Throughout 2021-2022, United Academics and members from the CSWS Caregiver Campaign continued their collaborative efforts to push the University of Oregon administration to address issues of equity and inclusion for UO faculty struggling to balance the demands of caregiving while fulfilling their employment expectations. On April 27, we hosted a joint zoom teach-in with 43 attendees. The contents of this report lay out the scope of the issues but also provide hands-on practical strategies to address challenges that have existed long before the Covid-19 pandemic.

There is a video recording of the Teach-In available on the CSWS website, as well as the [UA caucus webpage](https://www.uauoregon.org). If you have any questions please feel free to contact [info@uauoregon.org](mailto:info@uauoregon.org), with subject heading caregiving…
April 27, 2022 • 12-2 pm via Zoom

Teach-In Panelists
Maria Fernanda Escallón, Anthropology
Lynn Fujiwara, Indigenous, Race & Ethnic Studies
Melissa Graboyes, History
Deborah Green, Religious Studies
Lynn Stephen, Anthropology

Welcome and Goals by Lynn Fujiwara

GOALS FOR TODAY
- Changing the Narrative
- Community Building
- Gathering Information
- Sharing Examples of Strategies That Have Worked

Maria’s Word on Caregiving
Maria Escallón: A Statement on Caregiving

When we think about carework and caregiving, many of us automatically think of nurses, doctors, domestic workers, nannies, nursing home staff, and others who provide care for children, individuals with disabilities, aging adults, or those with medical needs. But for many of us, caregiving is a daily part of our lives, part of our unpaid labor, that we ordinarily take on as members of our families, our neighborhoods, schools, workplaces, tribes, & churches. Some, have chosen their caregiving roles, others, have found themselves caring for someone, or receiving care in different moments of their lives.

Many of us care for our children, others for their aging parents, and others for family and loved ones with disabilities or who need medical care. Beyond our immediate circles, many of us care for extensive, non-local networks of friends and family, and some, even care for strangers living hundreds of miles away.

Caregiving may look very different for each of us, and involve anything like providing financial resources in times of need, problem-solving, sending remittances, giving emotional support, transport, inter-generational advice, or access to technology, just to give a few examples.

There are more of us who are caregivers than what we imagine. In the US alone there are over 43 million unpaid family caregivers caring for someone at home. According to recent estimates, one in three people in the US are in active caregiving relationships.

Today, we invite you to think of caregivers and caregiving expansively. In the context of our academic workplace, remember that caregiving is not just about parents or families in any traditional sense. By caregivers we mean anyone who regularly, and often without financial compensation, looks after a child, a dependent, a sick, elderly, or any individual experiencing disability.

Though caregiving has important gender implications, it is not solely a women’s issue. Though carework inequities have been highlighted by the pandemic, they are not a new, nor a temporary crisis. We all need and depend on care, for us, for our communities, for our workplace. Without a single exception, we all have been cared for by someone, and most probably, will be called on to care for somebody at some point in our lives.

Today, we invite you to change our narrative about care, as something that we choose, that it’s our individual responsibility, that happens inside our home, and that we need to
deal with alone. As the pandemic changed our lives and zoom meetings made our messy living rooms, our wondering cats, our partners in pajamas, and our screaming children visible to all, here we want to make caregivers and carework visible as well, reflecting on our personal challenges and the institutional responsibilities of our workplace. We are calling on you to recognize your caregiving roles, and if you are not there yet, to learn how you can be a caregiver ally.

We invite you to reflect on your current caregiving challenges, but please don’t stop there. We want to strategize solutions with you recognizing our differences and our different goals and needs. We invite you to imagine, to imagine with us what our work could look like if rather than a private burden or a public liability, caregiving was seen as an opportunity to build a more inclusive and diverse workplace. Like me, many of you moved away from your families and friends to work here at UO. Let’s use this time together to think, to talk, and to plan, and most importantly, to realize that here, with all of us present in this small virtual room, we are creating our new caregiving community.

A Brief and Schematic Timeline of Caregiver Efforts at the University of Oregon
Presented by Lynn Fujiwara and Lynn Stephen

### CAREGIVING EFFORTS AT THE UNIVERSITY OF OREGON

<table>
<thead>
<tr>
<th>Event</th>
<th>Mid 1990s</th>
<th>2010</th>
<th>2019</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Family Medical Leave Act and Oregon Family Leave Act.</strong></td>
<td>Unpaid leave with job protection.</td>
<td>First University Faculty Parental Leave Policy Implemented. Established through faculty led committee. Allowing faculty to take paid leave with the birth or adoption of a child.</td>
<td>The pandemic and shutdown impose an extreme toll on folks balancing work and caregiving. The structures of inequality are made visible by the pandemic for those most vulnerable and lesser resourced.</td>
</tr>
<tr>
<td><strong>Mid 1990s</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>University allows faculty to stop their tenure clocks due to FMLA leaves. No university parental leave policy.</td>
<td></td>
<td>Parental Leave policy and the use of sick leave to care for family members, or partners family members ratified in the UA CBA.</td>
<td></td>
</tr>
</tbody>
</table>
CAREGIVING EFFORTS AT THE UNIVERSITY OF OREGON
Efforts During the Covid-19 Pandemic

- **Tenure Clock Extension**
  - Spring 2020
  - Provost Office establishes Corona Virus Tenure Clock Extension

- **CSWS and UA Persistent Efforts**
  - August 2020
  - Op-Ed articles, Meetings with Admin, UA Representatives Meet with Admin, UA posts surveys and seeks testimonials

- **Caregiver Campaign**
  - Spring-Summer 2020
  - Caregiver Campaign continues to seek a university covid policy covering demands and supports for caregivers struggling with closed care facilities, schools, and childcare centers.

- **Covid Relief**
  - Summer 2020
  - HR establishes relief fund to assist employees who have experienced reasonable and necessary personal, family, and living expenses as a result of Covid-19 not covered by insurance.

- **3-Stage Covid Policy Guidelines**
  - 2020-2021
  - Caregiver Campaign announces Covid hardship course releases for untenured faculty who experienced hardship and stalled research, many of whom were caregivers (though not all).

CAREGIVING EFFORTS AT THE UNIVERSITY OF OREGON
Current Efforts and Keeping It Going

- **Caregiver Campaign and UA hold meetings with admin given the back to in-person mandate**
  - Summer 2021
  - Caregiver Campaign and UA hold meetings with admin given the back to in-person mandate

- **The UA Bargaining Team wrote and presented a Caregiving Article presented to the administration on March 17, 2022**
  - Fall 2021
  - UA Caregivers Article

- **What can we imagine here?**
  - April 27, 2022
  - What can we imagine here?

- **What is next?**
  - TBD

- **CSWS and UA Persistent Efforts**
  - CSWS and UA Persistent Efforts
  - Requesting Remote Flexibility
  - Closed childcare centers
  - Support for caregivers with unvaccinated children
  - Concern over reviews and research productivity

- **Today’s Teach In**
  - Today’s Teach In
  - Continuing the movement to build and transform equity for all University employees juggling caregiving.
Break Out Rooms Part I: Caregiving Challenges and Supports

In groups of 4-5 participants discussed and recorded their group’s discussion on Teach-In Google slides

In your groups please respond to the following two questions and put your responses on your group’s slide

1) What is one major struggle you experienced regarding caregiving? Or, what is something you saw a caretaking colleague or student struggle with?

2) Can you share any examples of a positive or supportive experience around caregiving at the university. This could be something you experienced personally, or saw, or heard about from others at the UO OR other universities.

Major Summation of Themes from Break-Out Rooms Part 1

**Struggles and Challenges**

**Theme 1 Structural Obstacles**

- Can’t take advantage of in-residence fellowships that require relocation.
- Cannot explain caregiving challenges in P&T or Review documents.
- Elder care/care for parents with chronic health conditions not considered outside of FMLA.
- Sandwich generation, juggling childcare and eldercare.
- Closed nursing facilities.
- Lack of adequate available childcare and after school care (most repeated)
- Existing available caregiver list is inadequate.
- No backup childcare during closures, which can be for extensive periods of time.
- Existing quality child care is not affordable for many faculty salaries (NTTF and TTF).
- Additional expenses for substitute care when dependents are sick or other emergencies.
- Additional expense for childcare when child care centers close (paying twice).
- Issue of safety for families of color and families with kids with disabilities, need
quality childcare with concrete understanding of difference.
- Lack of childcare options for children with disabilities.
- Lack of university flexibility:
  - Forcing faculty to teach in-person with no mask mandate with newborns and unvaccinated children in the household.
- Poor mental health coverage by Providence insurance.
- Faculty juggling too many things all at once with little on-going flexibility.
- Changes in living arrangements: faculty caring for parents, extended family members in home.

**Theme 2 Cultural**
- Taboo to talk about caregiving responsibilities and or conflicts regarding department responsibilities.
- Lack of openness to talk about caregiving for health, mental health, addiction and recovery, the lingering health and mental health impacts of childbirth, etc... within departments and colleges.
- Lack of visibility for caregivers - seen as an individual private problem.
- Need to create cultures of respect around caregiving (e.g. ending meetings on time, expecting someone else in the household can cover caregiving, scheduling evening events, etc..)
- Concerns about entrenched silences in units. Need to expand notions of community and allyship. People without caregiving responsibilities often seem put off by discussions of caregiving.
- So much variation across units in terms of understanding and recognition of caregiving challenges.

**Examples of Positive or Supportive Experiences**
- Parent communities pulling together to help each other out. Parenting circles and networks.
- Started a “Teams-Channel” to create a list of students, resources, sharing findings and a list of caregivers (but took a lot of time).
- During the pandemic there was broader understanding for scheduling changes and flexibility in some departments.
- Moved visiting lectures between 9-5 so didn’t have to pay for additional childcare.
- More senior folks in some departments took the lead on recognizing the structural obstacles for largely junior faculty juggling caregiving responsibilities and still maintaining work productivity.
- Saw moments of awareness during pandemic, and solidarity with caregivers.
- Triage mindset, establishing new priorities based on what is humanly feasible.
- Seeing other institutions implement employee involved decision making over the working conditions that so deeply impacted their own lives.

Share Out: Information the Organizers Compiled for Strategies and Interventions

Must Address The Growing Complexity of Care: Lynn Fujiwara

CAREGIVING: A COMMUNITY MODEL AND INSTITUTIONAL GAPS

The University needs to catch up to community models of care, away from heteronormative nuclear family models that do not reflect the complex conditions of their employee’s lives.

Elder care, childcare, family members with disabilities, chronic illness, mental illness, are all conditions that require caretaking. We don’t have a system that allows for long term caregiving.

Gaps persist for employees balancing care for people with addiction & recovery, prolonged mental health situations, different forms of disabilities (invisible disabilities).
Specific Areas that Need Addressing for Equity: Maria Escallón

**PANDEMIC-RELATED SUPPORT: TARGETING CAREGIVERS**

- **Financial support** (Grants, discretionary funds, summer stipends)
- **Additional time** (Tenure clock/review extensions, Covid medical leave, research leave, teaching releases)
- **Additional resources** (backup childcare, virtual tutoring)
- **Flexibility** (teaching schedules, adjustable workloads)
- **Research & Representation** (workforces, care caucus, surveys, childcare coalitions)

Specific Examples from Other Major Research Universities: Maria Escallón

**US-BASED UNIVERSITIES: TARGETING CAREGIVERS**

- **Lehigh University**
  - Grants & discretionary funds: support scholarship & reimburse caregiving costs

- **Harvard**
  - Research grants that cover dependent care

- **UT-Austin**
  - Research Reboot program - summer scholarship funding or paid semester leave to conduct scholarship

- **Stanford University**
  - Pandemic leave quarter; Financial help for childcare; taxable salary grant; small and large recovery research grants

- **West Virginia University**
  - Childcare emergency relief fund & virtual Tutoring

- **UMass Amherst**
  - Emergency relief fund

- **Yale**
  - Emergency backup childcare

- **UC San Diego**
  - Dependent care travel grants

- **Berkeley**
  - Subsidized back-up child/elder care backup care

- **Indiana**
  - Subsidized backup care, care caucus, gender equity task force
United Academics 2022  Proposed Caregiving Article: Debbie Green
This article was presented on April 27, 2022 during collective bargaining. To this date, UA Continues to wait for a full University Administration response.
(SOME) LEAVE OPTIONS [+ GAPS...]

- Temporary FMLA/OFLA: Up to 12 wk/yr. Taken continuously or intermittently. Subject to supervisor’s approval. Unpaid, but can use paid leave if you have it. Your sickness or that of your family. “Child”= 0-18 OR 18+ with mental or physical disability

- FMLA leave: your serious health condition; a family member’s serious health condition; care for a child after birth, adoption, foster placement. NOT for non-serious medical conditions. Up to 12 wks/yr. Unpaid, but can use paid leave if you have it.

- Parental leave policies at the UO differ by represented faculty, other faculty, OAs: https://hr.uoregon.edu/benefits/employee-leaves/paid-represented-faculty/parental-leave-faq-represented

- Flexible work arrangements policy at UO (for OA and Classified staff): https://policies.uoregon.edu/vol-3-human-resources/ch-4-workplace/flexible-work-arrangements

- Covid-specific leaves: UO Emergency Sick Leave

Strategies and Ideas Based on Experience: Lynn Stephen

IDEAS THAT CAN WORK IN YOUR UNIT

- Flexible scheduling of courses, being able to double up or move courses to a different quarter.

- Establish a fund for caregiving needs at departmental level among colleagues--this is the way that holiday bonuses are paid at UO--That can create a small fund of $2,000-$3,000 that caregivers can tap into.

- Ask senior/tenures faculty to teach an extra course to relieve junior faculty.

- Create a care ally plan with concrete commitments at the unit level with support of chair and whatever the executive or other decision-making committees are.
Strategies and Ideas Based on Experience Cont..

**MORE IDEAS THAT CAN WORK IN YOUR UNIT**

- Establish a care committee that is part of unit departmental committee structure. Make sure care comm. has a voice at faculty meetings, in executive committee meetings and reports regularly in faculty meetings. It can be place for people to come with concerns, have them be heard and to brainstorm solutions.

- Conduct a unit level inventory of care-taking responsibilities by hours per week for faculty and staff to provide a picture of how much time overall is being spent on carework.

---

**CHANGING UNIVERSITY CULTURE ABOUT CAREWORK**

Make carework visible.

University-wide care fund employees can access when necessary to help pay for carework.

Inventories and flexibility in University service assignments

Increase practice of interim participation roles for when people have to step back.
Break Out Rooms Part 2: Where Do We Go From Here?
In groups of 4-5 participants discussed and recorded their group’s discussion on Teach-In Google slides

In your groups please discuss the following question:

1. Name two concrete actions you can take - What are things that you could do to support these issues moving forward… (as a faculty, ally, dept head)- write on slides OR name actions that could be taken by organizations (such as UA, CSWS, others) on campus (or the university administration as a whole) that would support these issues, improve conditions on campus for caretakers.

2. Imagining the best case scenario around caregiving at the UO, what would it look like, feel like? (This isn’t practical question of what could happen now, but what the ultimate goal would be). Think aspirationally.
Major Themes from Discussion Groups

Concrete Actions
- Construct a manifesto, value statement about care as a human right. University wide, also at local level. People we care for have a right to our care, and we have a right to give care.
- Make caregiving more visible, challenge the silence and invisibility.
- Create care committees in units. Recognizing caregiving when determining workload.
- More flexibility and recognition of caregiving responsibilities in unit scheduling.
- Emphasize the importance of offering amenities of care so people stay and don’t move, as is happening in businesses. Make economic sense.
- Put considerations of carework into departmental documents about tenure and promotion. Carework statement. Make this a coordinated effort by many departments to put this in their tenure and promotion guidelines.
- Conduct a caregiving inventory for faculty run through DEI.
- Develop an emergency action plan - people in depts are cross trained to do the work. Cross training so when there is an emergency things are not in one person’s place.
- Institutionalizing the discussion around caregiving as a necessary consideration.
- Unit heads work to promote a culture of support among faculty
- More leadership positions by people who are caretakers, who are informed about the issues and policies.
- Bringing caregiver issues to the state level, providing testimony and data.
- Keep expanding on how we understand care, away from a zero-sum framework that creates divisions about who gets what.
- Recognizing that equity for caregivers is not preferential treatment, equity for caregivers begins with the understanding that equity does not exist for caregivers in academia.
- Contribute resources recognizing the differences between NTTF, protem, and TTF, etc… positions and salaries.

Aspirational Goals
- Allow people to share sick days, research funds, other funds with others to support care needs and work through time. Trusting faculty to make decisions about how to offer their sick days, resources, and to support other colleagues to be successful.
- Accepting many paths to success, supporting people who make decisions not to move around, and look at how carework shapes people’s lives and career
- Childcare centers in our buildings, napping pods.
- Diversity recognized in all aspects of caregiving inequities.
- Establishing a radical ethic of care, where everyone in the UO community (family members) are recognized and considered in policy decisions.
- Inclusion of NTTF in all aspects of carework considerations.
- Solidarity: where all recognize the challenges caregivers face, even among UA membership, while recognizing labor and working conditions, some have been less understanding about how work and labor conditions are intricately tied to caregiving challenges.
- Need a naturalized life-cycle approach - not deficit framing. Caring for our families as enriching, not just a liability or distraction to our work.
- Professional caregivers provided living wages.
- Leadership with experience in caregiving.
- Not having to feel like either family or career has to be sacrificed.
- Having an identity as a caregiver valued.
- The existence of adequate space and affordability for childcare for all faculty
- UO subsidizes cost to keep salaries and work abilities equal.
- Have enough faculty and staff in each unit so we are not overtaxed.
- Expand caregiving options on campus to make them accessible.
- University encourages flexible problem solving to allow caregivers full participation in the profession.

Please Stay Involved!
On May 27, 2022 United Academics hosted a Caregiver Rally and Celebration. Our Special Guest was Caesar the No Drama Lama. This was a collaboration with the undergraduate group UO-YDSA (Young Democratic Socialists of America), and the GTFF.

The following is a statement read by Rajeev Ravisaka

Speech for Caregivers Rally (May 27, 2022)
Rajeev Ravisankar
Ph.D. student in media studies

My name is Rajeev, and I was part of leadership for the Graduate Teaching Fellows Federation, AFT Local 3544, which represents 1,300 grad employees at the University of Oregon.
I'm currently part of the Lane County Labor Chapter, which brings together local unions representing construction workers and bakers to K-12 and higher ed workers

I'm so glad to be part of this event, and thank you to Kendall, United Academics, and others for your work in organizing it.

The attention for caregiving with this event and in contract negotiations of our cousins in the United Academics faculty union is so important in highlighting the range of experiences and challenges for working-class people in dealing with care work.

Many working people have additional shifts of care work waiting for them at home and struggle to cover these responsibilities. The collapsing of home and work life during the pandemic added enormous pressures to this situation. Access to care work services can be limited or out of reach for many due to cost and availability.

Workers employed in the care work industry receive low pay and face dangerous working conditions as we've seen locally at the Rawlin Memory Care facility, where the company OneLife paid its workers poverty wages, exposed workers to severe health risks, and understaffed the facility, despite receiving Covid relief money.

Crucially, this renewed focus on care work makes it abundantly clear how much employers and institutions rely on and benefit from all of us taking care of caregiving. The capitalist economy has been built around the accumulation of care work—the unpaid labor of social reproduction.

Conveniently for major institutions and profit-making enterprise, the responsibility to socially reproduce workers for the next day has fallen on individuals and families in the privatized realm of the home, a responsibility and burden that has largely been borne by women.

In the absence of public support infrastructure, care work often relies heavily on familial or friendship networks, which have come under strain in a society where we are atomized and separated from one another.

Unpaid work of care is assumed and treated as natural... It's one of those things where we say, “There's nothing to see here.” Often, it's not even considered real work, but rather a labor of love.
The notion of a labor of love from home has been transferred into workplace settings as an ideological ploy to get you to think your wage labor relationship doesn't actually involve work and is just something that you should love to do.

This is why it's so important for the labor movement and social movements in general to engage with the whole worker—the whole person situated in a broader community who requires a range of needs to be met to lead a fulfilling life.

This understanding can inform the ways we seek to leverage our collective power and to extend the bargaining table through an approach to winning material gains that embraces the emotional, social, intellectual, and ecological.

We can push employers like the University of Oregon and powerful entities to move beyond the hollow language of resilience and individualized coping strategies and to actually provide institutional support and to implement structural changes that can make a meaningful difference in our lives.

As we strive to move from individualized, privatized responsibility to collective action and common cause, let’s remember that our struggle is not just for the bare minimum existence that allows us to get from one day to the next but for the possibility of living vibrant and dignified lives. Ours is a struggle for bread and roses.

I’ll close with an excerpt from the poem “Bread and Roses” by James Oppenheim:

“Small art and love and beauty
Their drudging spirits knew
Yes, it is bread we fight for
But we fight for roses too

Our lives shall not be sweated
From birth until life closes
Hearts starve as well as bodies
Bread and roses, bread and roses”