5-2019

Training as Restructuring: Cases from Entry-Level Healthcare and Manufacturing Workforce Training in Eastern Connecticut

Shelley Buchbinder

How does access to this work benefit you? Let us know!

Follow this and additional works at: https://academicworks.cuny.edu/gc_etds

Part of the Human Geography Commons, Public Policy Commons, and the Urban Studies Commons

This Dissertation is brought to you by CUNY Academic Works. It has been accepted for inclusion in All Dissertations, Theses, and Capstone Projects by an authorized administrator of CUNY Academic Works. For more information, please contact deposits@gc.cuny.edu.
TRAINING AS RESTRUCTURING:
CASES FROM ENTRY-LEVEL HEALTHCARE AND MANUFACTURING WORKFORCE
TRAINING IN EASTERN CONNECTICUT

by

SHELLEY KRISCHER BUCHBINDER

A dissertation submitted to the Graduate Faculty in Psychology in partial fulfillment of the requirements for the degree of Doctor of Philosophy, The City University of New York

2019
Training as Restructuring: 
Cases from Entry-Level Healthcare and Manufacturing Workforce Training in Eastern Connecticut 

by 
Shelley Krischer Buchbinder 

This manuscript has been read and accepted for the Graduate Faculty in Psychology in satisfaction of the dissertation requirement for the degree of Doctor of Philosophy. 

Date ________________ Setha Low 
Chair of Examining Committee 

Date ________________ Richard Bodnar 
Executive Officer 

Supervisory Committee: 

Cindi Katz 

Leigh Graham 

THE CITY UNIVERSITY OF NEW YORK
ABSTRACT

Training as Restructuring:
Cases from Entry-Level Healthcare and Manufacturing Workforce Training
in Eastern Connecticut

by

Shelley Krischer Buchbinder

Advisor: Setha Low

Since the 1980s, capital mobility and state restructuring have increased precarity in older industrial regions, such as eastern Connecticut (CT). These changes reconfigured labor markets, changing the work available, including the types, conditions, and skills required. Greater responsibility devolved onto poor and working-class people to navigate a labor market with insufficient living-wage work with 42.4% of jobs pay under $15/hour (Tung, Lathrop, & Sonn, 2015). Entry-level healthcare and manufacturing are two avenues for sub-baccalaureate, living-wage employment. Employment and Training (E&T) prepares people for entry-level jobs; it is a politically popular response to restructurings (Lafer, 2002; Laney et al., 2013). How do trainings produce and reproduce relations of capital and the state, race and gender, and skill, beyond preparing people for new jobs? I link these processes through a multiscale theory (critical) and method (extended case study). This is an experiential study from participant observations and semistructured interviews from the Eastern Connecticut Manufacturing Pipeline (Pipeline) training and OIC of New London County (OIC NLC) Certified Nursing Assistant (CNA) training. I recruited through the snowball method, collected observation and interview data with
field notes and transcriptions, and thematically analyzed using bottom-up and top-down coding. Restructuring renders conditions of work and life difficult to reproduce. Training as a fix permits the continuation of restructured relations of mobile capital and a contracted (smaller and devolved) state by subsidizing and shifting responsibility to people and local programs. The trainings’ conditions (location, testing) are heavily segregated by race, gender, and class. The trainings offer two different work trajectories. CNA training is a pathway toward the sustaining promise of good work in healthcare, albeit via jobs that are bad and like previous work. Pipeline training is a foothold to living-wage work, like past work, that is subsidized and protected by the state but limited in scale by state contraction and instability. Focusing on training, skill, and the job market, as E&T programs do, distracts from the restructurings that degrade and segment work and daily life. The trainings can offer possible steps toward increasing wages. However, trainings offer an individualizing answer, asking people to work harder and train more to deserve living wages, regardless of restructurings and persistent inequalities.

*Keywords:* labor market and skill restructuring, employment and training, frontline healthcare, defense manufacturing
ACKNOWLEDGMENTS

Thank you to my research participants for your time and experiences, my committee (Setha Low, Cindi Katz, and Leigh Graham) and outside readers (Laura Wolf-Powers and Elizabeth Nisbet) for your labor, and my family and friends for your love and support. And thank you romantic Willimantic for being a great teacher and my first home.
# TABLE OF CONTENTS

List of Figures ........................................................................................................... viii  
List of Tables ........................................................................................................... ix  
Key Acronyms ......................................................................................................... x  
Chapter 1 Introduction to Restructuring in Eastern Connecticut ............................. 1  
Chapter 2 Literature Review: Restructurings of Capital and the State, Labor Market, and Skill 24  
Chapter 3 Follow the Money: Employment and Training in Eastern Connecticut .......... 52  
Chapter 4 Government Contracts to the Rescue: Is There Space in the Electric Boat Pipeline Life Raft? ............................................................................................................. 77  
Chapter 5 CNA Training Pathway To . . . ? ................................................................... 122  
Chapter 6 Conclusions: Finding a Foothold or a Pathway ........................................ 157  
Epilogue ................................................................................................................... 177  
References ............................................................................................................... 178
LIST OF FIGURES

Figure 1: Long-Term Employment and Training Programs Through the U.S. Department of Labor ................................................................. 54
Figure 2: Public Sector Employment and Training in Eastern Connecticut ................................................................. 59
Figure 3: Eastern Connecticut Manufacturing Pipeline Participant Flow ................................................................. 83
Figure 4: OIC of New London County Certified Nursing Assistant Training Flow ..................... 131
Figure 5: Nursing Career Pathway ......................................................................................................................... 136
LIST OF TABLES

Table 1: Economic Demographics........................................................................................................ 6
Table 2: Social Demographics.................................................................................................................. 6
Table 3: Service Sector Worker Demographics......................................................................................... 8
Table 4: Manufacturing Worker Demographics........................................................................................ 9
Table 6: Demographics of OIC NLC Interviewees .................................................................................. 138
Table 7: Demographic Comparison of the city of New London and New London County .......... 139
<table>
<thead>
<tr>
<th>A JC</th>
<th>American Job Center</th>
</tr>
</thead>
<tbody>
<tr>
<td>ALICE</td>
<td>Asset Limited, Income Constrained, Employed</td>
</tr>
<tr>
<td>C ETA</td>
<td>Comprehensive Employment and Training Act</td>
</tr>
<tr>
<td>C NA</td>
<td>Certified Nursing Assistant</td>
</tr>
<tr>
<td>C NC</td>
<td>Computer Numerical Control</td>
</tr>
<tr>
<td>C T D OL</td>
<td>Connecticut Department of Labor</td>
</tr>
<tr>
<td>D OD</td>
<td>Department of Defense</td>
</tr>
<tr>
<td>D OL</td>
<td>Department of Labor</td>
</tr>
<tr>
<td>E &amp; T</td>
<td>Employment and Training</td>
</tr>
<tr>
<td>E B</td>
<td>Electric Boat</td>
</tr>
<tr>
<td>E AMA</td>
<td>Eastern Advanced Manufacturing Alliance</td>
</tr>
<tr>
<td>E W IB</td>
<td>Eastern CT Workforce Investment Board</td>
</tr>
<tr>
<td>E TP</td>
<td>Eligible Training Provider</td>
</tr>
<tr>
<td>H HA</td>
<td>Home Health Aide</td>
</tr>
<tr>
<td>H PO G</td>
<td>Health Profession Opportunity Grants</td>
</tr>
<tr>
<td>J TPA</td>
<td>Job Training Partnership Act</td>
</tr>
<tr>
<td>L PN</td>
<td>Licensed Practical Nurse</td>
</tr>
<tr>
<td>L TC</td>
<td>Long Term Care</td>
</tr>
<tr>
<td>N C</td>
<td>Numerical Control</td>
</tr>
<tr>
<td>N L C</td>
<td>New London County</td>
</tr>
<tr>
<td>O IC</td>
<td>Opportunities Industrialization Center</td>
</tr>
<tr>
<td>O IC N L C</td>
<td>OIC of New London County</td>
</tr>
<tr>
<td>O S C C</td>
<td>One Stop Career Centers</td>
</tr>
<tr>
<td>P CA</td>
<td>Patient Care Aide</td>
</tr>
<tr>
<td>P CT</td>
<td>Patient Care Technician</td>
</tr>
<tr>
<td>P EP</td>
<td>People Empowering People</td>
</tr>
<tr>
<td>P IPline</td>
<td>Eastern Connecticut Manufacturing Pipeline</td>
</tr>
<tr>
<td>R N</td>
<td>Registered Nurse</td>
</tr>
<tr>
<td>S N AP</td>
<td>Supplemental Nutrition Assistance Program</td>
</tr>
<tr>
<td>Acronym</td>
<td>Description</td>
</tr>
<tr>
<td>---------</td>
<td>--------------------------------------------------</td>
</tr>
<tr>
<td>SNAP E&amp;T</td>
<td>Supplemental Nutritional Assistant Program Employment and Training</td>
</tr>
<tr>
<td>TVCCA</td>
<td>Thames Valley Community Council Action</td>
</tr>
<tr>
<td>WC</td>
<td>Windham County</td>
</tr>
<tr>
<td>WIA</td>
<td>Workforce Investment Act</td>
</tr>
<tr>
<td>WIB</td>
<td>Workforce Investment Board</td>
</tr>
<tr>
<td>WIF</td>
<td>Workforce Innovation Fund</td>
</tr>
<tr>
<td>WIOA</td>
<td>Workforce Innovation and Opportunity Act</td>
</tr>
</tbody>
</table>
CHAPTER 1

INTRODUCTION TO RESTRUCTURING IN EASTERN CONNECTICUT

Since the 1980s, capital mobility and state restructuring have increased precarity in older industrial regions. These changes reconfigured labor markets, changing the work available, including the types, conditions, and skills required. In light of the restructurings, more responsibility devolved onto poor and working-class people to navigate a labor market with insufficient living-wage work; 42.4% of jobs have wages under $15/hour (Tung et al., 2015). Entry-level healthcare and manufacturing are two avenues for living-wage employment at the sub-baccalaureate level. Employment and Training (E&T) is a way to prepare people for jobs that are devolved and individualized; it is a politically popular response to restructurings (Lafer, 2002; Laney et al., 2013). My research studies E&T programs that prepare and train disadvantaged (poor and working-class) and dislocated (unemployed) workers for entry-level manufacturing and healthcare jobs. The two main cases are the Eastern Connecticut Manufacturing Pipeline (Pipeline) Introduction to Manufacturing training and the Opportunities Industrialization Center of New London County (OIC NLC) Certified Nursing Assistant (CNA) training.

---

1 This mobility is due to the availability of middle-skill work through training and opportunities for advancement, discussed in this chapter and Chapter 2.
Training happens within restructurings of the capital and state, labor markets, and skill. There are three levels of research inquiry, with three sub-questions that guide the research: capital and state restructuring (macro), labor market restructuring (meso), and skill restructuring (micro). How does E&T produce and reproduce the restructurings and fixes of capital and the state? How does E&T produce and reproduce gender and race segregations? How does E&T produce and reproduce skill segmentation and degradation? The main source of data for my research is reflexive, from observations and interviews. Although there is no direct causation linking processes to the quotidian reality of programs and people’s lives, these processes shape, limit, and help to understand the everyday. The dissertation links these processes observed through a multiscale critical theory and the extended case method.

Although there is literature on restructuring and workforce training addressed individually, my research makes two contributions. First, attention has been paid to deindustrialization and state neoliberal reforms, but with less focus on how capital and state restructuring reconfigure both skill and training. There is a theoretical and research tradition of considering changing skill and labor as related to capital reproduction, such as Braverman (1998) or Ducey (2009) researching the restructuring of skill in manufacturing or healthcare, respectively. In that tradition (Ducey) and theory (Braverman), my research is about E&T programs in eastern Connecticut (CT) and connects human experience to capital reproduction and restructuring.

The second contribution is a regional focus that combines healthcare and manufacturing. Eastern CT is rural, with four small cities experiencing regional growth in manufacturing and healthcare jobs. Most research on E&T and capital mobility and state restructuring focused on major metropolitan regions, such as Ducey (2009) studying New York City (NYC) hospital
training. Eastern CT is not a major region. My study is about experiences and changing conditions outside dense urban centers. There are fewer municipal and local resources, services, and infrastructure. By focusing on a region, I also address manufacturing and healthcare, which are not often considered together because of the specific regional context. For example, Fitzgerald (2006) considers both healthcare and manufacturing avenues of mobility but does not directly relate them to each other.

This chapter offers a brief introduction to the research region and its three levels of restructuring, study design, and chapter overviews. Chapter 2 presents a literature review of restructurings in historical and theoretical detail.

**Eastern CT: Windham and New London Counties**

CT is a wealthy and unequal state; its capital city, Hartford, is ranked as one of the “most-distressed small United States cities” (Ormseth, 2017). Eastern CT is a relatively rural region with poor cities. It consists of Windham and New London, two of CT’s eight counties, which border Rhode Island to the east and Massachusetts to the north. Although New London County (NLC) has two central cities (Norwich and New London), Windham County (WC) has no official cities. It has two towns, Willimantic and Killingly, with state services that include American Job Centers for E&T. Willimantic and Danielson in Killingly are part of larger

---

2 The CT median income of $73,781 is above the United States average of $57,652 (U.S. Census Bureau, 2017e).

3 Willimantic was a city until 1983, when it was consolidated into the town of Windham (Hartford Courant, 1995).
collections of towns and villages. These four cities rank among CT’s 25 most distressed municipalities (State of Connecticut, 2017).

All four cities (Killingly, New London, Norwich, and Willimantic) developed and were populated during the industrial revolution (1870s–1920s). All four had textile factories on waterways originally for power generation, specifically the Thames River in NLC and the Willimantic and Five Mile Rivers in WC. The requirements of factories drew migrants, both regionally and from abroad. Zoning regulations developed in the progressive period, and cities required inclusionary and dense urban zoning. Likewise, industrial requirements developed rail infrastructure (Kleniewski, 2006). There was also a concentration of successive infrastructure by the state (roads, offices, public housing, social services) and capital in part because of population density, logistic centrality, and zoning restrictions outside cities that limited infrastructure and certain forms of growth (Ross & Levine, 2015).

The costs of labor and land increase with urbanization. The costs of living and organized labor contributed to a contraction of industrial activities in New England starting in the 1970s, called deindustrialization. The textile industry, concentrated in the northeast, was the target of this regional contraction. Women, foreign-born people, and people of color disproportionately worked in textile and apparel factories and were hard hit (Bluestone & Harrison, 1982; Dorman, 2005). For example, Willimantic’s largest employer, the American Thread Company, left in

---

4 Both are regional population centers and have the job and service concentration of cities. They are referred to as cities in this dissertation because they are regional centers.

5 Eastern CT rankings are New London (1), Norwich (11), Windham (12), and Killingly (21).

6 New London was initially a port city for whaling (Hodara, 2014).

7 CT has a long history of racial and economic zoning, using exclusionary zoning for first residential suburbs, relegating poor people and people of color to poorer industrial cities, such as the ones studied, with industry, multifamily, and public housing (Reece et al., 2009).
Many cities in the midst of industrial restructuring, labeled *gateway opportunities* for new immigrants, continued to draw migrants through a low cost of living and demand for low wage and vulnerable laborers (Massachusetts Institute for a New Commonwealth, n.d.).

Since this capital restructuring, the demographics and labor market in these cities and counties demonstrated how the locations are similar and unique in a larger comparison (see Table 1). In descriptive statistics of poverty levels, educational attainment, income, and race, WC and NLC are similar to CT. However, the cities, New London and Willimantic, have lower levels of educational attainment and income and higher concentrations of people of color and rates of poverty. For example, the eastern CT counties have poverty rates around the state average (10.1%), whereas the poverty rate is 29.9% in Willimantic and 28.3% in New London. The counties’ median household incomes (WC $60,689 and NLC $67,574) are above the national average ($57,652) and below the CT average ($72,781). The cities are poorer; household incomes are $33,564 in Willimantic and $37,331 in New London (U.S. Census Bureau, 2017e). Similarly, Willimantic and New London have a low rate of homeowners, 33.9% and 36.8%, respectively, as opposed to the county, state, and national rates, which are around two thirds (U.S. Census Bureau, 2017f).

---

8 In 1985, the American Thread Company closed its Willimantic operations and moved production to North Carolina (Ryan, 1999). Capital mobility after worker struggle, 1925 strike, reduced the number of jobs, from the high of 2,500 (1925; Eves, n.d.)

9 An example of becoming a gateway city is Bedford, Massachusetts. After industrial decline, it continued to have new waves of immigrants from Guatemala, in part to work in fish processing plants. The new immigrants interviewed praised moving to a small city part because of affordable housing and perceived safety (Juravich, 2009).

10 This section focuses on the cities of New London and Willimantic because the majority of data is collected in those cities.

11 The respective population below the federal poverty line (FPL) is 11.9% for WC and 9.3% for NLC.

12 Similarly, the population of CT considered to be Asset Limited, Income Constrained, and Employed (ALICE) and people below the FPL is lower in the counties (39% for WC and 33% for NLC), then the cities (56% for Windham, including Willimantic, and 67% for New London; Connecticut United Ways, 2018).
Table 1: Economic Demographics

<table>
<thead>
<tr>
<th></th>
<th>Population</th>
<th>Below Federal Poverty Line</th>
<th>Median Household Income</th>
<th>ALICE*</th>
<th>Owner Occupied Housing</th>
<th>High School Graduate +</th>
</tr>
</thead>
<tbody>
<tr>
<td>Willimantic</td>
<td>17,737</td>
<td>29.9%</td>
<td>$33,564</td>
<td>56%</td>
<td>33.9%</td>
<td>78.4%</td>
</tr>
<tr>
<td>Windham County</td>
<td>116,674</td>
<td>11.1%</td>
<td>$62,553</td>
<td>39%</td>
<td>69.9%</td>
<td>88.4%</td>
</tr>
<tr>
<td>New London</td>
<td>27,147</td>
<td>28.3%</td>
<td>$37,331</td>
<td>67%</td>
<td>36.8%</td>
<td>83.3%</td>
</tr>
<tr>
<td>New London County</td>
<td>270,772</td>
<td>7.3%</td>
<td>$69,411</td>
<td>33%</td>
<td>66.7%</td>
<td>91.9%</td>
</tr>
<tr>
<td>Connecticut</td>
<td>3,594,478</td>
<td>10.1%</td>
<td>$73,781</td>
<td>40%</td>
<td>67.5%</td>
<td>90.2%</td>
</tr>
<tr>
<td>United States</td>
<td>321,004,407</td>
<td>14.6%</td>
<td>$57,652</td>
<td>**</td>
<td>63.8%</td>
<td>73.6%</td>
</tr>
</tbody>
</table>

* A measure of residents who are Asset Limited, Income Constrained, Employed (ALICE)
** Data unavailable

(Connecticut United Ways, 2018; U.S. Census Bureau, 2017b, 2017f, 2017e)

The cities are more diverse than the state or counties. Similarly, CT (76.7%), WC (89.1%), and NLC (82.2%) are majority White, more so than the United States as a whole (73%). However, the two cities are more diverse. Willimantic is 39.8% Hispanic and 7.5% Black, and New London is 33.1% Hispanic and 15.8% Black (U.S. Census Bureau, 2017a). Willimantic residents are 29.9% foreign born, and New London (14%) is around the state average but higher than the county average (see Table 2; U.S. Census Bureau, 2017d). These demographics will be important when considering the racial and gendered tracking of training participants in Chapters 4 and 5.

Table 2: Social Demographics

<table>
<thead>
<tr>
<th></th>
<th>White</th>
<th>Black</th>
<th>Hispanic</th>
<th>Foreign Born</th>
</tr>
</thead>
<tbody>
<tr>
<td>Willimantic</td>
<td>66%</td>
<td>7.5%</td>
<td>39.8%</td>
<td>29.9%</td>
</tr>
<tr>
<td>Windham County</td>
<td>89.1%</td>
<td>2.2%</td>
<td>9.6%</td>
<td>5.3%</td>
</tr>
<tr>
<td>New London</td>
<td>58.6%</td>
<td>15.8%</td>
<td>33.1%</td>
<td>14%</td>
</tr>
<tr>
<td>New London County</td>
<td>82.2%</td>
<td>5.8%</td>
<td>8.6%</td>
<td>8.2%</td>
</tr>
<tr>
<td>Connecticut</td>
<td>76.7%</td>
<td>10.5%</td>
<td>15.4%</td>
<td>14.2%</td>
</tr>
<tr>
<td>United States</td>
<td>73%</td>
<td>12.7%</td>
<td>17.6%</td>
<td>13.4%</td>
</tr>
</tbody>
</table>

(U.S. Census Bureau, 2017a, 2017d)
Trends in eastern CT are similar to larger trends across the United States. Eastern CT cities concentrated people of color and poor people, as compared to the county or state. White flight after World War II (WWII) racialized homeownership for White working and middle-class families outside cities (Rothstein, 2017). With state and capital disinvestment in cities, segregation entrenched as new immigrants from Latin America and Asia and African Americans from the south entered northern cities (Ross & Levine, 2015).

Top employers in eastern CT are in the healthcare, retail distribution, and manufacturing sectors. In WC, two of the top six private employers are hospitals (Day Kimball and Windham), two are distribution centers (Frito Lay and Lowes), one is an educational nonprofit (EASTCONN), and one is a retailer (Walmart). Walmart stores are three of the top ten employers in WC (Labor Market Information, Connecticut Department of Labor, 2018d). In NLC, of the top six private employers, three are production and design (General Dynamics, Electric Boat [EB] Engineering, and Pfizer), two are hospitals (Lawrence and Memorial and Backus), and one is a casino (Mohegan Sun) (Labor Market Information, Connecticut Department of Labor, 2018c).

The region matches national averages for jobs in healthcare, education, and social assistance (see Table 3). These jobs are disproportionately held by women, regionally and nationally. The change to the feminized service sector as the dominant employer specifically education and healthcare, is in part due to shifts in the economy toward consumption (discussed in Chapter 2) that happened in the wake of industrial flight and contractions. Although industrial cities developed around industrial work and life, their decline left cities searching for new jobs

13 EASTCONN is an E&T contractor discussed in depth in Chapter 3.
and economic activity. The “meds and eds” model looks at hospitals and universities as sources of jobs and tax revenue (Adams, 2003). By the 1950s, hospital systems were built and invested as part of urban renewal programs funded by the Housing Act of 1949, slated for struggling cities as industrial mobility and decline began to erode urban employment and funding (McKee, 2016). Since their development and growth, healthcare systems have been restructuring through closures and mergers, discussed in Chapter 5.\textsuperscript{14}

<table>
<thead>
<tr>
<th></th>
<th>Total Workers</th>
<th>Healthcare, Education, &amp; Social Assistance</th>
<th>% All Workers</th>
<th>Healthcare and Social Assistance</th>
<th>% All Workers</th>
<th>% Female</th>
</tr>
</thead>
<tbody>
<tr>
<td>Willimantic</td>
<td>8,361</td>
<td>*</td>
<td>*</td>
<td>*</td>
<td>*</td>
<td>*</td>
</tr>
<tr>
<td>Windham County</td>
<td>59,022</td>
<td>16,746</td>
<td>28.4%</td>
<td>9,071</td>
<td>15.3%</td>
<td>81.9%</td>
</tr>
<tr>
<td>New London</td>
<td>12,031</td>
<td>*</td>
<td>*</td>
<td>*</td>
<td>*</td>
<td>*</td>
</tr>
<tr>
<td>New London County</td>
<td>133,786</td>
<td>32,714</td>
<td>24.5%</td>
<td>18,633</td>
<td>13.9%</td>
<td>78.6%</td>
</tr>
<tr>
<td>Connecticut</td>
<td>1,805,086</td>
<td>478,083</td>
<td>26.5%</td>
<td>281,148</td>
<td>15.6%</td>
<td>78%</td>
</tr>
<tr>
<td>United States</td>
<td>150,599,165</td>
<td>34,781,348</td>
<td>23.1%</td>
<td>20,850,113</td>
<td>13.6%</td>
<td>78.2%</td>
</tr>
</tbody>
</table>

* Data unavailable

(U.S. Census Bureau, 2017c)

However, eastern CT is also unique in its concentration of production jobs (see Table 4). The region has a higher percentage of workers in manufacturing WC (12.7%) and NLC (13.2%) than the CT (10.6%) or national (10.3%) averages (U.S. Census Bureau, 2017c). As in national trends, manufacturing jobs are disproportionately held by men. The concentration of manufacturing jobs is largely through EB in Groton (NLC), the largest employer in either county. Training for EB is the subject of Chapter 4.

\textsuperscript{14} Eastern CT has seen hospital restructuring in the past two decades. All four of the region’s hospitals were merged into larger healthcare systems, Hartford Healthcare and Yale New Haven Health. Backus Hospital in Norwich and Windham Hospital in Willimantic are part of Hartford Healthcare, and Lawrence and Memorial Hospital in New London and Day Kimball Hospital in Putnam are part of Yale New Haven Health.
Table 4: Manufacturing Worker Demographics

<table>
<thead>
<tr>
<th></th>
<th>Total Workers</th>
<th>Manufacturing</th>
<th>% All Workers</th>
<th>% Male</th>
</tr>
</thead>
<tbody>
<tr>
<td>Willimantic</td>
<td>8,361</td>
<td>*</td>
<td>*</td>
<td>*</td>
</tr>
<tr>
<td>Windham County</td>
<td>59,022</td>
<td>7,500</td>
<td>12.7%</td>
<td>76.4%</td>
</tr>
<tr>
<td>New London</td>
<td>12,031</td>
<td>*</td>
<td>*</td>
<td>*</td>
</tr>
<tr>
<td>New London County</td>
<td>133,786</td>
<td>17,629</td>
<td>13.3%</td>
<td>73.2%</td>
</tr>
<tr>
<td>Connecticut</td>
<td>1,805,086</td>
<td>191,519</td>
<td>10.6%</td>
<td>70.7%</td>
</tr>
<tr>
<td>United States</td>
<td>150,599,165</td>
<td>15,477,389</td>
<td>10.3%</td>
<td>71.3%</td>
</tr>
</tbody>
</table>
* Data unavailable
(U.S. Census Bureau, 2017c)

Three Levels of Restructuring

This section considers multilevel restructurings of capital and state (macro), labor market (meso), and skill (micro) factors about healthcare and manufacturing, the sectors of E&T studied, in eastern CT. The literature review in Chapter 2 follows these restructurings historically and theoretically.

**Capital and state restructuring.** After WWII, and accelerating in the 1970s, productive manufacturing capital was restructuring from old industrial cities, specifically New England textile mill cities (Bluestone & Harrison, 1982). As production contracted, shifted locations, and was mechanized, the economy increasingly became reliant on the consumption of goods and services. In the wake of manufacturing capital and employment, there has been an increase in service sector employment that is caring (education, healthcare, and social assistance) or consumer driven (retail, food service, and distribution), as cited above, in eastern CT. The caring sector has a mixture of professionals and paraprofessionals, whereas the consumer-driven sector has a concentration of unskilled entry-level labor without mobility, or a flatter employee

---

15 The next section on labor market restructuring provides specifics.
structure (Kalleberg, 2011, p. 62). This restructuring is evident in the top employers in eastern CT hospitals (all four regional hospitals), educational nonprofit (EASTCONN), retail (three Walmarts), and distribution centers (Lowes and Frito Lay).

The state restructured as capital was moved away and changed at the national, state, regional, and local levels.\textsuperscript{16} Means-tested redistribution programs, such as welfare and food assistance, were contracted through cuts and outsourcing.\textsuperscript{17} In CT, many programs devolved to state management, in a contracted form; E&T is a prime example, discussed in Chapter 3. With funds reducing and responsibility devolving from federal to state governments, there was a contraction down to municipal governments. Many cities have difficulty providing basic services, such as education. In 2013, Windham (Willimantic) and New London schools were classified as low performing and subjected to a Special Master appointment to oversee education reform (Rabe Thomas, 2013). State restructuring distributed more social responsibility downward with fewer resources. Vulnerable people, abandoned by capital, were concentrated in cities with declining state support and limited local capacity.\textsuperscript{18} These restructurings shift labor markets toward education and healthcare and the unique increase in manufacturing employment because of EB.

\textbf{Labor market restructuring.} Despite contractions, there are two expanding sectors of employment in the CT labor market, healthcare and defense manufacturing. Both are claiming shortages of employees, discussed in depth in Chapters 4 and 5, and both play a significant role

\textsuperscript{16} “The state” refers to the federal government.

\textsuperscript{17} The restructuring included the increase of repressive state programs, such as law enforcement and prisons, including the military (after a drop-off after the Cold War), discussed in Chapter 2.

\textsuperscript{18} In the post-WWII period, many White working-class families fled outside industrial cities (Rothstein, 2017).
in the labor market. In CT (2018), 34.4% of all 1,474,100 private-sector workers are in manufacturing (164,700) or education and health services (341,900; Labor Market Information, Connecticut Department of Labor, n.d.-b, n.d.). The CT Department of Labor (CT DOL) tracks “in-demand” jobs as part of workforce development functions. A majority of the fastest-growing jobs are in the manufacturing and healthcare sectors. The second most in-demand job, after statistician, is home health aide (HHA), projected to grow by 34% by 2026. The third is Computer Numerically Controlled Machine Tool Programmers, Metal and Plastic, projected to grow by 33.5% by 2026 (Labor Market Information, Connecticut Department of Labor, 2018b).

This growth misses a larger trend in job openings. For 2016–2026, projections for the top five jobs with the most current job openings in CT (retail salesperson, cashier, food preparation and service worker, waiter and waitress, and personal care aide) require no education or formal training beyond high school and have average wages below $16/hour with limited mobility (Labor Market Information, Connecticut Department of Labor, n.d.-a).19 Although there may be job growth in areas requiring specialized training; the current and projected openings concentrate in entry-level and low-paying service sector jobs.

Both healthcare and manufacturing jobs are currently growing in CT, but overall manufacturing jobs are on the decline in both absolute and relative terms. Since the 1990s, manufacturing jobs have been cut in half, down from over 300,000 workers (Labor Market Information, Connecticut Department of Labor, n.d.). Within this larger trajectory of decline, the sector has made limited job gains: “Manufacturing in Connecticut is seeing renewed investment after a difficult period from 2002–2012 when the manufacturing sector saw the loss of more than

19 A living wage in 2018 CT was $12.88 for a single adult and $28.78 for a single adult and child (Glasmeier, n.d.)
40,000 jobs” (State of Connecticut, 2014, p. 6). The gains are slow and do not replace lost jobs. Manufacturing may be down from the 1990s, but it is still a large part of the workforce and growing after recent defense appropriations. In CT, defense companies with federal contracts employ 6.3% of the workforce. In 2011, CT defense contractors were awarded $12.7 billion in federal contracts (State of Connecticut, 2014, p. 8). EB has a new appropriation to increase workforce, including the Navy contract that is the impetus for an EB-targeted E&T grant, the subject of Chapter 4. EB employs over 11,000 workers in CT and plans to grow to 18,000 by 2030. The company also has more than 450 subcontracted suppliers across the state, equaling about $485 million in contracts over five years (Mahler, 2017).

In the same period, education and health services workers had doubled, from just over 200,000 workers in 1990 to 478,083 in 2018 (Labor Market Information, Connecticut Department of Labor, n.d.-b). These sectors make up a significant portion of the workforce: “The healthcare services sector in Connecticut employs more people than any other field” (State of Connecticut, 2014, p. 9). The healthcare sector is projected to grow as people live longer and the state ages (State of Connecticut, 2014, p. 9). Both HHA (34%) and personal care aide (PCA; 25.1%) are in the top 10 growth fields (Labor Market Information, Connecticut Department of Labor, 2018b). The growth in low-skill and low-paying jobs can be seen in the high number job openings for HHAs and PCAs. Although healthcare jobs are growing, the growth in low paid entry-level work is a concerning trend, discussed in Chapter 5.

**Skill restructuring.** With the growth in healthcare and manufacturing in eastern CT, there is demand for trained and credentialed workers. The increased labor market need for healthcare and defense manufacturing workers requires the skilling of many people, at a time when capital is restructuring through contracting and the local capacity to educate and train is
limited. Both sectors claim they face ongoing shortages of skilled workers (Grant, 2016; Whoriskey, 2012). In healthcare, there is a need for professional employees (nurses and doctors) and paraprofessionals (aids and technicians). In defense manufacturing, there is a need for both professionals (engineers) and paraprofessionals (welders, machinists). My research focuses on entry-level training for nursing assistants and machinists.

Eastern CT has several technical high schools and community colleges that train people for entry-level healthcare and manufacturing jobs. All four cities have technical high schools offer programs for entry-level healthcare and manufacturing training. The two regional community colleges, Quinebaug Valley Community College (QVCC) and Three Rivers Community College (Three Rivers), have entry-level healthcare and manufacturing training and offer degree and certificate programs. They also have bridge programs to transfer to four-year colleges. There are additional public options; for example, the New London Adult and Continuing Education runs CNA courses. There are private, for-profit, or nonprofit providers. A CNA training offered by a nonprofit provider is the subject of Chapter 5.

Skilling through training is a proposed fix for restructuring. Multi-scale restructurings produce crises of wages and employment for poor and working-class people and trained employees for employers. Training is paid for by a mixture of capital, labor, and the state. My research studies entry-level training paid for by the state and considering these restructurings, discussed in Chapter 3.

20 Ella T. Grasso Technical High School is in Groton, where EB’s manufacturing facility is located next to New London. Harvard H. Ellis Technical High School is in Danielson (within Killingly). Norwich Technical High School is in Norwich. Windham Technical High School is in Willimantic.

21 QVCC has campuses in Danielson and Willimantic, and Three Rivers is located in Norwich.
Methodology

A central concern of critical scholars is to connect overarching theories and the churning of the political economy with everyday life and experience. A common critique of such efforts to prove or find evidence of a theory is that people cite evidence that suits their theoretical inclinations (Burawoy, 1998). Although scholars can argue that these are exemplary or critical moments, it is necessary to determine how to distinguish between cherry-picking and crucial evidence. My research attempts to bridge this divide using reflexive science and the extended case method.

My family, for two generations, and I are from small factory cities, now disinvested. I lived shielded by my parent's education and homeownership yet rendered vulnerable by mounting and crippling debt, looming foreclosure, and struggling, later designated failing, public schools. I became interested in people’s experience and the specifics of the “problems” of places such as my hometown of Willimantic, a site of my research. The theory came later.

I did not know or read about training before I entered training programs for research. I became interested in economic redevelopment based on interviews in a pilot study about changes in downtown Willimantic. However, the economic development initiatives that I explored were research dead ends. These initiatives stall on the problem of people living in small old industrial cities being too poor yet lacking a way to earn more income. In a repeating cycle, agents of economic development in cities’ proposals call for professional- and managerial-class visitors and residents. What can poor and working-class people hope for within this landscape of desired professional- and managerial-class futures? These questions brought me to E&T, targeting disadvantaged and unemployed people.
In this project, E&T is a window into the role of trainings as fixes in the context of state and capital, labor market, and skill restructurings. How does training produce and reproduce unequal relations in eastern CT, beyond training people for specifically credentialed jobs?

Within the larger question, there are three subquestions at macro, meso, and micro levels of restructuring. As capital moved away from living-wage manufacturing work and the state cut redistribution and devolved responsibility, E&T represents an individualizing solution to larger restructurings that make the lives of poor and working-class people more precarious. How does E&T reproduce and sustain restructurings of capital and the state? Entry-level healthcare and manufacturing are advertised as avenues to economic and social stability. These fields are stratified and offer vastly different places in a changing labor market. How does E&T produce and reproduce gender and race in laboring? The state and capital present skilling as a fix for precarious people and the needs of capital, a win for both capital and labor. How does E&T produce and reproduce segmentation and degradation in skill? Training devolved to the state and individual responsibility prepares workers for a new and expanding job market by teaching skills at a time when work is degraded and entrance increasingly monopolized by credentialing.

**The extended case method.** I employ the extended case method to analyze E&T programs and experiences as responses to and solutions for restructuring (Burawoy, 1998). The method uses techniques of ethnography, specifically participant observation and interviews. The method engages the reflexivity of the researcher as part of the process, and the selected case relates everyday life to larger structures (Burawoy, 1998, p. 14). The method is in opposition to the tenets and techniques of positivist science, such as experimental or survey research. Positivist science separates the researcher and the subject of research on the grounds of objective learning and science. To counter bias and subjectivity, the methods employ objectivity tests (Burawoy,
While countering bias is important, positivist sciences’ methods toward objectivity can be desirable for experimental research questions, complex studies of experiences and the political economy require other methods. My study uses exemplary cases to connect the political economy and individual experiences and events within the E&T landscape in eastern CT.

Burawoy (1998) lays out the four levels of contexts, from micro to theory, for an extended case study: intervention, process, structuration, and reconstruction. First, an intervention uses ethnographic tools to break down or interrupt normal schemas or routines to learn from and about everyday life. A breakdown is a way to think about interventions as a disruption to the daily routine of a day or a program (Agar, 1986, p. 25). It requires key informants and participants to stop and think about their conditions. For my study, participant observation, interviews, and key informant discussions are interventions or breakdowns. Interventions are set in manufacturing and healthcare training. These two cases are studied because the Eastern Workforce Investment Board (EWIB) and the state of CT identify manufacturing and healthcare as growth fields in need of a trained workforce, and two large federal E&T grants were awarded: The Pipeline and the Health Profession Opportunity Grants (HPOG). The site selection is organic and built from connection, necessity, and the elimination of other options.

The first training site is OIC NLC. After a meeting with a key informant for a girls’ empowerment program was unsuccessful, I was in New London and wanted to maximize the trip.

---

22 It is a revision of structural research methods that focus on the reproduction from structural forces without the important input of human and nonhuman agents (see Althusser, 1971).

23 For E&T, I emailed the director of Adult Education at EASTCONN and scheduled a phone conversation. He directed me to another key informant at the American Job Center in Willimantic, and each key informant, through direct recommendations or information in the conversations, led me to new contacts.
down from NYC. I looked on the United Way website, saw that OIC NLC is a training provider in New London, and walked in. I met with the educational director, and she invited me to a Social Service lunch. She was my first and a crucial key informant, leading me to other informants, trainees, and observations. The second site was the Introduction to Manufacturing training at Three Rivers. I planned to observe the HPOG, with permission from the program navigator, but that permission was not granted. HPOG is a U.S. Health and Human Services (HHS) study grant, and the nonprofit grant administrator did not want to contact HHS for permission. While I was interviewing key informants at the CT DOL about HPOG and another training, the Workforce Investment Fund (WIF) Pipeline was mentioned as a successful program. After meeting with staff from the CT DOL and the contractor, Thames Valley Council for Community Action (TVCCA) staff, I selected the Pipeline as the second training site.

Participant observation is a way into the day-to-day rhythms, routines, and events that make up how places work and people experience life (Schensul & LeCompte, 2013). Participants’ observers learn from integration and interaction (Emerson, Fretz, & Shaw, 2011). Participation makes it difficult to take jottings and detailed notes during observation. However, participation increases interactions with people in the research settings, from trainers to trainees. During observation, I made headnotes and jottings to trigger memories and details of important observations.  

24 Each note starts with important information about the key context, events, and the observation’s physical and social settings. I attempted to observe all parts of training, from recruitment through different modules. My ability to observe relied on program permission, including participation in several preskills employability trainings at American Job Centers and

---

24 The official notes were typed after leaving observation, no later than that night.
Access Agency, discussed in Chapter 3. I received documents, slides, and other information while attending training and meetings.

Interviews are an intervention technique to understand complex social and material relations. They obtain narratives from people and are different from the everyday and looser nature of conversation (Quinn, 2005). I conducted interviews with trainees at all the different levels of training: accepted and waiting, preskills training, skill training, and after training. I advertised for recruitment at the training and sent out one set of email communications to the Pipeline participants through a job development specialist, who is a subcontractor on the Pipeline grant. The interviews were semistructured interviews that included grand tour questions with prompts (Leech, 2002). Interviews inquired about work, training, and life at different points before the training, during the training, and imagining beyond the training. The goal was for an interview to walk people through time and places. The interviews were recorded with consent and varied based on the interpretation of the grand tour questions, prompts, and the person's experience and rapport with me.

Key informants are important interventions to understand programs and connections between programs and to gain entry to both participant observation and interviews. Key informants were chosen for their knowledge and insider status (Schensul & LeCompte, 2013). Key informants are important to comprehend partnerships across agencies, which are crucial to understanding E&T in a region (Kumar, Stern, & Anderson, 1993). Key informants are paid staff members across the eastern CT E&T landscape who have meetings and share official documents. I selected key informants through snowball referral and cold outreach after observations or meetings.
Second, the process analyzed the intervention data from interview transcriptions and field notes. Field notes were produced after interviews, key informant meetings, and participant observations. They include summaries and specific quotes (from jottings) of the spatial environment, topics discussed, and biographical information of key informants and interviewees. The interviews were transcribed into Word documents. After the interviews’ and observations’ field notes, I also produced memos to think beyond individual events, interviews, or conversations so as to see commonalities, discords, and emerging themes. Memos engage researchers through the process of qualitative data (Birks, Chapman, & Francis, 2008). Interview coding was a mixture of theory and narratives (top down) and everyday experiences and observations (bottom up; Mac Ginty & Firchow, 2016). I coded thematically both top down, from interview questions, and bottom up, from commonalities in the interviews. I created a codebook and quote book based on the data, specifically from memos.

Third is structuration, or the impacts of external forces on lives and experiences. I considered the interventions and process in the larger contexts of state and capital, labor market, and skill restructuring. These structures are the context for programs and experiences, discussed next in Chapter 2. Last, reconstruction is the renewal of theory through adopting, refuting, or extending based on findings, discussed in the Conclusion.

Although positivist science has the 4Rs to enforce objectivity, there are four effects of context and power from an extended case study as reflexive research: domination, silencing, objectification, and normalization. Domination is an example of the effects of power on my study; it refers to the overarching dynamic that can sometimes place participants and researchers at odds. Participants are “trapped in networks of power” over hierarchies and resources (Burawoy, 1998, p. 22). Researcher observers are “on our own side” and have ulterior, often
theory derived, motives (Burawoy, 1998, p. 23). Although I am from eastern CT, my interests were different from or dominated participants’ experiences. My theoretical and methodological groundings in historical materialism position the changes to capital, state, and labor as part of negative and exploitative relations, with emancipatory opportunities (Marx, 1993a). I understand the training to be ineffective from the context of macroeconomic data and trends (Lafer, 2002). Although the trainees had experiences that confirmed critiques of training, they also shared their work, hopes, and plans. Another distinction is that I am a Ph.D. researcher in a training program. My level of experience and role as a student researcher privilege higher education. Lastly, I was dependent on and thus aligned with E&T staff. They were key informants and allowed me to observe and interview. Although I informed those interviewed that I did not represent the programs and that their information would be both anonymous and confidential. I used my position as a Ph.D. candidate and former social worker in alignment with the programs and staff to obtain access.

There are always power dynamics and hierarchies. To control for the effects of power, I remained close to the description of events, processes, and stories in the data chapter and reiterated that the research is anonymous and separate from the programs. I also engaged in empathetic listening to be open and supportive when observing and interviewing. The extended case study offers opportunities to bridge experience with structures and research these programs and those trained in them. The data in Chapters 3, 4, and 5 use observations, interviews, and key informant meetings to study E&T in eastern CT in larger contexts that render life more precarious and individualized.

Cases of entry-level healthcare training at OIC NLC and manufacturing training at the Pipeline are sites that follow structuration of multilevel restructuring through the extended case
method in eastern CT. This exemplary case is a window into the situation of poor and working-class people as conditions restructure away from living-wage work and state redistributions.

**Chapter Overview**

The subsequent chapters of this dissertation provide additional contextual discussion of restructurings. Chapter 2 is the history and theory of restructurings. Chapter 3 provides an exploration of the system of E&T in eastern CT. Chapter 4 focuses on a manufacturing training program, the Pipeline, followed by Chapter 5 on a CNA training at OIC NLC. I conclude by returning to the restructurings of state and capital, the labor market, and skill in light of experience (Chapter 6). The remainder of this section is chapter summaries.

**Chapter 2 Literature review: Restructurings of capital and the state, labor market, and skill.** This chapter provides the historical and theoretical foundation of the three levels of restructuring. Macrolevel restructuring of capital explains downward pressures of capital mobility on wages and working conditions, specifically since the 1970s in older industrial and urbanized areas. The restructuring of the state explains the cuts and devolving of the Keynesian state since the 1970s. The labor market restructuring explains the history and theory of gender, race, and class in productive and reproductive labor. Skill restructuring explains the current structure and hierarchy of skilling and the general trends toward skill segmentation and degrading as credentialing increases.

**Chapter 3 Follow the money: Employment and training in eastern Connecticut.** This chapter begins with an overview of publicly funded E&T. It follows E&T from macro to micro. It starts with reviewing implementation of short- and long-term federal funding initiatives (Workforce Innovation and Opportunity Act [WIOA] and HPOG). Then it turns to the implementation of state and private restructurings as a result of these programs (EASTCONN).
There are two broad categories of training: hard skills, in Chapters 4 and 5, and soft skills or employability. This chapter ends with an in-depth examination of two employability trainings, a Access to Employment and Confidence Makeover, and their focus on model trajectory and behaviors.

**Chapter 4 Government contracts to the rescue: Is there space on the Electric Boat Pipeline life raft?** This chapter studies the Pipeline as a case of entry-level manufacturing training for machinists through the time-limited WIF. The data include key informant interviews, participant interviews, observations, and document analysis. The chapter starts with the state of defense manufacturing and the evolution of machinists. It follows the Pipeline from the grant, through recruitment, to training. The chapter then offers analysis of semistructured interviews from people in the Pipeline. The interviews show the precarity of working conditions for younger workers, how work conditions are detached from education, skill, and experience, and how this program offers a limited entry into old forms of working-class work but seems to be creaming participants, narrowing the Pipeline.

**Chapter 5 CNA training a pathway to…?** This chapter studies a CNA training. The chapter begins by considering the context of healthcare staffing shortages, restructurings of nursing fields, and the role of the funder and training program (OIC NLC). The chapter then follows the CNA training from funding to orientation to the actual training process. The focus is on building basic skills (resume writing, dress) and workplace skills (showing up on time) and connecting the learning to everyday life. The chapter concludes with an analysis of interviews from participants at different stages of the training, from the learning academy through completion. The trainees are disproportionately women of color and have numerous personal and work experiences with caring, and they see the training as a chance for change and personal
growth. The focus is on the CNA training as a start and movement toward advancement, within a restructured and stratified labor market.

Chapter 6 Conclusions: Finding a foothold or a pathway. This chapter revisits the research questions and consider the relation of E&T to the restructurings of the state and capital, the labor market, and skill. These are different levels of fixes that allow or continue capital accumulation. The two skills trainings demonstrate two different trajectories based on how they operate in the research sites. The first is a pathway for the mostly poor women taking the CNA training to find plentiful but difficult and poorly paid entry-level work. The goal is to make their way toward nursing over time. The second is a foothold for mostly working-class men to access hard-to-get working-class jobs with better pay and working conditions that have mobility built in. Future directions for research involve credential inflation for CNAs and the role of state intervention for jobs and economic development in defense manufacturing.
This chapter is a literature review of capital and state, labor market, and skill restructurings through history and theory. These restructurings establish a framework to consider E&T in Chapter 3. First, the restructuring of capital and the state is the basis for both the need for training (changes to capital) and the changes to the programs (cut and devolved) that explain the current form and functions.

Capital and State Restructuring

**Capital mobility.** Capital mobility is a capital accumulation strategy that relies on movements of financial and fixed capital and their fluidity. Mobility strategies exploit differences between places and statuses of workers (Bluestone & Harrison, 1982). The possibilities and effects of capital mobility are rooted in a complex mixture of conditions, including the level of technology (transportation, automation), cost of labor (labor organization, cost of living, mechanization), and social and political conditions (regulations, trade relations, tax policies) (Baran & Sweezy, 1966; Bluestone & Harrison, 1982). The rise of monopolistic corporations in the 1870s–90s increased production speed and scale, shaping the capital mobility to follow.  

---

25 There was a shift towards corporations, away from the previous competitive system of individual entrepreneurs (Baran & Sweezy, 1966, p. 43).
Monopolistic control… enables them [multinational corporations] to buy and sell on specially privileged terms, to shift orders from one subsidiary to another, to favor this country or that depending on which has the most advantageous tax, labor or other policies—in a word, they want to do business on their terms and [wherever] they choose (Baran & Sweezy, 1966, p. 201).

As production and productivity increase (and production is more mechanized), the prices of commodities fall as the amount of fixed capital increases (Marx, 1993b). More products need to be sold to keep the same level of profitability; this is called the treadmill of production, a term frequently used in discussions of agricultural production (Carolan, 2016, pp. 7, 10–12). The economic system becomes more prone to market saturation and economic crisis. Responses to the crises are capital restructuring and sometimes mobility.

In the 1970s in the US, a crisis sparked by the market saturation of consumer goods, competition from less expensive imports, and historically high wages threatened profitability. Corporate mergers increased scale and cut labor costs through shedding, informalizing, and outsourcing labor (Bluestone & Harrison, 1988). This wave of capital mobility swept across industrial cities in the United States, specifically in the northeast. Manufacturing shifted to places with lower costs of production, including less organized workers. This moment of capital

26 Commodity prices decrease by increasing volume. Marx found this to be a general tendency of commodity production. They are initially made by skilled labor (handmade) in small scale and therefore expensive. Over time, the process is cheapened through mechanization and less-skilled labor, producing cheaper versions affordable to working-class people (Marx, 1993b).

27 The reason wages were high in northeastern industrial cities is the industrial labor struggle and organization in the first wave of unions, due in part to the concentration of workers in exploitative working conditions (time, pay, safety, nature of the repetitive work). Everyday textile conditions and exceptional tragedies drove organizing. The Triangle Shirtwaist Factory Fire (1911) killed 146 workers, fueling waves of union organizing and workplace safety protections (Orleck, 2017).
mobility is key to consider the regional restructuring of labor and skill in New England. In addition to capital accumulation through closure, flight, and labor shedding, working conditions for the remaining jobs were more precarious. There was a rise in temporary, part-time, nonunion, or contract labor statuses to lower costs (Bluestone & Harrison, 1988). Strategies varied by industry. For example, the textile and apparel industries almost entirely fled the northeast and eventually the United States, whereas automobile production remains domestic, moving locations from the Midwest to the South, de-regionalizing (Clark, 2013, p. 4). Although the auto industry remains predominately domestic, capital mobility is enacted by changing location, labor conditions (use of contractors), and automation (Dorman, 2005). The expansion of contractors and sources reduces dependence. Depending on conditions, mobility creates fluctuating levels, locations, and strategies.

The neoliberal state. The state expanded and concentrated investment in cities concurrent with the industrial growth that initiated Progressive Era reforms, starting in the 1870s. The Keynesian Era, the New Deal through the Great Society, established and expanded broad state regulations and redistributions, ushering in an “age of security” (Kalleberg, 2011, p. 22). Labor regulations established a minimum wage, and the National Labor Relations Board (NLRB) arbitrated capital and labor disputes. The NLRB provided state support during the

28 Textiles and apparel concentrated first in northeastern cities and towns. There has been mobility from the northeast. Capital mobilized for cheaper conditions. Production moved first to the southern United States because “when firms decide where to relocate, they fully recognized the advantages to them of land in the southeast…. this is a competitive advantage” (Newman & Winston, 2016, pp. 180–181). Since the 1990s, apparel production has moved abroad: “According to data from the 2010 Census, nearly 100 percent of all apparel Americans use is imported, up from nearly 57 percent in 2000” (Metz, 2011).

29 References to “the state” concern the federal government. There are also references to a state (CT) or state agency (CT DOL).
height of unionization and membership, the 1930s–1950s (Massey, 2008). Redistributions included programs to support unemployed workers (unemployment insurance) and disabled or elderly workers (Social Security). There were also means-tested programs with cash payments (Aid to Dependent Children [ADC]) and food support (the food stamp program).

Propelled by crises in a crisis-prone system, a state realignment began in the 1970s. Neoliberal state policies supported deregulating markets and corporate welfare (Peck, 2010). Policies, categorized in the 1980s as the Washington Consensus, included free trade, fiscal austerity, market deregulation, privatization, and private property protection (Centeno & Cohen, 2012). The restructuring contracted state redistributions and expanded state control. In the 1980s, mass incarceration began as means-tested programs were cut (Alexander, 2012; Peck & Tickell, 2002). Among redistributions, the realigning state included both contractions (rollback) and expansions (rollout; Peck & Tickell, 2002). Reductions and elimination of state programs cut, or rolled back, state funds. Means-tested social safety net programs were racialized and increasingly associated with dependency and cultural impoverishment (Collins, 2008). Means-tested programs were increasingly popular targets for cuts or elimination. As an example, the public-sector jobs component Comprehensive Employment and Training Act (CETA) of 1973, an E&T program, was reduced in 1981 and eliminated by 1982. The vast majority of the CETA funds ($41 billion of $51 billion) paid for public-sector employment for people unable to find work (Smothers, 1981).

30 There were also subsidies for capital. After WWII, federal support shifted from cities to the growing suburbs through guaranteed home loans, tax credits, highways, and other public services supporting home building, trucking, and the defense industry (Ross & Levine, 2015).

31 These also serve as subsidies for capital, externalizing necessary costs for workers that might other be included in wages.
In addition to the rollback of the state, programs privatized and devolved (a rollout). Funding to manage and administrate federal programs devolved to state governments and the private sector through block grants and contracts (Eisinger, 1998; Peck & Tickell, 2002).\textsuperscript{32} As responsibilities shifted, capacity in the local economy, government, families, market, and charity were diminished by capital mobility in former industrial centers.\textsuperscript{33} An asymmetrical relationship was established wherein “local institutions and actors were being given responsibility without power” (Peck & Tickell, 2002, p. 386). One example is the successive jobs training programs that followed CETA. After cuts, the remaining E&Ts were devolved and contracted out, outlined in Chapter 3.

In the midst of state restructuring, a network of local boosters and economic development initiatives arose to fill gaps from capital and federal contractions and departures. The role of the city and its agencies and infrastructure supported private growth (Logan, Molotch, Fainstein, & Campbell, 2013). With municipal entrepreneurialism, there were successive waves of large publicly funded projects, such as sports arenas, convention centers, and consumption centers. These projects represent a controversial use of government funds for private gain. As demonstrated in NYC, projects often overrun costs and underperform profits, while local and state funds to transportation, housing, and local schools shrunk since the 1970s (Eisinger, 2000). Based on the limited nature of capital investment and requirements for low labor and operation costs, there is temporal dissonance. Poor and working-class people are needed to make the

\textsuperscript{32} There has been a growth in public private partnerships since the rollout period of neoliberal model policies (Peck & Tickell, 2002).

\textsuperscript{33} Many smaller former textile cities, like New London and Willimantic, declined with plant closures, slippage in public services, and self- destruction of property and tax base, and they carried deficit spending, a debt burden, relying on declining state and federal funds after capital flight (Hoyt & Leroux, 2007, pp. 20–24).
current economy work. However, the model for local governments is to attract wealthier people to live and visit. This is a central dissonance in E&T programs and the desires of trainees, explored in the Conclusion.

**Restructuring Labor Markets**

**Racializing and gendering healthcare and manufacturing labor.** My study includes cases of training for entry-level employment in healthcare and manufacturing. This section follows the racialization and gendering of these fields both practically, by framing manufacturing as productive labor and healthcare as reproductive labor, and in a historical and theoretical context. Woven throughout are the spatial dynamics of labor markets from spatial segregation and mismatch in productive labor to the location of care work.

While decreasing by the 1960s civil rights movements, labor segregation by race and gender continue concentrating disadvantage (Lowe, 2013). Racing and gendering happens within structured labor market segmentation into primary and secondary labor markets. Primary labor markets are generally stable (through government contracts), well-paying jobs with based in formal education or unionization. This includes stable working-class employment of entry-level productive work (disproportionately white and male). Secondary job markets generally are unstable, with poorly paid jobs filled by a surplus of untrained people performing simple and repetitive tasks common in entry level reproductive work (disproportionately women and people of color; Harrison & Sum, 1979). Generally, entry-level productive work in defense manufacturing jobs are in the primary labor market, while entry-level healthcare jobs are in the secondary labor market.

**Productive labor.** Productive sectors of the economy, such as manufacturing, produce commodities (Marx, 1993a). Before the industrial revolution, production was done by hand and
in small batches by skilled craftsman and apprentices. Technological advances in production, energy, and transportation allowed for growth and consolidation. Industrial production expanded and cheapened goods through rationalizing labor on assembly lines and mechanizing work (Braverman, 1998). Factories increased scale and speed, making more standardized finished products. Factory-based, large-scale production concentrated textile production in the northeastern United States. “Traditional manufacturing was characterized by a preponderance of middle-income jobs due largely to the influence of unions,” securing worker conditions through collective bargaining (Kalleberg, 2011, p. 63). Capital mobility in the 1970s restructured traditional manufacturing through closing, moving, subcontracting, using contingent labor, and automating (Bluestone & Harrison, 1982). After restructuring, manufacturing remained or grew in old industrial regions in two main forms: traditional and advanced.34 35

Traditional manufacturing is a continuation of labor-intensive factory production, generally with cheaper labor. There are cost reductions by changing the status of workers to contract, temporary, and part time and preferring more vulnerable workers, such as immigrants. Growth in “low educated Mexican labor” cheapened labor in both the production and service sectors (Kalleberg, 2011, p. 51). After restructuring, work arrangements degraded from more stable and protected full-time unionized jobs. Generally, the advanced manufacturing sector has high technology production methods, skilled workers, and produces complex items, such as biomedical products (Fitzgerald, 2006). Advanced manufacturing is highly mechanized and automated, requiring relatively fewer production workers, with higher productivity, than

34 The reasons industries remain can relate to transportation costs, regulations or trade barriers, need for quick turnaround, small scale, or ready access to a vulnerable labor force.
35 “Post capital mobility” or “post restructuring” refer to the time since the 1970s and are not meant to imply that restructuring is over.
traditional manufacturing does. More labor is in research, engineering, and design (BA or higher positions) than in production work (van Winden et al., 2010). Attraction and growth of advanced manufacturing is an economic development strategy for industrial regions (Clark, 2013).

The distinction between traditional and advanced manufacturing is imprecise and intersects with the skill of workers, the complexity of products, and technology. Defense manufacturing highlights this gray area by having characteristics of both. As in traditional manufacturing, parts remain labor intensive, especially complex small-batch work. There is a web of subcontractors as a cost reduction measure. As in advanced manufacturing, workers are well paid, highly skilled, and can produce high tech products. The divide between traditional and advanced manufacturing relates to workers’ categorization and compensation as much as to the work being done or items being produced. Worker categorization connect to racial separations in manufacturing, beginning with the industrial revolution.

In the late 19th century, revolutions in technology and labor organization increased production and resource extraction, requiring more laborers than were domestically available. Generations of predominately European immigrants met the expanding labor demand. Urban production jobs included exploitation and mobility because of increased access to education in urban centers and job mobility in industrial work (Steinberg, 2001). During the rapid industrial and urban growth at the turn of the 20th century, most African Americans, Mexican Americans, Native Americans, and Chinese Americans lived in rural areas. Cotton for northern textiles was sharecropped and farmed by keeping most African Americans in the predominately rural South, through force or lack of an alternative (Steinberg, 2001, pp. 28–29).\footnote{These labor systems replaced plantation slavery, abolished after the Civil War.} Until the Great Migration
(1916-1970), African Americans were primarily agricultural workers and domestic servants, two categories left out of New Deal Labor protections (Rothstein, 2017, p. 156). African Americans moving to industrial cities during the Great Migration found that entry-level jobs were either segregated to the lowest levels or available only after the supply of White male workers was exhausted. African Americans were either barred from union membership or able to join auxiliary unions with no voting rights, until Civil Rights legislation in the 1960s (Rothstein, 2017, pp. 158–160). Labor segregations and exclusions included WWII defense manufacturing. Integrated factories and shipyards were mandated by the federal government as work diminished, production shifted locations, and workers were laid off at the end of WWII (Rothstein, 2017, p. 167).

After WWII and the Great Migration, industrial restructuring intensified, with capital mobility rising in the 1970s and reducing industrial jobs in urban centers. Industrial production increased in suburbs and the Sunbelt, disproportionately White areas (Ross & Levine, 2015). African Americans and later waves of post-1965 immigrants entered cities as industrial production contracted, moved, automated, and downsized (Massey, 1995). Although manufacturing remains in old industrial regions, jobs are not returning to precapital mobility levels. Manufacturing jobs are declining in real numbers and as a percentage of the labor force, from 31.2% in 1970 to 13.6% in 2016 (Baker & Buffie, 2017).

Since civil rights legislation ended legal segregation, “economic differences became self-perpetuating,” and segregation and inequality remain entrenched (Rothstein, 2017, p. 153). In productive labor, desegregation effectively ends by 1980 and resegregation has happened since 1995. Black workers continue to disproportionately hold lower paying and status jobs (Tomaskovic-Devey et al., 2006). There is a continued lack of access to good productive work
for African Americans living in center cities. For example, there is a spatial mismatch between job growth in suburban areas and job seekers, specifically Black workers, in urban areas (Ihlanfeldt, 1994). A highly publicized case of someone trying to overcome spatial mismatch is a Detroit man walking 21 miles daily to work in a factory in the suburb because he had no access to a car or public transportation (Schmitt, 2015). As the call for productive labor demand has contracted in old industrial regions, workers remain racialized as disproportionately White. The spatial location of work and workers has shifted to car centric suburbs. Machinists are a case of the restructuring and racialization of productive labor in manufacturing in primary labor market jobs, the subject of Chapter 4.

Reproductive labor. Social reproduction is often exploited yet necessary work to “raise, care for, and maintain” people and society (Duffy, Armenia, & Stacey, 2015, p. 7). Reproductive labor is broad, across services as varied as bank-telling and healthcare. Care work, a part of social reproduction, contributes to well-being and involves face-to-face relations or care for dependents. Care work is divided into nurturant, such as nursing and teaching, and non-nurturant or menial, such as cooking, cleaning, and laundry (Duffy, 2011, p. 114). A mixture of paid and unpaid workers provide care through the family, market, and public sectors. My research concerns paid care work in healthcare.

Care work is long devalued and hyperexploited, as either unpaid housework or domestic work by formerly enslaved people for wages below societal standards of living (Davis, 2011; Folbre, 2012). There are stratification and devaluation between paid care work and other occupations and within paid care work. I discuss both issues in my research. Care work broadly has wages below productive work at the same skill level (Duffy et al., 2015, p. 10). England, Budig, and Folbre (2002) point to an association of this work with women and mothering. Care
for dependents is devalued as natural and unskilled, and there is a wage penalty for female jobs in general. Within care work, there is a stratification between professionally educated and credentialed care workers, who are disproportionately White women, and the lowest-paid care workers, who are disproportionately women who are racial and ethnic minorities, poor, and foreign born (Duffy, 2011, p. 17; Duffy et al., 2015, p. 11). There is an ongoing relationship between mostly White professional- and managerial-class women who can work outside of the home and the poor and working-class women, disproportionately women of color and foreign-born women, who make that work possible via paid caring, cooking, cleaning, and laundry. This arrangement shows how “serfdom saved the women’s movement” for White professional-class women (Duffy, 2011, p. 5; Glenn, 1992). Domestic servants are an example of stratification within care work. Domestic servitude was a dominant form of female employment during the industrial period (the 1870s–1970s) and included nurturant and menial tasks. Domestic servants have been jobs of last resort for immigrants, racial and ethnic minorities, and poor women (Duffy, 2011, p. 33). From the end of the Civil War to WWII, domestic work was the most common form of employment for Black women (Davis, 2011). Although there are fewer domestic servants, nonprofessional care workers, like CNAs, continue to be disproportionately Black women (Glenn, 1992).

Since industrialization, there has been an increase in paid, institutional, formalized reproductive work. Generally, reproductive work has been outsourced or commodified, shifting from unpaid family to paid workers performing a service (Duffy, 2015; Glenn, 1992, p. 4).37 In

37 The restructuring of social reproduction is overstated and more complex than linear and increasing commodification. In the period of outsourcing, there remains significant unpaid labor. There were also always paid workers, and the increases in paid care work in education, healthcare, and social services also speak to changes in
preindustrial urban formations, both production and reproduction occur largely in households. In urban industrial formations, production is taken over by capital and reproduction remains centered in the home. After WWII, there was a rapid commodification of social reproduction, explained in the following ways. First, conditions of capitalist urbanism required more wages and paid care in part because capital processes atomize people and nuclear families away from kin and community networks. Urban life increasingly required dependents and older adults to be cared for by paid workers. Second, the needs of constant capital expansion required new areas of profit making (Glenn, 1992, p. 5). As a result, capital firms “invent... new products and services, some of which are indispensable as the conditions of modern life change and destroy alternatives” (Braverman, 1998, p. 281). As more parts of daily life are for sale, and more people enter wage employment, families lose the ability to subsist. There is an “atrophy of competence” (Braverman, 1998, p. 194). Outsourcing reproductive work offers opportunities for women’s independence through wages outside of heteronormative families and makes woman and families more dependent on wages and capitalist relations for survival, speaking to the changing locations of work and workers. CNAs are a case of stratification and outsourcing of care work in healthcare, the focus of Chapter 5.

The labor market in context: Healthcare and manufacturing. In the decades of intensified capital mobility and state restructuring, precarious and polarized working conditions expanded “bad jobs” (Kalleberg, 2011).38 In the period between WWII and the mid-1970s, there

-------------------

38 Jobs are bad due to low wages, no fringe benefits, and limits on autonomy, flexibility, or control (Kalleberg, 2011, p. 10).
was sustained economic growth and an expansion in good jobs.\textsuperscript{39} There was a general degradation of working conditions from the post-WWII male working-class model of job security, benefits, and unionization (Bluestone & Harrison, 1982).\textsuperscript{40} Rates of worker organization through unions declined in membership and bargaining power, and the rights to organize and strike diminished (Kalleberg, 2011, pp. 31–34; Massey, 2008). These processes and conditions eroded the means of survival for poor and working-class families, evidenced by the demographics of New London and Willimantic (Chapter 1). In CT, job openings are highest in low-wage jobs, such as retail salesperson, cashier, food preparation and service workers, waiters and waitresses, and PCAs (Labor Market Information, Connecticut Department of Labor, n.d.-a).

In CT, healthcare and defense manufacturing both have trajectories complicating the historical growth of bad jobs and dead-end work.\textsuperscript{41} Both sectors have desirable sub-baccalaureate employment, and together they make up large parts of the workforce in eastern CT, as referenced in Chapter 1. Generally, manufacturing work is desirable because “unlike retail, hospitality and business services, manufacturing offers workers who do not possess a bachelor’s degree a chance to earn middle-class wages” (Lowe & Wolf-Powers, 2018, p. 3).\textsuperscript{42} In CT, “skilled manufacturing jobs, which pay above-average wages, are coveted not only by workers but also by CT officials seeking to reverse the loss of higher paid jobs being replaced by low-wage work” (Singer, 2016). Although manufacturing jobs have declined overall, defense manufacturing is increasing.

\textsuperscript{39} Good jobs have good wages, fringe benefits, and work autonomy, flexibility, and control (Kalleberg, 2011, p. 10).
\textsuperscript{40} This model was never available to everyone. It concentrated among Whites in industrial cities and then suburbs. See Rothstein 2017 on racialized suppressed income and housing segregation.
\textsuperscript{41} Defense manufacturing is one part of the larger scope of military contracting that includes services, design, research, and production (Krishnan, 2016).
\textsuperscript{42} There is also a growing use of temporary workers in production (Putre, 2015).
Likewise, healthcare has living-wage sub-baccalaureate jobs. It is understood to be replacing the loss of good jobs in manufacturing (Ducey, 2009). Although healthcare is growing, the jobs are often segregated by setting and educational barriers, discussed in depth in Chapter 5.

Sub-baccalaureate healthcare and defense manufacturing jobs have characteristics that insulate them from contracting or becoming bad jobs. Both sectors have limited abilities to offshore or eliminate positions. Healthcare is often location-based hands-on care services (Duffy et al., 2015). For security reasons, defense contracting is limited to within the United States (Markusen et al., 1991). In eastern CT, EB’s submarine repair and assembly is also labor intensive (Bergman, 2016). Moreover, instead of state austerity cuts, both healthcare and defense contractors receive significant funds from the state. In 2017, Medicare paid $705.9 billion and Medicaid $581.9 billion in private insurance reimbursements, 37% of all national health expenditure (NHE) in 2017 (Centers for Medicare and Medicaid Services, 2018). The Department of Defense (DOD) allocated $320 billion to contractors in 2017, 8% of all mandatory and discretionary federal spending (Schwartz, Sargent Jr, & Mann, 2018). Both the healthcare and defense manufacturing sectors claim a shortage of skilled workers to meet demand. In healthcare, there is quick growth and high rates of attrition, especially among frontline home care and long-term care workers (Dill, 2015). In manufacturing, the workers, especially military contractors, are aging toward retirement. For example, in 2017, 61% of aerospace and defense contractors were over 46 and there were 27,000 open jobs in aerospace and defense companies (Office of the Under Secretary of Defense for Acquisition and Sustainment and Office of the Deputy Assistant Secretary of Defense for Manufacturing and

43 The work is labor intensive in part because submarines are large and complex, without many repeating parts that need to be hand assembled.
Industrial Base Policy, 2018, p. 8) Skilling and education are proposed fixes sub-baccalaureate workers and worker shortages in both sectors.

**Skill: A Gap or a Degraded Disconnect**

With calls for a more educated and skilled new and replacement workers, there is a long-running debate between higher education and training. There is a historical tension between the push for universal college and the rise of middle-skill jobs that require workforce-specific training (Newman & Winston, 2016). There is public support for both college-for-all and workforce training initiatives. This section begins by considering education and training as methods to share skills, and the remainder is about skill.

**Education and training.** Formal education and training have components of learning socialization (laboring and citizenship), technical knowledge (literacy and numeracy), and declassing or depoliticizing (Bourdieu & Passeron, 1979; Bowles & Gintis, 2011; Willis, 1977). Education and training are on parallel and often segregated tracks. Formal primary and secondary education begin in Boston and New York in the 1820s and spread during industrialization and the corresponding Progressive Era in the 1890s–1930s. By 1920, 46.6% of school age children were enrolled in secondary school (Herbst, 1996, p. 157). While there were debates between college preparation, common education and vocational education, public education began and remains focused on academic skills (Herbst, 1996). College and college access expanded after WWII, with the formalization and growth of professionals and increased

---

44 The rise in formal education, along with industrial capitalism, shifts away from informal or on the job training through experience and apprenticing. For example, Katz (2004) found that in agrarian subsistence societies, learning is transmitted in childhood through interactive processes of play and work. As more people entered waged work outside of agriculture, processes of formal schooling increased.
access to higher education for veterans through the GI Bill (Collins, 1979; Rothstein, 2017). Higher education enrollment jumped from 3.2 million to 7.1 million during the 1960s (Herbst, 1996, p. 203). Higher education was classed via baccalaureate or higher credentials, generally educating managers and professionals (Bourdieu & Passeron, 1979). There are divisions among universities, “in which graduates of elite institutions prosper and degree holders from more modest one’s flounder” (Newman & Winston, 2016, p. 24). Although there have been rising rates of enrollment in four-year colleges, graduation rates have not kept pace with enrollment. In 2015, 68% of high school graduates entered college, whereas only 34% of college students who began six years before had earned degrees (Newman & Winston, 2016, p. 16). More people are starting four-year degrees and not finishing, and rising education rates are uneven by race and class, discussed below.

As formal education expanded, a system of formal training developed. These programs range from the degree-granting technical high schools and community colleges to nonprofit, for-profit, and public nondegree programs. Career and technical education (CTE), or training, is preparation for employment through credentials and certificates. Training programs emerged and formalized through industrial programs first paid for by industry. Formal state funding started with the 1917 Smith Act and increased with WWII defense funds. These funds built vocational education in the form of technical high schools, trade schools, and community colleges (Newman & Winston, 2016). There was a public funding stream for E&T between the New Deal

---

45 However, high school graduation rates are up; they have been over 85% since 2000 (Newman & Winston, 2016, p. 16).

46 Employers remain the largest source of E&T spending an estimated $164.2 billion in 2012 (Hanks & Madland, 2018). While employer E&T spending is difficult to measure, it is estimated to have declined 28% between 2001-2009 and employers spend more training highly educated and paid workers (Waddoups, 2016).
and Great Society, discussed in Chapter 3. During the War on Poverty, vocational training shifted from preparing industrial workers to remedial training for disadvantaged youth and workers. Programs suffered as manufacturing jobs decreased, and less training was possible because of limited job prospects for students, in addition to funding cuts (Newman & Winston, 2016, pp. 42–44, 46). There has also been low interest in trade education because of its assumed instability, which is often accurate (Fitzgerald, 2006, p. 151). Community colleges are receiving attention and funding, such as the $12 billion Obama-era Community College to Career Fund Act or WIA for training through community colleges (Meléndez, 2004, p. 7; Newman & Winston, 2016, p. 119). Although community college students take general education courses and can transfer to a four-year college, the focus remains on skill-specific training or degrees.

There is a class, and often race, divide that tracks people to education or training, producing a dichotomy and hierarchy of learning skill and knowledge. The United States racializes and classes primary and secondary education through residential and educational segregation because schools are locally funded and distributed (Massey & Denton, 1993). Preparation for and acceptance to education or training relates to these segregated conditions. The outcomes and tracking to education and training replicate primary and secondary school segregation and naturalize reproduction as based on merit, knowledge, or skill (Bourdieu & Passeron, 1979). Human capital individualizes issues of wages and labor market conditions.

Education gives credentials for baccalaureate and higher professionals and managers, whereas

---

47 Since the WIA, E&T funds are targeted to the programs through skills training vouchers, aimed at community college training.

48 At community colleges, fewer than 25% of matriculated students go on to a four-year college, and about half of all students are enrolled in noncredit certificate programs (Newman & Winston, 2016).

49 This division of skill for the working class and knowledge for the professional and managerial classes is false, but it speaks to the classing of different learning settings. Education and training involve both skill and knowledge.
training, through community college programs and certificate programs, prepares people for working-class employment. Professional fields have pairs of educated professionals and trained paraprofessionals. Training is often associated with the working class and positioned as a second tier, below formal education. According to Newman & Winston (2016, p. 80), “vocational education has long been conceived as a solution to a problem: the integration of immigrants, a remedy for poverty, a way of dealing with disaffected kids, or a skills gap.” Within the restructuring state, human capital theory becomes mainstream claiming that skills are forms of capital that can be purchased, through education and training. The theory claims that wages and productivity are directly connected to and commensurate with skill (Bowles & Gintis, 2011; Shauman, 2013). Training programs develop job-specific skills, likely to change in a changing job market.

**Understanding skill.** Skills are the mental and physical abilities involved in labor (Marx, 1993a). Most jobs require both, and skills do not necessarily connect to paid labor. Skills vary in depth and specificity: foundational, core, and advanced (Fitzgerald, 2006, p. 165). There is also a separation between hard and soft skills. While employers’ commonly claim that there are insufficient workers with sufficient technical and cognitive or mental and physical skills (hard skills), Ducey (2009) found increasing demand, and vocational training for soft skills such as behavior or attitude. Lafer (2002) showed how employability training teaches punctuality,

---

50 Human capital is defined as “the stock of knowledge, skills, experience, health, personal attributes, and values that influence the productive power of an individual” (Shauman, 2013, p. 387).

51 *Skill* can refer to a job requirement or a personal ability or attribute. Skill is assessed in time, place, and political economic contexts.

52 Bodily intensive skill, historically apprenticed or learned on the job, was once valued but has been devalued. Suchman (2007) observed a shift from manual to mechanized labor at a paper mill, finding that bodily skills (timing, smell) were obsolete, as new skills were needed in reading indicators. Older skills were undermined and replaced by new ones.
discipline, and motivation. Many of these new soft skills are hard to define and measure and resemble older external work control and discipline. Working-class male labor historically had external discipline and control, such as scientific management (Braverman, 1998). Soft skills internalize control, maximizing workers’ discipline and productivity, in addition to highly inflexible and controlled work for bad jobs (Kalleberg, 2011). Work is a “matter not of skill, but rather of will,” internalizing discipline (Lafer, 2004, p. 117). There is a trend toward compulsory employability training and higher education for professional and managerial workers to increase their human capital and remain competitive. This compulsory training extends to poor and working-class workers demanding middle-class attitudes and orientations without middle-class pay or conditions (Dill & Morgan, 2018). A Pew survey found 54% of the workforce identified personal upgrading throughout their work life important to “keep up with changes in the workplace” (Pew Research Center, 2016). Employability for the poor and working-class and professional and managerial class converge in a push for continual self-improvement for labor market competitiveness, with similarly classed outcomes.

Skill level is assessed by how long it takes to learn to do a job well or proxied by the required level of credential or education. Skill connects to the level of worker productivity. However, with the restructuring of labor relations since the 1970s, there has been a growing

53 Scientific management studies the labor process to increase productivity and rationalize it. A core of scientific management takes away knowledge once owned by the worker and concentrates it with a new class of managers and planners who control and discipline workers (Braverman, 1998).

54 For example, Braverman (1998) retold the experience of Frederick Winslow Taylor, who worked as an apprentice and machinist for under a year. Taylor noted how his level of productivity and efficiency were above that of his working-class coworkers. Braverman posits that professional people who do working-class labor temporarily will work harder because they know they will move ahead to better conditions. This is different from working-class workers, who know that their working lives will continue with unrelenting conditions.
disconnect between worker productivity, wages, and skills. A skill categorization scheme includes a hierarchy of unskilled, middle-skill, and highly skilled labor. A low-skill or unskilled job can be learned and performed well in a few days and generally requires a high school diploma or less. Semiskilled, middle-skill, or paraprofessional work can be performed well after a few weeks or months. Highly skilled or professional jobs can take years to reach proficiency and often require a four-year degree or more. This schema proxies formal education and training for skill, which devalues experiential learning, often in more physically, emotionally, or socially engaged work.

My research concerns training for middle-skill jobs, specifically machinist and CNA commonly categorized as middle skill (San Diego Workforce Partnership, 2015). Middle-skill jobs generally require more than a high school diploma and less than a four-year college degree, or high school and some training. Almost 50% of jobs in the United States, a significant amount of job growth, are middle skill (Holzer & Lerman, 2007, p. 9). The growth in middle-skill jobs are in opposition to the characterization of a hollowed-out postindustrial service economy that is polarized, or in an “hourglass” shape, between good and bad jobs, high and low skill (Kalleberg, 2011, p. 65). Both are true; there is a growth in middle-skill jobs, yet wages are stagnating or declining, with inflation hollowing out wages regardless of the skill required (Desilver, 2018; Holzer & Lerman, 2007). Middle wage employment has shifted. Older middle wage

55 For example, Fitzgerald (2006) found that although manufacturing productivity is rising at twice the rate of the rest of the economy, wages are declining (pp. 151–2).
56 There is a movement to value more the complex relational aspects and dynamics of care work that are currently undervalued by the designation as unskilled and poorly paid (Folbre, 2012).
57 In general, higher skilled jobs require cognitive reasoning and unskilled jobs require social interaction (services), both hard to replace with outsourced labor or technology leaving a hollow middle (Holzer & Lerman, 2009).
58 Polarization and growth in the middle are not at odds since there can be wage polarization and more education and training required for jobs in the middle.
employment (construction, manufacturing and clerical work) paid decent wages with low levels of required formal education or training, declined due to technology and capital mobility. New middle-wage employment (health and high-end service) requires more education and training, but wages have not followed (Holzer, 2015). Some middle-skill jobs have rising wages these include medical technicians (associates required) and electricians, but not the majority (Holzer & Lerman, 2009, p. 4).

Newman & Winston (2016, p. 9,11) propose middle-skill jobs as an option between college, which can lead to debt and no job, and remedial and noncompetitive workforce training for poor people, discussed in Chapter 3. Sectors with middle-skill jobs, such as healthcare and manufacturing, can include advancement. However, middle-skill labor is a complex category that conceals nuances, inequality, and differences within the category. There is a spectrum in middle-skill training from having a high school degree with on-the-job training (OTJT) to an associate degree. There is a credit barrier between noncredit training and an associate degree that tends to divide middle-skill training by race and class, discussed in Chapters 4 and 5. Although middle-skill healthcare jobs are growing, middle-skill production jobs have declined in number and percent of the labor force, from 30% to 10% (Holzer & Lerman, 2007).

**A Gap or Restructuring?** Despite the growing number of middle-skill jobs, there is a long-standing debate about whether, in the labor market, skills are advancing or degrading. The first claim is that skills are advancing. The increase in both levels of educational attainment and educational job requirements by employers say that human capital is increasing (Collins, 1979). Innovation and technology reduce and eliminate unskilled, dirty drudgery in agricultural or manual work, leaving more skilled cognitive and social jobs (Collins, 1979; Grugulis, Warhurst,
& Keep, 2004). The idea is that a postindustrial economy requires a growing number of knowledge-based workers. The knowledge-based worker theory includes an old assumption that the more people use technology in their work, automating unskilled tasks, the more skilled the work is (Braverman, 1998). This is not necessarily the case.

Within the logic of skills advancement, capital and the state blame poverty and unemployment on an individual lack of skill. People are unemployed and underemployed because they lack sufficient skills for living-wage jobs, in human capital theory (Lafer, 2002, p. 48). The logic explains how skilled jobs remain unfilled regardless of fluctuations in unemployment and underemployment. Lafer (2005) found that although there were unfilled nursing positions, there were enough skilled nurses. High nurse attrition meant there were not enough nurses willing to work under the current conditions, not a shortage in skilled nurses. At the same time as the shortage in the 1990s, hospitals laid off and redistributed nursing jobs to aides and technicians (Lafer, 2005). The jobs were segmented and degraded. The shortages of skills connect to labor conditions and the changing demands of capital, more than to skill.

Similarly, low wages and bad jobs have more to do with deunionization and capital mobility than skill level (Cowie, 2011, pp. 16–17; Massey, 2008, p. 11). Since the 1970s, there has been a growth in precarious employment typified by few legal protections and insecure and uncertain wages and benefits (Kalleberg, 2018, p. 286). Americans have, on average, become more formally educated and skilled over the 20th century as wages have stagnated or declined

59 Although agricultural and manual work (industrial) has declined, new forms of necessary drudgery have arisen in polarized service-sector work, where bad jobs with lower pay and more part-time employment make up a larger part of the workforce (Kalleberg, 2011, p. 30).

60 Technology has facilitated outsourcing of highly skilled jobs and generally allowed for a reduction in skill, discussed in the next section.
(Ryan & Bauman, 2016, p. 4). Since the 2008 financial crisis, unemployment is falling, resulting in wage improvements, but this has not made the median wage a living wage (Desilver, 2018). When disproved by the economic facts, the skills gap has come back, “hydra-like,” and continues (Lafer, 2004, p. 114).

The focus on skills (lack, level, and skilling) is overstated and obscures capital restructuring. Changes to profit models affect the organization of skill and the skills expected of workers. Capital tends to degrade and deskill work and workers as a profit strategy. A drive of capital accumulation is to increase production and efficiency, often by reducing labor costs and increasing productivity through labor reorganization and mechanization. Capital, through management and mechanization, removes skill, knowledge, and control from workers. Managers reorganize and change the division of labor by dissecting a labor process into smaller units. The goal is to increase the efficiency of scale and productivity while reducing workers’ skill to detail work (Braverman, 1998, p. 118). These processes increasingly deskill labor and laborers into atomized executors of planned tasks who are easily replaceable. As managers and planners increasingly control the labor process, mechanization/automation is another tool to increase productivity and control the pace and order of work to meet predetermined targets (Braverman, 1998, p. 133). Worker skill and autonomy are limited to preplanned movements and tasks. The loss of control and knowledge reduces the laborers' ability to negotiate and control their work and working conditions (Braverman, 1998). Machinists are an example of this change, discussed in Chapter 4.

61 These processes were intensified by the scientific management movement at the end of the 19th century (Braverman, 1998).

62 In labor intensive production, exertion “used up” bodies that allowed “independence, mobility and identification with superiors” (Zuboff, 1988, p. 41). As the industrial revolution brought electrification and mass production via
Work is segmented, generally, between planners and executers. Managers and professionals are planners with autonomy and discretion. Workers are executers without autonomy or discretion. Over the 20th century, there has been a growing class of managers and professionals produced in part because the labor market expands with population growth and new sectors (Kalleberg, 2011, pp. 65–68). However, over time, segmentation and degradation spread to managers and professionals. Professional jobs are segmented; for example, nursing work involves fewer nurses and a growing number of multiskilled techs and aides, and social work is transferred to former clients and case managers (Ducey, 2009; Schram & Silverman, 2012). The rise of standardization in public education, such as common core requirements and lesson templates, reduce professional autonomy and control (Endacott et al., 2015). Both segmentation and degradation give workers lower levels of discretion and autonomy and render them more replaceable over time.

The segmentation and degradation of work are dual processes. Skilled work is segmented and degraded, requiring less skill, but different people must be upskilled for new deskilled jobs. These processes make “the domain of the expert… smaller and smaller as the century ended” (Duffy, 2011, p. 77). Changing who performs a skill, from a skilled to a middle-skill worker, can blur the relationship between work and skill level. Once-skilled tasks become middle skill, such as injections moving from the realm of trained nurses to assistants (Ducey, 2009).

assembly lines, scientific management began to reorganize machine shops and the labor of machinists, exacting more control (Braverman, 1998; Zuboff, 1988).

63 The growth in new and professional work has been used to complicate and challenge the degradation thesis, critiqued as too simplistic and overarching (Wood, 1982).
Generally, work segmentation and degradation accompany a rising level of requirements for credentials (through education or training). Although training is a proposed fix for poverty and unemployment, it often prepares people for worsening labor conditions, a great contradiction. Rising levels of credentials are disconnected from job skills or economic mobility (Collins, 1979, pp. 182–183). Collins found that most skills are learned on the job or casually, whereas professional education can be irrelevant, quickly forgotten, or too specific (pp. 16–7). Similarly, Livingstone & Sawchuk (2005) found that formal schooling deprives working-class people of their learning capacities, which are often collective and experience based. As a result, education is not a good way to train workers for specific jobs but reproduces and naturalizes class relations. Education produces abstract credentials by passing higher levels. Although education or training can be technically irrelevant, credentials monopolize access to jobs and reduce the possibility that workers acquire skills learned at the job (Collins, 1979). Professional organizations, regulation (scopes of practice), and the interests of the expansion of higher education, and related debt markets, protect the monopolization of jobs by credentials. Healthcare is a prime example of access monopolization.

Healthcare has rigid, formalized scopes of practice based on credentialing and licensing, with strained relationships between skills and jobs. Although there is complex credentialing, licensing and scopes of practice developed over the 20th century and vary widely by state and healthcare setting. For example, Licensed Practical Nurses (LPNs) often do the same work as

64 These new jobs can have better conditions than previous employment, such as a move from HHA to CNA, described in Chapter 5. However, the same work is done by a newly trained person for less pay than the previously skilled worker received.

65 There is a basic general level of skill required for jobs (literacy and cognitive skills; Collins, 1979). Most jobs require basic education skills, not correlated with education level.
Registered Nurses (RNs) and yet are paid less and receive less training (Collins, 1979). Skill categorization is often determined by who performs it: “Very complex practices are often categorized as unskilled because the groups performing them are unskilled” (Adler, 2004, p. 242). As professional groups discard less-skilled work and less-skilled workers do more skilled work, work is devalued or becomes invisible. With changing training requirements and scopes of practice in healthcare, there are turf battles between professions and occupations. For example, there are experiments in expanding CNA nursing tasks to increase job satisfaction and retention. At times, nursing unions and professional organizations will push back to protect the scope of their professions (Morgan & Farrar, 2015).

This disconnect between education and work has contributed to diploma inflation and underemployment, or the underuse of skills and knowledge. Diploma inflation includes the trend of people with doctorates taking the jobs that people with master’s degrees held, people with MAs taking the jobs people with BAs once held, and people with BAs taking sub-baccalaureate jobs, such as bartending (Newman & Winston, 2016, p. 23). Another example from healthcare is multiskilled staff doing the same work as credentialed people but being paid less (Ducey, 2009). More credentialing does not necessarily relate to skill or access to living wage work in the labor market.

Calls for more skill and skilling explain away inequality, devolved responsibility, and restructuring. The logic is that one can educate or train oneself out of being poor or working class. This circular logic ignores the structure of the economy that degrade skill and working

66 This is common in service fields that generally have more credentialing and formal education. It has been found that manufacturing relies less on credentialing or formal career ladders and more on seniority for career access and advancement (Fitzgerald, 2006, p. 157).
conditions, and reproduce class, creating the majority of people as poor and working class. A skills deficit logic and the call for more skilling persist as a cornerstone of U.S. labor policy, with recent iterations focusing on soft skills or employability (Lafer, 2002, pp. 69–70). Appeals for a more skilled workforce are borne out in policies such as E&T.

A Skill Fix? E&T is part of a larger suite of government programs to prepare, support, and attach workers to labor markets. The United States has a history of attaching rights to both property ownership and waged work, called economic citizenship (Collins, 2008). Since the colonial period, land and labor have been gendered and racialized by excluding unwaged workers (women and enslaved African Americans) or those dispossessed of land (Native Americans and Mexican Americans; Roediger, 2008; Steinberg, 2001). New Deal government expansions redistributed benefits to workers through Social Security, unemployment insurance, access to credit, and lower mortgage rates (Collins, 2008, p. 135). The role of ADC, the first incarnation of state welfare, was to replace income from a missing male wage earner. Those benefits that were means-tested have been attacked and cut since the 1980s. As Collins (2008, p. 138) said, “it is common in the American political culture to portray women who turn to the welfare system as dependent and unwilling to work.” Government redistributions, such as the New Deal or Great Society, often expand with social unrest and contract when more labor is needed (Piven & Cloward, 2012). As means-tested welfare programs expanded and contracted, people moved back and forth between work and programs. After the 1996 welfare reform, the

---

67 This is evidenced by the fact that in 2018, almost 80% of Americans reported living paycheck to paycheck (Reich, 2018).

68 Again, during the New Deal expansion, disproportionately Black sectors of agriculture and domestic labor were excluded from regulations, such a minimum wage, and protections, such as unemployment insurance or Social Security (Rothstein, 2017).
workforce emerged as a degraded form of work that is contingent, flexible, disposable, and disconnected from the rights and benefits of economic citizenship (Collins, 2008; Peck, 2001). In general, the state continued to valorize work and workers, even as uneven, exploitative movements of capital and the state degraded work. Within the broad conditions of unemployment and insufficient employment, E&T is part of the state facade that all Americans have value as a worker, and access to work, if only they have the right skills.

General trends in E&T will be examined by considering the E&T system in eastern Connecticut in Chapter 3, an entry-level manufacturing training in Chapter 4, and an entry-level healthcare training in Chapter 5. These trainings will be windows into the changing political economy and relations of capital, the state, and labor. Healthcare and manufacturing jobs are key options for poor, working-class, and unemployed people in eastern CT because there is current and projected job growth in both sectors, as cited in Chapter 1. Healthcare and manufacturing are sectors that can provide avenues of living-wage employment to people who are not managers or professionals, as discussed earlier. These avenues for living wages are in tension with the segmentations, segregations, and stratifications within labor markets that monopolize access to good jobs.

Social position is often connected to being employed and the type of work. In the decline of industrial work, it has been observed that in addition to losing class position worker also lost their place in society, “deindustrialization is clearly more than an economic process. It involves the displacement of…industrial workers to the…periphery” (High & Lewis, 2007, p. 25).
CHAPTER 3

FOLLOW THE MONEY: EMPLOYMENT AND TRAINING IN EASTERN CONNECTICUT

While there is media and political focus on the expansion of college access, training is a consistent policy for employers and the state. More training is devolved to the state and individuals as the demand for middle-skills increases as employer funding and training declines. E&T is a popular policy that is in the interests of capital and does not seriously challenge racial and economic segregation and follows human capital theory of educating and training oneself out of poverty (McKee, 2008). E&T programs connect dislocated workers, disadvantaged adults, and youth to labor markets. This dissertation focuses on dislocated workers and disadvantaged adults. Employment services are primarily job search and placement, whereas training is general employability and job-specific skills.

This chapter addresses noncredit E&T in eastern CT that is for adults and publicly financed\(^70\): WIOA as a long-term stable program, HPOG as a time-limited study grant, EASTCONN and the evolving role of contractors, and two cases of employability (soft skills) training.\(^71\) E&T restructured in the wake of state devolution and cuts (Meléndez, 2004). Following the programs sheds light on how the system operates, in the context of restructurings.

\(^{70}\) Not private-pay programs at community colleges or private training institutes

\(^{71}\) The next two chapters focus on skills training.
An Introduction to Employment and Training

This section follows federal E&T programs, through the DOL focus on disadvantaged and dislocated adults (see Figure 1). In the midst of the Great Depression crisis and dislocation, the Wagner Peyser Act of 1933, a New Deal program, created the Employment Service (ES) to offer job search and placement assistance to dislocated adults through a job bank (Schrock, 2013, p. 164). After the boom of WWII production, 1950s industrial decline began to deteriorate the urban economic base (employment and tax revenue) because there was more industry and White flight out of cities, segregating them racially and economically. Despite calls for more structural reform, 1960s War on Poverty programs targeted poverty alleviation primarily through individual, family, and community access to opportunities that could accomplish little against the forces economically undermining industrial cities. A poverty alleviation approach includes job training, which does not directly target structural inequalities of capital or racial segregation (McKee, 2008, p. 92). In this vein, the Manpower Development and Training Act (MDTA) of 1962 was a federally funded and managed E&T program that was one third classroom training and two thirds OTJT. The program served 1.9 million people between 1962 and 1973, targeting dislocated workers and later admitting economically disadvantaged workers (Barnow, 1993, pp. 76–77). MDTA was limited in scale and creamed “better prepared” job seekers (McKee, 2008, p. 125).
In the 1970s, federal programs and funds began devolving to state and local government administration, which became known as New Federalism (Meléndez, 2004). E&T legislation shifted to meet regional and local labor market needs. CETA of 1973 was a product of New Federalism; it was a hybrid program that included both state and local administration and federal direct federal contracts. CETA had a variety of components, but the largest and most controversial was public-sector employment, where the government served as the employer of last resort. CETA and public-service jobs became unpopular with claims they were inefficient, unfair or promised government waste; it was reduced in 1981 and ended in 1982 (Smothers, 1981). The Job Training Partnership Act (JTPA) of 1982 replaced CETA, without the public-sector employment component (Barnow, 1993; Giloth, 2000, p. 349). JTPA was a significantly

---

72 The Job Bank is still in effect as the basis of workforce development as job searching at American Job Centers (AJCs).
reduced E&T program, and it reflected the cutting and devolving of federal programs that began in the Reagan administration. JTPA was a shift from job creation to short-term job training, under the belief that there is a labor shortage, not a job shortage (Lafer, 2002, p. 21). As Lafer (pp. 22–23) said, “the assertion that employment opportunities are plentiful—if only workers were qualified to fill them has been a central tenet of federal policy for the last twenty years.” Between 1984 and 1996, the height of the labor shortage claims for JTPA, Lafer (2002) found that the number of decent-paying jobs was at best enough for only a quarter of the people seeking them (p. 23). By the 1990s, there was a broad acknowledgment that workforce training programs “failed to improve family income or improve poverty,” and WFTD continued to have longstanding issues with poor wage, job retention, and job advancement outcomes (Giloth, 2000, p. 341).

JPTA was repealed and replaced by the WIA of 1998, later amended by the WIOA of 2015. WIOA built off the infrastructure of WIA. WIA and WIOA continued and increased devolution to state, local, and private actors (Nisbet, McKay, & Haviland, 2017, p. 186). WIA also expanded and formalized regional Workforce Investment Boards (WIBs) that integrated regional initiatives, managed contracts (including contractors), and did not provide direct services (Giloth, 2000, p. 353). WIBs were similar to JTPA’s Private Industry Councils (PICs)

73 WIOA is funded through the DOL with HHS for TANF services and the Department of Education for disability services. WIOA was ratified in 2014 and enacted in 2015. This is the most recent E&T federal program at the time of this writing (Employment and Training Administration, U.S. Department of Labor, n.d.)

74 WIOA changes included added “flexibility at the local level to provide incumbent worker training and transitional jobs as allowable activities and promotes work-based training by increasing the maximum reimbursement rate for on-the-job training from 50 percent to 75 percent; the law also emphasizes training that leads to industry-recognized post-secondary credentials” (Barnow & Smith, 2015, p. 31). This offered more state discretion over programs. States can transfer money between the adult and dislocated programs or add basic skills deficiency as a priority category, and employment services or workforce development no longer needs to be located at the OSCCs/AJCs. Again, there has been a general withering and shrinking of services (Barnow & Smith, 2015, p. 32).
but did not provide services as PICs did (Borges-Méndez & Meléndez, 2004, p. 97). Funding and programs have devolved from federal to states government and then from states to regional authorities, or WIBs. WIBs are dominated by market interests based on their majority private sector board of directors and focus on regional high demand occupations (Nisbet et al., 2017, p. 186). “WIA and WIOA may have deprioritized the needs of workers. For example, WIOA—like WIA before it—requires a majority-business board [for WIBs] … WIOA still allows for an outsized employer voice, which, in turn, can mean that worker voice is diminished” (Hanks & Madland, 2018).

WIA created One-Stop Career Centers (OSCCs), currently AJCs. OSCCs were increasingly administered, managed, or operated by intermediaries or contractors (Borges-Méndez & Meléndez, 2004). WIA was critiqued as more of the same in terms of E&T. WIA and then WIOA had similar providers and similar structures of locally and regionally devolved services that focused less on skills training and changed the funding mechanisms. WIA funding declined from previous programs, and there were overall fewer in-person trainings, following the post-1996 welfare reform shift to prioritizing work over skills training (Decker & Berk, 2011, pp. 912–913). Program reforms were implemented due to the limited results for the most disadvantaged participants (Lafer, 2002). There are a variety of explanations for why these programs have poor results, including limitations in scale or failure to address the erosion of labor conditions (Giloth, 2000; Lafer, 2002). WIA and WIOA promoted separations among participants through the delivery of tiered services and division of training based on the location or employment sector.

WIA, and then WIOA, segregated job seekers and reduced program costs through division into sequential and tiered services categorized as core, intensive, and training. Core
services were universally available and included career search, labor market information, and workshops. When someone was unable to find a job using core services, there could be referrals to intensive services. A tier of intensive services included case management, assessment, employability skills, and placement. These were increasingly administered by contracted nonprofits already adept at community engagement and case management (Decker & Berk, 2011). If needed, there might be referrals to the last tier of training, paid for through Individual Training Assessment (ITA) vouchers used at eligible training providers (ETPs). WIA, and now WIOA, tiered restructuring separate employment services (intensive) often provided by social services nonprofits and skills training (training), with community colleges as the primary providers. These groups were divided into programs, employability, and case management services for disadvantaged workers and skills training and job placement that focused on dislocated workers (Meléndez, 2004, p. 13). Job seekers with the most qualification and experience, generally dislocated workers, were creamed out of the programs. Although overall fewer people received skills training, this varied by state and region (funding priorities). Some OSCCs referred almost all participants to skills training, and some referred almost no one (Decker & Berk, 2011, p. 911). There was an increase in employability or soft skills, two examples of job readiness or employability programs, such as Access to Employment (A2E) and the Confidence Makeover workshop, discussed later in this chapter. Intensive services, such as soft skills and case management, were less expensive than job training or public-sector employment in CETA. An impact of this shift and contraction of the state is declining E&T federal funding. In 1978, $6 billion (unadjusted) funded 765,000 public sector jobs under CETA (Smothers, 1981). By 2015, $2.8 billion funded WIOA declining almost 50%, from $5.1 billion in 2000 (National Skills Coalition, n.d.). Under WIOA, E&T continued as devolved, privatized,
and reduced, focusing on labor attachment and struggling with its relationships to employers, the labor market, and disadvantaged and dislocated trainees.

There is a continued separation between disadvantaged and dislocated workers, in part due to a focus on employer demands embedded in WIBs. Employers are “customers” of jobs programs as much as job seekers. Programs sell services and applicants to employers (Schrock, 2013, p. 172). This tenuous balance is observatable in differences between sectorial and place-based programs. Sector programs have screening skill assessments and requirements, are longer term, and cream top participants into training and placements (Giloth, 2000, p. 343). Sectoral-based E&T operate from a belief that training can impact employers demand for workers (Conway, Blair, & Gibbons, 2003). The model is that sectoral trainings are “creating, assessing, and improving jobs...through enterprise development, targeted training, services, organizing, organizing and public policy change. Sometimes that involves making bad jobs into good jobs” (Giloth, 1995, p. 283). Giloth (2000) found sector trainings do not successfully focus on “job retention, career advancement, financing and shaping civic workforce agendas” (p. 354). Chapter 4 focuses on a sectorial training program in manufacturing. In contrast, the place-based E&T focus on the needs of disadvantaged job seekers through quick workforce reattachment with short-term job training (Schrock, 2013, p. 172). Place-based programs can have more employability components. General employability training can highlight critical thinking, oral communication, personal characteristics (such as appearance or attitude), and interpersonal skills (such as teamwork; Giloth, 2000, p. 348). Chapter 5 features a healthcare training program with a place-based approach. The next section delineates the regional implementation of E&T programs (see Figure 2).
Figure 2: Public Sector Employment and Training in Eastern Connecticut

<table>
<thead>
<tr>
<th>category</th>
<th>description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Federal</td>
<td><em>Ongoing</em>: Department of Labor (Workforce Innovation and Opportunity Act)</td>
</tr>
<tr>
<td></td>
<td><em>Time-Limited</em>: Health and Human Services (Health Profession Opportunity Grants) &amp;</td>
</tr>
<tr>
<td></td>
<td>Department of Labor (Workforce Innovation Fund)</td>
</tr>
<tr>
<td></td>
<td>[Funder and Regulator]</td>
</tr>
<tr>
<td>State</td>
<td>Connecticut Department of Labor</td>
</tr>
<tr>
<td></td>
<td>[Funder, Regulator, Contractor and Program Administrator]</td>
</tr>
<tr>
<td>Regional</td>
<td>Eastern CT Workforce Investment Board</td>
</tr>
<tr>
<td></td>
<td>[Contractor]</td>
</tr>
<tr>
<td>Contractor</td>
<td>Thames Valley Council for Community Action and EASTCONN through American Job Centers (Danielson, New London, Norwich and Willimantic)</td>
</tr>
<tr>
<td></td>
<td>[Program Administrator]</td>
</tr>
</tbody>
</table>

Setting the Scene: Funding Training in Eastern CT

WIOA in Eastern CT

This next section outlines WIOA funds and programs in eastern CT, Windham and New London counties. In 2014, the DOL allocated $25,077,349 to the CT DOL: $6,430,247 for low-income adults and $6,910,362 for local dislocated workers. CT AJCs provided 161,637 services (153,515 staff-assisted services) to 28,668 customers, including job search activities, workshops, and labor market information. The Eastern CT Workforce Investment Board (EWIB) area included four AJCs (Danielson, New London, Norwich, and Willimantic) with 6,140 people.

---

75 WIOA is one stream of E&T funds at AJCs. There is a web of federal, state, local, and private grants operating at any one time. In 2018, CT released a State Plan for WIOA on all of its E&T efforts including state and private sector programs (Office of Special Education and Rehabilitative Services, U.S. Department of Education, 2018).

76 WIOA funds are disbursed to the CT DOL, which is responsible for the AJCs under the Wagner Peyser Act. WIOA funds are subcontracted by EWIB, and nonprofit contractors TVCCA and EASTCONN had three-year renewable contracts. Both subcontractors offered workshops and intensive case assistance to low-income, dislocated workers and youths (GG, meeting May 24, 2017).
making about 57,000 visits. Of the five CT WIBs, EWIB saw 21.4% of visits (Connecticut Department of Labor, 2015). A FY 2018 WIOA report identified program weaknesses, including insufficient resources, program conflicts, lack of work readiness, and inconsistent nonprofit staffing due to lack of continuity from unstable funding and low wages (Employment and Training Administration, U.S. Department of Labor, 2018, p. 59). This chapter addresses issues of contractor services in the section on EASTCONN and employability training with the last two cases.

*Back to Work* workshops are an introduction to (intake for) WIOA. The discussion below is based on my observation of a *Back to Work* workshop at the Norwich AJC on March 23, 2017 that had ten attendees. Six were White men, and a noticeable number of them asked about the dislocated worker program and mentioned higher education degrees. Most of these men seemed to be in their 40s–60s and wore jeans with a collared button-down. There were two men of color, one Black, with a Rastafarian hat, and one young and Latino. There were two women, one Black woman with a shaved head in her 40s who had a bachelor’s and one White woman in her 50s with dyed blond hair whose level of education is unknown. A TVCCA WIOA program assistant led the orientation. She was a young Latina woman in slacks and a vertically striped button-down shirt. The workshop started by introducing the AJC core services available to everyone, including workshops, computers, and online resources.

Thirty minutes into the training, the leader shifted to WIOA, “the reason you are all here.” The trainer explained that WIOA is a federally funded E&T program. After this orientation, an advisor would be assigned, like the leader, who offered guidance, job search help,
and career planning and referred people to free training programs or online options. The trainer discussed eligibility (Back to Work Orientation, observation, March 23, 2017).  

The TVCCA worker then discussed the labor market, specifically two time-limited and evidence-based programs: HPOG from HHS (for healthcare) and WIF from the DOL (for manufacturing). The next section is about HPOG, and Chapter 4 focuses on the WIF Pipeline.  

**HPOG in Eastern CT**

The goal of HPOG is to have people start or move up in health professions career tracks, with the option of multiple training programs. The first round of HPOG 1.0 grants were disbursed in 2010; a second wave, HPOG 2.0, was in September 2015, when “the second round of grant awards were made to 32 organizations located across 21 states to carry out five-year programs in their areas” (Administration for Children and Families, U.S. Department of Health and Human Services, n.d.). Subcontracting through EWIB, EASTCONN was awarded the HPOG contract in December 2015, and training began in 2016.

As part of HPOG, EWIB contracted a Navigator, an internally promoted former EASTCONN WIOA case assistant (Rebecca). The position required a bachelor’s, but Rebecca had an associate degree, after multiple starts and stops, and was grandfathered into the position by her experience. Rebecca

---

77 This is for low-income people (family income below 200% of the FPL) and dislocated workers.

78 There were eight categories of dislocated workers in the PowerPoint presentation. This status was certified through documentation (unemployment insurance, layoff letter, job log, etc.). It used to be certified through the DOL but was now through TVCCA staff. The trainer never explained the difference.

79 In October 2015, EWIB was awarded a $1.5 million HPOG award “to help low- groups, an experimental group that receives HPOG case management and training and a control group with no treatment, or regular WIOA services” (HPOG Orientation, observation, March 22, 2017). In addition to studying different services, a grant goal is to give trainees the opportunities to take multiple healthcare trainings to obtain better jobs (RM, meeting, March 22, 2017).

80 All key informants and interviewees have pseudonyms.
explained how HPOG targets Work First and low-income people; most program referrals come from WIOA Jobs First Advocates whose clients receive or received public assistance. Rebecca shared that the advocates often find it a challenge to move Jobs First clients from welfare to work (RM, meeting, March 22, 2017). This represents one of many porous back and forth between grant programs at AJCs.

Rebecca facilitated an HPOG 2.0 *Health Careers Orientation* in a small conference room with small windows at the Willimantic AJC on March 22, 2017. There were five attendees, two women (one Black and one White) and three men (one White and two Latino). The White woman shared that she was interested in being a medical assistant, but not training through enrolling in HPOG which included case management. The training started with labor market information about healthcare. There was an exhaustive list of health careers, starting with CNA, presented as “the first place that people start in healthcare. Get your feet wet in classroom and clinical.” As Rebecca went through each profession, she outlined the training requirements, providers, work, and average pay. She then shifted to longer training for college credit, including as an RN, which is the “top of the food chain of non-master’s level healthcare.” She brushed past this as an option for attendees because “most people changing career paths do not have four, six, eight years” (RM, meeting, March 22, 2017).

81 List of noncredit trainings: CNA, Patient Care Technician, Emergency Medical Technician, Phlebotomist, Pharmacy Technician, Veterinary Assistant, Medical Receptionist/Office Assistant (HPOG Orientation, observation, March 22, 2017).

82 List of credit-bearing educational trainings: Recreational Therapist, Medical Assistant, Health Information Technician/Medical Billing and Coding, Paramedic, Dental Assistant, LPN, Veterinary Technician, Occupational Therapy Assistant, Respiratory Therapist, Sonographer, Radiology Technician, RN (HPOG Orientation, observation, March 22, 2017).
The HPOG Navigator than introduced HPOG as a grant available to people at 200% of the FPL. It was a study grant, so of those enrolled, two thirds were selected into HPOG and one third to a control group for non-HPOG AJC services. The next step was a two-week job readiness boot camp, created by EASTCONN under the advisement of HHS. HPOG enrollment included intensive case management with regular communication. Enrollees selected training from a list of ETPs. After completing training, they could work with an HPOG Job Developer, who supported soft skills and prejob training and contacted employers directly to help sell trainees (HPOG Orientation, observation, March 22, 2017).

Rebecca shared insights about HPOG after the orientation. She said that the best entry-level jobs, in terms of pay and benefits, were at hospitals. She commented that getting a job as a CNA or Patient Care Technician (PCT) at a hospital is like “winning the lottery” and that it helps to know someone (RM, meeting, March 22, 2017). With the unlikeliness of hospital work, she added that the WIF Manufacturing Pipeline provides a better chance of getting people to $20/hour jobs with a similar 4–10 week training. The results of the first HPOG grant supported her assessment of low outcomes and poor advancement.

HPOG 2.0, part of a five-year study grant, is still in progress, so the evaluation report for HPOG 1.0 (2010) provides helpful insights into grant outcomes. HPOG 1.0 contracted to 32 organizations in 23 states, from nonprofits to community college E&T. There were over 36,000

83 The role of knowing someone or the unlikeliness of getting hospital work as support staff was backed up by training professionals at a nonprofit training provider and community college workforce development department, cited in Chapter 5. These factors also follow the embedded theory from Royster (2003) of how social connections produce job outcomes over the blind market.

84 For HPOG (2.0), there were no results released, only goals and an evaluation model (see Administration for Children and Families, U.S. Department of Health and Human Services, n.d.)
The demographics of the program was 88% female, 61% racial or ethnic minorities, and 53% in households receiving SNAP. Eight-seven percent of those included completed a training by year three, 5% were still in training, and the remainder dropped out. The majority did short-term training. After twelve quarters of employment, on average, HPOG trainees in healthcare did better than those in other sectors. After 15 months, 58% were employed in healthcare at an average hourly rate of $13.49, whereas the average hourly rate was $12.99 for all jobs. For those jobs in healthcare, 63% were FT, 59% were FT overall, and 77% offered employee health insurance benefits. The study found that although those who did longer-term training had better individual outcomes, most participants completed a shorter training in order to get back to work faster. Moreover, short-term training is not necessarily related to a career pathway or living-wage employment (Harvill, 2015).

From the final report, HPOG trained people for high growth entry-level healthcare support jobs that were marginally better paying with better work conditions compared to similar jobs outside of healthcare. Neither the training nor the report called attention to the fact that the fastest-growing professions in healthcare are support jobs, as cited in Chapter 1. Health support occupations, such as HHAs, had a mean annual wage of $31,310, or a median hourly wage of $13.80, in May 2017 (Occupational Employment Statistics, Bureau of Labor Statistics, 2018). Although the message of HPOG is to find mobility, overall HPOG 1.0 failed. HPOG demonstrates that entry-level healthcare training is neither producing a living wage nor leading to a career pathway. The HPOG 1.0 report acknowledged that these entry-level jobs are not the

85 Of 36,000, 29,952 (80%) consented to inclusion in the research (Harvill, 2015).
86 These statistics were close to those from CNA research as OIC of NLC; these respondents were disproportionately low-income women of color.
goal for their trainees, hence the focus on multiple programs under HPOG (Harvill, 2015).

Moreover, although the goal of HPOG is to get people out of entry-level, low-wage jobs, HPOG trained people for these entry-level support jobs. Who was supposed to hold these entry-level jobs if not the HPOG participants? The tension between training for entry-level work and unlikely mobility expectations is discussed in Chapter 5 for a CNA training.

**Devolution to Contractors: EASTCONN**

Under the orientation of neoliberal policy and new federalism, nonprofits became the primary operators of many AJCs (Borges-Méndez & Meléndez, 2004, p. 86). In eastern CT, WIOA funds and programs were administered through CT DOL and then subcontracted by EWIB to private providers. The discussion below considers the shifts in service provision and management under this devolution, specifically the private management of an AJC by the public nonprofit EASTCONN.\(^7\)

Although E&T was dependent on federal allocations to run its mandated programs, like AJCs, there was state and regional administration, including the CT DOL. Between August 2015 and December 2017, the state government was cut by 7.6% (5,300 workers; Employment and Training Administration, U.S. Department of Labor, 2018, p. 10). Federal allocation cut contributions to CT DOL, including reductions to CT DOL staff and AJCs. A suggested method to cover the federal shortfall was to increase state contributions. The CT DOL requested a tax on state employees, as most other state agencies were affected by federal cuts: “It [CT DOL] is

\(^7\) EASTCONN was “created in 1980 under Connecticut General Statute 10-66a [and] is a public, non-profit, regional educational service center (RESC)” (EASTCONN, n.d.). In addition, it contracted services from the Connecticut Department of Education (continuing education and disability education). It is governed by a board of directors chosen from local boards of education. Its services cover WC.
proposing a new tax that would generate about $9 million a year to support staffing. It is a tiny tax, amounting to 0.05 percent, or half of 1/10th of 1 percent of the first $15,000 of taxable employees’ wages” (Singer, 2018). The CT DOL reconfigured to cope, with a reduction in CT DOL staff in AJCs. A program manager at a contracted nonprofit, explained how two of the four AJCs in eastern CT, Willimantic and Norwich, had no full-time CT DOL staff. They had staff with part-time hours to process unemployment insurance (GG, meeting, May 24, 2017). The numbers of contract staff were increasing. A CT DOL employee, Carl, now retired, called the process of attrition of CT DOL staff “redlining.” When a current CT DOL staff member retired, the position was not restaffed. In the New London AJC, the CT DOL staff had been reduced from 28 to 9, at the time that Carl retired in 2017. Carl commented on a rising number of TVCCA staff members at the New London AJC. They had different badges, but people did not look at badges and might mistake them for CT DOL staff. There was a shift from CT DOL staff making $30/hour, with BAs and resume certifications, to contractors making $15/hour who were not as well educated or trained. He worried that the quality of services is declining (CY, meeting, April 19, 2017). The increase of E&T contractors is part of larger trends of scaling back public-sector workers for nonprofit and for-profit contractors (Borges-Méndez & Meléndez, 2004, p. 97).

In addition to public-sector staff attrition and replacement by contractors, there were statewide reductions in the number of AJCs: “In 2015, as a cost-saving measure, the CT DOL announced it would close half of its twelve AJCs statewide, Willimantic among them” (EASTCONN, n.d.). When the closing was announced, EASTCONN had E&T contracts through EWIB, reporting six WIOA caseworkers, in addition to time-limited grants, such as HPOG (AM,
The closing of the Willimantic AJC could have reduced contracts and staff. After the closure announcement, EASTCONN proposed keeping the AJC open in a partnership with the CT DOL. EASTCONN began to operate the space for WIOA programs and services and provide space for the part-time CT DOL staff. The Willimantic AJC became an affiliate AJC, instead of a comprehensive center, with more cost externalized to contractors, including overhead.

E&T was changing through staffing and its model of service. The changes to contractor staff included pay and benefit cuts, decreased skill levels, and worsening working conditions and stability. The role of the nonprofit contractor was also expanding by running the new satellite center and renting space to the CT DOL. The head of adult programs at EASTCONN, Raymond, called this shift “innovative” (RT, phone call, November 30, 2016). Is this an innovation? It allowed EASTCONN to keep contracts and maintained local access for Willimantic AJC jobseekers, but it reduced federal and state roles in E&T. It was an instance of the state externalizing to shrink the size and scope of responsibility and services.

Service Providers: Employability Training

In restructuring E&T, the sequential module of service separated soft skills or employability (intensive) from hard skills (training). Hard skills are the subject of the next two chapters. Soft skills are the topic of the remainder of this chapter.

The restructuring of E&T shifted funds away from hard skills training to employability and case management, as mentioned earlier. Ducey (2009) found from the NYC hospital training

---

88 The two main contractors for AJC operation are EASTCONN in the two northeastern CT locations (Danielson and Willimantic) and TVCCA in the southeastern CT locations (Norwich and New London).
program that employability training can deflect attention away from changing (worsening) work conditions. The content of the training reframes problems and reactions to problems as the responsibility of workers. In general, the training ignores both power imbalances in work and the effects of restructuring on jobs and resources. The soft skills tend to naturalize and normalize difficult conditions and managerial complaints that the operational and staff costs in healthcare are too high, without any of the contentious politics (Ducey, 2009, pp. 126–127). This section studies two cases of employability training in eastern CT, A2E and Confidence Makeover. These two employability programs keep the focus on responsibility and individual choices, diverted from the work conditions.

A2E is an Access program, funded through grant support. Access is a northeastern CT nonprofit, founded in 1965 and funded under the Economic Opportunities Act of 1964. Access continues to provide social services through public contracts for housing, food, and case management services in Windham and neighboring Tolland county. The Access program director, Karen, met with local employers in 2016 to assess what type of employability training could prepare Access clients for $10–14/hour entry-level employment. As with E&T in general, this program was designed to meet the needs of employers for entry-level staff and find employment for clients. Access created the A2E curriculum based on employer-identified employee gaps in computer skills, financial literacy, and motivation (KK, meeting November 2, 2016). In addition to Karen, A2E was cofacilitated by a local clowning professional and assisted by a UConn public administration student, Kristin.

89 This is not a WIOA or AJC program. However, they see similar clients and are regional E&T subcontractors.
A2E was a 14-week program that met twice a week (2.5 hours a session). Training took place in a dedicated, windowless room at the Access offices in Willimantic. Monday was financial and computer literacy, and Wednesday evening was communication skills through the People Empowering People (PEP) curriculum. The target demographic was people with a high school education and limited work experience. Recruitment was a problem from the start because there were insufficient referrals from Access caseworkers. There was low attendance throughout the program. After the first few sessions, there was a group of four, out of 10–12 desired. However, two were college educated with significant work experience.

The following are observations from the PEP training. PEP was a curriculum developed by the University of Connecticut. Overall, the program targeted communication skills, personal responsibility, and being agents of change (Love, n.d.). The training was a mixture of lectures, with term definitions, and skill-building activities on topics from eye contact to behavior modification, separating feelings from actions. After A2E ended, Karen shared that PEP is “low-hanging fruit” because it was free, and she had already run it about six years ago while working as a town employee and then consultant. Her previous PEP attendees were homogenous groups that were highly educated and had a high level of insight. She felt the A2E PEP program fell flat because the group was small and lacked insight (KK, meeting, May 10, 2018). Blame lay on people not the labor market, a microcosm of the larger issues identified with trainings.

A2E introduced local potential employers to the participants, including human resources (HR) professionals from Westminster Tool and Horizon. The first employer was Westminster Tool, an advanced manufacturer and member of the Eastern Advanced Manufacturing Alliance (EAMA). The director of HR, Krista, provided backstory of how this plastics manufacturer began precision manufacturing medical supplies to avoid competition and “not compete with
Mexico” (A2E, observation, February 8, 2017). Krista shared that she is college educated and had no previous manufacturing experience but was referred through her sister’s friend. She explained the company’s level of training, advancement, and community, including a softball team and retirement celebrations. Krista described a recent part-time hire, a recent female graduate of Windham Technical High School. When asked, she disclosed that Westminster Tool had 34 employees, 12 in manufacturing. The pay was reported to range from $13/hour to a salary of $70,000 (A2E, observation, February 8, 2017). As common in advanced manufacturing, it had a small number of employees, and the majority did not work in production.

The second employer was Horizon, a social services provider for people with cognitive and intellectual developmental disabilities; its HR director, Jessica, made the presentation. Its services included residential and day programs, supported employment; educational services for clients 16–21, and a summer camp for people of all ages. At the time of the talk, Horizon had 225 employers, 125 year-round. Jessica outlined how all new Horizon employees started in entry-level support positions or at the summer camp and advanced as positions become available (A2E, observation, March 15, 2017). Horizon had plentiful entry-level and seasonal work.

The Westminster Tool presentation included advancement and opportunities for good pay and eventual retirement, but there were few manufacturing jobs. Horizon had almost half of its employees in seasonal summer employment and started its staff in the entry-level support positions; people could apply for other jobs when and if something opened up. Although heavily supported by public funds, neither employer provided abundant stable employment.90

90 Both employers rely on government contracts; medical supplies are part of healthcare, heavily supported by Medicaid and Medicare, and disability services are primarily paid for by the State Department of Disabilities, in addition to private pay.
A2E training relied heavily on modeling trajectories and behaviors. One form of modeling is mobility trajectories. During a Wednesday PEP training, two guests presented their progress to show how anyone can achieve mobility and make a difference in the world. The speakers were married adult immigrants from South America. They were lawyers but emigrated to the United States for more opportunities due to the economic and political crisis in their country. While they waited for their degrees to transfer, they lived in an apartment with their two children and worked a variety of jobs below their skill level, including as a Walmart stocker and substitute teacher. Within ten years, one became the Access Housing Support Coordinator and the other a CT child welfare worker. Their story shows mobility and giving back in a few short years. Their mobility took place after a shock to their class and social position, but they had unspoken advantages. These immigrants had family friends in a wealthy town with a good school system where they could first rent and then buy a home, rather than the poorer cities where they both worked. One of them spoke fluent English before arriving in the United States. They both had an advanced degree (JD) that transferred to a BA in letters.

Another form of modeling is modeling behaviors. PEP training uses play-acting with partners or body movement exercises. For example, the trainers present on the concept of using “I” statements: “When you___, I feel___, because ____, I would like ___ to happen.” The goal was to reframe from blaming someone else (you) to responsibility (I feel), because “no one makes you feel anything... your feelings are 100% your own” (A2E, observation, February 1, 2017). These are communication skills, but how do they work in low-wage jobs with little ability to negotiate work conditions or barriers? These trainings deflect attention away from working conditions and pay or make them something to swallow.
The models from trajectories to behaviors in A2E’s PEP training relied on assumed class advantages of education, employment, and connections. They presented near impossibilities or frequent frustrations for actual people preparing for entry-level work. The teaching focused on how job seekers’ ideas for work should be creative; people will want their ideas. The training presented model employers with few jobs overall or a majority of seasonal or entry-level work. Automation was reducing jobs at Westminster. Moreover, jobs at Horizon were contracts from the state, positions for which state employers were paid more through wages and benefits, as another disability contracting agency director indicated (KS, meeting, June 29, 2016). These models of employability can be helpful skills for daily life, at best, but their jobs and trajectories are highly unlikely and mostly dependent on factors outside job seekers’ control.

The second employability training was a Confidence Makeover workshop over two half-days, contracted to Workforce Transitions Training (WTT), a for-profit training provider. The workshop took place at the Willimantic AJC, under a WIOA core service contract. The trainer, Ralph, was a White man, a retired high school principal in his 50s or 60s. He reported regretting leaving the classroom and moved back to CT to care for his father. He worked part-time jobs for New London’s AJC teaching computer basics and then became the director of training before being let go. He described losing a job and the depression and despair he experienced before picking himself up and creating WTT. He claimed to have trained over 12,000 people, from CT to Florida.

The Confidence Makeover was a core service open to the public, with registration online (CT.jobs account) or in person. There were five people in attendance, not including myself. Three were White; one was an older White man in a Patriots sweatshirt, to whom the trainer looked and spoke most frequently. The other two were a woman from a neighboring town and an
older woman who did not say much. There were also two younger Latina women. One woman had her friend translate, and the trainer repeatedly commented about not knowing how to pronounce her name. She looked visibly uncomfortable from the continuous singling out and did not return the second morning.

Participants were handed black-and-white workbooks with questions and exercises in a large font. The training moved between the workbook, anecdotes from the trainer, and exercises on a butcher-block board. The workbooks contained a prompt to define confidence and write a description of a confident person they know and what makes that person confident. An activity followed where these descriptions were pulled out. After the first day, there was homework in the workbooks: respond to the question “how do you want others to see you?” The trainer did not mention it on the second day.

Personal anecdotes from Ralph dominated training time, including many about how much people love the training and recommend it. He stated that “this is the most important workshop you are ever going to take regarding getting a job. . . . You will figure that out by 10:15 a.m.” He shared that in 2014, the average person was unemployed for 72 weeks, considering 99 weeks of unemployment insurance, or almost two years. It was difficult to get a job, except with Dunkin Donuts for $9.50 an hour. He claimed that people who took this workshop got a job in 22 weeks. One of the White women commented, “I need a job in two days” (Confidence Makeover, observation, January 11, 2017).

The trainer also promised to be a recommender for a future job. He offered a mock conversation with a potential employer: “I . . . cannot comment about any job skills.” He claimed that if potential employers call, they are not interested in skills, but “I describe a generic confident person. I have known [her] for five hours. However, I have [a] zip drive with
information about 11 thousand other successful people, and she is just like them.” Ralph said that skill is not the issue: “I do not want to diminish the skills piece, but most people who come to workshops have enough skills for a decent job” (Confidence Makeover, observation, January 11, 2017). The focus on confidence over skill rests on his claim that everyone at the training was skilled enough, but he did not ask about their experience, training, education, sector of employment. The trainer and training make promises to participants: this training is essential, it will help get a job fast, and the trainer can be a future recommender. How can the trainer know any of these things? Although this training had a message of valuing one’s self and the perils of depression, it did not offer concrete steps, follow-up, or information to support its claims. The Confidence Makeover asked unemployed or underemployed people to emulate and project confidence regardless of their social or material conditions.

A2E and the Confidence Makeover exemplify employability training, separated from hard skills training. These trainings may have helped some trainees, but there was a visible pushback from people in training. For example, in A2E, a participant dropped out after two or three weeks. Before leaving, he asserted that he had enough motivation but had physical limitations for work in his field. He had owned an auto repair shop and worked in printing. His arthritis would not allow him to continue (A2E, observation, January 25, 2017). How would employability help him? Does it depend on the work? Both of these employability trainings

91 I was employed when I took the training, and I had no follow-up communication to or from the center about my employment status. When I tried to contact the Confidence Makeover trainer after the training, he declined: “I have a situation with a family member that just popped up, which I will have to take care of and will be pretty time consuming. So, unfortunately, for the immediate future, I won’t be able to meet, which is disappointing” (RA, personal communication, January 21, 2017).

92 For the Confidence Makeover, there was no follow-up by the training or trainer, and for the A2E, the follow-up was time limited.
focused responsibility back on individuals to control their situations and have the confidence to be active members in communities, without considering structural conditions.

**Discussion**

What does this system of federal funders, contractors, and training say about E&T? These programs demonstrate how funds are being cut and contracted (out) and exemplify segregation and creaming. More educated and experienced workers are creamed, while disadvantaged workers concentrate in case management, employability (Confidence Makeover), or skills training, such as HPOG. HPOG training results in similar pay and conditions to that of other entry-level jobs, confirming that the restructuring of E&T segmented and ghettoized people.

Why make this investment to move many people into entry-level jobs with low wages? In 2014–2015, WIA spent just over $25 million in CT, a state of over six million people. That is about $4 per person. This spending level is a minimal investment compared to the state allocations to defense contractors, such as General Dynamics and United Technologies. In 2015, received the third highest amount of defense contracting money ($2,504 per capita), behind only Virginia ($4,303) and the District of Columbia ($6,689; Stauffer, 2018). Defense can offer gainful employment (full time, benefits, a living wage) to disproportionately to traditional working-class workers (White men). Why is a federal program focused on low-income, dislocated, and youth workers paltry by comparison? E&T allow the government to claim it is responding to need but that it is up to people to take advantage. In reality, this sorts people into different training by race, class, and gender and creams job seekers through long waits, eligibility, and referrals. E&T is itself a jobs program for workers like Ralph and Jessica with unstable education and work experiences. The next two data chapters explore these segregated programs. Chapter 4 is about
manufacturing training, and the following chapter is about training for new entry-level jobs in the healthcare sector, specifically CNA.
CHAPTER 4
GOVERNMENT CONTRACTS TO THE RESCUE: IS THERE SPACE IN THE ELECTRIC BOAT PIPELINE LIFE RAFT?

Media, social service providers, and politicians are in a frenzy over the news of defense contractors’ hiring in eastern CT. New Navy contracts to General Dynamics’ EB are projected to increase employment through 2040, offering a career for someone graduating from high school. This expansion fits the model of primary labor market jobs that are government supported, stable, and increasingly rare for working class people. Bergman (2018) stated that “after making more than 3,000 new hires in 2017, EB has a total workforce of 16,200 employees, a number not seen in nearly 25 years.” Contracts included repairs and new builds of the existing Virginia-class submarine ($432 million) and the design and build of a new Columbia-class submarine ($5.1 billion; General Dynamics, 2017; LaGrone, 2017). CT state representative Joe Courtney claimed that “this work is fueling economic growth and hiring across the region, and today’s contract keeps that momentum going” (Gomez-Acve, 2017). EB’s submarine repair and production expansion include new middle-skill jobs. Who will fill these coveted jobs? The Pipeline is a regional E&T program that trains people to work at EB and other entry-level advanced manufacturing. This chapter follows the Pipeline and people in it to understand the role and experience of this training. The chapter begins by considering changes in manufacturing, particularly defense contracting.

93 EB (1899) is subsidiary of General Dynamics that relies on Navy defense contracts.
Manufacturing: Restructured and Growing

Employment in advanced manufacturing, such as biopharmaceuticals and medical equipment, is growing even as manufacturing as a whole continues to contract. Advanced manufacturing offers high road production and employs skilled workers with relative job stability, as outlined in Chapter 2. Although traditional manufacturing is more labor intensive, it often relies on cost-cutting through shifting labor to contingent, temporary, or part-time (Fitzgerald, 2006, p. 153). Defense manufacturing has a mixture of advanced and traditional manufacturing, which is labor intensive, highly technical, and well paid, that expanded during and following WWII.

The post-WWII Truman Doctrine contributed to the build-up of the military capabilities that supported a network of military contractors and subcontractors (Markusen et al., 1991, pp. 13–14). The CT River Valley and Long Island Sound are two regions with post-WWII investments that cushioned, and at times reversed, the industrial decline in the 1950s and 1970s–80s: “Massachusetts and Connecticut have been among the leading recipients of prime military contracts over the entire postwar period” (Markusen et al., 1991, pp. 118–119). At the end of the Cold War, CT’s economy had the most defense spending per capita in the United States:

With all its military activity, from Sikorsky to General Dynamics to United Technologies, the state of CT is per capita the most defense-dependent state in the nation, three times

94 This labor-intensive work has cheapened labor costs through changing the terms of employment from a largely full-time unionized workforce with benefits to a more contingent workforce. In the auto industry, work has shifted to outside suppliers in Southern factories, who pay lower wages and offer little training or safety (Bluestone & Harrison, 1988; Dorman, 2005, p. 190). Within firms, the temporary workforce rose from 4.6% of production workers and 13.4% of low skilled manual workers in 2000 to 7.3% of all production workers and 17.9% of all low-skilled manual workers in 2015 (Putre, 2015).

95 The Cold War drove small-batch production that was secretive and without competition or other pressures to reduce costs (Markusen et al., 1991, p. 36).
the national average. More than 25% of its manufacturing shipments go to defense

(Markusen et al., 1991, p. 134).

In 2015, CT ranked third in the country for defense spending (Stauffer, 2018). CT, and New England, contractors continue to specialize in manufacturing contracts. In 2011, over 80% of defense purchased products and services were manufactured (Defense Technology Initiative, 2012, p. 7). The state concentrates labor-intense blue-collar defense contracts. Defense contractors are large employers and have a racialized and gendered workforce. Military contractors are disproportionately “well educated white men,” which leaves “large pools of [an] urban underclass” (Markusen et al., 1991, p. 7).

Since the end of the Cold War, defense contractors have undergone funding cuts that resulted in restructuring, including privatization, mergers, layoffs, exports, and movement to more research and service provision, concentrated in the far west and south (Krishnan, 2016, p. 31). In 2013, before the Trump Administration’s influx of money, EB employed approximately 12,000 (2013) between Groton and Quonset Point, Rhode Island, down from 21,500 (1991; McDermott, 2013). In 1992, EB laid off 1,888 workers (1,200 from Groton Shipyard, out of 13,800), or 8% of the workforce, “after President Bush moved to sink the Navy's program of new EB-built Seawolf submarines” (Weisman, 1992). Additionally, mergers reduced contractor options and competition, leaving a monopolized market and overproduction of arms and armaments (Krishnan, 2016, p. 31). For example, General Dynamics purchased three smaller shipbuilders, growing its capacity and market share (Markusen & Costigan, 1999, p. 194). It

96 This was not the first round of layoffs. In 1977, 4,000 workers were dismissed from General Dynamics submarine division (Weisman, 1992).
remained almost entirely dependent on defense contracts, as other contractors diversified into the private sector (Markusen & Costigan, 1999, pp. 7–12). In addition to cuts, defense overproduction continued in part due to the increase in local and regional lobbying by defense firms and elected officials: “Unnecessary production facilities receive support to prop up district employment. Defense has become a jobs program” (Markusen & Costigan, 1999, p. 195).

With the start of the War on Terror, defense spending rose during the Trump and Obama administrations, and the Trump administration proposed 13% increases to the armed forces (Jaffe & Paletta, 2018). The 2017 National Defense Authorization Act, a $618.7 billion defense bill, included $1.9 billion for submarines built in CT (Bergman, 2016). New contracts required the quick addition of workers. Defense contractors called for a better trained workforce, claiming labor shortages: “Submarine maker Electric Boat has run into a challenge amid its biggest hiring push since the Cold War: finding enough qualified workers in a small state crowded with defense contractors” (De Avila, 2017).

CT is reliant on defense contractors’ economic impact, specifically EB. *The Future of Defense Workforce Report* (2017) highlighted the need for a larger and better trained workforce. Mahler states that “Electric Boat currently employs 11,000 workers in the state and intends to grow to 18,000 by 2030. That requires the hire of 14,000 new employees, including 2,000 in CT by the end of the year” (2017, p. 2). There were 450 EB subcontractors based in CT, awarded $485 million from 2011 to 2016. New appropriations were expected to double subcontractor orders (Mahler, 2017, p. 2). The report targeted the lack of qualified applicants and called for the state to increase support to technical high schools, community colleges, and training programs.

---

97 These hiring figures include replacing retiring workers.
The report cited the Pipeline as one effort to keep EB well supported in the region, presenting it as a win for both EB and CT. Although the steady growth in EB jobs is the first in a generation, there is a history of segmentation and degradation of industrial jobs that cycle through employees through mechanization and labor reorganization, described in Chapter 2.

Machinist is an entry-level production position in demand with defense manufacturing hiring, specifically by EB. Nationally, machinists are disproportionately White and male\(^98\); 94.5% are men, and 82.9% are White (DataUSA, 2016). Middle-skill manufacturing work, outside of textiles and apparel, has been dominated by White men over the 20th century. Decades after the reduction in productive jobs and the shift in their concentrations, White men continue to dominate middle-skill good technical employment and have half the unemployment rate of Black men (Royster, 2003).\(^99\)

Machinists transitioned from skilled shop workers to operators who executed the plans of others, requiring middle skills, as discussed in Chapter 2. In preindustrial manufacturing, machining was a craft learned through experience and apprenticing. Shop machinists were central to the fabrication, operation, and repair of tools and commodities, from hand tools to more complex machining. They were skilled workers who apprenticed with masters (Braverman, 1983).

---

\(^98\) Poor and working-class urban women worked and continue be productive laborers. In the past, they tended toward feminized jobs and fields, such as textiles and apparel, that have since been automated or moved abroad (Dorman, 2005).

\(^99\) After civil rights nondiscrimination legislation, explanations of racialized outcomes focused on individual attitudes or work ethic barriers (Royster, 2003, p. 8). However, discrimination continues. Tilly (1998) described durable inequality, including the monopoly of White men in good working-class jobs. Royster (2003) found that material support and the connections of family, friends, and vocational school teachers gives White male job seekers an advantage. White men were more able to find and retain work in their training area, compared to Black men, who had lower wages, job retention, and placements in their field. Working-class White people also perceived reverse discrimination. This served as a justification to support and employ other working-class White men (Royster, 2003, pp. 11–12).
1998, pp. 76–77). Scientific management reorganized labor around the scientific principles of productivity and efficiency, rationalizing and separating the work of machinists. In the 1940s, numerical control (NC) added motorized control to machining, and in the 1970s, computer numerical control (CNC) contributed computer programming and control (Merchant, 2003). Technological advances increased standardization and batch size with less labor (Braverman, 1998, p. 135). The use of motorized and then computer-controlled machines segmented and degraded machining; middle-skill CNC operators and others replaced skilled shop machinists.

Defense manufacturing often creates small-volume, high quality, complex products, such as planes, ships, and submarines, requiring complex fabrication and assembly (Bergman, 2016). Aerospace and shipbuilding defense manufacturing, concentrated in CT, requires some small-batch production that is hand-machined, -assembled, and -repaired. As a result, there is a proliferation of machining in some manufacturing settings, including CNC operators, shop machinists, and outside machinists (OSMs). For example, in shipbuilding, OSMs are the least skilled, working primarily with assembly, maintenance, and repair in the manufacturing area, a wet or dry dock for a submarine (Pekelney, 1942). The segmentation, degradation, and elimination (through mechanization) of the majority of machining rendered jobs less skilled and workers trained for a smaller range of tasks. New machining jobs required new skilling: “As automation has transformed factories and altered the skills needed to operate and maintain factory equipment, the laid-off workers, which may be familiar with the old-fashioned presses and lathes, are often unqualified to run the new [equipment]” (Whoriskey, 2012). Changes in the

100 OSM is an entry-level job at EB advertised to Pipeline participants.
organization of work and types of work produced a crisis in newly trained workers that ignored this cycle of crisis produced by restructuring.

EB’s calls for worker training, including for machinists, is not the first time companies have requested and received investments in retraining a shrunk and reformulated manufacturing workforce. The Pipeline is an example of a federally funded sectorial program designed to train a changing workforce, based on employer demand (Giloth, 2000). The next section follows the Pipeline from grant to training (see Figure 3).

Figure 3: Eastern Connecticut Manufacturing Pipeline Participant Flow

<table>
<thead>
<tr>
<th>Sign Up</th>
<th>American Job Centers and Eastern Workforce Investment Board Portal</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Prove It Assessment</strong></td>
<td>Employment and Training Institute*</td>
</tr>
<tr>
<td>*Program screening: high scorers and medium scorers (after bootcamp) move on, while low scorers are referred to other American Job Center services</td>
<td></td>
</tr>
<tr>
<td><strong>Orientation</strong></td>
<td>Connecticut Department of Labor with subcontractors and Electric Boat human resources</td>
</tr>
<tr>
<td><strong>Pipeline Services</strong></td>
<td>Skills training at community colleges and Business Development*</td>
</tr>
<tr>
<td>*There is no order to these services. Skill training is a near universal demand limited by program capacity.</td>
<td></td>
</tr>
<tr>
<td><strong>Job Offer</strong></td>
<td>Electric Boat, Eastern Advanced Manufacturing Alliance employers, or Business Development placement</td>
</tr>
</tbody>
</table>
The Manufacturing Pipeline

Setting Up the Pipeline (WIF Grant)

The Pipeline is funded through WIF, an evidence-based training program through the DOL. The Pipeline is a partnership between the CT DOL, EWIB, EB, and EAMA. WIF is a $6,000,000 grant covering October 1, 2015 through September 15, 2019. The grant requires the hiring of 425 Pipeline participants over four years out of thousands of projected jobs; EB agreed to hire 350, and the 58 EAMA employers agreed to hire 75. The federal government provided this grant to the CT DOL, where it is administered by the EWIB, a workforce investment board created by the WIA of 1998 (Connecticut Department of Labor, WIF Notice of Award, September 26, 2015). Grant services include intake/case management, testing, remediation classes, Matrix Online Learning, skills training at two local community colleges, and job search support. EWIB disburses payments to WIF contractors, from nonprofit case managers to EB trainers at the community colleges.

Carl, a U.S. veteran and long-term CT DOL employee, was the CT DOL program manager for the Pipeline. When interviewed in April 2017, about 18 months into the grant, Carl reported the following Pipeline statistics: 4,000 signed up through the EWIB portal; 1,400 were active and had been tested and attended an information session; and 273 were or had been in training. He was enthusiastic about the Pipeline, “With a 92–93% placement rate, what’s not to like about this grant?” His enthusiasm was tempered by the acknowledgment that the

\[101\] Research was conducted in winter, spring, and summer of 2017.
\[102\] Carl retired in summer 2017, halfway through the grant period.
physically intensive and repetitive work at EB is not for everyone and there is a long waiting list for in-person training (CY, meeting, April 17, 2017).

From Carl, it was clear that the new Navy contract to EB was central to the region’s Pipeline grant. EB’s needs drove the process because community colleges do not train enough people with job-specific skills for the shipyard. Carl thought that EB would have offered the training without the grant. It had an internal training department for OTJT and trainers through other DOL funds. However, this grant saved EB money and paid for state-of-the-art facilities at the technical high schools and community colleges that housed training. The community colleges will have new facilities for workforce training after the grant ends. Community colleges are in financial trouble, especially with cuts to funding following the 2008 recession, and workforce training from federal funds and local employers is a growing source of new funds (Eyster, Durham, & Anderson, 2016). This can benefit community colleges. The coordinator of the Three Rivers training echoed the desire to expand this workforce training program after the grant (HB, meeting, March 3, 2017). Although there are subsidies (the Navy contracts), Carl’s observations speak to the needs and ability of industry to train its workforce and the needs of the community college system to be a training partner to make up for declining public funds (CY, meeting, April 19, 2017).

**Entering the Pipeline**

EB will be hiring hundreds of new workers each year, on average, until 2040. New EB trade workers typically start at $38,000 or more per year, at a minimum, plus benefits worth 50% more, and can quickly move up to higher-wage positions. This program will provide you in classroom training that will prepare for immediate employment. This program includes a 4–12 week intensive classroom training program, so once adults
complete the training, they can apply for immediate employment at EB, or any of the other dozens of manufacturing companies in EAMA (once a successful interview has been accomplished). (EWIB, Pipeline recruitment flyer, February 2017).

The Pipeline promises that good entry-level jobs are widely available. People were generally referred to the Pipeline through the AJC staff and job search services or signed up through the portal on the EWIB website. Some interviewees were directed from the EB website after trying to apply for a job. The Pipeline grantees performed almost no active recruitment and had no problems exceeding recruitment targets. They were ahead of schedule for in-person training; there was a substantial backlog of people waiting as new people entered the Pipeline. The demand was for the in-person training, but the waitlist to begin was over six months. Even if a spot became available, EB could bump anyone in the Pipeline for a conditional hire (an applicant through EB human resources hired on the condition of completing the Pipeline in-person training). Pipeline demand was so high that Carl had Pipeline case managers and staff directing participants to services beyond in-person training, specifically online training and job development services (CY, meeting, April 19, 2017).

After signing up for the Pipeline, participants took an online skills inventory assessment. If they scored low, below 40, they were referred to other programs and services, such as WIOA. If they scored in a medium range, 40–69, they were referred to a two-week refresher course provided by EASTCONN, a local nonprofit and AJC partner. If they scored high, 70 and above, they were directed to a Pipeline information session at an eastern CT AJC in Danielson, Norwich, New London, or Willimantic.

**Information session.** These are observations from a Pipeline information session at the New London AJC on April 20, 2017. The entrance to the AJC was through a labyrinth of internal
halls constructed from shoulder-height gray divided cubicles, requiring staff instructions to find a large conference room in the back, with four rows of half-hexagonal tables with cushioned chairs. There was a PowerPoint slide welcoming people and stuffed blue folders in front of every chair. The Carl directed me to sit at the back of the room. Two people entered after I did and sat in the last row; one was heavily tattooed, and the other one wore a blue security uniform. Although there was one White woman, the room was filled with older White men in collared shirts. A number asked how to qualify as a dislocated worker. This training was full of unemployed white men.

Staff from the CT DOL and TVCCA and recruitment staff from EB facilitated the information session. The training began with a pitch from EB on stability. Pipeline staff discussed different training options. One option was 4–12 weeks of in-person skills training, with no mention of the six-month waitlist that the program manager Carl cited. Another option was job search assistance, Pipeline case managers had discretion of where to direct applicants. There were temporary agencies or 58 other EAMA companies that could be job searched. There were also funds for OTJT, which can pay half of a person’s salary if that person was hired while training. There was free online Matrix training because AJCs had an account through WIOA.

The second half of the training highlighted information from the AJC’s Fundamentals of Resume Writing and Interview Strategies training. There were many instances of instruction by anecdote. The program manager told the story of applying for his first job at the CT DOL. There were 12 applicants, and he was the only one without a college degree. However, he was a veteran and the only one who sent a follow up “thank you” message, and he got the job (Pipeline Information Session, April 20, 2017).
The takeaway from the information session was that employment at EB was likely and the in-person training was widely available. Carl highlighted the employability skill of following up as the difference between getting a job or not, ignoring other factors, such as veteran status or experience.

**Business Development: Job Search Assistance**

Pipeline participants can use Business Development to help search for jobs any time after an information session, even after in-person training. Referrals to Business Development were an alternative to training or an option as people waited for the in-person training. Eastern CT had two full-time CT DOL Businesses Development staff at the Danielson and New London AJCs and two contract staff at the Norwich and Willimantic AJCs.

Laura was the Willimantic AJC staff member. She contracted through the local community college, through EWIB. She was on multiple grants, including the Pipeline. Generally, she collaborated with employers to find workers, saying that “my job is to help businesses with whatever they need.” She often used grant funds to incentivize hiring. One example is Step-Up, a statewide CT DOL program initiated in 2011 that provided incentives to hire new full-time employees at up to $18/hour over six months, or $12,000. By 2017, 4,882 people had used the program, with an average wage of $15.99 (Office of Special Education and Rehabilitative Services, U.S. Department of Education, 2018, pp. 37–38). Step-Up funding was running out, according to Laura.

The Pipeline covered part of her salary to work on behalf of job seekers, not companies. She echoed other Pipeline staff that the training had a wait list and that it was not clear when more in-person training would be available. Some in the Pipeline could not or did not want to wait. Similarly, after the training, some people could not or did not want to work for EB and
preferred job search assistance. She said that the goal was to find people better work than they currently had. Laura had been a small business owner and seemed aligned with the needs and interests of businesses, which was her job outside of working for the Pipeline. She was optimistic about Pratt and Whitney in Hartford hiring 8,000 workers, and EAMA employers had subcontracts with EB. More broadly, she said, a worker shortage was driving up wages in healthcare from $10–12 to $13–14 for nursing home work. She commented that nursing homes wanted to pay more, but Medicaid reimbursement rates were a constraint. She added that in this job climate, “I would work for three agencies and turn it into a full-time job.” Although she expressed optimism, she mentioned that OTJT funds were drying up and the expressed interest in the Pipeline produced a long waitlist. With these conditions, she says, employers are using the “try before they buy” model of employment assistance (LR, meeting, April 27, 2017).

**Manufacturing Pipeline Training**

There were two training partners for the Pipeline both community colleges, QVCC in Danielson and Three Rivers in Norwich. Data included key informant interviews and observations at the Three Rivers training at Grasso Technical High School (Grasso) in Groton CT. Pipeline training used technical high school facilities after school hours, and Three Rivers rented space at Grasso. In summer 2016, Grasso added a new $1.7 million welding lab, paid for by a CT grant (Connecticut Technical Education and Career System, 2016). At the time of my research, there were two in-person training options through Three Rivers, Welding and Introduction to Manufacturing and a Drafting class was slated to begin the following month.

---

103 From those Pipeline participants interviewed, James worked with Laura, who recommended he apply for manufacturing sales, but the jobs she suggested pay $12–15/hour. He wanted at least $17.
Bruce was the Three Rivers training coordinator; after 30 years he retired from being a teaching laboratory technician at the local Coast Guard Academy. He was an experienced educator and trainer and committed to running a good program. He viewed the increases in funding E&T as a changing paradigm, accepting that not everyone was college bound and that there are opportunities in the trades. He described how the Pipeline benefits the community colleges and EB, as well as other manufacturers, saying that “EB is the big elephant in the room, and they get a hell of a deal.” For the community college, the goal was for this program to be cheap and sustainable enough for employers, including EB, to continue sending students to it after the Pipeline. The program was designed to meet the needs of EB. Bruce had actively worked to change the program training to be closer to EB’s own training but was waiting for access from EB (BJ, meeting, May 9, 2017).

**Introduction to Manufacturing Training**

These observations are from a four-week Introduction to Manufacturing training to prepare people for the OSM job at EB. As the trainees learned during orientation, they were to be Three Rivers students, under the Workforce Education department, and they needed to go to the campus to claim an ID and student privileges. The classes were held in mainly the automotive, drafting, and computer rooms. Grasso was empty of students, except for occasional late band practice. It felt like a high school, except for the new multimillion-dollar welding space.

During the training orientation, Bruce started by introducing the trainees and trainers. Pipeline trainees were asked to tell their story, where they were from, and what they had done. The room had 15 trainees and was overwhelmingly male (13 of 15) and white (11 of 15). It included a diversity of work experience, physical ability, and education. Some trainees had taken college classes or had 20 years’ manufacturing experience. Some had no training past high
school and had worked in retail or janitorial services; one person worked for seven years as a janitor at EB. A young White man in his 20s had a BA from a private college. After graduating, he had only worked retail at Home Depot (Introduction to Manufacturing, observation, May 15, 2017).

Pipeline trainers floated in and out, sometimes sitting on the side listening while other trainers spoke. The majority of trainers either were employed by EB or the U.S. Coast Guard or had been so employed in the past. The trainers from EB worked in manufacturing, and this was part-time employment. There was also an EAMA company trainer. Two trainers took leadership roles. Connor was a relatively new EB employee, after completing the Pipeline training, and Barry was the former head of an EAMA member company and a subcontractor to EB.

Connor was a young White man in his late 20s. He wanted to be a mechanical engineer but did not have the money for college and did not want to take out loans. He decided to go back to school while he worked for a one-year certificate program in manufacturing at a local community college, paying $7,500 out of pocket. Connor applied to EB and was hired, on condition of finishing the Pipeline. He said he did not learn anything new in the Pipeline training, but he was the go-to person in training for the instructors. EB hired him as an OSM working in the field, not in a machine shop. He had just been promoted to Optical Light Measurement after a little over six months at EB. He came back as a Pipeline instructor and was now a lead instructor responsible for a significant amount of curriculum, teaching, and grading. He said the Pipeline was an alternative to the college that he could not afford (C, meeting, May 25, 2017). He did not mention the out-of-pocket college training that was deemed insufficient for an entry-level hire at EB.
Barry was from an EAMA manufacturer, Collins and Jewel. The company started making and fixing boilers and then switched to the logistics of outsourcing manufacturing. He joked during an introduction, “I’m the ‘guilty party’ [in] offshoring manufacturing processes, but it was a job.” Now this company had new contracts, including EB. He was looking for talent for his company. He often gave the employer perspective; a specific example is during an Occupational Safety and Health Administration (OSHA) training below (B, meeting, June 6, 2017).

Training was a mix of in-person lectures, the online module program Tooling U, and hands-on skills. During hands-on skills, trainers instructed and then moved around the space assisting one on one to make sure skills were being practiced proficiently. However, nothing observed in this training used advanced technology. It focused on basics, such as learning measurements and introductory tool use.

There were two employability workshops, about general employability and the OSHA. Bruce presented the employability training on the second day of the four-week training. There was a PowerPoint presentation with definitions of employability and data from employers about in-demand worker qualities. Issues with employability were identified as poor time management, written communication, critical thinking, punctuality, and self-motivation. Overall, employability was “things that make you wanted by the employer.” The focus was not on skills for an OSM job at EB. The assumption was that EB can train people for that but cannot train or change character.\(^\text{104}\) “EB is hiring on character and training on skill” was a mantra repeated often during this training. During employability, trainees were told do anything to get and keep a job.

\(^{104}\) It was unclear if this meant intrinsic character or character based on experience.
including leaving their phones at home and coming early not to be late. They were told that regardless of their commute or family situation (perhaps a sick child or parent), when they were at work, that was all they should focus on (Introduction to Manufacturing, observation, May 16, 2017). Barry delivered the OSHA presentation, describing it as a company owner’s responsibility to workers for a safe workplace: “As an employee, you have rights.” However, he undermined this idea multiple times by editorializing the employer side of safety and health concerns. For example, he told trainees to go to their employer before filing an OSHA complaint and that a responsible employer will fix things by priority, not all at once. He told them that management does not want someone to be injured because they want people working.

Toward the end of the four-week training, EB sent employees to perform short job interviews (less than 10 minutes). Three EB staff interviewed trainees in quick succession. Pipeline trainers told trainees that EB had their resume but to bring a copy just in case. In the interviews, EB asked a few technical identification and problem-solving questions. Some trainees were dressed up, and one person declined to interview, he decided not to work for EB. While people waited before and after interviews, Connor gave tips about working at EB, such as making $2 extra to work for nuclear (Introduction to Manufacturing, observation, June 6, 2017). The connection to EB was clear in the Introduction to Manufacturing training, whereas the connection to Three Rivers was obscured making the transferability of the training unclear.

Pipeline training reflected a tension of being like work and yet not being work as a way to test out the characters of the participants. It simulated work, with clocking in and out and lunch breaks, and the trainees were not paid. However, they were surrounded by trainers with positive work experiences, such as early retirement at the Coast Guard or higher education paid for by EB. The training sold opportunities not frequently available to or lost by some trainees.
This might work for the people taking the programs but not for those who were on the long wait list, failed a skills assessment, or could not travel or spare the time for this training.

**The Electric Boat Connection**

EB was present throughout the Pipeline in staff and name. EB HR pitched at the Pipeline orientation and organized the interviews during the classes. Roger, the EB recruiter, restated the WIF grant commitment to hire 350 from the Pipeline. EB’s hiring needs included quickly growing to 14–18,000, because of new contracts and its aging workforce. Right then, EB would need to hire every person out of local technical high schools to meet its demand. There was also a good talent pool of people with some skills and no formal training. The Pipeline was a “win-win” because EB filled needs-qualified people and provided opportunities to start a career. However, he highlighted employability as a concern, so the Pipeline was a proving ground for showing up on time and other such skills.

Roger reported that, so far, there were 110 people trained and 92 in the door or assigned a start date. He heard positive things from Pipeline trainees, such as “I have always thought of leaving this job” because they moved from job to job or accepted a job they did not like because it was their best available option. Roger “can think of three people moved to tears with an offer.” He touted the program’s success in producing successful and efficient workers (RL, phone communication, May 17, 2017).

---

105 Roger did not mention that they include their own contingent hires, which EB interviews directly and then diverts to Pipeline training.

106 These are much lower than the figures from Carl, the CT DOL Pipeline program manager, who said there were over 270 trained in person. These numbers are considered together in Chapter 6.
Interviews with Pipeline Participants

A host of public funds supported EB, from the Navy contracts to the Pipeline. Although the Pipeline met the recruitment and training needs of EB, how did Pipeline participants experience it? The next section follows the experiences of Pipeline participants via semistructured interviews. I conducted 13 interviews, recruited by advertisement during trainings and through job development referrals. They are not a representative sample, but they are illustrative of patterns in experiences. I ceased interviewing when I no longer had Pipeline staff support to continue recruiting. The interviewees were at different stages of the Pipeline: waiting for, taking, or having finished in-person training. The demographics of this sample, matching reports from the Pipeline, were majority male (85%) and White (69%), with 15% of White respondents also identifying as Hispanic. There was a noticeable representation of Black trainees (23%). There was an age span between younger, 30s and 40s (46%), and older, 50s and up (54%; see table 5). At the time of the interview, no one had been hired by EB.
Table 5: Demographics of Pipeline Interviewees

<table>
<thead>
<tr>
<th>Category</th>
<th>Interviewees</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Population</strong></td>
<td>13</td>
</tr>
<tr>
<td><strong>Gender</strong></td>
<td></td>
</tr>
<tr>
<td>Female: 15%</td>
<td></td>
</tr>
<tr>
<td>Male: 85%</td>
<td></td>
</tr>
<tr>
<td><strong>Age</strong></td>
<td></td>
</tr>
<tr>
<td>Under 40: 46%</td>
<td></td>
</tr>
<tr>
<td>50s+: 54%</td>
<td></td>
</tr>
<tr>
<td><strong>Education</strong></td>
<td></td>
</tr>
<tr>
<td>Bachelors: 43%</td>
<td></td>
</tr>
<tr>
<td>Associate: 15%</td>
<td></td>
</tr>
<tr>
<td>Some College: 15%</td>
<td></td>
</tr>
<tr>
<td>High School or GED: 38%</td>
<td></td>
</tr>
<tr>
<td><strong>Individual Income</strong></td>
<td></td>
</tr>
<tr>
<td>Under $20,000: 54%</td>
<td></td>
</tr>
<tr>
<td>$30,000 and up: 46%*</td>
<td></td>
</tr>
</tbody>
</table>
* All in this category report receiving unemployment insurance and may be reporting previous income.  
| **Race/Ethnicity**    |              |
| White: 69%            |              |
| Non-Hispanic White: 54% |           |
| Hispanic: 15%         |              |
| Black: 23%            |              |
| Asian: 8%             |              |
| **Owner Occupied Homes** |            |
| 62%                   |              |
| **Nativity**          |              |
| U.S. Born: 92%       |              |
| Foreign Born: 8%      |              |
| **Residence**         |              |
| New London County: 62% |            |
| New London or Norwich (cities): 39% |       |
| Windham County: 23%   |              |
| Hartford County: 8%   |              |
| Middlesex County: 8%  |              |

**Coming to the Pipeline**

How people come to the Pipeline shows the desired applications for this sectoral training that required an entrance exam. The vast majority of interviewees were direct referrals to the Pipeline by AJC staff, seventy-seven percent reported receiving unemployment insurance or being underemployed when interviewed.\(^{109}^{110}\) Nathan, a white man in his 50s, had a long history of manufacturing and supervisory work, but in recent years, he has cycled through unemployment and retail work. “I went from unemployment to using the services of, the CT employment agencies…. during the process of signing up on the portal, satisfying those requirements, I heard of the EB training.” Albert, a Black man in his early 60s, had a long career in electrical and computer work with defense contractors and had been unemployed with
unstable contract and temporary work. “It [the Pipeline] was recommended at the DOL…. primarily because I have been struggling for full employment since 2011.”

Another group of interviewees (23%) who were working or staying at home entered the Pipeline because they were interested in or had applied to EB specifically. The excitement of EB’s hiring motivated some people. Esther, an Asian woman her 40s, was a stay-at-home mom after years of working in quality control. Her husband worked at EB, and she was looking to get back to work:

I saw it at the EB website. Yes, I apply for multiple positions, outside machinist, painting, lab positions . . . because they have quality control there too . . . [I have not been hired because of] lacking work experience or something like that. I keep going back to the website, and on the bottom on their website, there are things about the Manufacturing Pipeline. And that’s how I found out.

Rich was a White man in his 20s who went to trade school and then bounced around to many retail, service, and temporary jobs and had been trying to get a job at EB: “I have been applying to EB for a long, long time . . . like two or three years. When I went to the DOL building, that’s when I found out [about the Pipeline].”

However, a few interviewees were not hopeful when they heard EB’s starting wages of $15–18. Those tended to be educated, previously higher earning, professional participants. Ray was a white man in his 40s with an advanced degree and a history of professional work in

\[109\] Unemployment insurance had expired, or people were not qualified.

\[110\] Qualifying for unemployment insurance and the level of benefit is related to the type of job (contractor, regular employee) and pay.
research. He had been looking for work for over nine months, and he was not happy with the starting pay at EB. He heard about manufacturing opportunities from friends and imagined higher wages.

They [in manufacturing] are making good money . . . and then I find out what the wages are. Starting—you are talking about 15 bucks an hour, I was like, oh gosh. That’s not what he’s getting, that’s for sure [laughs]. There was a disconnect, from what I know the reality of what people are getting to what this is paying. So that kind of put me back, do I really want to do this? Because I was making, not a lot of money, but not bad, that’s for sure. Like double or triple [like $30–45/hour]. So, I wouldn’t mind a step back if it’s something different, but not if it’s that much of a step back.

Interviewees and Pipeline staff commonly observed that the Pipeline was backed up, causing long waits between testing, information session, and training. Although some were fine with unemployment and waiting for the training, more had difficulty. For example, Charles was a White man in his early 50s who had a career as a truck driver. Due to health reasons, he could not continue. Against medical advice, he performed pickup driving jobs while taking community college classes. He was waiting for in-person sessions to start and worried that the wait for training and work was too long:

[In the] information session and at that point, they told all of us that were in that session that you were looking at the first of the year before they were going to be able to start placing anybody from our group into any of these training. . . . Because there are so

111 This matches the descriptions from CT DOL and Pipeline training staff that there was significantly higher interest in in-person trainings than there was training capacity or funding.
many people that are in it already . . . my unemployment is going to run out in August. So I mean I cannot sit here and wait from July to January of 2018, for a training session that could take another six months. I got to go do something.

The rush to start training and find work quickly speaks to the material precarity of some interviewees. Although most people entered the Pipeline via a direct referral from the CT DOL or redirection from EB, they did not all start from the same material and social place.

**Conditions: Internal vs. External Support**

Resources such as unemployment, family support, and personal savings allowed participants to wait and progress differently through the Pipeline. Based on material conditions, interviewees had two orientations to the challenges of daily conditions. The first group was more precarious and looked to internal support for stability and mobility. The other group was more materially protected, by owning a home or having access to more government benefits, with significant external support. These different support systems created different focuses from the interviewees on mobility or stability.

The first group was going through recent changes and struggling more with material conditions, such as living-wage work, stable housing, or a working car. They discussed problems of self-conception and turned to internal supports. A study of struggling working-class young people found that they relied on self-management and emotional management as a tool for control. With waning public support and predatory private services, there was a strength given to a therapeutic narrative of the self as a possible locus of positive change. Working-class men’s stories of “bravery, strength, and distrust of words” transformed into new stories of individual growth (Silva, 2013, pp. 20–21). Five participants mentioned problems with control, direction,
adulthood, or addiction before a transformation point. Of these interviewees, three were Black men, one was a woman, and one was a young White man.

Rich, a White man in his 20s, was the youngest interviewee. He graduated from a technical high school and Job Corp for training.\textsuperscript{112} He had been in and out of many jobs, citing a lack of control of emotions, misunderstanding the situation, or feeling bullied. However, he talked about the Job Corps experience, two years prior, using drugs and not taking it seriously. He described trying in the program, which allowed him to grow up, find direction, and be an adult:

It [Job Corp] has pros and cons at the end of the day because that’s where like I grew up. Like when I got there, I used just to say when I left I still felt like I knew a lot. I knew everything, but, like . . . I was toned down more when I left. When I went in there, I thought I knew everything. . . . It’s like you are going to school and you are supposed to do work. I would just play around and . . . took advantage of stuff, you know, and they fed you lunch and then they had like a corner café thing, you go there . . . I don’t know how to put it, I just starting viewing things different.

Controlling and reforming his outlook were the tools needed to prosper regardless of condition. Later in his interview, he mentioned how the Job Corps computer training did not help him get a job.

Vince was a Black man in his 30s from a disinvested community that lacked opportunities for children. Through a summer jobs program, he picked tobacco in high school.

\textsuperscript{112} Job Corps is a Department of Labor program that started in 1964 to offer free residential education and E&T to disadvantaged youth (aged 16–24; (U.S. Department of Labor, n.d.).
He described a transition from being a troublemaker to becoming a good provider and man. He has gained control:

Yeah, I’ve been one of those kids that was the troublemaker. I am not the greatest guy. I have been through it all. I have been in bad relationships. I have done it all. Overall, I just want to be a good man; I want to be a provider for my family. I never want to use my negative and say this is what makes me. No, the good makes me.

Vince narrated growing into a responsible man. Later in his interview, he mentioned his long commute to dangerous contract work with little mobility at another CT defense manufacturer. Although he matured, his longtime employment did not allow him to support his family even while working full time. He had a long commute and hunger.

Sam, a Black man in his early 40s, had some family losses and found himself alone, depressed, and self-medicating with substances. He connected this to a poor self-image, not caring:

It’s like, OK, I am ready to go wherever now. I probably didn’t care what I looked like. And now, I look in the mirror and tell myself to be proud of myself. I love myself. I tell myself never give up. I talk to myself, within myself a lot. And then I talk with God every time too. I had to take that change somehow. So I stopped the addiction, and I stopped the habits all at the same time, and [I’m] five years clean and healthier than I have ever been and helping others.

In addition to getting clean and sober, he moved cities to improve his life. These transformational experiences, focusing on a better self and a better future, were mostly about internal changes rather than external support. After a computer workforce training program in
Philadelphia, he was unable to find stable work and worked a mixture of retail and temporary jobs that did not become permanent. He was still sober and grateful. This focus on the self and changing the self comes back to the Pipeline training mantra that “EB is hiring on character and training on skill.” Interviewees were working on themselves for future compensation, despite precarity.

The second group of trainees was more stable in their everyday material conditions and had access to external supports, reducing precarity. The following are stories of their support to become and stay stable. These people were generally older and more educated and/or had access through military service or disability to more social programs.

Owning housing is a support, and everyone in this group owned a house or lived with families that did. Although owning a house can promote stability, homeowners can also face housing instability. The homeowners at risk of foreclosure found external support to stay in their homes, for the time being. After a long stretch of unemployment, Bob, a White man in his 50s, was unable to make house payments without the help of an adult child: “My daughter was living somewhere else; now she is living there with me, but renting it, you know helping out because I have no income coming in right now. And my unemployment ran out.” After unstable employment and intermittent unemployment since 2011, Albert, a Black man in his early 60s, was in crisis and accessed a preforeclosure eviction programs to help him keep his house:

But after that, I started having issues with the mortgage company, and my house was almost foreclosed. . . . two years . . . Fortunately for the state of CT . . . I wound up right

113 Of the interviewees, 62% owned their own home or lived with someone who did. That matches the larger statistics from New London and Windham Counties (see Table 4).
now making payments to CT Housing Finance Authority, and the payment I’m making is
a lot less than the house payment, but they are making the rest of the payment, and I will
have to repay them once I get the other . . . Plus I used part of my retirement.

Through family or state support, these people can stay in their houses.

Another external support is access to social assistance, from unemployment insurance to
GI veterans’ services. These services are described as robust and flexible. Albert described
joining the military with the goal of going to college:

Well, as far as the army is concerned, that was what I had to do. The primary reason I
joined the army was to get the GI Bill. . . . And if I had to go to Vietnam to do it, I would.

As it turned out, he did. Since earning his college degree, he completed multiple workforce
training programs. James served in the National Guard during college and after. In addition to
tuition remission, this service could be added toward retirement if he were to take a civil service
job; for example, “once you get into the Post Office, they still have a pension too, and my
military service counts.”

Bill, a Hispanic man in his 40s, served in the Navy. He has access to a Navy training
because of a disability.114

I lost some hearing in the Navy, so I have a 10% disability, so what they have is an
electronic technician program, five months. The stipend might be 500–700 a month,
which is better than nothing. And after five months, you get 11 certificates, and I can
work at EB, I can work for automotive, I mean, so many options, you can go anywhere . .

114 The Pipeline does not offer a stipend and is shorter.
. I just feel that electrical training, electronic technician training will get me into EB fastest.

So, he chose the Navy training first and put the Pipeline on hold until after he finished: “First, electronics; at least they are going to give me [a] 500-to-700-dollar-a-month stipend.”

He was juggling options between different training programs, potential employment, and returning to hospital work as a respiratory therapist. He was conflicted about the military, which he left after his first child was born because the Navy did not inform him of the birth of his son. He felt that was because he was noncommissioned. However, he suggested that his daughter and nephew join the armed services as a way out of $10/hour work,

My youngest one is 20, and I have been trying to get her to go into the military and she won’t. . . . I have great girls, but not so much realistic or, ah, about, I mean, 50 dollars a week at home is not a lot of money, and if you are just making minimum wage, it’s because you choose to do that. Go back to school. I tried to get you into the military or go to trade school. If you choose to make $10 an hour, that’s your choice.

Although there were differences in their supports, interviewees all experienced precarity in their lives that brought them to the Pipeline.

Work Experiences

Interviewees had broad work experiences. There were trends toward work being low wage, unstable, or worsening. This section first looks at challenging or poor working conditions and then addresses the loss or worsening of good work. Interviewees described bad work, as defined by Kalleberg (2011) as low paying, unstable terms, or physically challenging or unsustainable. Regardless of their educational attainment, younger workers and workers of color
tended to have more employment instability, sometimes fluctuating between a stable, living wage and more precarious work. Several interviewees mentioned that their only consistent work, or work to come back to, was temporary, low wage, or relied on tips. This work is ubiquitous and something to avoid. Nathan sums this up: “You know job postings are all name tag jobs. . . . the service sector, fast food worker.” However, these jobs can be stable. After an injury and losing stable entry-level healthcare jobs and a death in his close family, Sam had issues with depression and addiction, but his retail job was available and offered stability.

Temporary work was highly available but provided little schedule or pay stability. Interviewees described diverse work, from manufacturing to assistant to tax-season pickup work through temporary agencies. There was also a contract or commission work, described as hourly, by the commission, and often accompanied by long-term fears of layoffs. Some worked for subcontractors, including EB or Sikorsky, another CT defense contractor. As conditions worsened and the contracts changed, people lost jobs. For example, Albert said that

[P]art of that treaty [at the end of the Cold War] was the reduction of two Trident D5 submarines. . . . and the plan was to build those at Electric Boat. . . . Which would have taken me, if they built those, until the year 2000, at least, but . . . they cut that so our company, Interstate Electronics, had a reduction in workforce, because of that contract reduction from the Navy to Electric Boat.

He was laid off. He could have finished his work life on an EB contract and is now relying on the stability of another EB contract. The rhetoric of contractor stability is belied by experience.

Low-wage, “name tag,” and temporary/contract work was available, but full-time work with living-wage pay or skilled work remained unstable for many. The examples are from workers under 50, one college educated and one with a GED. James was a college-educated man
in his 40s. He worked at Frito Lay in sales and driving delivery. He lost his job due to a mistaken mishandling with money, worked at Applebee’s, found a sales job at Solar City that became contract work, and returned to Applebee’s. His experiences exemplify a stable job transitioning to less pay and stability:

[Solar City] switched from a W2 to 1099, and they wanted us all to be individual contractors. So, they took away benefits and all that. . . . I was doing well at Solar City, but I saw that that was not going to work. I knew, once they decided they were going to make us all independent contractors, they are going to get rid of this whole division.

James commented that there was a solar boom and it ramped up so quickly that the sales force was too big for the market. Under these conditions, bartending for tips at Applebee’s became the stable option:

I was working at Applebee’s. I started, just as a waiter, while I was going to school, so I could make money. And I did that pretty much the whole time I was working in Mass and then when I came back to CT . . . then went to Frito Lay, then went back to Applebee’s . . . I had always left on good terms and the managers, well, one of the managers, was still there, and she knew me.

Rich held a high school diploma from a technical high school, but he never worked in that trade. He completed more technical training that did not help him get or keep work: “They should be leaving [Job Corp] with a career, but it’s not exactly guaranteed. And I got my A+ Certification, along with Strata. . . . It’s nothing. Employers don’t even ask about [it].” He described working many jobs (construction, manufacturing, automotive, and retail). In between jobs, he worked at Labor Ready, a temporary agency. “I got fired from Town Fair Tire [for scratching a car] in December. . . So I left there, and I went back to Labor Ready.” He mentioned
Labor Ready over and over, with signs of resentment and anger at still working there for minimum wage. He had a job through Labor Ready that upcoming weekend.

Work in many sectors of labor, from agricultural picking to CNA patient lifting, can be dangerous or physically taxing. Many interviewees experienced dangerous or backbreaking labor conditions as primary to their roles at work, from rigging to mattress flipping to driving gas tankers to landscaping to working third shift. In these ways, their work was not sustainable, and many felt that they needed to find something else or worried about not being able to continue long term without consequences.

Charles’ work as an EB shipyard worker and then a gasoline truck driver was both physically taxing and dangerous. Both left him injured, as he contemplated going back for hard outside labor on an EB shipyard. Charles started as a rigger at EB, like his father, but he was injured multiple times and left after five years.

When I got out of high school . . . I did five years at Electric Boat. . . . I was a rigger. . . . A rigger did all the crane work. My orthopedic doctor said a rigger did whatever is too high, too low or too dirty for anyone else to do. . . . Yeah, it’s all bull work. . . . A lot of times you would put something in, sometimes it would be a 500-pound pump, and sometimes it would be a 12,000-13,000-pound piece of gear machinery. I tore the cartilage in my right knee.

While working at EB, Charles earned his commercial driver’s license (CDL) over the weekends. He quit EB and started driving a fuel tanker:

If all you are looking at the money, then sure, you make 100,000 dollars, go get yourself a couple of years’ experience and get no tickets and no accidents, all of sudden you are
employable at a company like that, that hauls the bad stuff because that’s where all the
money is. . . . You are going to work six days a week, so whatever you have going on for
a life with your family, you got to fit that all into one day. And you are not going to work
six eight-hour days. You are going to work six 10- to 14-hour days.

Charles had knee problems and was told not to drive a truck anymore, pushing him to try the
Pipeline and an associate degree in manufacturing at a community college. Now in his 50s, he
was working to get back into EB. He was willing to do hard work but wanted inside work. There
was no mention of recognition of previous work at EB by him or the Pipeline.

It [rigging] was very, very hard work. And I am not afraid of hard work, but it’s one of
those jobs where you just physically get beat up. There are other jobs there that are the
same thing, like ship fitters and machinists. Some of the people you mentioned, you
know, they have jobs that are very different from that. A lot of those jobs are more using
your head, reading blueprints, fitting things, making things fit, even designing things,
things like that, rather than pure bull work.

The Pipeline prepares trainees for entry-level work at EB. Both machinist and welding
work is physically taxing. It is physical and not highly paid to start, but it promises mobility and
stability. This work at EB echoes the post-WWII bargain of stable, decent-paying work that
nevertheless might be dangerous or lead to premature death (Cowie, 2011).

In the interviews, the definition of “good work” was blurry. Is a job “good” because it is
professional or managerial, the “inside work” described by Charles? Is it good because of the
pay, benefits, or schedule? Why are the jobs at EB considered good even though they do not start
as managerial, professional, or even inside? The stability of long-term contracts focuses on
safety and a chance for advancement, exactly what bad employment does not have. Interviewees
descriptions of good employment are based on their experiences and class-based expectations but generally are full-time, living wage, include benefits, long term stability, autonomy and respect in work, and the ability to do inside or sit-down work.

Labor unions, benefits, wages, and private-sector union membership have been on the decline since the 1970s, as has public support for unions or unionization (Cowie, 2011, p. 16). No interviewee mentioned the EB union. Although EB’s shipyard is unionized, only Bill spoke positively of union protections. Interviewees described good jobs being phased out or getting worse, but no one connected this to a decline of unions. People shared negative experiences with or comments about unions. Multiple people reported working in the face of strikers. Nathan, for example, said that “in the early to mid-80s, like ’83, ’84, there was printing strike in Minneapolis. . . . Yeah, they were unionized, and they were having big conflicts. . . . I was making six bucks in Rochester.” He was offered $11/hour to be a strikebreaker in Minneapolis, and he moved that week. Rich’s father was in a laborers’ union: “He traveled all over, and then when he took a nonunion job while collecting unemployment, they blackballed him, so he got fucked over real bad.”

Ben worked as a public school teacher, after working in nonunion private schools. He felt disadvantaged by the union and school districts as an experienced teacher looking for new work in unionized public schools after layoffs. He said the union pay scale disadvantaged him from getting jobs because districts wanted newer, less expensive teachers.

I felt stuck and I couldn’t even get to a point where I could get tenure because the unions would say this is where you need to be as a starting teacher with 16 years experience, this is where you need to be on the salary scale, and so they were always looking, it
seemed like they were looking for way to prevent me from coming back so they could hire brand-new teachers right out of college.

After difficulty finding stable teaching work, Ben turned to substitute teaching. However, as a substitute, he was let go for a short-term substitute at the end of the year because that person was cheaper per day:

They [the school] let me go at the end of April [or] May because they were trying to save money. . . . Right. So they were able to get per-diem sub . . . Right, because per-diem subbing is $85 a day versus what they were paying me was $135 a day, which was even about half what I was earning at other long-term sub positions.

Regarding the worsening conditions of stable working-class jobs, Charles worked for Exxon as a driver. However, when Mobil merged with Exxon, they phased out drivers to shift to a contractor common carrier. The outsourcing reduced driving liability and paid workers less, with fewer benefits.

Right, and I would still be working there if [it] wasn’t merged with Exxon. Exxon was famous for getting rid of the trucks. [Exxon has been liable in an accident for trucks not having current technology.] . . . Yeah, that’s why the companies started getting out of the trucking end of it, because they just didn’t want that liability.

Many White interviewees had connections to good jobs, through family members with good jobs. A number had parents working at EB or as contractors. James said “[Dad started at Pratt and Whitney], I want to say in Assembly, but he went to Aeronautics. But he got his foot in the door. But probably for the last ten years, he was an inspector.” Ben said “right, that’s why I was looking at Pratt because my dad still consults for them. . . . He’s an aerospace engineer, so
he actually worked at the research center.” Charles said “my father worked at Electric Boat.” These family connections have not yet yield employment. These accounts described working up to be a supervisor or a skilled/professional worker. Vince and Bill recommended people to the Pipeline as an avenue to a stable, safe, and good-paying job.

**Education and Training**

Interviewees were geographically spread out over the grant-targeted New London and Windham counties, as well as neighboring Hartford and Middlesex counties. The interviewees were highly educated as a group 46% with BAs, 15% with an associate degree, 15% with some college, and 23% with high school degrees and no college credits. Overall, the interviewees were highly formally educated and had multiple certifications, some of which were required or provided by employers or professions and needed more training for entry-level jobs.

Interviewees with less than a college education talked about needing more education or training. From Vince, “the jobs—everyone needs training. I get that part. So, it’s cause and effect; there’s no one qualified for jobs, what you do? You train these people. If you want great work, train them.” Formal education is broadly seen as a way to escape production, blue-collar work; as Nathan said, “It [community college] was a challenge. . . . to advance me. You know, my dad died a production worker. I just really didn’t want that to be my thing. I wanted the challenge of new skills.” Bob lost a good job because he lacked a credential. With a high school degree and experience, he worked himself up to being a production supervisor. However, when his company came under new ownership, supervisors were consolidated, and his position was reposted as requiring a BA, even though he had been doing the work without one for years. He saw this as a general trend in manufacturing supervisory positions, which resonates with larger credential inflation (Collins, 1979):
They [employers] wouldn’t even look at you for people who were a supervisor. They were looking at doctorates and BAs and so on. Where you—you might not necessarily need that to do that job. But you know what? They had their choice, and they were getting the more qualified people.

The realities of training and education programs are more complicated and did not always align with better jobs or more job stability. Many participants had completed multiple training programs, some job specific that had not been used or were used only temporarily. Albert’s training, education, and work trajectory are a prime example of this. After serving in the army in the 1970s, doing computer repair, Albert enrolled in an electronics program at a four-year college. At the same time, he received unemployment insurance and looked for work. He started a two-year electrical apprentice training program under CETA, a precursor to the current WIOA, through the DOL. “Because I was a Vietnam-era veteran . . . they called the CETA program. That’s to employ veterans that came back and are looking for work and hadn’t found anything or anything decent.” CETA was ended in 1982, as described in Chapter 3.

After college and the training, Albert worked for a defense contractor on submarine electrical systems. However, the Navy contract was cut, and he was laid off at the end of the Cold War, as described above. He then trained on Cobalt through the CT DOL, to perform computer programming for another defense contractor. An employee of that contractor had to teach the class because Cobalt was out of date and not commonly taught. “Yes, he [trainer] was one of the people that Computer Sciences hired to bring back the training class [in Cobalt] because most people—I mean at some schools—they weren’t even teaching it.” Cobalt was specific for that job and not a widely used programming skill. Immediately after starting work at Computer Sciences, Albert was informed that his employment was uncertain:
It was actually the first week we started. . . . Our supervisor, who was in charge of the program, simply told us that they had people that were going to do the work, they just needed more bodies [to fulfill the contract.] . . . You are not really going to be doing hardly any of the work. And for the first few months, that was about it. And once the contract was over, we were expected to be laid off.

He was laid off in 2011. Since that layoff, he worked temporary computer repair, tax preparation, and other nonstable employment.

Although Albert was educated, trained, and in the midst of Pipeline training, he paid for his security certificate: “I do have another ace in the hole. I also got my security certification, you know, and there is a company, I know needs help that would probably hire me.” He estimates that job would start at $14/hour, which he says is “not bad.” Although he owned his home, he was aided through a CT foreclosure assistance program to pay his mortgage and needed income. He was not the only trainee to have multiple forms of training, formal education degrees, or credentials and still be unemployed off and on.

Albert’s report echoed broader experiences of training that was unwanted, was job specific, or became obsolete before someone could finish a program, even an associate degree program. Issues exist across workforce training and degree programs. The people most likely to do nondegree training before the Pipeline did not have a BA. Three interviewees had a CDL that they had not used, used briefly, or could no longer use because of requirements of long hauls. Some had taken Pipeline-like training in computers or healthcare and worked briefly or not at all in the fields. Although the skills gap focuses on people getting more training or education to be more employable, interviewees shared how commonly training and education are not directly related to skill or jobs. Albert expressed anger with individual employers, and he ran a group for
people laid off from his last job. He laughed away the irony of the layoffs and bad timing, but he continued to seek more training to stabilize himself.

There was also the role of experience and apprenticing as key to being able to perform work. Bob worked as a mattress edger and then edger trainer. He shared how it took almost a year for a new edger to be productive; the job was skilled but not formally trained. However, it also included bull work, lifting mattresses. Bob recounted that when he took a job as an edger and trainer.

He [mattress production manager] called me up and offered me a job, and he said “Hey, we would really use the help here because you know the tape edger job takes like a year to learn to be productive anyways.” . . . Yeah, you work on it every day. . . . It’s difficult to master. It takes a long, long time to do, and it’s hard on your hands and so . . . I would say nine months to a year until they were up to speed where they could keep up everybody else.

However, the company partially automated the process with mechanical lifting and flipping. There was a subsequent $6/hour drop in wages; the edging skill was still required, but not the muscle to lift the mattresses. Without the bull work, the skill through experience was devalued, similar to work degradation (Braverman, 1998).

There are examples of untrained people doing manufacturing work, such as the Pipeline was training for, but as untrained temporary workers. As Vince puts it,

I relate to my experience [as a temporary worker] at Parker Hannifin and Turbo Tech . . . in production, manufacturing, looking at a layout, assembly . . . I grew up . . . learning—look at a ruler, look at measurements, know engines, know the yard.
He could do temporary work on a production line, using existing knowledge he picked up, but it did not last and was not well paying. The Pipeline training was similar work under different employment conditions.

Although there were three college-educated people trained and working in research, accounting, and teaching who were using their degrees until they could find work or livable work in their fields, there were also examples of college-educated workers not using their degree or it not bringing stability. For example, James had been in and out of good sales jobs that had nothing to do with his degree in biology:

Which I don’t do anything with right now . . . There is only one person that I know that studied that they did and then went right into that field, which was chemical engineering, and he is still in that field.

What do these interactions and confusions of education, training, skill, and work mean? The training and education available and the job market do not align as the market restructures. Specific education and training can offer people access to a job, even if they do not need the training or could learn their job without it. However, training and education do not protect people in the job market. The Pipeline claimed that 90% were hired after completing the in-person training, but those slots were backed up and many were filled with provisional hires from EB.
The Future

EB was central to the plans of most people interviewed, echoing the focus on the training. For Nathan, “You know EB is the golden—the brass ring in terms of this area.” He acknowledged that he would need to pay his dues at EB, starting at the bottom and working up to supervision or departments with better connections. Nathan was in his 50s and had already worked his way up in printing. He went on to say:

That part of it appeals to me. The other part of it that appeals to me is that fact that if I get into a manufacturing part of EB, keep my nose clean and do it successfully and learn the lay of the land and the vernacular, I feel like I could parlay that into . . . there is a lot of material planner, project manager, technical writer. There are a lot of those jobs. . . . [I can] pay my dues in the shipyard and learn how it works.

Although most interviewees expressed an interest in and anticipated EB employment, they actively pursued backup plans, and not through the Pipeline job development staff. The Pipeline tended to offer general advice on resumes or job search. Some expressed wanting more training or education and also the need to land some work soon. Bill expressed that clearly,

I just feel that . . . electronic technician training will get me into EB fastest, not saying the Welding [Pipeline training] isn't great. . . . I also need a part-time job because I’ve got bills like everybody else, and that training is in the evenings, so I was like, I would do orientation for a job because I am trying to—I have a meeting Monday, an interview Monday, for a job for adult mental and physical disabilities, I have experience in that.

Some expressed that they could fall back on training that they already had. Bob had a CDL license but barely used it because the only jobs he could find were long haul and he had children.
at home. However, he now considered it a fallback, “That’s what I am going for. I try to leave myself open, but with the CDL, that was always my fallback, but then I realized I couldn’t get into anyplace unless I had a recent year.” The CDL jobs he was considering were on commission by the value of the haul, which is a new payment model.

Some were actively interviewing for other manufacturing jobs. Rich had been rejected from EB for medical reasons after almost a year of training and waiting; he was now interviewing in other manufacturing.

Well, if I don’t get the job at Amgraph—it’s third shift for $17 an hour—I would hate to lose an opportunity like that. If I don’t get that, and hopefully, then, maybe I would get a job. . . . They do fire cocking, that’s $14 an hour. And you travel all over the East Coast. They do fire cocking for hospitals, schools.

He had a technical high school degree, Job Corp training, and the Pipeline. It was possible that one would help him get full-time stable work.

James is a prime example of hedging ambivalence. His job in sales driving a truck and filling orders was his best paying and most stable, but he felt unfulfilled mentally. His degree did not skill him for this job, but a friend from college referred him to it. He finished the Pipeline, and his application was still pending at EB online. He went to a job fair at United Technologies and was waiting to hear back. He was offered a manager job at Applebee’s, which paid decently. While in the Pipeline, he took the CT Civil Service Exam, and just days before I interviewed him, he accepted a job offer as a floater at a Post Office branch that paid $18/hour. The floater position had worsened recently, with new hires’ compensation cut by $6/hour and benefits eliminated. The position could stay part time, one shift a week, for up to 10 years, like a current
floater, or become full time in six months, like another former floater. He would not answer questions about the future because it was too uncertain.

From experience, many interviewees with significant periods of instability and a lack of connection between education, training, and good jobs were keeping their options open but hoping for a way into a stable job at EB.

**Discussion**

The Pipeline promises to hire 425 participants over four years, 350 by EB and 75 by EAMA employers. The cost is $14,117 per person hired, from this $6 million grant, for entry-level manufacturing work that was mostly physical and in the shipyard at EB. Those staffing the Pipeline, from the CT DOL workers to the Pipeline trainers, have good jobs because of this funding. They have won the lottery of good jobs and share advice to others seeking similar jobs. Staff speak of the program from a sense of security, but the trainees do no share their optimism. From interviews, work outside EB was precarious, and the conditions of historically good work were worsening or being phased out. Precarious labor highlights the desirability of EB’s old and taxing form of labor. For Bob, an EB rigger who left the company, the precarity of the labor market brought him back to EB. From interviewees’ accounts, in the past, entry-level jobs had limited education or outside training requirements. Times have changed, and prior education and training are becoming more important for getting good entry-level jobs. Experiences from the interviewees show that there is nothing that completely protects workers. Access to or stability of work is often not connected to training, education, or experience. Many had multiple unused trainings. Although training may have transferable skills, the growth in specific training means people trained explicitly for a new job, such that people who might be skilled enough nevertheless cannot get that work. Employer or job specific trainings, like the Pipeline or
Albert’s Cobalt training in the 1990s, may only be useful for a specific contractor, even though people have skills and experience. Increased credentialing requires skilled and experienced people like Albert to take new trainings. Training is monopolizing access and productive for the trainers and training program.

The Pipeline’s goal of EB employment produces a singular focus of attention on doing what one needs to get and hold that job. After people’s various experiences with unstable work that worsened or was phased out, EB was perceived as different. The training for EB prepared them for the type of physically taxing and repetitive work that became increasingly unpopular in the 1970s: “Back in 1972, a unionized manufacturing job seemed like an existential dead end[;] in the twilight of the industrial golden age, that same job had become a coveted source of security” (Cowie, 2011, p. 15). In light of the larger working conditions, EB became coveted for those with limited options.

In a sea of precarity, the Pipeline had thousands of applicants for a few hundred spots. The Pipeline can cream people through conditional hiring and its own structure. Lafer (2002, p. 96) observed how for program success, JTPA and WIA, precursors to WIOA, had an incentive to cream workers. In the changing economy, the surplus of experienced and skilled workers made creaming possible and advantageous to the CT DOL and EB. CT DOL wanted good placement and retention rates, and EB wanted the best employees as a premium. This program represented a way to screen people who could be hired, train them using government funds, and test out their abilities and stability before the final hire.

EB’s conditional hires being filtered through the training shows this creaming effect. For example, the trainer Connor, who already had experience in manufacturing, paid for a one-year manufacturing certificate, and was hired conditional only on attending the Pipeline. He started at
an entry-level OSM position. The conditional hire system allowed EB to screen people applying and require that they attend 1–3 months of training and wait for security clearance. EB could replace any other Pipeline trainees and save itself training or provision time by pretesting and training people, which excludes conditional hires who do not or cannot provide months of almost full-time training without compensation. Conditional hires are vetted by EB HR but use public rather than company resources.

On the flip side of creaming, Pipeline structures a weed-out. Pipeline in-person training requires a substantial time commitment (long wait for training, taking the training, and then EB security clearance), transportation, and access to unemployment. The program cream people who can wait for and take the training. With layoffs, there were also experienced, skilled people in the area looking for decent work. The interviewees I saw were more often male, White, and stably housed and more educated than city residents or job seekers in general. Is this merely a way for employers to have state funds, through nonprofits, to sort people and find the most skilled, when there are not enough jobs for the demand? In this environment, skill was not the passport into EB or a good inside job there even with all the planned hiring. As Pipeline trainers reiterate, EB did not need workers who were skilled, just disciplined enough to work. The question is about getting a job, not whether they can do the job. EB creamed skilled, experienced, educated/trained workers and tailored and disciplined them using an EB curriculum, trainers, and hope while using public funds. The Pipeline is a way to underemploy skilled and educated people without other options to start in entry-level manufacturing jobs.

Is EB the stable, good job lottery ticket? Although working at EB might be more stable than other regional options, Albert’s experience highlights the irony of waiting for a job at EB because of contract increases after losing a job due to unstable Navy contracts at EB in the 1990s.
and 2010s. It is a lottery ticket, but not everyone is playing the same lottery. Employment at EB was segmented. Although EB was a mixture of professional and managerial work and manual shipyard work, it had different funnels, from degree programs for inside work to training programs for the shipyards. Bob and his father, both riggers at EB, had a high school education, whereas James’s college-educated father started in assembly and moved to engineering. The Pipeline allows continuing segmentation in the labor market (race, class, gender), with more credential inflation, and creaming. CT is highly bifurcated between cities and suburbs, and the Pipeline attracts people who are more educated and experienced than the cities, which concentrate poor people, people of color, and immigrants. Training for those segregated by race, class, and gender in cities is considered next, in Chapter 5.
There are looming shortages in healthcare, spanning from primary care doctors and nurses to nursing assistants (Kavilanz, 2018). These crises present work opportunities. Although the shortages in nurses, assistants, and aides are all in healthcare, the required training and potential workforces are different. Jobs segregate by the level of credential and setting. For the RN shortage, associate and bachelors’ degree trained nurses from higher education institutions are needed (Grant, 2016). Credit-bearing higher education can be a barrier based on finances, time, and educational readiness (Haynes at al., 2015). For the entry-level shortages, untrained and trained assistants and aides are required, specifically for chronically ill and aging people. This demand fits the model for the secondary labor market, requiring a surplus of workers. This chapter studies training for the shortage in the latter, frontline healthcare workers.

These frontline workers are 50% of all healthcare workers (6 million) and represent the fastest growing segment of healthcare workers. They have a low point of entry (training) and low pay, starting under $19/hour. One third (2 million) of frontline direct care workers are concentrated in residential and home care, the lowest paying and fastest growing healthcare settings (Dill, 2015, pp. 62–63). There is an overrepresentation of women of color in residential care and foreign-born women in home care (Folbre, 2012, p. 83). Nursing assistants are frontline direct care workers and there is strong growth in the field with increases in long-term

---

115 Nursing assistants in both long-term and home care are similar in demographics, but the working conditions differ, facilities offer higher pay but more injury risk, whereas home care is lower paid but provides more satisfaction and autonomy (Price-Glynn & Rakovski, 2015).
facilities and home care (Duffy, 2011). For those training as nursing assistants, connections to nursing pathways are supported through small-scale demonstration projects but limited in practice (Nelson & Wolf-Powers, 2010, pp. 40, 42).

This chapter is about CNA training and the experiences of those undertaking it. I begin with a historical overview of the restructuring of healthcare and the formalization of nursing assistants, followed by an overview of the OIC NLC training program. The chapter traces the training process and then the experiences of those in training with observations and interviews with staff and trainees.

Reproductive Labor: From Domestic Workers to CNAs

Healthcare and health professions formalized into hospitals in the US between 1870 and 1930, staffed by growing numbers of paid professional and unskilled workers (Brannon, 1994, p. 14; Duffy, 2011, p. 50).116 Nursing is central to patient care and was stratified from the beginning. First trained nurses, and then RNs, were disproportionately educated White women who patrolled the professional boundary by differentiating themselves from practical or untrained nursing staff, disproportionately women of color (Glenn, 1992, p. 28). Nursing credentials institutionalized the educational and class differences between skilled and unskilled nursing staff (Duffy, 2011, p. 55).117 Healthcare services and access expanded through employer-sponsored insurance and public insurance (Medicaid and Medicare) during the Great Society

116 Early healthcare was provided by charity, public, and religious organizations. Beginning in the 1870s, nursing training shifted from apprenticing to formal nursing schools (Brannon, 1994).
117 The majority of nursing schools were founded between 1900 and 1920, and there were hierarchies of education and training, often focusing on differences of skill and roles, from skilled nurses to practical nurses and aides. The latter were assigned elderly patients and low-level tasks, such as housekeeping. Skilled nurses were recruited from the professional and managerial classes because of an assumption of good moral standards (Brannon, 1994, p. 62,64,67,93).
reforms of the 1960s (Buchmueller & Monheit, 2009). Starting in the 1970s, and intensifying in the 1990s, the business of healthcare was under pressure to restructure from internal (profit and efficiency) and outside (managed care) causes. Although the restructuring was proposed to increase the quality of care and efficiency, the results were large corporate structures cutting costs (Ducey, 2009). Internally, healthcare systems rationalized and intensified, producing economies of scale, as in the 19th-century factories, concentrating care for older adults in segregated rehabilitation and long-term care facilities (Brannon, 1994). Nursing assistants make up the most significant percentage of staff in long-term care or skilled nursing facilities (37%) and perform the vast majority of direct patient care (Campbell, 2017, p. 3; Price-Glynn & Rakovski, 2015). Medicaid and Medicaid funding and regulations constrain and shape healthcare settings and work conditions (Nisbet & Morgan, 2017). In light of rising costs and the low quality of institutional settings, Medicaid and Medicare encourage noninstitutional chronic care, specifically home care (Landers et al., 2016).

Labor reorganization reapportions the work of an RN to an aide, a technician, and a lower grade nurse (an LPN). There is a growing separation between professional planning workers, such as doctors and skilled nurses, and execution workers, such as technicians and aides. In nursing, the lowest level of tasks are increasingly offloaded onto a growing unskilled and middle-skill workforce (Weinberg, 2004). To maximize profits, this system incentivizes care by the cheapest permissible laborers, through licenses and skill required for tasks (Ducey, 2009). In this climate, there is an ongoing conflict between healthcare systems and professional and

---

118 These growing formal health services were, and are, unequally distributed. This is a dearth in minority areas—for example, there were no hospitals in the majority Black neighborhood of LA in 1960, and patients were segregated in hospitals (Loyd, 2014, pp. 38, 40).
licensing organizations over the boundaries of professions and scopes of practice in terms of the work that required task-specific credentials (Morgan & Farrar, 2015). These are similar to restructuring in production a century before, described in Chapter 2.

Nursing work is being restructured, cut, and squeezed, trapping skilled nurses between care and mandates and patients and administrators (Weinberg, 2004, p. 96). Weinberg described the use of lean manufacturing techniques to access and cut excess staff or make staffing more flexible, by being called in, moved to other facilities, or sent home (p. 138). Restructuring divided nursing tasks such that nurses became planners, whereas nursing assistants increasingly perform primary nursing care. Nurses managed assistants who had limited patient care autonomy (Duffy, 2011, p. 86). Weinberg (2004) found that nurses criticized assistants saying they were less knowledgeable and bad workers (lazy, asleep, high; Weinberg, 2004, pp. 66–67). Assistants took on both segmented and degraded parts of nursing and other trained work and formalized domestic work into the healthcare system, with new requirements.

**CNAs.** As a segment of frontline healthcare workers, CNA work combines assistance with personal care or Activities of Daily Life (ADL), such as feeding, changing, and cleaning people with medical monitoring. CNA work depends on the setting (hospital, long-term care facility, or home), staff available, and range of patient needs (Price-Glynn & Rakovski, 2015). CNA work is a combination of credentialing paid in-home domestic labor and downskilled nursing work (Duffy, 2011; Glenn, 1992). The jobs require increasing formal training and certification despite being similar to historically untrained domestic work (Ducey, 2009). There

---

119 In the past, the ADL work was primarily performed by vocational nurses and aides, but the medical work of vitals and charting has been deskilled downward to aides and assistants (Ducey, 2009).
is a discrepancy between how the work is defined as “unskilled and menial” and how CNAs are allowed and expected to “exercise skill and judgment” (Glenn, 1992, p. 28).

CNA work is squeezed by habitual understaffing and low quality working conditions (Dill, 2015; Price-Glynn & Rakovski, 2015). CNAs are at the bottom of the healthcare hierarchy and do not control their work. They have orders to follow from nurses and other professionals (Weinberg, 2004). They must do, like manufacturing operators. Their work is both physically and emotionally intimate. From a study of CNAs in a long-term care facility in Massachusetts, caring intimacy can create a struggle between care that is similar to kinship and the paid nature of the labor. At the same time, this caring produced self-exploitation as they worked on breaks, came in early or on days off, or left late. The positions were understaffed and underpaid, making it hard for workers to care for their own families (Dodson & Zincavage, 2007).

My research studies a CNA training at the nonprofit OIC NLC, with clinical hours in a nursing home. The demographics of CNAs working in nursing homes are 91% women, 54% racial or ethnic minorities, 20% foreign born, and 51% with a high school diploma or less; the vast majority are poor (Campbell, 2017). In general, CNAs in nursing homes are disproportionately women, racial and ethnic minorities, and in possession of low levels of education. As the population increases, ages, and lives longer, there is a growing reliance on poor, minority, and immigrant women to perform and subsidize care for older adults. Training

---

120 The Personal Responsibility and Work Opportunity Act (PRWOA) of 1996 restructured welfare into state-administered block grants that were time limited and included a work requirement. Welfare reform funded recipients and pushed quick workforce attachment; entry-level care work is an avenue for the latter (Peck, 2001). Entry-level direct care jobs are expanding as many poor women are entering the labor market.
for this growing field of employment occurs through a variety of training and educational settings, and I observed training at OIC NLC.

Training and OIC

Johnson’s Great Society programs addressed a mounting urban crisis, due to structural changes that resulted from capital mobility, or deindustrialization, and suburbanization associated with white flight out of industrial city centers, with individualizing antipoverty programs such as OICs. OIC began in Philadelphia 1964, because North Philadelphia was a destination for Great Migration in-migrants (as cities’ industrial bases contracted) and landlord neglect (as many White people left Philadelphia for the suburbs). Philadelphia was in economic decline and facing an urban uprising. Although OIC began targeting employer discrimination and conditions, it shifted toward job training following employer claims that there were insufficiently skilled Black applicants for jobs beyond dirty and menial tasks (McKee, 2008; Sullivan, 1969). Job training became OIC’s central mission: “OIC was seen as addressing the supposed skills deficits and cultural maladjustments of low-income urban African Americans” (McKee, 2008, pp. 131–132). Capital interests, including the Philadelphia Chamber of Commerce, supported OIC’s selective patronage and job training as a liberal alternative (“build, brother, build”) to Black militancy (“burn, baby, burn”; McKee, 2008, p. 131).

OIC training targeted hard-to-reach job seekers. In 1965–1966, trainees were 98% poor, 81% with less than a high school education, and 90% African American, in contrast with MDTA applicant creaming (McKee, 2008, p. 149). The OIC training was, and continues to be, organized in two parts in order to meet the training needs of poor residents. OIC combines employability

121 It is currently known only as OIC partially because of the shift in training focus away from industrial jobs.
and skills training, divided under WIA and then WIOA. As a result, OIC is well positioned as a training provider under the devolved conditions of WIA, and now WIOA (Borges-Méndez & Meléndez, 2004). The employability training was a feeder program, proclaimed the first “prevocational program,” building attitude, ambition, and self-respect (Sullivan, 1969, p. 99). The feeder ran at the trainee’s pace, from two weeks to three months, in a supportive environment that balanced self-help with race pride, after earlier insufficient education and training. Content ranged from basic literacy to workplace expectations (McKee, 2008, pp. 139–142). The goal was a psychological transformation in the face of broader discrimination and claims of inferiority (Sullivan, 1969, p. 107). The second part, a skills training, began with a wide variety of training programs, heavily gendered male (electrician, sheet metal) and female (power sewing and clerical; Sullivan, 2000, pp. 15–16). Skills training lasted between eight weeks and 18 months, with an average of 22 weeks (McKee, 2008, p. 154).

By 1967, OIC was used nationally as a model antipoverty program (“outstanding ghetto project”), fitting self-help onto a “liberal framework for community development” (McKee, 2008, pp. 164, 168). In 1965, OIC was cheaper and more successful than Philadelphia’s own Department of Education training and received the most federally contracted training money in the city (McKee, 2008, p. 161). Although OIC received local and Ford Foundation funding, it quickly became dependent on federal sources. From 1964 to 1969, $45.9 million of OIC’s total $48.5 budget was from federal sources, including the Office of Economic Opportunity (OEC; McKee, 2008, p. 169). Federal funding continued: “a $32.6 million grant in 1973 and a $44 million grant in 1974, under CETA, allowed OIC to prosper at a time when other anti-poverty

122 There were more female participants in part due to income support through welfare for female trainees, but male jobs paid more (McKee, 2008).
programs were terminated” (Bartlett, 2015). There was a balance between self-help, with the slogan “we help ourselves,” and the need for public funds (Sullivan, 2000, pp. 18, 21). OIC continued to be funded, but its effectiveness was limited by changes to capital and labor markets. OIC found early success in placements and funding, but placement successes fluctuated with the economy. High placements and breaking race barriers in employment occurred during an employment expansion related to expanding defense manufacturing in the 1960s, but placements declined with the recession in the 1970s. OIC’s model was weak because its model relied on “economic changes [growth]” not challenging job flight or segregation (McKee, 2008, p. 165).

OIC soon spread to over 100 cities, with 30 autonomous OICs by 1967 and 130 by 1976 (McKee, 2008, p. 163; Sullivan, 2000, p. 21). OIC NLC opened in 1970, focusing on industrial and clerical training. OIC NLC has shifted away from its original manufacturing focus, such as technical high schools in CT, to providing culinary arts and CNA training. From my observation, although the OIC NLC building bustled with programs and activities, there had been shrinkage, with one to two floors mostly empty and a hodgepodge of contracted training (OSHA 10, PCT from Three Rivers, Parent Leadership) and outside organizations renting space (soup kitchen, food pantry, TSA Precheck) in 2016–2017. In 2018, OIC NLC experienced a 12% ($70,000) budgetary shortfall (Smith, 2018).

For the two employment and training programs, all participants had the Supplemental Nutrition Assistance Program (SNAP), and their training was funded primarily through the

---

123 The coordinator for manufacturing at the Connecticut Association for Technical High Schools described past shifts from fields like manufacturing because of job contraction and hospitality because of low pay (JM, meeting, June 1, 2017).
SNAP Employment and Training program (SNAP E&T).\textsuperscript{124} “These services are intended to assist recipients in gaining skills, training, work, or experience that will increase their employment and earnings and reduce their need for SNAP” (Barnow & Smith, 2015, p. 53).\textsuperscript{125} SNAP grants are individually targeted, funded by the Department of Agriculture, managed by the CT Department of Social Services. SNAP required people to be at 130\% of the FPL and training prepared people to “secure jobs with solid wages” (Jobs and Employment, Connecticut Department of Social Services, n.d.). OIC NLC is training disadvantaged people to find stable entry-level work in healthcare.

**CNA Training**

OIC NLC training had multiple stages. Trainees started and stopped and returned after the birth of a child. Throughout my observation period, there were a stream of walk-ins and calls about the training (see Figure 4).

\textsuperscript{124} SNAP E&T is an optional funding source at AJCs (Decker & Berk, 2011, p. 907).

\textsuperscript{125} “In an average month in FY 2013, more than 47 million individuals received SNAP benefits; however, in 2012, the most recent year for which data are available, only 15.3 percent of non-elderly adult SNAP recipients participated in SNAP E&T activities. SNAP E&T supports a range of employment and training activities for SNAP recipients. Such activities can include job search, job search training, work experience or workfare, and education and training including basic skills instruction. Employability assessments and case management services can be part of a component but cannot be stand-alone activities. SNAP E&T can also be used to provide job retention services for up to 90 days after an individual who received other services under SNAP E&T gains employment. The 2013 appropriation for the program was $416 million” (Barnow & Smith, 2015, p. 53).
Figure 4: OIC of New London County Certified Nursing Assistant Training Flow

<table>
<thead>
<tr>
<th>Intake</th>
<th>Education director</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Orientation (weekly)</strong></td>
<td>Education director with community college representative</td>
</tr>
<tr>
<td><strong>Prevocational Training (6 weeks)</strong></td>
<td>Education director employability training</td>
</tr>
<tr>
<td><strong>Skills Training (6 weeks)</strong></td>
<td>Training with nurse trainer including a two week clinical placement at Beachwood Nursing Home</td>
</tr>
<tr>
<td><strong>State Exam</strong></td>
<td></td>
</tr>
</tbody>
</table>

**Orientation.** OIC NLC held weekly Thursday morning orientation sessions for both the CNA and culinary tracks. In an orientation on September 28, 2016, the attendees were predominately people of color. For the CNA training, five of eight attendees were women of color, and three were White women. For culinary session, there were two Black men. The two-hour orientation began with attendance. Two themes emerged during orientation. The first was a focus on responsibility. The director of training and orientation leader, Ronda, had an oft-touted mantra, “early is on time, on time is late, and late is unacceptable” (OIC, orientation observation, September 28, 2016). This mantra was repeated throughout orientation and the Learning Academy preskills training. Students were handed packets with information about OIC NLC, its source of funding, and its certification requirements that ended with a contract of rights and responsibilities for students to read and sign. It was participants’ responsibility to show up, and they were also required to enter the workforce regardless of the conditions of employment offered. From the OIC NLC Employability Skills Agreement, “I am aware that I might not obtain my ideal career goal initially, and that I will realistically accept a job offer at the end of my training to support myself.” Students could not control the type of job they could obtain and the conditions of that job, but they were responsible for a good self-presentation through dress.
and grooming. In the orientation, Ronda commented on the unacceptability (hat, low pants) of the attire of one young Black man in particular but praised others’ dress as acceptable. The second half focused on pathways. Three Rivers staff advertised additional training at the orientations. Ronda mentioned additional training for radiology and ultrasound tech, with the goal of becoming a nurse, for those on the CNA track. The idea of moving along a pathway was stressed: “Can’t get from step 1 to step 2 without a level of success.” There was a short break and a tour of the facility, including the services available to trainees: vouchers for the food pantry and clothing closet. On the tour, three women expressed interest in shopping at the closet that day (OIC, orientation observation, September 28, 2016).

Learning Academy. The Learning Academy has been a part of OIC since its Philadelphia founding. Several trainees commented that they did not like or appreciate it because they wanted to move on to the CNA training, to finish quickly, whereas others liked the slow pace. The Learning Academy took place in a computer room with students facing a projection of the trainer’s computer. The academy had basic job-specific training (caregivers, CPR), general skills (basic typing), and employability (how to dress for work). The training often started late, with no reason given, and ended early. The training wound down with a blurry line between working independently on projects, resume writing or a typing test, and the actual termination (OIC, observation, October 20, 2016). The Learning Academy was program mandated employability training.

Skills training. The CNA training followed successful completion of the Learning Academy and was divided between didactic learning from a workbook and hands-on skills. There were readings from a book that had key terms and simple quizzes requiring definitions. In a class on death and dying, the instructor, the director of OIC NLC, read directly from the
workbook and went through questions at the end of the chapter. There were a few outgoing trainees who offered quick responses, and people generally answered the questions correctly (OIC, observation, June 22, 2017). The clinical learning was a mixture of students working through CNA skills on the board and students practicing on mannequins. It was composed of two weeks of 15 skill modules followed by two weeks of clinical internship at a nursing home. From the first day, the instructor, Patty, listed exam requirements and pitfalls, such as forgetting a step or doing things out of order. On the exam, two of five skills tested were hand washing and indirect care. She hammered in entering skills, meet and greet, and draw curtains and exit skills (which are meet skills in reverse). Patty warned students not to memorize because they would forget, but she told them to approach it like cooking, like a recipe, and to think about the why of the order of these items logically and visualize (OIC, observation, February 23, 2017).

There was an aura around Patty, from the way staff spoke of her and students described profound interactions, that was similar to reports of early charismatic OIC instructors (McKee, 2008). Patty shared an inspiring story of educational and social mobility. She dropped out of high school before going back to complete the OIC NLC secretarial training in the 1980s. After a family health trauma, she returned to OIC NLC for CNA training and worked at a long-term care facility overnight. She recalled terrible conditions and staff sleeping instead of working. She quit and found a hospital CNA job, where she worked for ten years before deciding to go back for an RN credential, paid for by the hospital (PR, meeting, February 22, 2017). Her life story shows

126 While I observed, a Learning Academy cohort was deemed not ready after taking a practice test and sent back for additional practice (OIC, observation, June 22, 2017).

127 This was borne out in several interviews, specifically with Black students, who referenced her incredible journey in relation to their own.
perseverance through personal and work hardship, with educational triumph contributing to her current success.

The nurse trainer described being both tough and supportive with the trainee. She helped the students accept the conditions they would face. She shared that they needed to be responsible for mistakes ("own it"), would be looked down on by care teams, and must remember their worth ("beauty is only skin deep"). They were told to remember, “Everything you do will take you to the next level” (OIC, observation, February 23, 2017). Patty talked about how things were harder in the field than the students would see during their clinical rotation. Students’ clinicals were at a five-star long-term care facility, Beachwood Nursing Home. A few interviewees had problems even at that exemplary facility such as poor care for patients and an impossible workload. For those people, Patty told them to focus on effective communication ("What can I help you with?") and on the chain of command, documentation, and professionalism (PR, meeting, February 22, 2017). Patty redirects trainees to what they can control, part of responsibility shifting downward.

OIC NLC had a high completion rate, in part because SNAP, the primary funder, was mandated to maintain a required 80% pass rate at a training facility to remain a training provider. Additionally, OIC NLC held students back, asking them to retake or slow down the Learning Academy if they were worried that they would not pass the exam.

Next Steps After CNA: Pathway

---

128 An interviewee, Ezola, had difficulties while at clinical. She saw the poor conditions of residents and could not do anything. The nurse trainer reminded her that this was just a way for her to progress and was not permanent.
129 I could not locate completion rates.
130 During observation, I saw students held back or given more prep before moving to clinical.
The CT DOL categorizes CNA training as an entry-level certification in medical fields that can be a pathway to more skilled and better jobs in healthcare (see Figure 5). Another entry-level health career is emergency medical technician (HPOG Orientation, observation, March 22, 2017). CT DOL materials on the health professions and pathways included patient care technician (PCT) as a next step; that job includes the duties of a CNA plus electrocardiogram readings and phlebotomy (Connecticut Career Resource Network, Connecticut Department of Labor, 2017). It is the first step toward mobility. In spring 2017, OIC NLC contracted with Three Rivers to host a PCT workforce training class in the evenings.\textsuperscript{131} The PCT recruitment was run by Heather, the Three Rivers Department of Workforce Training program manager. In past PCT courses, trainees were eligible for SNAP E&T funds or a Three Rivers scholarship that paid half the training cost. The goal of the PCT training was increased employability (HB, meeting, March 3, 2017).

\textsuperscript{131} I observed recruitment and training sessions for the Three Rivers PCT training at OIC NLC.
This PCT class was six weeks, two three-hour evenings a week, and ended with clinical time at Backus Hospital in Norwich. The training was held in a small, tightly packed room with large desks and furniture. The trainer, Christine, stood with everyone facing her and her back to an overhead projection. There were 11 people; the vast majority were women of color, and several had Caribbean accents. Christine was a White woman who worked at a local hospital as a nurse. She came to the training looking frazzled and read directly from a workbook. She deviated at points after reading a section that she disagreed with. She used a PowerPoint deck that accompanied and often duplicated the workbook. She once commented, “that was a short PowerPoint,” as if she had not looked at it before teaching. As in the CNA training, the class was a mix of reading from the book and fill-in-the-blank exercises with practice skills. The materials were used and worn-down items from the hospital where Christine worked (CS, observation, March 23, 2017).

(HPOG Orientation, observation, March 22, 2017).

<table>
<thead>
<tr>
<th>Role</th>
<th>Wage</th>
<th>Requirements</th>
</tr>
</thead>
<tbody>
<tr>
<td>Certified Nursing Assistant (CNA)</td>
<td>$11.35-19.39 per hour</td>
<td>Non-credit, 100 hours and state certification</td>
</tr>
<tr>
<td>Patient Care Technician (PCT)</td>
<td>$13-15 per hour</td>
<td>Non-credit, two month training*</td>
</tr>
<tr>
<td>Licensed Practical Nurse (LPN)</td>
<td>$25.27 per hour (CT median)</td>
<td>Certificate or for-credit, one year</td>
</tr>
<tr>
<td>Registered Nurse (RN)</td>
<td>$75,000 annually (CT median)</td>
<td>Associate or Bachelor of Science, two years</td>
</tr>
<tr>
<td>Registered Nurse (BSN)**</td>
<td>$75,000 annually (CT median)</td>
<td>Bachelor Science in Nursing, four years</td>
</tr>
</tbody>
</table>

*At the time of HPOG, there was one community college PCT course offered as a stackable certificate.

**A BSN is required to work as an RN in Connecticut hospitals.
Despite the additional credential, Heather thought that most trainees were set up to fail. At the Three Rivers training, Heather saw good hospital jobs went to graduates with connections, who tended to be the private-pay participants, such as Navy wives, not the SNAP or scholarship trainees.\(^\text{132}\) Between Heather, a White woman, and the predominately women of color in training, the hospital would always hire her. She got her first job at Baystate Medical Center in Environmental Services and quickly moved on to secretary because of family connections. Additionally, she commented on the poor pay for CNAs and that the WIOA money was used poorly. She identified a lack of real case management to help with barriers. People could not finish the program but had already used their training funds (HB, meeting, March 3, 2017).

Heather observed employment discrimination and training systems set up to fail people. In CT 2018, phlebotomist starting wage ($16.63) and mean wage ($19.19) making it another frontline healthcare job (Labor Market Information, Connecticut Department of Labor, 2018).

Learning from Experiences of CNA (and a PCT) Trainees

The OIC NLC training offers a window into the material and social spaces of training, within a network of larger programs, described in Chapter 3. Training covered responsibility, employability, and mobility, disciplined workers and set work expectations, and established effective care worker expectations. The OIC NLC interviewees were at different stages of the training, from the Learning Academy to CNA training to recently completing the training.\(^\text{133}\)

\(^{132}\) Discrimination by race against CNAs is widespread. A study from Massachusetts in 2011 found discrimination by race among CNAs and direct care workers, with Black CNAs paid less and working more hours compared to White CNAs (Hurtado et al., 2012)

\(^{133}\) I conducted 15 semistructured interviews. Two people interviewed were not in CNA training. Krystal was already a CNA and had just started the PCT training, and Mitchell was in the Learning Academy but tracked to do the culinary training.
Table 6: Demographics of OIC NLC Interviewees

<table>
<thead>
<tr>
<th>Category</th>
<th>Interviews</th>
</tr>
</thead>
<tbody>
<tr>
<td>Population</td>
<td>15</td>
</tr>
<tr>
<td>Gender</td>
<td></td>
</tr>
<tr>
<td>Female: 80%</td>
<td></td>
</tr>
<tr>
<td>Male: 20%</td>
<td></td>
</tr>
<tr>
<td>Age</td>
<td></td>
</tr>
<tr>
<td>18–29: 54%</td>
<td></td>
</tr>
<tr>
<td>30–39: 33%</td>
<td></td>
</tr>
<tr>
<td>40+: 13%</td>
<td></td>
</tr>
<tr>
<td>Education</td>
<td></td>
</tr>
<tr>
<td>Bachelors: 7%</td>
<td></td>
</tr>
<tr>
<td>Some College: 20%</td>
<td></td>
</tr>
<tr>
<td>High School or GED: 73%*</td>
<td>*One trainee had less than HS and was concurrently completing a GED.</td>
</tr>
<tr>
<td>Individual Income</td>
<td></td>
</tr>
<tr>
<td>Under $10,000: 53%</td>
<td></td>
</tr>
<tr>
<td>$10,000–14,999: 7%</td>
<td></td>
</tr>
<tr>
<td>$15,000–19,999: 33%</td>
<td></td>
</tr>
<tr>
<td>$20,000–24,000: 7%</td>
<td></td>
</tr>
<tr>
<td>Race/Ethnicity</td>
<td></td>
</tr>
<tr>
<td>White: 47%</td>
<td></td>
</tr>
<tr>
<td>Black: 33%</td>
<td></td>
</tr>
<tr>
<td>Hispanic: 20%</td>
<td></td>
</tr>
<tr>
<td>Owner Occupied Homes</td>
<td>7%</td>
</tr>
<tr>
<td>Nativity</td>
<td></td>
</tr>
<tr>
<td>U.S. Born: 80%</td>
<td></td>
</tr>
<tr>
<td>Foreign Born: 20%</td>
<td></td>
</tr>
<tr>
<td>Residence</td>
<td></td>
</tr>
<tr>
<td>New London: 67%</td>
<td></td>
</tr>
<tr>
<td>Norwich: 7%</td>
<td></td>
</tr>
<tr>
<td>Groton: 13%</td>
<td></td>
</tr>
<tr>
<td>Connecticut, Other: 13%</td>
<td></td>
</tr>
</tbody>
</table>

CNA trainees matched the general demographics of New London as disproportionately female (80%) and people of color (53% Black and Hispanic), a higher percentage than the city of New London. The interviewees were younger and less educated and had a higher percentage living in the city of New London or another city compared to the Pipeline trainees in Chapter 4. For education, 74% of trainees had a high school diploma, a GED, or less, and 20% had some college.134 53% were under 30 and 87% were under 40 (see Table 6). Additionally, 67% lived in the city of New London, where the training occurred, and 21% lived in the nearby cities of Norwich or Groton. The city of New London is significantly poorer and has more economically vulnerable residents than the surrounding areas (see Table 7). The population in the training

134 The only person who had a bachelor’s received it abroad before immigrating to the United States.
program was overwhelmingly women of color, from my interviews and observations. There were a fair number of Afro-Caribbean and Latina women, matching the disproportionate amount of low-skill care work done by women of color and immigrant women. Melvin, a Black man in his 20s, commented on the gendered and racialized dimension of preparing to work as a CNA, and the alternative for people who did not accept that work: “[in my family] the females did the CNA thing, and then the males in my family were always bad and criminals.”

Table 7: Demographic Comparison of the city of New London and New London County

<table>
<thead>
<tr>
<th></th>
<th>New London (City)</th>
<th>New London (County)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Population</td>
<td>27,147</td>
<td>270,772</td>
</tr>
<tr>
<td>Below Federal Poverty Line</td>
<td>25.4%</td>
<td>7.6%</td>
</tr>
<tr>
<td>Median Household Income</td>
<td>$37,331</td>
<td>$69,411</td>
</tr>
<tr>
<td>Race/Ethnicity</td>
<td></td>
<td></td>
</tr>
<tr>
<td>White: 58.6%</td>
<td></td>
<td>White: 81.2%</td>
</tr>
<tr>
<td>Non-Hispanic White: 45.2%</td>
<td></td>
<td>Non-Hispanic White: 76.2%</td>
</tr>
<tr>
<td>Hispanic: 33.1%</td>
<td></td>
<td>Hispanic: 10%</td>
</tr>
<tr>
<td>Black: 15.8%</td>
<td></td>
<td>Black: 5.7%</td>
</tr>
<tr>
<td>Owner Occupied Homes</td>
<td>36.8%</td>
<td>66.7%</td>
</tr>
<tr>
<td>Foreign-Born</td>
<td>14%</td>
<td>8.2%</td>
</tr>
</tbody>
</table>

(U.S. Census Bureau, 2017a, 2017d, 2017f, 2017e)

Trainees reported coming to OIC NLC through family members or friends who had done the training or from seeing it while driving or walking by, as opposed to the Pipeline participants who were directed to the training through the CT DOL or sought it out. A Black single mother in her 40s told me, “well, my cousin told me about the free CNA classes if they—if you collect SNAP. So, I came in and did the interview and took a small little test for them and got placed into the Learning Academy.” A smaller number had searched for a program. Many trainees commented on how important it was that the training was free. Two interviewees paid for a past CNA training; one passed the exam and was doing the PCT, and the other did not pass the state exam.

Work experiences. Most interviewees worked while in training, with past and present work experiences of low wages, low skill, and exploitation. Jobs were described as dead end
with no advancement, poorly staffed or resourced, insufficient training or support, third shift, temporary, seasonal, and under the table. Often, trainees held multiple jobs at once. Many trainees, specifically the women, were currently or had been in care work, specifically home care or housecleaning. The work was described as easy to come by without training or experience, unsustainable, and low paid. When Tamika, a Black single mother in her 40s, started in home care, getting the job sounded easy:

The company that I was working for . . . I did not really have the experience. They opened up a door for me to come in and do the caregiving. But . . . I applied with no experience. It is like they threw me cases that I legally wasn’t supposed to do.

Two trainees mentioned how a potential employer had not wanted them trained. Lilly, a White single mother in her 20s, repeated her former employer’s sentiment: “honestly; I want to train someone who doesn’t know anything rather than training someone who had bad habits that I have to fix.” Andrea, a Dominican single mother in her 30s, described entering healthcare work, “I just walked into the office one day and I said ‘oh, I want to work,’ but before that, I used to work . . . as a janitor.” Interviewees described a strong connection between cleaning and home care.

Krystal, a White woman in her 20s who was taking a PCT class, said it was easy to find a job: “I got my CNA in January and then was employed by April 2016. . . . I didn’t really start looking in earnest until March, because I hadn’t intended to start until the summer.” It was easy for Krystal to get a job quickly and rise to seniority training new staff because of the high turnover. However, she could not change locations: “I was trying to get a job at the hospital, and

---

135 Lilly was told this while interviewing for a waitressing job.
TRAINING AS RESTRUCTURING

I just had my CNA, and I applied, and I hadn’t heard anything back.” The CNA training did not get her into a hospital to gain more medical experience (she planned to be a doctor).\textsuperscript{136} She found that it was hard to get a hospital job with only a CNA credential, so she began training as a PCT as she finished and associate degree.\textsuperscript{137} Many interviewees expected to find hospital work as CNAs, but the training coordinator at OIC NLC and the workforce training coordinator at Three Rivers said that finding full-time hospital work as a CNA was unlikely (HB, meeting, March 3, 2017; RT, meeting, June 3, 2017) and OIC NLC makes them agree to take any job offered.

Although work was available, it was also physically, emotionally, or materially unsustainable. Ezola, a Black single mother in her 30s, worked cleaning rooms in a local hotel that was habitually understaffed.

I worked over at the Clarion for, like, a year. Helped with the renovation . . . we was understaffed, so I was going in an hour before my shift to do laundry, so I can do my shift . . . And, I would constantly go to the manager with complaints because we was so understaffed, and it was a lot of work, and we was getting 24 rooms a day, per person, when the law is 16 maximum. That’s the state law. In an eight-hour shift, you can only clean 16 rooms, and we was getting 24 . . . They claimed it was funding, but I don’t think it was funding, because if you can buy stuff for the hotel, you can pay people to keep the hotel up.

\textsuperscript{136} Krystal went directly to college from high school but dropped out for financial reasons and was living with her father while she finished community college, worked as a CNA, and took a PCT training.

\textsuperscript{137} Previously, she paid for an EMT training, but was unable find a job.
Ezola put in extra hours without pay at an illegal volume. Many people mentioned the physical strain of the work on their bodies. Ezola remembered the strain of housecleaning:

And it’s strenuous on your back . . . on your body. You know, and you are doing all this work, you are doing all this work for minimum pay. . . . sometimes people tip, sometimes people don’t, you know.

The low pay for care work was a common topic. For example, Andrea, a Dominican single mother in her 30s, worked as an HHA, “Yes, and [Almost Family is] $9.60 an hour, you know, but there is no room for advancement, so.” Lilly, a White single mother in her 20s, worked in housecleaning:

The labor you do for the money you make in housekeeping is ridiculous. . . . I was like, “I think I deserve a raise!” . . . OK, yeah, we’ll talk to the boss about it. Never really got it, never really talked about it . . . I asked three times for a raise, and they all said yes every time [voice raised] . . . But I never saw a raise. . . . January 1st I went up to $10.10? Because I was making $10 an hour . . . I got my raise up to what is now the minimum wage, $10.10. . . . I am like, I could work at McDonald’s, and I would be working at lot less hard. . . . I would be making what 30 cents less, 40 cents less, because $9.65 was minimum wage before. . . . It’s a high-class inn; they make really good money.

Lilly’s comparison of non-nurturant cleaning work to fast food work clarifies the low wages and shows how taxing care work can be. Many of the conditions echo other service-sector work, at places such as Dunkin Donuts and Burlington Coat Factory.

Many trainees connected unpaid care work to becoming a CNA and making a profession of caring. Jacquelyn echoed her connection between care work for a relative and the work she
would do: “You go to someone’s home, you take care of the person. It’s just like being home with your grandmother or grandfather. And taking care of him or her.” Krystal reported,

I took care of my grandmother when she was sick. I was pretty young then; that was 2008. So I was, like, 16 or 17. And she had dementia, and it progressed pretty rapidly over the course of about two years from her functioning pretty much normally to not really, she became nonverbal, um, she couldn’t feed herself, that kind of thing.

Kaitlin, a White woman in her 60s who had long worked caring for partners at home, tells a story of a lifetime of paid and unpaid care work that blurred the lines. She explained her work ethic:

I am not a lazy person. I am just that kind of person, I like to work. Feeding the children, going to work, have another kid, go to work. You know, keep on going. I did that, I did that in Groton for 10 years; I did Cosmetology. I am in my 60s, you know, 10 years and 10 years. My daughter is going to be 50, OK. I had her when I was 16.

Unpaid care work showed people they could do paid care and blend it with unpaid work.

**Being caring.** There was a strong identification with care, especially women. There was a broad consensus on the benefits of being caring as a good quality. Heather, a White single mother in her 30s, remembered being told she was caring.

My grandfather had a heart attack and . . . and I was going to see him everyday for visitation . . . you know, like, help him out and stuff, and then I talked to the CNA nurse that was sitting outside the room, and we talked about it, and I told her I was interested in it, and I asked her if I should take it, and she said you should go for it. And my grandfather . . . laying on the bed, you should do it. I’m so proud of you if you do it.
Care is a personal trait, sometimes understood intergenerationally. Kaitlin saw her family as connected to her caring:

I have a lot of empathy, and it’s how I am. And all of us in my family, we are all the same. It takes a certain type of person—my mother was like that. I have two sisters that are RNs, [and] one’s an LPN. My daughter is a CNA; it’s kind of in the blood.

Arielle, a Black woman in her 20s who was starting a nursing program, says “like when they are sick, I like to care for people. Like, I like to help with stuff and help them feel better. I like to help people.”

Tamika, a single black mother in her 40s, shared that

I like nurturing, I guess. I have four kids, so I am a nurturing person. I just like to help, if I see people need help. I am willing to sit, talk, cook, clean, so it all plays into the same role, basically.

Although being caring was important, some trainees had poor experiences with caregivers or of not being cared for themselves. Raphael, a Puerto Rican man in his 20s, recounted instability in his high school living and caring situation between his foster parents and a friend:

I was actually living with a friend to finish off junior year, and I ended up getting too much for them over there, so then they were like, yeah, you need to start to thinking about what else. No, I lived there for a while, and my parents, they got money for me. I was adopted, so I didn’t even know they were getting money from the state for me. So they paid my friend’s mom for me living there, a fraction of it.

138 Arielle lived with her parents and started college after high school. She dropped out for personal reasons and was working on a CNA credential as she waited to start an RN program.
Sophia, a White woman in her 20s, detailed living instability with her mother:

My mom was one of those people, like, she just kind of put her kids where she could, a lot of foster homes. I have been a lot of places. . . . I have never really lived with my family. My mom kicked me out when I was 13. I lived back with her my senior year, because she wanted me to help her pay. She needed me, so I moved in when I was 17. . . . It blew up in my face. I came home one day and she was just gone. Everything was still there, and I was like, damn, what am I supposed to do. Your mom’s in jail and I am like, for what? I remember being, like, clueless like everybody. It was on the news and stuff.

Sophia’s mother was arrested and incarcerated. Sophia dropped out of high school in the spring of her senior year to work and kept paying for her mother’s apartment. She gave up dreams of college and entered the workforce.

In addition to poor experiences of family care, many had bad experiences with paid care workers. Sophia worked as a cleaner at a nursing home where her mom was a resident:

Nursing homes are bad. I am sorry. My mom’s in one right now. And I went there and they are all the same. The no matter what people work there, it’s weird, it’s like if you don’t like your job, don’t do it. I feel we need more people like me.

Tamika recounted her father’s care in a facility:

I didn’t like the way some of the way people were being treated as far as, like, hygiene wise, so not cleaning them, not changing the beds, and me and my sister, we saw this woman when we went to check on my dad, it looked like the bed wasn’t changed in we don’t know how long, stains up in there.
There were stories of working at facilities where they saw people not working and sleeping through their shift or patients with bedsores due to understaffing or poor care. Many focused on people giving bad care or being uncaring and not the facilities’ work conditions. Several trainees had difficulty while at the OIC NLC clinical rotation at a nursing home, including staff not listening, staff being unhelpful or even bullying, and poor conditions for residents. Ezola tried to highlight patient conditions to the staff, unsuccessfully. As a trainee, she was at the bottom of the CNA hierarchy and the nursing hierarchy.

At Beachwood Nursing Home . . . I can’t do anything but let the people who work there know, but they know, so what can I tell them . . . My struggle was, I had a resident that was—she had shearing of the skin and the bedsores. Every bad thing you could think of that can happen to a resident in a nursing home, this resident had . . . and when I looked at her . . . I had her my first day. It was my first day. So when I—it just . . . it really hurt me to see her like that, because I knew she was in pain. She kept saying she was in pain. I couldn’t do anything to ease her pain because I am just an aide and I am in training.

Most experiences with paid care were negative, even at the five-star facility where they performed their clinical internship. Conditions with paid care workers, both broadly and specifically in the clinical location, were poor because of low pay, bad working conditions, and inadequate training or supervision.

There was a dissonance between the caring individuals they saw themselves as and the conditions at facilities or care they received. Although most of these trainees would go directly to long-term care/nursing homes as CNAs, only two mentioned that that work would be difficult/undesirable. Melvin came to CNA work ambivalently. Many family members were CNAs, and he resisted following their path because of what the work entails. After he suffered
educational failures at a predatory college and was trapped in dead-end service work, a friend taking the OIC NLC training changed his mind: “So, like, he [friend] said like I don’t like cleaning butt either, you know what I mean, but it’s worth it.” To justify the training, knowing what was ahead of him, he commented, “Sometimes you have to do things you don’t want to do to get to places you want to get to.” He expressed compassion for the need for paid care work: “Everyone needs care, and someone needs to do this!” Lilly had worked as a cleaner at inns but was reaching a dead end. She shared that a CNA position was an opportunity and a hard place to start: “Because, CNA, you do the butt end of the crap. That’s fine, I was doing housekeeping. But I would like to get farther up . . . It’s the start.” Lilly looked forward to moving beyond it: “With a CNA job, I will work my butt off . . . So I would like to push it as far as I can eventually; I just want to try to get my foot in the door.” For people facing dead ends, the deskilled work at the bottom of the caring spectrum was “worth it” and “the start.” There was a sense from both of these vocal skeptics that a CNA position was not a desirable or good job, but they were optimistic that it could and would lead somewhere else. Although almost all trainees had experience in low-wage work and many were in care work, there was a sense that things would be different, that this training was leading somewhere, after work with nowhere to go: to better work conditions or better career track.

Trainees’ experiences of care and support from family and friends relate to their ability to complete education or training. There was a split between people with family support, living at home or with family to share resources, and those with limited support. Arielle and Krystal were the only two people interviewed who were currently enrolled in a community college or accepted to an RN program. They both had only lived on college campuses or with parents. Both reported
starting college “the normal way,” after high school, and continued to have family support as they pursued both occupational tracks (CNA, PCT) and academic tracks (RN).

Most trainees reported limited assistance from family and friends. Many were living on their own and often caring for dependents. This latter population was in a more dire situation and more often had a criminal history and interrupted high school education. There were some who lived at home for periods when a child was young. This second population qualified for and reported use of public and private support systems, including adult education, soup kitchens, public housing, food stamps, disability services, unemployment, and Social Security disability. These supports were labeled insufficient or poor. Ezola summed it up well:

The only obstacle is living paycheck to paycheck . . . And I can’t live off of just the state monthly; it’s not enough. It’s very, very little money. I was getting $383 a month for me and my child.

Within the hope of caring work, there was the reality of plentiful yet unstable work in all work experiences and challenges of daily life. This was how many trainees came to OIC NLC. They were looking for a new opportunity.

**Finding OIC NLC and finding yourself.** Most interviewees arrived at the OIC NLC at a low point in their lives or notions of themselves. The training represented a way to transform themselves and their material circumstances. There was a strong narrative of personal growth from a weak, angry, depressed past. For the women, the struggle frequently related to abusive work or personal relationships. Five women described verbal, emotional, financial, and physical abuse that kept them back in personal, educational, or employment situations and contributed to feelings of dependency. They described an awakening from losing a job, having a child, or losing
a child. For others, there was a hopelessness related to feeling replaceable or stuck. Ezola commented,

Well, I was two different places in the last five years. I started off at the Holiday Inn downtown, New London. Yeah. I started out there. I never called out. I never missed a day, even the snowstorm; I walked it. I even made the Channel Eight news for it. But I felt I wasn’t appreciated enough, like, you know how you feel . . . replaceable, and I loved the interactions, I loved meeting new people. That wasn’t the issue. It’s the physical labor of doing the job and not having the tools you need to do the job. And there is nowhere to go from housekeeping. Where do you go? I know people that’s been in the housekeeping business 15, 20 years and they are still housekeepers. . . . Yeah, they didn’t move to a supervisor, they are not a front desk agent. They are not, you know, a manager. . . . It’s just a housekeeper and that’s it. Where do I go from here?

Notably, three women of color, two Black and one Pacific Islander, described themselves as previously having bad attitudes, being angry, or being terrible. They were labeled with negative attributes at times that they asserted injustice or instability at work, school, or home. Tamika said, “I used to have a terrible attitude. I was very, like, angry all the time, and I didn’t know how to socialize with people.” Ezola said,

So, the housekeeping business, you are not allowed [to] bring your cell phones to work. . . . I followed that rule for five years. My issue was, was . . . he [my manager] tried to come at me because of my attitude, but I was the one coming in 8 o’clock every morning to do laundry for an hour so that everybody can do their job.
From Sophia,

I was younger because it was like I was like an angry little kid. Like, you can imagine how angry a kid with all this stuff happening [unstable living and foster care]. I was mad, so I used to hit.

Interviewees entered the training at a turning point, looking for something new or different. Self-growth and actualization at OIC NLC was common. Ezola summarized this sentiment well:

Do what you love, love what you do. You shouldn’t have to get out of bed every day like “ughhhh,” dreading what you do. Love it. Love it. Be happy. That’s what I am looking forward to in the CNA, with being a CNA. I want to love what I do. Housekeeping, I didn’t love it, I dreaded it. It was a job, I did it, I got paid for it, I did it well. But it was time for a change.

They were ready for a change when signing up for OIC NLC.

OIC NLC was supportive, particularly for the interviewees who were people of color and living in Groton and New London. Melvin experienced financial hardship and jobs with no future. He expressed the importance of OIC NLC and its staff during hard times:

Life is hard for some people, some harder than others. And like this place here, it’s just like you come in wounded, and you come [out] super healed and super strong, you know. You might come with . . . a broken leg or something, and you leave here with two super strong legs, you know. It’s a great feeling, you know, here. Ms. Patty is, like, great motivation. You can do it, don’t let nobody tell you this, and everybody, you know, being around people who have the same kind of problems I do—confidence. So everyone is
building up from where we fell, and, like, everyone who is around us, we are, like, broken, but we are all fixing each other.

Lilly struggled with low paying dead-end work and night work that felt unsustainable since the birth of her son, including a night job that continuously ran down her car. She expressed needing something more: “At least this, I feel like I am getting somewhere, like at least I am trying to get somewhere. So, I felt really stuck, and now I feel like I am getting out of it.” Ezola had difficulty during her clinical and contemplated dropping the program. She expressed her feelings toward OIC NLC and the staff as new and important, “Yes, very caring, and I love that. . . . Yeah, outside of here, I don’t have.”

Health professions are highly segmented and credentialed, as seen from the CT DOL information session. Interviewees highlighted the need for more education, not generally differentiating between formal credited education and training programs.\(^{139}\) Although education is important, interrupted education was a common experience. One group did not complete high school, dropping out due to work or general instability. They later completed GEDs at Job Corp or adult education. Tamika expressed her experience of turmoil after an unplanned pregnancy and getting kicked out derailed her education:

I didn’t finish high school. I was a dropout. I ran—what I was familiar with was being out in the streets making money, you know, selling drugs, whatever it took to get money. I was a runaway, and then I finally went home when I was, like, 16 . . . she [my mom] finally gave me the ultimatum that if you can’t abide by the rules, you have to leave. So I

\(^{139}\) Only the interviewees pursuing higher education made the distinction, and no one mentioned that CNA training offered no credit toward a nursing degree.
left. I was 16 and . . . I had my first child when I was 19, and I was out in the streets selling drugs and stuff to survive.

Sophia was forced to leave high school before graduating, but she knew she had value:

I am smart! I am really smart, like, I have potential to do a lot of things. I’m a hard worker. Yeah, I had to be like that, no one’s ever done anything for me. . . . It’s about your intelligence and what you can do and how hard you work. That’s why in places like this [OIC NLC], I tend to get ahead . . . It’s not all about working all the time. Because I don’t have nothing to show for it.

Three people who started college after high school worked hard with little benefit. This dissonance rendered them angry and depressed. Krystal worked retail for two years after leaving a four-year college to repay debt and earn enough to release her transcript so that she could transfer to a community college. After paying her debt, she had to retake over 30 credits at a community college. She worked hard at school and work and still had difficulty. Melvin was forced to leave a four-year college for nonpayment of tuition; he misunderstood his assistance as covering all four years, not just the first year. Due to interrupted education, many had to undertake extra work certificate programs or credit hours or cover high school material. Ducey (2009) found that entry-level high care workers were always training or taking courses with little formal credentialing. Many who began higher education after high school encountered financial problems with debt and payment that led them to service work and noncredit training programs.

OIC NLC was distinct from prior experiences of interrupted or predatory education for multiple reasons. First, OIC NLC highlighted individual success. Ezola shared that
Training as Restructuring

Everything they [OIC NLC] do is for us . . . the people who walk through the doors. The only thing that they gain from this at the end of the day is the satisfaction of helping someone like me. They don’t got [a] quota to meet for a yearly bonus, you know. . . . They want to see us succeed. . . . That’s what they get from us.

Second, trainees earned a feeling of accomplishment. Raphael described a new feeling in the program: “It was a growing experience for me in the sense that I never did anything like that, and I never, I don’t even know if I ever finished anything.” Third, the training would lead to employment. Kaitlin was certain that she would easily find employment based on her caregiving experience: “I know once I get the certification, I am going to find something to do.” From my observations and the interviewees’ accounts, the OIC NLC staff were hardworking, caring, willing to listen, and accommodating of schedules and learning issues. The program prepared trainees for the entry-level job market, and it had expectations. OIC NLC is required to keep a high pass rate for SNAP funds, and it is compensated per person. Participants must sign at orientation that they are required to accept any job offered to them. There were many types of hardship (jail, dead-end work, abuse) that prepared and disciplined interviewees for bottom-rung work in healthcare even as they were told that they were being trained for more.

Pathway to . . .? The interviewees, E&T materials, and staff shared expectations of future employment as portable, well paid, flexible, and offering advancement. There would be benefits even if the work would be bad (in the words of Melvin, “cleaning butt”). CNA training and work offered future stability through being able to have an emergency fund, own or rent a home (even with a roommate), have a car, and move out of state.

There was a common sentiment from CNA trainees that this was a start to education leading to job growth, especially in nursing. This training was part of a pathway toward a career
and job stability away from the bottom rung, even if people began there. There was a chorus of expectations of advancement. Lilly wanted to continue, with trepidation:

They . . . have the . . . Patient Care Technician. . . . I would like to try to go farther and try
to do that. . . . I am nervous for the whole thing in general. . . . I don’t have nursing
knowledge.

Tamika had interrupted school; she knew the struggle to get a GED, the hard work, temporary work, and overtime, and she had a clear goal to become a nurse: “Well, my goal is to get into nursing. That is my primary goal. The housekeeping is just on the side.” Melvin was passionate about his music and wanted to move out of state; the CNA training could help, and “I am able to work somewhere where there is progression.” After years of feast or famine in seasonal landscaping, Raphael was ready for stability: “I will . . . focus more on the CNA and see if I genuinely want to take off with it if I want.” Sophia’s college plans were sidetracked, so she was trying a new path: “I feel like this CNA thing will be the start of something, where it’s like a foundation for me. Like I can work off this; it will count for something.” The training was discussed as a concrete step toward moving forward to greater stability; as Andrea stated, “My goals are just to get stable.” There was a clear connection drawn between becoming a CNA and stability and mobility. Two interviewees mentioned that becoming a CNA would be enough training; both were over 40. From Kaitlin, “I am here to get my CNA, and then I will be able to get something a little better than just having $700 a month.” She had low expectations, and her CNA wages were in addition to Social Security because she was over 65. Younger interviewees expressed wanting more training.
Discussion

OIC NLC training prepared people, through basic skills and employability discipline, for entry-level healthcare jobs. These jobs are both bad and growing, as cited earlier. However, CNA jobs are better in terms of pay and employment conditions. The training and staff worked to be accessible and meet the needs of trainees and future employers facing hiring shortages. And many of the trainees were hopeful and optimistic about the training and future opportunities. The training promoted emotional attachment to work and they displayed that in their interviews. E&T staff sold the trainings and possibilities to trainees.

The trainings required investments from trainees, which they expressed in the differences made in the lives of trainees by Patty and Rhonda. However, trainers and training programs knowingly produce workers for entry-level bad jobs with limited chances for good hospital conditions or mobility in the words of OIC NLC and Three Rivers staff. Many of the trainers have experienced job instability and the trainings are producing stable employment for trainers, based on what state and federal programs were willing to fund. Programs, that reproduced secondary labor market labor, within a story that mobility is possible with more human capital.

The experiences of work and caring were challenging, stagnant, and at times abusive, such that the interviewees were looking for an entry point for better work. This training represented an entry point that was accessible by time, location, and cost. The trainees were primed for and often brought up possible but unlikely outcomes, such as working in a hospital and getting further training paid for, as their CNA trainer Patty did. Hospital work is better paid and offers more advancement opportunity, but the growth for entry-level workers is in long-term care and home care, as cited earlier.
Trends of growing segmentation and degradation of work in healthcare are making mobility less likely. Segmentation is opening lower points of entry in healthcare, but credentialing each stage creates additional barriers. The degradation of work that is stripping and downskilling nursing tasks accumulates more work at the bottom, increasing the need for more entry-level workers. That growing pool of entry-level workers is simultaneously promised avenues of mobility through a CNA training that is already stratified by race, gender, and class in caring labor. Skill, through education and training, is patrolling the barriers between paraprofessional and professional work. However, the interviewees’ experiences challenge these barriers. These people are skilled, experienced, proven carers and workers who are optimistic about their futures, even though interrupted and substandard education might have derailed book learning.

The CNA training prepares people for the future of restructured, segmented, largely entry-level healthcare work, which is sometimes similar to their current low-wage service employment. Healthcare jobs are more likely full time, with slightly higher pay and benefits, as cited in the HPOG 1.0 evaluation in Chapter 3. However, these are still categorized as bad jobs. This free and flexible CNA training is an option for poor and working-class people, disproportionately women of color, that does not foreclose mobility. The process obscures how inequalities in education access and the segregation of employment render mobility unlikely. It places the responsibility to advance on poor and working-class individuals. The start of the pathway looks like what has come before.
CHAPTER 6
CONCLUSIONS: FINDING A FOOTHOLD OR A PATHWAY

While eastern CT cities are passively labeled *distressed*, there is active work on the part of E&T programs, staff, and associated employers like EB. Conditions of capital mobility and neoliberal restructuring promotes local and regional government and nonprofit responsibility. E&T programs both prepare people for available jobs (creaming, disciplining) and are productive of jobs (training program staff). The programs are trying to navigate between the demands on employers, state funding and regulations and the needs of job seekers. In the case of the Pipeline, EB was ever present from the orientation to skills training dictating how many workers where needed and when. In the case of OIC of NLC, there was an ever-present demand with unnamed employers. The key regional importance of healthcare and defense funds are central as seen in the top regional employers and E&T priorities. These programs operate as sorting mechanisms and holding tanks for some, they are largely an alibi for rising and segregated inequality.

Healthcare and manufacturing are two areas with significant middle-skill and -wage jobs, but can they offer a larger redistribution of wages and benefits? E&T in eastern CT is responding to the demand for middle-skill healthcare and manufacturing workers through a network of funding and programs. People trained to work as CNAs at long term care facilities and machinists at EB (or another manufacturer) find employment in those fields in large numbers, based on the program reporting and the CT DOL. Training offers job access in growing sectors amid restructurings wherein credentialing is monopolizing entry-level work.

---

140 At the time of my research, no one that I interviewed or observed had been hired by EB/EAMA employer or as a CNA after training. This result may be in part because interviews represent a point in time rather than a longitudinal investigation. Public reporting on outcomes is limited and generally released much later. The OIC NLC education
In addition to employment access, E&T programs exist within multilevel restructuring. Both structuration (external impacts on everyday life and experiences) and reconstruction (renewal of theory) extend a case study beyond people’s daily experiences (Burawoy, 1998). Forces of capital mobility and neoliberal state restructuring (since the 1970s) within gendered and racialized labor markets shifted the needs for skills through training and credentialing. Changes to skill intersect with the general trends that degrade and segment labor.

This conclusion reviews the enactment of training as a fix for changing the relations of capital and the state; reinscribing race and gender in labor; and reshaping skill and employability. These restructurings contribute to two different training trajectories, from a pathway in nursing to a foothold in manufacturing. This section concludes with trends and future research directions.

director shared that there was high demand and placements (and the 80% completion rate was federally required). There were discrepancies about the number of people hired at EB through the Pipeline. The EB Pipeline liaison cited 92 placed out of 110 trained; that was 84% hired, working, or given a start day by May 17, 2017. The CT DOL program manager provided different numbers: by April 17, 2017, 4,000 people had signed up for the Pipeline through the EWIB portal, 1,400 were active, and 273 were trained. He, and other Pipeline staff, claimed a 92–93% placement rate on April 11, 2017. However, 94 hires out of 273 trained is a placement rate under 50%. There are also discrepancies in the numbers relative to timing; some people trained and were hired later, because the dates don’t match, and it is unclear if the number of people trained included both those currently training and those who completed the program. Although the placement rate varied, a large number of those trained will work at EB or an EAMA employer. These numbers were almost two years into the four-year grant. As of December 2017, the Pipeline exceeded its hiring goals: 5,152 portal registrations (goal 1,350) and over 1,000 with high scores on the assistant tests (goal of 564). Five hundred and fifty-three people enrolled through an individual appointment with a case manager. Thirty cohorts had started or completed training, with 12 more scheduled through May 2018. Seven hundred and forty-four people had been employed, but not all at EB (Employment and Training Administration, U.S. Department of Labor, 2018, pp. 45–46). The high number could be from conditional hires from EB or placement through business development. Nevertheless, questions remain. How can there be more people employed than enrolled? How many people had EB hired? How many of the people in the trainings were conditional hires? How many had been trained/waiting? These results show success beyond goals, but based on limited information, and most people registered were not hired or trained by more than three years into the grant, speaking to the under capacity to meet demand.
Multilevel Fixes

A Fix for Capital and the State

Capital mobility changes capital requirements, sectors, and locations for work. Previous work in manufacturing or paid care requires new training or certification for access to entry-level jobs, sometimes with pay and conditions similar to past work. Conditions of mobility and the state shift and undermine education and training institutions, while capital needs to find workers for new, expanding, and restructured jobs. The state is subsidizing that effort, as it has in the past, in varying ways. There are different skills and certifications, even if the enrollees are the same or similar. In addition to the training, the state pays healthcare and defense manufacturing companies through reimbursement and contracts, discussed in Chapter 2.

For entry-level defense manufacturing, post–Cold War cuts to contracts and overall declines in manufacturing reduced the need to train and educate new workers. Now that funding and hiring are increasing, the state is working to “fix” the shortage of contractor-ready workers through subsidizing a new hiring process, including paying for screening, pretraining, orientation, training, and placement assistance. EB is also funneled conditional hires to Pipeline training, which diverts regular applicants for additional free training. Pipeline trainees wade through this long process, with external support, or struggle through precarity and instability. Additionally, employers can cream employees out of the program; EB conducts interviews during the training, and the EB staff receive recommendations from trainers. These relationships between capital (EB) and the state (E&T) are not new, but the restructurings change the conditions of the programs, needs at EB, and the needs of the workers. These subsidies to EB happen as jobs grow, in contractors and subcontractors, that are dependent on state
appropriations for submarines, which have questionable value beyond serving as a lobbied redistribution to capital and a jobs program, as cited in Chapter 4.

Entry-level healthcare jobs are growing because capital requires more full-time workers for the expanding population as families have less capacity to care for people who are living longer. The trainees have many experiences with precarious and low-wage service work; some had performed paid care work. The need for entry-level care workers rapidly expanded, and the CNA program trained people for those jobs rapidly. The CNA clinical time provided a nursing home with free full-time labor for two weeks. The training aligned with capital’s need for a quick turnaround for entry-level workers, motivated by mobility or stability, who are pretrained and work for free for a limited time during clinicals. The training aligns with the state need for training success and action by keeping the pass numbers high, above 80%, and with trainees’ interests for access to middle-skill jobs. However, training works against the interests of labor by aligning labor with capital. The trainers work to develop not only self-worth and confidence through employment but also the discipline to take any job. The E&T programs enact and yet contend with these changing conditions and dynamics, between the interests of labor and demands of capital (profits).

E&T operates within a restructuring state that impairs its ability to fund, administer, and provide services and reduces its capacity. The DOL devolved E&T to states. Now, even the CT DOL, a devolved state agency, saw its funds and staff reduced as it was cut and devolved once again, to nonprofits and the private sector. Devolution exists even within the devolution from a withered CT state government. Both the Pipeline and OIC NLC operate as public–private partnerships (Peck & Tickell, 2002). The Pipeline is funded and regulated by DOL and devolved and privatized to CT DOL, EWIB subcontractors, community colleges, and nonprofit providers.
OIC NLC operates as a nonprofit, independently with reimbursement from SNAP E&T, but it is struggling as its programs have contracted. OIC NLC is attempting to diversify income as the labor market moves away from its model of industrial training, which relies on capital hires and a strong economy for good employment (McKee, 2008). The contracts allow the growth of nonprofit programs and staff that shadow similar state jobs, as former CT DOL worker Carl described in the shift from CT DOL staff to contractor TVCCA staff. The conditions of the contractors’ workers are generally more precarious (wages, working conditions, and worker status), even as they are striving to make the conditions of trainees more stable.

E&T programs operate within externalities from the state (to administer and manage) and capital (to screen and train on the job), requiring changing targets for and types of training. Capital is demanding subsidies, as its relations require the state, programs, and trainees to increase flexibility. In the face of precarity and instability, laborers must be and are flexible by moving, retraining, and accepting different labor arrangements and using their time and bodies to fix externalities from capital and the state.

Reinscribing Race, Gender, and Class in the Labor Market

Middle-skill healthcare and defense manufacturing jobs are growing in CT, and these jobs are highly segregated by race, class, gender, and space. The training reinscribed and naturalized race, gender, and class in specific ways.\textsuperscript{141} The content and entry points of the training worked to gender and racialize them, as do the education/training and work experiences

\footnote{141 Race and gender statistics are included in Chapter 1.}
of people before this training. They also speak to the power of education and experience in naturalizing segregation and stratification and acting as a fix for labor market restructuring.

OIC NLC met the needs of working poor people by moving them into entry-level work. The CNA program location, SNAP funding, and content targeted poor people, specifically women of color. The CNA training was in downtown New London, a city disproportionately poor and working class and Black and Hispanic, as cited in Chapter 5.\textsuperscript{142} The program’s location was key to recruitment and ease of attendance, considering work, transportation, and other responsibilities. Many people interviewed had passed the building or heard about the program through friends or family. CNA trainees expressed a need to be close to the training; many did not have cars or had tight schedules with work or family responsibilities. OIC’s goal was for everyone to finish, which it accomplished through offering extra help and remediation and even slowing down the program for a group that had difficulty with the material. The content was also relatable to experience.

The Pipeline was creaming people for the smaller demand in the manufacturing labor market through recruitment and screening. From my observation and interviews, the Pipeline recruited unemployed and underemployed people, not poor working people as at OIC NLC. The CT DOL AJCs were the point of entry for most Pipeline trainees. The Pipeline training required independent transportation because the AJC meetings, testing, and trainings were geographically scattered over eastern CT. The Pipeline trainees all owned or had use of cars. The training was inaccessible by public transit, and the trainees were more geographically spread out than the OIC

\textsuperscript{142} There are high concentrations of ALICE people in Connecticut cities. Three of the studied cities had over 50% of their residents who were either working poor or below the FPL and ALICE (Norwich 54%, New London 67%, Windham 56%; Connecticut United Ways, 2018).
NLC trainees were. The Pipeline required an entrance exam on shop basics (tools, measurements, machines) and numeracy. For those who qualified, there was a long wait list. This EB-connected training was in high demand, even after screening. Through the exam and geographical and waiting requirements, the program excluded many poor people and women.

Education, training, and past educational and work experiences tracked trainees by race, class, and gender and naturalized outcomes. CNA trainees all had less than a BA. The Pipeline trainees had more variety of training and education; some had more than a BA, and many had or were working on associate degrees and/or had multiple certificates and training. Although credentialing can monopolize and naturalize outcomes, work experience was also tracked and naturalized. CNA trainees had significant experience in care work (paid or unpaid) and different forms of service work (retail, food service). This work was plentiful and often understaffed. The CNA trainees’ experiences were consistent with historical evidence of entry-level care work as a survival strategy of women, specifically women of color and immigrants (Glenn, 1992). Pipeline trainees’ experiences were bifurcated, but in general, they had more often found good work that was temporary or dead-end. These experiences had greater barriers to entry, and access was achieved through family or friend connections and education or training. Work, education, and training experiences set expectations and naturalized employment tracking in the restructuring labor market. Many Pipeline trainees would have access to better jobs through EB after a long wait, whereas the CNAs would work in bad long-term care jobs. These outcomes can be attributed to merit, intellect, commitment, or aptitude, but in reality are related to resources.

143 The one exception was a woman who had a BA from abroad that was not yet accepted in the United States.
TRAINING AS RESTRUCTURING

experiences, and educational access. Although training proposes access, it is unequal, as it has been in the past, and the programs perpetuate that inequality in recruitment and structure.

**Training as reshaping skill and employability.** Skill and skill requirements reproduce and transform as relations are restructured. This involves reproduction of changing skills, teaching new skills, formalizing historically informal work, and decentering skill in work.

E&T is a venue for skill reproduction. It is also a fix for skill transformation as formerly skilled labor is segmented and degraded. For example, by degrading and segmenting nursing work, complex ideas of hygiene and health are reduced to the level of recognition and repetition. In CNA training, skills were taught as a recipe to visualize and recall. Moreover, although the Pipeline has a basic skills and math entrance test, the training includes basic tool recognition and operation, which were general knowledge and skills. Trainees exited with enough information to repeat basic tasks or recognize tools or blueprints but not enough to be able to make decisions independently.

CNA training teaches new skills and formalizes informal skills. As these new workers are trained for the deskilled work of trained nurses, they acquire new healthcare skills, such as hygiene, ethics, vitals, scope of work, and relation to other health professions, through didactic and experiential education. Training is preparation for the certification exam (Connecticut Nurse’s Aide Competency Exam). Training formalizes historically informal work, previously learned through paid and unpaid labor. The trainees described exhausting experiences doing paid and unpaid care work to provide nurturant and non-nurturant care, most often home care or familial care. A trainee, Kaitlin, worked as a nursing assistant in homecare and institutional settings without training or certification for many years and now required certification to be able to get a job in a new state. The training taught how to bathe someone, and many participants
have bathed dependent people, but likely not in the ideal conditions instructed. The paid forms of this work (domestic service, elder care, housekeeping) formalize to the work of nursing or health aides or assistants. Training is skilling women who were considered unskilled and previously skilled through informal learning. This formalized work is akin to the trainees’ past informal, paid, and unpaid work. It requires more credentialing and limits work scope. These limitations devalue previous skills and experience as staffing is cut and tasks devolved.

Overall, E&T decenters skill, with a focus on employability. Both training programs stated that anyone with the right character could do the jobs. For the Pipeline, training drilled being on time, being a hard worker, and honesty. CNA training had similar soft skills, including care. This focus on character is part of making workers more expendable and interchangeable, which are long-term processes of capital in labor relations. The rhetoric of employability simultaneously works to align the interests of workers and management. Management is portrayed as a partner looking to find the best workers and treat them well. This view has a benevolent employer promising a lifetime of work. The presentation of EB as benevolent and stable erases past layoffs and their impact, as discussed in Chapter 4.

Although training can grant entry to a better job for trainees, it contributes to skill requirements that can decenter, degrade, and make expendable labor and skill.

**Trajectories: Pathway vs. Foothold**

If training is a fix for restructuring, the two programs established different trajectories. The entry-level healthcare training had a focus on upward mobility, but entry-level manufacturing had a focus on finding a foothold. In short, disproportionately non-White poor women and men were told they can educate themselves out of poverty, and disproportionately White working-class men were told they can have entry into good working-class conditions.
Beginning the Pathway

The first training trajectory proposes a pathway to upward mobility through incremental change, by starting as a CNA. Healthcare is an industry with mobility claimed through pathways because of the number of middle-skill jobs in patient care, from assistants and technicians to nurses. The CNA is advertised as a stepping-stone toward nursing. In the training, there was a broad consensus that CNA work is demanding and a good place to start but not the end goal. Before presenting the CNA orientation at OIC NLC, a community college representative discussed further training and education. Trainees focused on mobility and how a CNA job allows people to move toward nursing. The HPOG 2.0 is a multiyear study grant that allows participants multiple trainings for health professions, focused on mobility up the healthcare ladder.

However, the participant outcomes do not bear out this message and orientation toward mobility. From the findings in HPOG 1.0, entry-level healthcare jobs were insufficient and most grant enrollees stopped after one entry-level training (CNA). The OIC NLC education director shared that few people from the CNA program became nurses. Most of the CNA trainees I interviewed discussed CNA work as similar to the work that they had already performed, paid and unpaid, and at the beginning or bottom. Low levels of mobility were highlighted in the literature in large part due to the growth of ghettoized parts of elder care and educational barriers. First, the job growth in healthcare is the result of an aging population and the increase in home care and long-term care facilities (Duffy et al., 2015). The majority of CNAs’ work in long-term care facilities and home care. These segments of the healthcare market are spatially separated and offer lower levels of mobility (Nelson & Wolf-Powers, 2010, p. 40). Second, there is an educational barrier between entry-level work as an assistant and more technical work that
requires intensive certification, an associates or bachelor’s degree. Generally, an associate degree (or long-term certification) is a minimum for living-wage work in healthcare. Formal education is a barrier that is difficult to surmount (cost, time, coursework; Morgan & Farrar, 2015, p. 276). Barriers limit mobility for most, as demand for entry-level work expands (Nelson & Wolf-Powers, 2010, p. 39).

Positioning entry-level “dirty work” as offering a pathway is new. Glenn (1992) pointed to a historical dual labor market that offered workers of color lower tier, dead-end, marginal jobs (p. 2). In the past, women who were racial and ethnic minorities were relegated to care work as domestic servants through discrimination, coercion, and limited options in education and employment (Glenn, 1992, pp. 15–16). Domestic servants wanted their children to find better, less vulnerable work (Glenn, 1992, p. 19). As the number of nurse’s aides expanded in hospitals in the 1930s, “barred from entry into better occupation…. black women turned to nurse’s aide as an alternative to domestic service” (Glenn, 1992, p. 28). LPNs and aides had limited mobility and wages as part of the class divisions with trained nurses (RNs). If poor women of color are funneled, forced, and constrained into frontline care work, why is CNA work, which is similar but now more trained and formalized, framed as the start of a career ladder? Certification and training represent capital offloading responsibility to train for new technology, safety standards, and work expectations. The training also attaches frontline work to the healthcare spectrum even as it is still divided by history, discrimination, and education.

Although there is a low road approach to frontline healthcare labor, jobs can be improved. Nelson & Wolf-Powers (2010) surveyed a hospital demonstration project to increase the pay, skills, and credentials of entry-level workers, but these were limited in scale and funding (p. 41). Morgan & Farrar (2015) provided cases of partnership programs with nonprofit long-
term care facilities and health care systems working to provide career ladders or “lattices.” These involved collaborating with community colleges and foundations to fund training and pay workers’ wages while they were trained. They also increased the responsibilities and autonomy of workers for better job satisfaction. These cases are exceptional demonstrations that require extra resources for pay and tuition and create tension with RNs by encroaching on their roles (Morgan & Farrar, 2015). These cases show that both better working conditions (more autonomy, more skilled work, better staffing) and mobility are possible, but neither is likely in the current healthcare profit model that relies on inequality and the exploitation of vulnerable workers. Change requires limiting worker exploitation (unions, work regulations, and monitoring) or restructuring to limit profits (nationalizing). The focus on people working their way up ladders is a method to keep laborers invested, hopeful, and working.

The trainees and programs hoped for mobility, despite past experiences and the unlikeliness that they would become nurses. This hope in contrast with low levels of mobility embodies what Berlant (2011) labeled as cruel optimism. It combines a desire for satisfaction, stability, and middle-classness with daily deferment and delay. Cruel optimism epitomizes how poor and working-class people continue to hope for different situations although their everyday lives present difficulties in work, family, and transportation. The trainees imagined cars, owning or renting spaces of their own, better schools and activities for their children, and being able to move somewhere more affordable. Their mundane lives were stable in their instability, and the CNA training was another fresh start. A life of fulfillment hovered just out of reach on a vanishing horizon. The CNA training was the moment things could change, yet most likely conditions would not change significantly for most women regarding living wages, a hospital
setting, or mobility to nursing. The training and trainers were engaging trainees through this image of the possible, regardless of the unlikelihood or minimal nature of the change.

**Getting a Foothold**

The Pipeline has a different training trajectory, promising that a trainee will enter or regain a foothold in good primary labor market jobs. There is a higher demand for good jobs than jobs available, and entry-level jobs are scarce, in opposition to the direct care labor shortage in frontline healthcare. A slot at EB promised stability. At the Pipeline orientation, an EB representative told potential trainees that entry-level EB jobs started at $15–18 hour. Pipeline workers and trainees shared that this was a good job because of the pay, stability, and overall room for advancement. EB represented a foothold to opportunities.

In the orientation and training, Pipeline staff reiterated EB’s growth and unmet labor demand and reinforced how the Pipeline was a good deal regarding outcome numbers. The trainees talked about EB as their priority. Nevertheless, thousands of people had signed up for the Pipeline after less than 18 months, with a promise for only 350 jobs over four years. At the time of my research, two years into the grant, there was a wait of 6–9 months (and growing) for in-person training. Many trainees were hedging their bets through different training, different job applications, and community college. Unlike the singular focus of the CNA trajectory, the Pipeline involves scattershot efforts, looking for a foothold.

The trainees and trainers had a broad consensus that they could do the work; they just needed to land the job. Workers trained for specific workplaces. The Pipeline curriculum is aligned with EB’s current work and needs. Technical schools have long had partnerships with employers with internships or externships that led to employment.
Now that entry is more difficult and unstable, it requires lining up fallback opportunities. As in defense manufacturing, public-sector police and fire work is a remaining bastion of working-class stability among respondents, who were disproportionately White and male (Silva, 2013). These jobs are limited relative to demand. The Pipeline winnows through the thousands interested and makes sure they understand EB’s labor needs. There is a need to track and hold people, as happened in the past through formal discrimination in employment and now occurs through education, program tracking, and connection barriers.

No Intrinsically Bad Job?

There is no intrinsically good or bad work. There is work that needs to be done based on social organization, any job could pay living wages with good working conditions. Any job can be made better, and any job can be considered good. Work can be improved through labor organization, staffing, regulations, distribution, and employment conditions. Mining is dangerous, dark, and likely to cause premature death. It is also true that the loss of coal jobs is decimating families and communities in Appalachia (Deaton, 2018). If mining jobs, in decline since the 1980s due in a large part to mechanization, can be considered good, a CNA position can be a good job with the addition of labor power and organization or government regulation, discussed in Chapter 5. Not everyone can have a pathway away from ‘bad’ work, such as nursing assistant work in a nursing home, which is part of the current healthcare system and can improve, as care can as well. The pathway can be to improving work conditions.

Additionally, although both the healthcare and manufacturing sectors claim newness, entry-level jobs are similar to established jobs’ routines and skills. The work at EB is old manufacturing, including welders with masks as in old forms of labor. These are jobs, like mining, that are physically taxing, repetitive, and potentially hazardous but that pay living...
wages. The old contract, now broken for most, of decent pay, a union, job security, and room to advance is the goal of gaining a foothold. Although nursing assistants may use new technology (reading vitals), much of the actual work is akin to that performed by domestic servants and untrained nurses. Healthcare is growing, but the increasing use of credentials is a barrier to movement that requires more education and training for smaller changes in work. Within other work available to the working poor, the CNA pathway is better than the Work First jobs that promised no mobility or work for a sense of purpose and independence (Lafer, 2004, p. 123). Claming newness masks the long-time struggles over working conditions and employment discrimination and presents the ‘professional’ aspect to all healthcare work as new jobs that are ahistorically available and full of promise for anyone.

**Frontline Healthcare**

There are two important trends in healthcare concerning the prospects for CNAs and those who are in training. First is a shift toward home-based care over institutional models of long-term and subacute care for a mixture of financial and care quality reasons, cited in Chapter 5. Second, there is a strong current and projected growth in HHA and PCA jobs over the next decade. These positions have no or less formal training (depending on the state). In a home setting, HHA and CNA work can be similar, involving ADLs, also cited in Chapter 5.

While I was researching in eastern CT, there were many CNA and PCT trainings through the CT DOL, community colleges, technical high schools, municipal adult and continuing education programs, and nonprofits. There was no mention of HHA or PCA training during the *Health Careers Orientation* at the AJC or from key informants. There are CNA training programs, but these jobs are not growing at the same speed and do not have the same projected openings as HHA and PCA work, cited in Chapter 5. CNA training tracks toward work in a
hospital, clinic, or long-term care facility, part of the pathway or ladder in direct care toward
nursing, even if that outcome is unlikely and difficult for the most precarious. While HHA and
PCA jobs are in home care settings. As cited in Chapter 5, higher pay, job advancement and
training are more available in medical facilities, whereas home care has lower levels of both.
More research is needed to study the relationship between the growth in CNA training and the
growth of HHA and PCA jobs and to determine if this is a training bait and switch or if they will
be equalized.

**Entry-Level Manufacturing**

DOD appropriations to CT defense contractors are on the rise and going largely to
General Dynamic’s subsidiary (EB), United Technologies’ subsidiary (Pratt and Whitney), and
Lockheed Martin’s subsidiary (Sikorsky). There will be more military aircraft and submarines,
meaning that the devolution of DOD funds to contracts remains a jobs program. Moreover, states
continue to rely on federal appropriations for regional jobs and an influx of funds (taxes). More
research is needed on the relationship between state subsidies and defense contractors, as both
economic development and jobs programs, including the outcomes of these contracts, who wins
the jobs, and the impacts on local and regional economies and infrastructure.

Currently, CT has a deal with EB, overseen by the CT Department of Economic and
Community Development, in which the state will provide a $35 million loan for machinery and
equipment (with loan forgiveness based on contracting); $20 million in sales and use tax
exemptions; and an $8 million grant to third-party workforce trainings through state community
colleges, technical high schools, and organizations. As part of the same agreement, EB promises

144 It was a subsidiary of United Technologies until its 2015 sale.
to grow its workforce to 13,000 (up from 11,881), make capital investments of $852 million, and double its $250 million annual spending on over 700 suppliers in the state (The Office of the Governor Daniel P. Malloy, 2018). CT is further subsidizing a defense contractor and using the contractor’s desire for more state investment to concentrate suppliers and workforce hires in the state. Will these increases have a broader economic effect or continue to be concentrated by race and class? With the rollback of troops and military operations, what will happen with these appropriations? Can they remain disconnected from need? How long until they face cuts, as in other areas of federal expenditure? Defense contractors are huge regional players who are both stable and unstable, but more information about the relationship to jobs and economic development would be valuable.

**Other Change Models**

E&T does not generally impact the quality of jobs, which is a problem for CNA trainees, or the number of jobs available, which is a problem for Pipeline trainees. I encountered other efforts to change working conditions for entry-level workers, through unionization or state regulation of wages. While researching in CT, I observed two healthcare unionization efforts. In January 2017, there was a “Fight for 15 and a Union” rally outside the Community Health Services Federally Qualified Health Center in Hartford, CT. Healthcare aides and technicians demonstrated for better wages alongside fast-food workers, with support from unionized healthcare professionals. At an American Federation of Teachers (AFT) meeting at Windham Hospital, nurses discussed options to fight against employer-mandated concessions. Other unions

---

145 Both unionization efforts were through my parents, who were presidents of unions for health and mental health workers.
for housekeeping, security, and food-service workers had been threatened with outsourcing to private contractors if they did not make concessions. Nonprofessional workers are the most vulnerable when threatened with replacement and outsourcing, in a climate of union decline. AFT negotiations highlighted the ways in which labor groups were pitted against each other and the increased vulnerability of people who are uncredentialed or have sub-baccalaureate credentialing.

The second issue is the state regulation of wages. More broadly, wages can be, and have been, increased on the state level, $10.10 (2019). However, due to inflation and wage stagnation, this will merely raise wages closer to their historic highs in the 1960s. Mean wages in 1964 would have been $19.18, accounting for inflation (Desilver, 2018). CT can also increase wages through state contracts, which have blossomed in the period of contraction and devolution. Public-sector contraction (both shrinking and contracting out) contributes to a growing nonprofit sector of contractors, especially in human services. The Arc of New London County (Arc NLC) is a contract provider of disability services. The Arc NLC, with the United Way of Southeastern CT and other human service providers, convened a Social Services Taskforce to advocate for state human service contractors. A contracted economist produced a report on the role of social services as important in local economies. However, wages for most social services workers were low, placing them near the economic hardships of their clients. For example, an informant from the Taskforce commented that entry-level paraprofessional Arc workers were paid $14 an hour

146 Historically and currently, there are insufficient living-wage jobs for all workers. The Bureau of Labor Statistics estimated in May 2017 that the median hourly wage was $18.12, with half of workers making that wage or below and 40% making $14.79 or below (Gould, 2017; Occupational Employment Statistics, Bureau of Labor Statistics, 2018). While there have been public victories to increase minimum wages, including the successes of Fight for 15 campaigns, the gains are limited: “Although we are finally seeing broad-based wage growth, ordinary workers are just making up lost ground, rather than getting ahead” (Long, 2017). Inflation has hidden wage stagnation and decline, and it also obscures that these increases are bringing wages back to mid-20th century levels.
(KS, meeting field notes, June 29, 2016). The data and report were used as part of a campaign to lobby the state to increase funding to pay workers more, helping families and the local economy. However, such social services were contracted to cut costs, mostly by transitioning labor to nonunion, less experienced, and with fewer protections and requirements. As seen in AJCs, there were conflicts between state employees and contractors working on the same WIF Pipeline grant. A CT DOL employee, Carl, commented on how contracting undermined work quality and the nonprofit contractors were looking to keep and expand contracts (Chapter 4). Nonprofit contractors have thrived through their cost-cutting measures and now want to continue thriving by raising wages.

These cases show how improving the conditions of labor is important. However, that ignores segregation and inequality of who holds positions. Second, it ignores that conditions are eroding further up the professional ladder. As restructuring makes more workers replaceable or expendable, profit seeking looks to rationalize new areas, and now professionals (doctors, social workers) are organizing for workplace conditions (as seen in the labor actions above with unionized doctors, social workers, and nurses). What happens in areas that are already eroded, such as machinists or CNAs? Can labor organize work with flexibilization, mechanization, and outsourcing? Instead of focusing on the erosion of conditions and power for these workers, employers focus on finding skilled workers.

My observations of trainings and interviews with trainers and trainees provide a window into the experiences of people navigating restructuring, where capital and state are investing less

147 The public nonprofit provider EASTCONN took over a CT DOL location, in exchange for keeping case management contracts while paying for the space, and cuts to CT DOL staff and services.
and expecting more. Although the trainings operate as a fix for multilevel contradictions and justifies inequalities of outcomes, these can be the best option for people looking for a pathway or foothold in the labor market. Many people that I observed and interviewed described all levels of troubles (Mills, 2000). The trainings in eastern CT offer a step away from those troubles but do not change the larger issues of restructuring that make daily life expensive, difficult and unequal. The cases show people’s hope and plans for economic mobility, toward middle-class stability. Distressed places are also being promised place-based middle-classness through attracting middle-class businesses, workers, residents, and visitors are not broadly available and are highly racial and classed, bringing displacement and segregation (Peck, 2005). Poor and working-class people are outside the realm of the planned middle-class future, but their labor and consumption are necessary. A new restructuring is required; labor needs to have better conditions, greater accessibility, and lower segregation, and skill must be less monopolized, segmented, and degraded.
Researching E&T was not my intention based on my pilot research, doctoral exams, or initial funding application. I was interested the lives and experiences of poor and working-class people in small, disinvested cities. I had been considering these problems as related to capital and state restructurings witnessed in economic development model policies that are unavailable for most places and do not deliver on the promised widespread economic uplift (see Peck, 2005). These restructurings are visible in every small old industrial town needing a river walk, rail to trail, downtown arts district, or mill condo development. I wondered where poor and working-class people fit into this image of (unlikely) class change, other than displacement. E&T was presented as a way for social and economic mobility.

My research is rooted in skepticism about E&T and curiosity about how they functioned, considering the attention paid to them as a viable option for poor and working-class people. I sat in on workshops, orientations, and training classrooms. The spaces were often old and poorly lit, and the information was frequently boring. I found it difficult. However, the trainees’ intense focus reminded of me how important these trainings were to the people taking them. The CNA trainee made $10.50 an hour as a supervisor at Dunkin Donuts, and getting a $12–14 CNA job in long-term care mattered. That extra money was important for his material conditions, yet it did not offer the work opportunity, conditions, or mobility promised. I take seriously the lives of people training and linked them to a larger context that makes their lives and labors precarious. My research is not meant to disrespect the daily struggles, joys, and accomplishments of trainees or the work of the people in training programs. These people are doing the best they can under challenging conditions that render their situations complex and difficult to improve.
REFERENCES


TRAINING AS RESTRUCTURING


Pew Research Center. (2016). *The state of American jobs: How the shifting economic landscape is reshaping work and society and affecting the way people think about the skills and training they need to get ahead* (pp. 1–95). Retrieved from https://www.pewsocialtrends.org/2016/10/06/the-state-of-american-jobs/


TRAINING AS RESTRUCTURING


