

Nursing Home Workers Striking For Self-Sufficiency

Union Wants Living Wage; State Says Money's Not There

By **ANDREW JULIEN**

Courant Staff Writer

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The union's message is that the nursing home workers' strike is about staffing, about patients, about improving the quality of care.

But like most strikes, it is also about wages, and how much people are going to get paid to do what they do.

Take Maribel Rodriguez, for example, a certified nurse's aide who is planning to walk off her job today at St. Andrew Healthcare Center in Waterbury, joining more than 4,500 workers at 40 homes. Rodriguez makes \$13.42 an hour to change, feed, dress and bathe the elderly and infirm who live on her wing.

Whether that's not enough, just enough, or too much money depends largely on your point of view. Rodriguez's hourly rate is about double the state minimum wage, and \$3 an hour above the average for nursing homes in the Northeast.

It's also \$2 an hour less than a starting nurse's aide at the state-run Veterans Home and Hospital in Rocky Hill makes, and \$3 less than what the state Office of Policy and Management says Rodriguez needs to be self-sufficient.

For Rodriguez, it means she has enough money for rent, food and to pay her bills, although not always exactly as quickly as she'd like. Since workers at her nursing home joined the union five years ago, Rodriguez has had medical insurance she can afford.

But Rodriguez said keeping her family going nonetheless remains a weekly struggle. New clothes for her three children are always a challenge, braces for her 16-year-old remain a question mark and a vacation with the kids is something she still just dreams about.

Rodriguez takes in about \$520 a week - before taxes - a gross salary of about \$2,250 a month. Out of that she pays federal and state taxes, \$600 a month in rent for a three-bedroom apartment, a monthly food bill of between \$400 and \$500 ("My 16-year-old eats like a horse," she says), clothes, school lunches, gas, car insurance and all her utilities.

It goes fast, she admits.

"I still struggle every week," the 32-year-old Rodriguez said. "It's paycheck to paycheck - pay the rent, pay the phones, pay all the bills, dress your kids because they're growing so rapidly. It's tough."

Union leaders have made it clear that their aim is not simply to win a few more cents an hour for people like Maribel Rodriguez, but to fundamentally change their role in the economy from working poor to middle class.



John Woike/Hartford Courant

Maribel Rodriguez works 40 hours a week as a certified nurse's aide at St. Andrew Healthcare Center in Waterbury. Then she rushes home to take care of her three kids, ages, 9, 11 and 16. Her salary just covers the essentials for her family.

And if the current impasse in both the legislature and at the bargaining table appears particularly confounding, it can be helpful to look at the long-term goals of Rodriguez's union, New England Health Care Employees Union, District 1199.

If a generation of immigrants could walk into the factories of industrial America with no more than a high school diploma and walk out solid members of the middle class, union leaders say that the people who care for the ill and the elderly have every right to expect the same.

"Do we want to have a society in which there's a permanent underclass that does things nobody else wants to do?" asked Deborah Chernoff, a District 1199 spokeswoman.

Many of District 1199's members are single mothers like Rodriguez, Chernoff said, and they often work a second or even a third job to boost their incomes.

HOURLY WAGES	
Compare and Contrast	
Federal Minimum Wage	\$5.15
Connecticut Minimum Wage	\$6.40
Certified nurse's wage, U.S. average	\$9.42
Certified nurse's wage, Northeast average	\$10.10
Maribel Rodriguez, CNA, St. Andrew's nursing home	\$13.42
Certified Nurse's Aid, Rocky Hill Veteran's Hospital (starting)	\$15.58
Office of Policy and Management Self-Sufficiency Wage (single mother, three children, Waterbury area)	\$16.70
Sources: State Office of Policy and Management, Watson, Wyatt Data Services, New England Health Care Employees Union, District 1199.	

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If union members cannot get what they think they deserve through negotiations, they will use the pressure of walkouts. As of Wednesday, 1,600 workers at 16 homes were already on strike. State public health and nursing home officials reported no problems Wednesday.

"We want people to be able to give their children opportunities, to not have to make every month a race to see if this month we're going to have enough money to pay the bills," Chernoff said. "We want the same thing everyone wants for themselves and their families."

The problem is that nursing homes are heavily funded by taxpayers through the combined state and federal Medicaid program. In Connecticut, nursing homes are one of the most expensive items in the budget, with an annual price tag of about \$1 billion a year.

So even if one agrees with the theory that nursing home workers do hard work that merits better pay, making that happen in the context of a state budget and an allegedly inflexible spending cap is an entirely more complicated matter.

State lawmakers typically make many promises, and this year is no different. They've called for improving mental health services, prescription drug coverage and education; nursing home wages don't appear to be at the top of anyone's list this year. Gov. John G. Rowland has said repeatedly and in no uncertain terms that there isn't enough money to make the union happy.

Toni Fatone, executive vice president of the Connecticut Association of Healthcare Facilities, said that while she agrees with the union's philosophical belief that nursing home workers do tough jobs that deserve good pay, she is not expecting any bonanzas from the legislature this year.

Helping nursing home workers become part of the middle class is "not a bad goal," Fatone said. "I'm just not sure if it's achievable when you're captive to government funding."

So, along with other aides, nurses, housekeepers and dietary workers, Rodriguez is expecting to be walking a picket line this morning. When she and the thousands of other workers will be back on the job is unclear.

"If somebody is to, say, walk in my shoes one day and do what I do, they'd understand," she said. "Lifting people, you're dealing with people that have psychiatric problems ... literally that are old and demented."

"Every day my back is killing me. I'm exhausted. I'm emotionally drained," she said. "When you talk about what you do in a day, I deserve more."