I never dilated. Her heart rate was also decelerating so they decided to do an emergency c-section.

They did the c-section and after they cut the umbilical cord my daughter went limp and stopped breathing. They did CPR on her for ten minutes before she came back. Her weight was 4 lbs and 12 1/2 ounces full term. She was put into an oxygen tent and I was moved to the ICU because of my high blood pressure.

– Janet, Cortez, CO

During my C-section, my baby was breached on May 13, 2016. I was in for 12 hours trying to wait for my baby to come down. He didn't come down. Three nurses had to stick their hands inside me to feel him and it was excruciating pain and blood everywhere that they could not find him that finally a third nurse did.

I could not believe how they treated my body without gentle care. They didn't care. I hated my labor and I hated my stay. The nurses were horrible. I was so drugged that I remember passing out from time to time for 12 hours. During my C-section, I had lost a lot of blood.

And even after I delivered, I did not have the moment alone with my baby. My care for my C-section was bad. The nurses only cleaned me two times. So I had scabs from the blood all over my skin on my behind and in between my legs. She forced me to clean myself alone and I cried because I could not do it alone. I wanted to just cry and leave.

– Adriana, Ft. Lauderdale, FL

I was completing my master's degree while pregnant with my daughter, and because of access to care for low-income women had to drive an hour and a half each way for prenatal care, as not all local providers were willing to take patients receiving public assistance with healthcare, and there is a shortage of care providers in our area.

My obstetrician agreed to a natural birth plan, however once in labor I was bullied about complications, and required to sign consent forms for a C-section after unwanted medications had been administered. My doctor broke my water without my consent at 5 centimeters dilation, which caused complications, and my daughter was born by C-section 12 minutes before the end of my doctor's shift. The next day was her day off.

– Terri, Macomb, IL

When I found out that I was pregnant with my twin girls, it was not a pleasant time for me as it would have been for most expecting mothers. Their father and I had just separated and I had just started a new job with awesome insurance. Well, with it being a multiple birth my body was extremely sensitive to certain smells and odors.

I was working at a local factory where the chemicals in the building would cause me to become so sick that I would

"I could not believe how they treated my body without gentle care. They didn't care. I hated my labor and I hated my stay. The nurses were horrible. I was so drugged that I remember passing out from time to time for 12 hours."

– Adriana, Ft. Lauderdale, FL

vomit and become light-headed. With that being said, I had to leave that job and take a lower paying job that caused me to not be able to afford medical insurance. I had to rely on Medicaid for myself and my then toddler.

It was a very difficult time for me, as I was sick during the majority of my pregnancy. Without Medicaid and being able to pick the doctor of my choice, I am not sure I how I would have been able to maintain medical coverage and cost for my family.

– Jessica, Indianapolis, IN

I have twins. Being pregnant with twins is a high-risk pregnancy. I was lucky enough to have great insurance coverage and a great doctor, who monitored me throughout my pregnancy, but my pregnancy was still risky. Every week my doctor would check my twins' heartbeats, and toward the end of my pregnancy, one of my twins had a low/risky heartbeat.

I had an emergency c-section. I can't and don't want to imagine what might have happened if I had not been checked regularly and if her low heartbeat wasn't caught and acted upon. I was also able to take maternity leave and care for my twins, who were in the NICU and on monitors. Those who don't have the same access to quality healthcare by default don't have the same care.

– Tina, Overland Park, KS

I had a long difficult delivery (back labor, pushing for four hours). Afterwards, I was in a lot of pain. They gave me painkillers and sent me home. I was still in a lot of pain days

later, but the doctors were only concerned about the baby—not me. Eventually, I read in a book that in rare instances you can break your coccyx during delivery. I knew what was wrong then. I told the doctor, and he said there’s no point in getting it X-rayed because there was nothing anybody could do about it. All he could suggest was that I put a bag of frozen peas on it!

I was in excruciating pain for months. I couldn’t nurse the baby sitting down. I had to lie down to nurse, and then get back up one knee at a time. It was six months before I could sit normally. I got no help or even sympathy from my provider (they weren’t helpful when I got thrush either, but that’s another story). I felt like I was just a womb in the eyes of the providers. The baby’s wellbeing is important, but shouldn’t the mother’s be, too?

– **Lynne, Amherst, MA**

When I had my first child it was a full moon, which might not mean anything to most of you but for maternity nurses, it is a busy night. We started out as one of two couples in the unit and by the time I was ready to go there were some 16 women in the same boat. My delivery was difficult and was complicated by the fact that both of my doctors were in other rooms performing emergency C-sections.

When it became clear that my OB/GYN would not be attending, they had to cast about for someone with an MD...no takers...even the anesthesiologist turned it down. The anesthesia, by the way, didn’t work and after an incredibly long and painful labor, put on hold while we waited desperately for one of the docs to get free, a resident delivered my son. However, since he was not an OB/GYN he did not perform “the cut” - no episiotomy meant substantial tearing from delivery of a 9 lb baby. He stitched me up for the better part of an hour. The first crash cart for the baby was not functioning, so they found a second. The baby and I were fine, but recovery from the birth was pretty substantial and painful.

My son had jaundice which required several subsequent visits to address. I had several visits with a lactation consultant so I could successfully breastfeed. I was lucky to have coverage that allowed not only a successful delivery under chaotic circumstances, but also so I could afford the care to avoid a serious infection afterward, and support to successfully breastfeed for 6 months even while I returned to work.

– **Katherine, Lincoln, NE**

I had my daughter at University Hospital (now called Rutgers Hospital) in Newark New Jersey back in 2010. I had a C-section and the whole time I was there I could just tell that I didn’t feel well. They had me on antibiotics and didn’t tell me why. I didn’t know why it was necessary. So the day of discharge, I kept telling my nurses that I didn’t feel good.



**EVERY YEAR IN THE UNITED STATES
700-900 WOMEN DIE
FROM PREGNANCY OR
CHILD-BIRTH RELATED
CAUSES AND SOME
65,000 NEARLY DIE**

**In fact, the U.S. has
the **WORST** maternal
death record in the
developed world**



SOURCE: <https://www.propublica.org/article/die-in-childbirth-maternal-death-rate-health-care-system>

They said well all my vital signs were good and that I was ready to go home. I got home with my newborn and my then eight-year old son went to sleep and I woke up in the middle of the night sweating chills felt like it was a full-blown fever.

I had to call my mom who lives very far away to come pick up my children so I can call the ambulance. So I had to wait until she got there, which was an hour to call an ambulance. I came to find out I had an infection in my C-section, something that I knew already in my heart before I left.

– **Tiffany, Newark, NJ**

I gave birth to twins via caesarean just before midnight on a Thursday in December. I had been adamant about not wanting a C-section throughout the entire pregnancy, so despite being warned by all of the doctors in my practice that a twin delivery was more likely to end in the surgery, I wasn’t really emotionally prepared when it happened.

My first night in the hospital is mostly a blur--a mix of exhaustion from the labor and foggy from the drugs. But I remember a male doctor coming in to examine me, and that he pulled out a couple of medium-sized blood clots. I don’t remember his name, or his face, but I do remember feeling a dulled sense of alarm, and his instructions: If this happens again, call for the doctor immediately.

The rest of my recovery was without incident, and my time in the hospital was spent learning how to change a diaper, figuring out how to breastfeed, and pushing myself to get up and move. When my husband and I brought the babies home on Monday, it was one of the only times in my life I can truly say I felt equal parts joy and terror: joy at having created these two perfect little lives, and terror at the

thought of somehow doing something wrong. I hear this is fairly common for new parents.

At home, the bleeding didn't stop, but I'd been told that that was normal, so I thought nothing of it. My feet and lower legs were more swollen than they'd been for the entire pregnancy, but again, swollen feet are common, so I just waited patiently for the swelling to go down. And besides, we were busy getting to know our babies, receiving visitors, and basking in the giddy joy of being parents.

On Saturday morning, nine days after giving birth, I got out of bed and as I stood up, I felt a gush of blood between my legs. I quickly made my way to the bathroom, where I was horrified to see four baseball-sized clots soaked the pads I'd been wearing. I vaguely remembered seeing something in my discharge instructions about calling the doctor if I started passing large clots, so I called my husband for help and immediately called the answering service. I

n the 45 minutes between when I called and when the doctor called me back, I had soaked through three sets of pads. I told her what was happening, and she said, "Come to the ER right away." So we left our newborns with my mother and rushed back to the hospital, an eerie reliving of our trip just over a week ago. This time, though, instead of chattering with anticipation and excitement, our car ride was silent, heavy with our fear. I left a pool of blood in the seat of the car.

In the ER, my blood pressure was dangerously low, so we were immediately ushered back to a bed. From there, my memory is comprised of a series of still-life moments. Joking with the nursing staff about how we loved the hospital so much we couldn't stay away.

My husband going next door to help the disabled patient and his caretaker connect to the Wi-Fi. Me, crying out for my husband to stay there, to not pull the curtain back despite my screams as the doctor examined me—I didn't want him to see her hands come away soaked in my blood. And through it all, trying to handle myself with aplomb while sitting in an ever-widening pool of blood.

The moment that is etched in my memory is this: I am holding my husband's hand, listening to the doctors on the other side of the curtain navigating the logistics of operating room privileges and blood type, when the edges of my vision start to fade. I look at my husband and say, "I think I'm going to pass out." And then, as if from a distance, I see him tear the curtain back and yell for help. I fall further toward the black, until the only thing I can see is his face—always so kind, and calm, and in control—a mask of panic. He, who never cries, has tears in his eyes as he says, "You have to stay here, okay? You have to stay here." I promise to try, but it feels as if I'm underwater.

That is the moment I can still relive if I close my eyes. That's the moment I thought I was going to die. I was too far gone to feel fear, but I did feel an overriding sense of regret. What a shame, I thought, that we'll never get to raise those

"That's the moment I thought I was going to die. I was too far gone to feel fear, but I did feel an overriding sense of regret. What a shame, I thought, that we'll never get to raise those beautiful children together. What a shame that my children, whom I already love so much, will never know their mother."

– Alia, White Plains, NY

beautiful children together. What a shame that my children, whom I already love so much, will never know their mother.

A nurse came and elevated my feet above my head. And slowly the room came back into focus. From there, I was rushed to the operating room where the doctor explained that they were about to put me under, and to count backward from ten. I awoke in recovery to the news that the procedure had gone well, and that I'd needed four units of blood to replace all that I'd lost. When I looked it up later, I was shaken to realize that they had replaced nearly half of my blood volume.

Before it happened to me, I had never heard the term "postpartum hemorrhage". That seemed like the kind of thing that happened somewhere else, where women didn't have access to quality maternal care. But it is far more common than one would expect. In the time since it happened, I've learned new information about how doctors treat Black women that has colored my birth and postpartum experience. Was the doctor careful enough? Did she see me as a human being?

I don't know if I could have done anything differently to prevent what happened to me, but I hope that by sharing my story, others might be more prepared. And more than anything, I now feel gratitude. For every moment I get to spend with my husband, every moment spent watching our twins grow, I am exceedingly grateful.

– Alia, White Plains, NY

FUNDING FOR HOME- AND COMMUNITY-BASED SERVICES

Home and Community Based Services waivers save lives. The coverage can vary widely and often there is not staff available to provide services, so people go without identified needs. My sister is one of them. She is in the middle of a grueling (four years now) battle with SSDI, without her CADI waiver, I don't know what she would do. She needs help with a variety of ADLs (activities of daily living). She needs rides to appointments and people to help shop, especially this past year.

She has never been able to find the staff to fill her hours, the PCA, ILS, and other workers are underpaid and good ones are hard to find and stretched too thin. If she lost these services, it could be life and death. Luckily she is able to hire people she knows to fill some homemaking hours, but she needs good skilled workers.

I live in a state with very little support in this area. Having cofounded an adult day program 20 years ago, I know personally, through the people I was able to serve, how critical and still inadequate these programs are. I fear for my sister every day. She falls, has a life alert necklace and NEEDS staff, there is nowhere available to go for services, so providing them in her home are critical to sustaining her life. I am considering moving to where she is.

– **Anonymous, Bisbee, AZ**

I had disabilities before being diagnosed with MS in 2019. As a Black 66-year-old American, I am having difficulty in finding home care/home nursing with Medicare. I want to stay in my home and be serviced by people who look like me and have empathy for what I am experiencing. I want to stay in my home and not go to a facility where I will be ignored.

– **Anonymous, Los Angeles, CA**

I have a son who has multiple handicaps. We would have never survived without community based services such as visiting nurses and social workers. He is deaf and the interpretive services were an absolute blessing!

– **Constance, Cortez, CO**

Cousin is hearing impaired and would walk several miles to see my dad's family. I would like to have personal affordable transporting for people like him. Family is very helpful but it is not enough, when your a young adult and wanting and

**THERE ARE
4.5 MILLION
DIRECT
CARE
WORKERS IN THE U.S.**



➔ **THEY ARE OVERWHELMINGLY
WOMEN (86%)**

➔ **MOST ARE PEOPLE OF COLOR (59%)**

➔ **ABOUT 1/4 ARE IMMIGRANTS**

SOURCE: <https://www.commonwealthfund.org/blog/2020/invisible-covid-workforce-direct-care-workers-those-disabilities>

needing your independence from family members who show ill will toward you.

– **Anonymous, Lawtey, FL**

My son was born with Down Syndrome, and as he grows up he, just like any other human being, deserves to be welcomed into activities without limits and assumptions regarding his capacity...the government isn't responsible for everything, but policy (and taxpayer funding) goes a long way to raise awareness and bring conscious contact to the masses who may otherwise never bother to understand, embrace, and participate in different people's paths. When we all advance, we ALL prosper

– **Nura, Atlanta, GA**

My son was severely disabled and needed total care. He required in home nursing care to live a good and safe life at home with his family. He needed around the clock care. Nursing care in our home enabled our family to survive

and meet his extensive needs. It helped our son to be a part of our community and it is more cost effective for the state. State institutions cost about four times more than supporting community care.

– Anonymous, Boone, IA

Visiting nurses was ordered by my docs after two different hospitalizations. It was really nice being able to have them come to the house since I'm in a wheelchair.

– Anonymous, Lawrence, KS

I am the mother of a mentally disabled adult son. We rely on programs that provide services that give us some relief. Our son has behavior disorders as well, so we rely on volunteers who take our son out once or twice a week for a few hours at a time.

– Anne, Villa Hills, KY

My son, who is multi-handicapped, waited 11 years for Maine state funding to reside in a group home/or to choose shared living. Finally, I went to a due process hearing which was conducted badly and lasted about a year. Parents should not have to go through this!

– Jo, Surry, ME

I am a retired nurse taking care of my disabled adult daughter. She is diabetic on the autism spectrum and has schizoaffective disorder. There are weeks where I have five or more appointments I try to stack them up. It's very hard. It is a 24 hour a day job.

– Marie, Clinton Township, MI

Home and Community Based Services is necessary for our medically fragile five-year-old son to stay home with his family who he adores. Miles is the first child of three and a very proud big brother. Following a stroke at five weeks of age, Miles suffered anoxic brain injury resulting in spastic quad CP, trach and G-Tube dependence.

Despite limitations over his body, Miles is very aware and loves his family and new experiences and places. Nursing care is difficult to obtain due to the low pay, making it a job of last resort. The lack of resources adds stress to the family unit.

– Mary, Raleigh, NC

My son has received in-home nursing care for the last three years through a CAP-C terminal illness waiver. He has severe obstructive sleep apnea, asthma, and a floppy airway, along with other medical concerns. Before we were granted

nursing care and Medicaid, it was very dangerous for Javi to attend preschool, as he was still small enough to nap during the school day and required oxygen whenever he was asleep. Every time he started to fall asleep at school, I would have to leave work and rush to pick him up or apply his oxygen and sit with him while he slept. Once Javi had a nurse to go to school with him, they were able to get him on oxygen should he fall asleep, monitor his vitals, and help him get through the school day safely.

Now that Javi no longer naps and is not in school in-person due to COVID, his in-home nurse provides support for him when I'm not able to be with him. Javi doesn't need oxygen during the day, but he does need two daily rounds of Chest PT, daily vitals checks, and frequent nebulizer treatments. I'm so grateful for Javi's wonderful nurses and the waiver that provides them. They have allowed me to continue to work and contribute to my community while ensuring my medically fragile son is safe, healthy, and able to learn and thrive with his peers.

– Martha, Greensboro, NC

As a double amputee with other health issues, I could not live alone or at the least without some form of help. If something should happen to my husband I would not be able to do the things I need to survive. Aside from short term Home Nurse Care I have been lucky so far to not need this, but I will in the future.

– Anonymous, Salem, NY

I grew up as a member of a family who relied on and greatly appreciated Home and Community Based Services (HCBS). My youngest sibling had spinal bifida and several medical needs that required 24-hour nursing care. Often, my mom was left without any nursing care in the home and became an "unregistered" nurse as the primary carer for my youngest brother, resulting in sleep deprivation and reliance on a personal network of unpaid caregivers.

Having HBCS was so important to our family so we could stay together as a family and not have to travel to the hospital to spend time with my brother. Being home also made my baby brother happiest as he was surrounded by the sights, smells, and sounds of family, rather than the noise, cold, and smells of hospital sanitizers and people who did not know and love him as we did. HCBS is crucial.

– Rachel, Rochester, NY

During an accident in 2006 my teenage brother sustained a traumatic brain injury that left him needing 24/7 care for the next 14 years until he passed away. As difficult as the accident was, finding and paying for quality care for him was the most difficult part of everything. As he was still a kid, putting him in a long term care facility would not have

“I know parents that can’t further their careers for fear of risking eligibility for support services and others who have had to abandon lucrative careers to care for children that didn’t qualify for services...”

– Barbara, Sevierville, TN

allowed him to have time with his peers and would have removed him from his family long before anyone should be taken from them. When he became an adult we made the difficult decision to find a facility for him, however finding quality care in a facility that had space available was nearly impossible. Because my brother was nonverbal, having him in a facility without someone there to advocate for him would have been detrimental to his care.

The emotional and financial burden placed on my family due to lack of systems in place for these types of circumstances was tremendous. While I understand that there are limited finances in the world and it’s hard to please everyone, I also know that until we start taking care of people in our country we cannot truly be great.

Keeping families together and giving people adequate supports for their medical needs is necessary. Providing in-home care is difficult, however it is far better than taking people away from their families. Although my brother passed away a year ago, there are still many families who deal with these circumstances.

– Nichole, Pittsburgh, PA

For over 30 years I have advocated for children with disabilities, getting to know families on a personal level at some of the most difficult times of their lives. Many of them need Home and Community Based Services in order to continue to care for their children. Some have been able to navigate the brutal maze of applications, denials and waiting times to finally receive services.

I know parents that can’t further their careers for fear of risking eligibility for support services and others who have had to abandon lucrative careers to care for children that

didn’t qualify for services, only to be worn down from the constant stress and physical strain. These are families that have tried to do everything right, raise a family, work at good jobs and pay their bills, never having enough help. They love their children and they need better access to services. Plain and simple – it is a need.

– Barbara, Sevierville, TN

A few years ago, my sister took my adult niece Jennifer home from a hospital. She was told to set up hospice and that Jennifer would only live 2 more weeks. Jennifer’s mother simply couldn’t stand the thought that Jennifer would die even without the sustenance of water. She asked the hospital in their rural town to accept Jennifer and they agreed. Within days, Jennifer emerged from her coma, blinking at first and eventually moving her hands. With the help of home care and therapeutic services, Jennifer, who’d been dismissed for dead, lived another 15 years. I have reason to believe we should never give up on life.

– Linda, San Antonio, TX

I have a great job helping people with disabilities and medical complexity be comfortable and happy. I’m a home nurse. Home and Community Based Services (HCBS) is valuable and precious. We keep Americans safe and happy at home and in the community. Home nurses like me like retirement, paid vacations, paid sick leave and wage increases. We’ve weathered the pandemic delivering medically intensive care in the home and community.

Children that receive the TEFRA waiver through Medicaid receive great services. It’s also called the Katie Becket waiver and especially serves children with disabilities and complex conditions. This waiver benefits them with well rounded services. It is affordable for people who are chronically technology dependent, such as permanently needing a breathing tube and machine to survive, to live at home. The math works out in favor of HCBS. HCBS is practical.

– Kristin, Seattle, WA

Our daughter is a 27-year-old woman with Down syndrome. She still lives at home and has required much help from us parents. She has Medicaid support for supportive home care, visits with a mentor and an art workshop once a week, some respite care for us parents and some transportation. We will need an expansion of Home and Community Based Services when she moves to a supported apartment or adult family home. We have had to work extra to support her for some activities, transportation, medical care not covered by Medicare and have not been able to find appropriate therapy for her mental health condition.

– Anonymous, West Bend, WI

PATHWAY TO CITIZENSHIP FOR DREAMERS AND ALL ESSENTIAL WORKERS

My son's father was born in Mexico. His parents came here for a better life when he was five. I have never seen more hard-working people than my son's grandma and grandpa. My son is a college student with an incredible work ethic who cares deeply about the well-being of those who are disadvantaged. My son and his generation are looking for holistic solutions, not fear-based hurtful reactions to challenging problems.

– **Nina, Tuscon, AZ**

I am a retired attorney who serves on the Board of a social justice advocacy agency, which includes two DREAMers as Board members. Both are college graduates, who were born in Mexico and brought to this country at a young age. Both have persevered to complete their education, despite the difficulty in getting scholarships due to their immigration status. Both of them are actively working to better the lives of immigrants in the community. They are an asset to the community, which is benefiting from their contributions and talents.

– **Anne, Morgan Hill, CA**

Had my immigrant grandparents not been able to come and help build our country, USA, the co-inventor of the portable kidney machine would not have been born; the composer of many symphonies would not have been born; the CEO of a major chemical factory would not have been born; the piano teacher would not have been born nor taught world class pianists. The list goes on and on just from my family of immigrants. Who found freedom here, and served our country in the military with honor and distinction! Diversity has enriched our country and should continue.

– **Lorraine, Denver, CO**

I came to the USA from Canada. I have benefited by meeting, working, and socializing with folk from other countries, faith traditions. My life is richer and I have learned much. Each person adds to the richness of America. The US is a better place because of this diversity.

– **Barbara, Stratford, CT**

I was a five-year-old Cuban exile in 1962. I came with my parents and brother. I know first hand of the sacrifice that

parents make for their children to come to this land of the “free and the brave”, to this great country of immigrants, I support You. You who were brought here and educated here and are living an American life with respect for all this country has given you, I support You. You who want to pursue higher education and become the professionals of tomorrow and give back to society, I support You. You who dream the American dream and all you know is life here, I support You, now and always!

– **Josie, Miami, FL**

I'm a critical care nurse, in the frontline, and yes, I am also an immigrant, part of this community, fighting this devastating pandemic.

– **Anonymous, GA**

**5.2 MILLION
UNDOCUMENTED IMMIGRANTS,
INCLUDING 1 MILLION
DREAMERS, WORK AS
ESSENTIAL WORKERS IN THE U.S.**

SOURCE: <https://www.commonwealthfund.org/blog/2020/invisible-covid-workforce-direct-care-workers-those-disabilities>



I teach college students and the DACA students are the hardest workers in my class. They have so much talent to contribute to our country if they were only given a chance. They have also supported our economy with their financial contributions as they pay large fees for the DACA process.

– Angelica, Chicago, IL

I serve families who have members who are DREAMers. These young people want to be detectives, teachers, social workers, medical personnel and so forth. Until DACA passed, they had no way to afford to continue their education beyond high school. One young woman is now in the criminal justice program. She wants some day to be a lawyer but realizes that she needs a paycheck over some time in order to be able to go for that dream.

I know others who are going to become teachers. They now can attend our community college for 2 yrs. and then do programs that our college has set up with the major universities so they can finish their BA here off site.

– Sr Thome, Garden City, KS

There are several kids in our town who were brought here to provide cheap labor in tobacco fields and lumber yards. The workers were paid less than minimum wage, legally, through some special program. After the program ended, or the season was over, or the timber ran out, the workers stayed. These young men and women have been here most of their lives. They are as much Kentuckians as any of us.

– Fannie, Clearfield, KY

Both of my parents got COVID-19. My father died, but my mother survived thanks to the Salvadorian immigrant who agreed to stay by her side 24/7. She did not once complain, and was the most loving supporting person one could possibly imagine.

– Liana, MA

I am a recently retired ESOL (ESL) teacher. I taught in New York City, New Jersey and Ohio. During my last 12 years of teaching in Prince George's County, Maryland the vast majority of my students were new arrivals from Central America. Most made the trip in perilous fashion and were detained for a period of time.

The anti-immigrant forces would have you think that most are just trouble and a burden to us. Far from it. They want to work. They want to learn English. They want to make a new life here far from the crime, gangs and poverty of their homelands.

I am the child and grandchild of immigrants from Poland, Germany and Hungary. My family escaped poverty and pogroms. Many died in the Holocaust. I deeply support the

new immigrant children as I have a personal understanding of their struggle.

– Howard, Oxon Hill, MD

My father was an undocumented immigrant. After nearly fifty years in this country, during which he served his adopted country in World War II, he was finally allowed to vote. Today his five children and 24 grandchildren all vote.

– James, Skandia, MI

Our family includes members born in Korea, Costa Rica, Israel, Guatemala & Ethiopia. They enrich all of our lives as well as those people around them. Just as my ancestors who were from Sweden, Germany, Ireland & England. All of my family members include: teachers, pastor, counselors, artists, machinists, law enforcement, healthcare, businesses, agriculture, and managers. The diversity of our country is what had made us Strong!

– Jodi, Albert Lea, MN

I am the child of an immigrant mother who came from Japan in the 1950s, a former enemy nation turned ally. She earned her college degree here, raised seven children ran her own business, taught at community college, and volunteered in her community and church.

She could not do these things as easily in Japan, where women's lives were more restricted and the economy and community were devastated by a wartime militaristic government. She lived the American dream of opportunity and second chances, and her children live out her legacy of service and faith to this day. This is what today's DREAMers represent, and their hard work and belief in American prosperity impacts all Americans, whether born here or abroad.

– Marilyn, Bozeman, MT

My family roots are immigrants - tailors, farmers, teachers - who all arrived on this shore not speaking English, without money, but hopeful and willing to work hard. We have built businesses, gone to college, graduate school, teachers colleges, dental school and more. America depends on DREAMers, economically and culturally.

– Karelene, Center Harbor, NH

As a mother of an eleven-year-old, I'm always looking for ways for him to spend his summer. One program that he not only loves, but it is also rich in diversity is the Circo Latino Circus Camp. This camp includes teachers from Central and South America. These teachers are masters of their craft and share their craft with the students. The result of a

“One of my biggest fears is being separated from my two young sons. I would like to someday become a citizen so that I do not live in fear of being deported and our children are left orphaned.”

– Trinidad, WA

month-long effort is an original circus performance. My son loves this camp. He loves the people, the practice and the performance. This camp with the amazing teaching staff and students helps my son appreciate the world he lives in with greater understanding and joy. He benefits by seeing people with differences compared to his experience exist and are part of the world we live in. It teaches him that we, as Americans and Latinos, create this amazing country. Diversity makes America an amazing country.

– Marisol, Albuquerque, NM

I have been working for 14 years as a farmworker in. I am a mother of five and feel like I'm continuously living in the shadows. For me it would be very important for an immigration form so that I can go visit my parents and be able to work here legally and not be in the shadows with fear of being separated from our families.

Story from the United Farm Workers of America.

– Rafaela, NY

My mom is an immigrant and works as a pediatrician – on the front lines. The US government should protect all people working in health care and on the frontlines.

– Monica, OR

In my job as a consulting psychologist in early childhood, I have worked with immigrant families. These families

deserve the opportunity to stay together. The families I have worked with are hard-working and striving to make a positive life in the USA.

– Barbara, Philadelphia, PA

I work as an occupational therapist in a public school district that is made of immigrants who have come to America seeking a better. Many of these children have been separated from family members. One day while testing one of the children, shortly after the election, the child broke down crying during the testing and voiced his concerns over whether he would ever see his father again and what was to become of his family? My heart broke and I had to keep from crying. I told the little boy that many of us are doing all we can to make sure he is safe. We are all stronger together... I am for building bridges instead of walls!

– Martha, Friendswood, TX

I am a librarian and ESL program coordinator. Everyday I meet immigrant families. They work hard to learn English, participate in our summer reading programs, volunteer in the library, and come to our programs. Immigrants bring so much to our communities, so much vitality and intelligence and heart. Many immigrants worked so hard to come here, and suffered so much before they arrived. For many, coming here is the result of a long held dream. Now to find that they are in danger here too has been so disheartening and frightening. In shutting out immigrants, America goes against all that we stand for and all that makes us great.

– Kylie, Centerville, VA

I have been working for four years in Washington as a farmworker. Even during the pandemic I have continued to pick cherries, pears, apples, and peaches. One of my biggest fears is being separated from my two young sons. I would like to someday become a citizen so that I do not live in fear of being deported and our children are left orphaned.

Story from the United Farm Workers of America.

– Trinidad, WA

As a scientist, I work with people all over the world. We are addressing problems, improving safety, and discovering new technologies. Having a country open to all people means that we are open to all ideas so we can put the best people to work on these issues.

– Amy, Bridgeport, WV

**For more information on these stories please contact
Namatie at namatie@momsrising.org**

MomsRising.org is an online and on-the-ground grassroots organization of more than a million people who are working to achieve economic security for all families in the United States.

MomsRising is working for paid family leave, flexible work options, affordable childcare, and for an end to the wage and hiring discrimination which penalizes so many others. MomsRising also advocates for better childhood nutrition, health care for all, toxic-free environments, and breastfeeding rights so that all children can have a healthy start.

Established in 2006, MomsRising and its members are organizing and speaking out to improve public policy and to change the national dialogue on issues that are critically important to America's families. In 2013, Forbes.com named MomsRising's web site as one of the Top 100 Websites For Women for the fourth year in a row and Working Mother magazine included MomsRising on its "Best of the Net" list.