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CASE STUDY: “CARE” AS A POLITICAL WINNER

Meredith Loomis Quinlan

Abstract:
Through face-to-face conversations and open-ended questions designed to elicit stories and deeper interactions, the Michigan People’s Campaign (MPC) may have altered voting patterns more effectively than using traditional electoral engagement strategies. During the 2016 election, by campaigning on issues of family care, MPC helped elect a progressive state house candidate in a Downriver Detroit district that Republican presidential candidate Donald Trump carried by over 6,000 votes.

Key Words: Integrated Voter Engagement, Caring Economy, Voting Patterns, Child Care, Long-Term Care, Advocacy

BACKGROUND

In the summer of 2016, the Michigan People’s Campaign (MPC) began building a statewide campaign to advance a bold idea for a public benefit to cover the costs of child care, long-term care for elders and people living with disabilities, and paid family leave. The campaign is called Universal Family Care. MPC is a statewide coalition of individuals and institutions that uses the methodology of grassroots organizing for social change. The organization was formed in 2014.

The creation of this campaign was the result of listening to the concerns of families across the state, and the necessity to respond to trends in population aging and the high cost of quality care. Michigan is tied with only one other state for having the most counties with a median age over 50, and our population is aging at a faster rate than that of many other states (Derringer, 2015). In Michigan, the average annual cost for elder care provided by an in-home health aide is $48,048, while the average cost for care within a nursing home is $98,185
per year (Genworth, 2016). According to the Michigan League for Public Policy, the average cost of full-time infant care is over $10,000 per year in Michigan (Sorenson, 2014).

Families have few options when it comes to affordable care. Michigan has one of the lowest income thresholds in the country for accessing support for child care costs (Sorenson, 2014), and Medicaid is the only public program to provide support for long-term care for aging loved ones. Private long-term care insurance is financially out of reach for most families and, in many cases, fails to adequately address their care needs.

With 10,000 “Baby Boomers” in the US turning 65 each day (Cohn & Taylor, 2010) and close to 4 million children born each year (Center for Disease Control, 2016), it is evident that by the numbers, most Americans have experience with needing or providing care. For parents in the “sandwich generation,” who are caring for young children and their own aging parents, it often feels more like the “panini generation” — being pressed on both sides. There is an opportunity, though, to create a Caring Majority; a political, social, and cultural movement of families, caregivers, people with disabilities, and elders who want to change systems of care in our states and country. This thinking was first introduced to Michigan People’s Campaign by Caring Across Generations, a national movement dedicated to shifting how our nation values caregiving and calling for policy solutions that enable all of us to live and age with dignity and independence.

On the labor side, workers in the home care and child care fields are woefully underpaid. The careforce — 90% of whom are women, predominantly women of color — receives compensation that is far less than the value of their work, even though their tasks are grueling and their work is the work that makes all other work possible (Burnham & Theodore, 2012). “Careforce” is a word used to describe the caring workforce. In addition, family members who take on the task of caregiving are generally unpaid, untrained, and forced to reduce the hours they are able to work at their job outside the home. This creates a cycle in which family caregivers are unable to save enough for their own retirement and future
long-term care costs. Advocating to improve compensation and benefits for the careforce is a direct way to elevate the status of women, promote caring economics, and increase the value of emotional labor, referring to jobs that require more emotional management to fulfill expectations of the work, such as the care worker who is expected to be friendly and compassionate as part of their job.

While the system of caring for people was built for the last century, there is a clear opportunity for states like Michigan to take a proactive approach to care policy. It is a dynamic issue that covers the fastest-growing job sector in the country—home care, workforce development, cooperation between health care and community providers (for elder care), early education and brain development (for child care), and work support systems that allow women, who still carry the responsibility for “care” in most families, to fully participate in the economy and their jobs outside of the home.

Traditionally, child care, long-term care, and paid family leave are considered to be siloed “issue” areas, which can force these issues into competition with one another for smaller and smaller slices of the state budget. The Michigan People’s Campaign and Caring Across Generations seek to build an integrated campaign with the focus on care infrastructure as a whole, creating a family-centered approach for future legislation as well as an opportunity to build a broader coalition of stakeholders.

PILOT: 2016

When initially determining how to advance Universal Family Care in Michigan, it became clear that there would need to be a way to shift politics in our state. By that, we mean encouraging politicians from both sides of the aisle to become champions on this issue, and publicly show the widely felt stress and pain of families when it comes to limited care options for their loved ones. Michigan is currently under the governance of a Republican governor, state house of representatives, and state senate; the party’s platform has resulted in major cuts
to public programs and the safety net. The political terrain is challenging, and a
serious campaign would need to directly address the difficulty of advocating for
new investment in public programs under a conservative government.
Our analysis is that there will be some state legislators who will become allies in
this movement, based on hearing the stories of their constituents and seeing the
data on aging trends, job growth, and financial duress of families when it comes to
affording care. However, persuasion alone will not be enough for us to move
enough legislators to win bold reform, and so electoral campaigns will need to be
built to elect candidates with a proven desire to champion these issues.

MPC was given the opportunity to build an electoral campaign around issues of
“care” due to a generous investment from the Center for Community Change
Action (CCCA) and Caring Across Generations. CCCA builds the power and capacity
of low-income people, especially low-income people of color, to change their
communities and public policies for the better.

It was decided that MPC would test theories around how these issues resonate with
voters, and whether we could elect a progressive champion on these issues in a
State House swing district. From the start, we wanted a pilot that could test our
key ideas so that we could expand with an effective model in the 2018 elections.

The campaign in House District (HD) 23 was one of the closest races in the state.
The seat had been held by a Republican for the past six years, but the numbers
were close enough that a Democrat could be successful in the district — the vote
margin was 52-48% in 2014.

No matter the numbers, a strong candidate is essential to winning swing districts
like HD-23. Darrin Camilleri is a Michigan People’s Campaign member who is a solid
progressive and a hard-working candidate. Camilleri prevailed in a competitive
primary race, successfully built an impressive volunteer infrastructure, and ran a
large-scale door-to-door canvass operation that attempted to talk with hundreds of
voters each day. MPC endorsed him after our member-led process, which
concluded that he would be an excellent representative on many of the issues we work on, as well as a champion on care.

On election night, Representative Camilleri won by 320 votes, in a district won by Donald Trump by over 6,000 votes. As we now know, Trump carried Michigan, which was a surprise to many pollsters and political pundits. In the aftermath of the election, we have asked ourselves what was different about this local race, in which voters overwhelmingly chose Donald Trump as their Presidential candidate, but Darrin Camilleri as their state representative.

In margins as small as Camilleri’s win, those of us in political organizing say that “field makes the difference.” By “field,” we mean door-knocking and phone calls that have people directly talking to voters about the election (Green & Gerber, 2015). At MPC, we are also starting to say that “care is a winner.”

THE FIELD PROGRAM

MPC had 7,508 successful contacts with voters at their doors. A contact means that a door-to-door canvasser was able to speak with the voter registered at the residence. In some parts of the district, we made two or three passes, which meant that we were able to talk to some voters more than once.

We did not knock on every door. We concentrated our energy on “liberals” who were unlikely voters and “moderates” who were “high propensity” voters, and focused mostly but not exclusively on women. The determination of “unlikely voters” is based on public data, which determines people who vote at a lower frequency in a given geography. This targeting was done through models created by the Voter Activation Network and America Votes. America Votes coordinates a progressive electoral coalition in Michigan and more than 20 other states.

A team of paid canvassers were trained on a long-form script that elicited voters’ own experiences with care. This script (See Figure 1) was different than those traditionally used in electoral canvassing programs. Traditional voter engagement
programs use scripts that generally are no more than 2-3 minutes, and follow a rigid structure. The MPC script allowed voters to identify whether they had experienced struggling to find adequate child care, elder care and/or care for a loved one living with disability. It then asked whether the voter believed that the state of Michigan should be doing something about these issues, whether he or she supported revenue coming from taxes on corporations and the wealthy to build new care infrastructure, and if he or she would vote for a candidate who would be an advocate on these issues of care. This model of longer conversations, in a face-to-face format that emphasizes advocacy beyond the election, is frequently referred to as “integrated voter engagement.”

**INTRO:** Hi, Is this _____? Hi, my name is ____ . I’m a volunteer with Michigan People’s Campaign. How are you doing today?
Great! I am out talking to people in the neighborhood about issues of “family care” -- by that I mean providing quality care for our loved ones from childhood to old age.

**STEP 1: ISSUES - Do They Connect?**
I am wondering if you have personal experiences with any of these issues -- either trying to find affordable child care or care for someone living with a disability or finding care for an aging loved one?
*If they don’t want to share a personal story, ask*
*Do you think other people in the community are struggling with these issues?*
Do you know anyone who is a caregiver?
Do you feel prepared for long term care needs?

**STEP 2: THEIR EXPERIENCES, IMPACT AND STORY**
*Ask questions to understand why the issues they have mentioned matter to them:* (listen for them to mention any values that shape their feelings on a particular issue).
- Could you tell me a bit more about your experiences?
- Can you tell me why that’s important to you?
- Has this issue/does this issue affect you or your family?
- How did that make you feel?
*Transition question*
- Do you think our state should be doing something about this?

**STEP 3: Support for Government Investment**
We are building a team of people who live Downriver to ask our government to invest in programs that help support families to pay for child care and long term care.

**STEP 4: CONNECT TO ELECTION AND ACTION ASK**
Elections coming up now and how they relate to your issues.
- We haven’t made an endorsement, yet, but we are going to be supporting a candidate who understands that
Do you think that is a good idea?

-One of our ideas is that corporations and wealthy people should pay their fair share in taxes. We know that money could be used toward supporting families like ours to pay for family care needs. What do you think about that?

YES. Will volunteer.
Great! Thank you! I’ll ask someone to follow-up with you about volunteer opportunities. Check out our website or facebook page: Michigan People’s Campaign (need 1-pager)

Maybe.
We’d love to have you join us sometime. If you’d like to get involved in the future - we can mark to give you a call in the upcoming weeks.

NO. Not interested.
No problem. If you’d like to get involved in the future - sign up on our website.

Great! Thank you so much for your time. It was great meeting you. Have a good day!

Figure 1. Michigan People’s Campaign Canvassing Script

Our first set of voter contacts did not include information about Darrin Camilleri. The second and third “passes” promoted Camilleri as a Care Champion, to the extent that MPC is allowed to under state election law as a 501(c)(4) organization, with the support of Michigan People’s Campaign Independent Expenditure Committee. These legal statuses determine what kind of language canvassers are able to use when talking about candidates, and all conversations had to be rooted in the advocacy issues of our organization.

A subset of conversations included content about charter school regulation and quality K-12 education. The voter file for this district has not yet been updated, but MPC plans to analyze the data to see if including K-12 education in the care script had an impact on voter behavior.

It is important to note that organized labor knocked on the doors of many of their members in the district with a pro-Camilleri message. Camilleri was an excellent candidate who built a strong operation that was able to inspire and motivate voters. MPC did not coordinate with their campaign, due to legal restrictions, but it is clear that a hard-working, progressive candidate with a bold vision, who has
support from many progressive organizations, plays a critical role in a campaign like this.

Our highly-trained canvassing team has many anecdotes about talking to voters with Trump signs on their front yards who committed to voting for Camilleri once they learned about his stance on care issues. There were also a fair number of people who became involved with our campaign as volunteer door knockers, and who told their stories of care publicly to animate the campaign. These stories showed us that connecting with voters about their family needs was more important than party affiliation. We heard from many people that what mattered to them was electing a representative who understood these issues. We believe that this learning provides insight into how representatives from different parties and political backgrounds can work together to find policy solutions that will have a positive impact on people’s day-to-day lives.

One voter we talked to had survived two strokes, and when MPC canvassers knocked on her door to talk about care, she immediately agreed to a follow-up conversation with one of our campaign organizers. During that conversation, she relayed how excited she had been to have a person knock on her door and talk to her about an issue that was deeply relevant to her life. She has participated in many MPC events since, and even told her story in a film which was shared on social media leading up to the election.

For the last portion of the canvass, MPC collected data on support for Camilleri and Care. See Figure 2.

<table>
<thead>
<tr>
<th>Camilleri Support</th>
<th>1 - Strong Support</th>
<th>2 - Lean Support</th>
<th>3 - Undecided</th>
<th>4 - Lean Oppose</th>
<th>5 - Strong Oppose</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>384</td>
<td>323</td>
<td>432</td>
<td>24</td>
<td>60</td>
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<td></td>
<td>31.40%</td>
<td>26.41%</td>
<td>35.32%</td>
<td>1.96%</td>
<td>4.91%</td>
</tr>
</tbody>
</table>

See Figure 2.
While Camilleri was a popular candidate, this data proved something we had wanted to test: issues of care resonate strongly with voters. Voters want to support candidates who are willing to work on the real issues that impact them. While these issues may be complex, it is clear families are perplexed by their limited options of care for their loved ones and want political representation from a candidate who is willing to support innovative social policy.

Many voters in this district are struggling financially, still feeling the effects of the 2008 crisis and the loss of auto industry jobs. These were the much talked-about white working class voters who helped propel Trump’s victory. We were able to help them name an issue that they were feeling — how the cost of care was squeezing their family budgets — and connect it to progressive values and a progressive candidate.

This is not a fluke. Polling shows that care is a potent issue with voters across Michigan. According to a poll conducted by Gerstein, Bocian and Agne Strategies (Poll of 500 Michigan Voters, September, 2016):

- 42% of voters polled are caring for a loved one who is aging or living with a disability

<table>
<thead>
<tr>
<th>Total</th>
<th>1223</th>
</tr>
</thead>
<tbody>
<tr>
<td>Care Campaign/Issue Support</td>
<td></td>
</tr>
<tr>
<td>1 - Strong Support</td>
<td>763</td>
</tr>
<tr>
<td>2 - Lean Support</td>
<td>331</td>
</tr>
<tr>
<td>3 - Undecided</td>
<td>179</td>
</tr>
<tr>
<td>4 - Lean Oppose</td>
<td>19</td>
</tr>
<tr>
<td>5 - Strong Oppose</td>
<td>20</td>
</tr>
<tr>
<td>Total</td>
<td>1312</td>
</tr>
</tbody>
</table>
58% of voters said that they currently use or plan to use paid long term care services in the next 10 years.

65% of voters said they are more likely to support a state legislator who voted in favor of a Universal Family Care proposal that would help cover costs for child care and long-term care.

**NEXT STEPS: 2018**

Looking toward 2018, MPC aims to replicate our learnings in other State House swing seats, with the benefit of an even longer ramp-up time.

Our goal is to build a strong team of volunteers in targeted State House districts, and to build a base of supporters around the issue of care, which will pivot into supporting candidates who will champion these issues in office.

Building over a year is an important part of our strategy. Frequently, candidate campaigns pop up in districts just a couple of months before the election, which reinforces a feeling among voters that politicians only care about their vote on Election Day and will become distant as soon as the election is over. MPC believes that movement and organization building happen year-round. The time allows us to train more leaders, hold elected representatives accountable, win issue campaigns, and build the necessary volunteer infrastructure to impact elections and important votes.

MPC found that candidates who elevate care can be persuasive to a broad swath of voters. This learning shows us that voters desire political candidates who are willing to tackle the pressing social issues of our time, especially those that impact the daily economics of families. The use of a long-form script that connects issues of care to candidates is a way to both elicit the stories of voters, and create an opportunity for voters to thoughtfully reflect on which candidate will better meet their human needs. There is an opportunity for representatives from both parties to embrace the desire for collaborative solutions to complex issues. This pilot also shows us that political engagement that takes a more human-centered approach is
not only effective, but critical to elect champions who embody the leadership to work toward social change that is rooted in the values of inclusion and equity.

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References


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HIV-prevention among at-risk Senegalese communities. She was published in the Journal of College and Character for a joint study, “‘Religion is not a Monolith’: Religious Experience at a Midwestern Liberal Arts College.” Meredith’s senior thesis was a documentary film on HIV-prevention in Detroit through a social determinants of health lens.

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