

A NOTE TO READERS: THIS ANALYSIS WAS GENERATED WITH AI

The professionals who support North Carolina families are among the busiest people in any room. This article was produced using an AI assistant directed to analyze publicly available workforce, wage, and cost-of-living data and synthesize findings that none of these sources reveals individually. The AI did not replace professional judgment — it compressed hours of research into a picture you can use. That is the purpose of this series.

AI as a tool for efficiency — not a substitute for the human relationships that make this work matter.

The Helper's Dilemma

The Professionals Hired to Stabilize Families Are Often Financially Unstable Themselves

A synthesis of BLS occupational wage data, ALICE labor force analysis, NC childcare workforce research, and NC direct care wage data

She shows up before 8 a.m. She has a caseload of 22 families. She knows the names of every child in every household she serves, what trauma they've experienced, what resources they're waiting on, and what crises are quietly building beneath the surface. She is exactly the kind of professional North Carolina's families need. And she is, by the ALICE Report's own definition, financially unstable herself.

This is the helper's dilemma: the infrastructure of care that North Carolina has built to support its most vulnerable families is often staffed by workers who are themselves living at or near the economic edge. Social workers, home visitors, childcare workers, direct care workers, teacher assistants — the people at the front lines of family support — earn wages that frequently fall below what it costs to live in the communities they serve. They experience turnover at rates that destabilize the families who depend on them.

Three datasets, read together, make the case with precision: the ALICE Report's labor force analysis shows us how many helping-profession workers live below a survival threshold. Bureau of Labor Statistics wage data tells us exactly what these jobs pay. And NC childcare and direct care workforce research documents what happens to families when the people meant to serve them can't afford to stay.

WHAT HELPING PROFESSIONS PAY IN NORTH CAROLINA

The Numbers Behind the People

Let's start with wages, because the data is specific and it is stark. In North Carolina in 2023, the median hourly wage for a childcare worker was \$13.99. The median wage for a direct care worker — someone who provides in-home support to seniors or people with disabilities — was \$13.62. The median for a home health aide was slightly higher, but still below \$16 per hour for most workers. The ALICE Report identifies the living wage for a single adult in North Carolina at \$15.82 per hour. That means the majority of NC's childcare and direct care workforce earns below the minimum needed to survive alone — before they support a child of their own.

The poverty rate for North Carolina's early childhood educator workforce is **12.6 percent** — nearly identical to the statewide poverty rate for all residents. And **43 percent of NC early childhood educator households participate in one or more public safety net programs** — Medicaid, SNAP, or other assistance — even while working full time. These are not part-time jobs held for supplemental income. They are the primary employment of workers who are then relying on the same public systems their clients use.

\$13.99

**Median Hourly Wage — NC
Childcare Workers**

2023 | BLS & Early Years Workforce
Study

\$13.62

**Median Hourly Wage — NC
Direct Care Workers**

2022 | NC Health News / PHI

43%

**ECE Households on Public
Safety Net Programs**

2023 | Early Years / CSCCE

Sources: Early Years NC Working in Early Care & Education 2023 Workforce Study; NC Health News/PHI Direct Care Wage Analysis; BLS OES NC 2023

Social Workers: Better Paid, But Still Stretched

The picture is somewhat better — though far from comfortable — for licensed social workers. The median annual salary for a social worker in North Carolina is approximately \$54,690, according to BLS data. For child, family, and school social workers specifically, entry-level positions frequently start below \$40,000. In rural counties, where cost of living is lower but wages compress even further, a DSS child welfare worker or school social worker may earn \$38,000 to \$42,000 with a four-year degree and a licensure requirement.

The ALICE Threshold for a household with one adult and one child — a common configuration for young professionals — ranges from \$49,000 to \$65,000 depending on NC county. That means a social worker in many rural NC counties, carrying a caseload of 20 or more families, earns at or below the survival threshold for their own household. They are ALICE.

The Turnover Crisis and Its Cost to Families

High turnover in the helping professions is not a personnel management problem. It is a family stability problem. When a home visitor leaves her position after eight months because she cannot afford her rent, the families on her caseload — some of whom have been building trust with her for those eight months — restart with a new worker. Or they go without one, because the position may remain vacant for weeks or months.

North Carolina has lost **116 child care centers in a single year** as COVID-era federal stabilization funds expired and wages remained insufficient to retain staff. Child care operators report **losing staff to retailers** — companies that offer higher starting wages, better benefits, and less emotionally demanding work. The credential requirements are lower at a big-box retailer. The stress is lower. The pay is higher. For a worker trying to survive on \$13 an hour, the math is not complicated.

In the direct care sector, the parallel story is equally clear. A 2021 analysis found that nearly half of NC direct care workers lived in poverty. The home care industry nationally is projected to face over 6.1 million total job openings over the next decade — not just from growth but from constant churn as workers leave for better-paying work. Wages in direct care are frequently equivalent to entry-level retail — without the benefits, without the schedule predictability, and with the additional weight of caring for medically complex and vulnerable people.

For families, this turnover is not an administrative inconvenience. Research consistently shows that continuity of relationships is one of the most powerful protective factors for children and families in crisis. Every time a caseworker leaves, a home visitor transfers, or a childcare center closes, that protective layer is stripped away. The families who most need consistent, trusting relationships are the most likely to have those relationships disrupted — because the workers who serve them can least afford to stay.

116**NC Child Care Centers Closed
in a Single Year***Post-COVID stabilization | NC DHHS***~50%****Direct Care Workers in or Near
Poverty***NC 2021 | PHI Analysis***6.1M****Projected Home Care Job
Openings 2024–2034***National | PHI 2025 — driven by
turnover*

Sources: NC DHHS Division of Child Development; PHI Direct Care Workforce Report 2025; State of Working NC 2024

THE RACIAL AND GENDER DIMENSIONS

Who Bears the Cost of Undervalued Care Work

Care work in North Carolina — as across the country — is overwhelmingly performed by women, and disproportionately by women of color. The childcare workforce is overwhelmingly female roughly 90 percent or more. The direct care workforce is similarly gendered. Black and Latina women are overrepresented in both sectors relative to their share of the overall workforce, and are therefore disproportionately exposed to the poverty wages, poor benefits, and high turnover that characterize these fields.

This is not coincidence. It is a pattern rooted in the historical devaluation of work that has been performed by women and people of color — work that has been classified as unskilled, as natural, as an extension of domestic labor rather than professional expertise. The childcare worker who reads to a two-year-old, manages a classroom of toddlers, and supports the social-emotional development of eight children simultaneously is doing skilled developmental work. The home visitor who builds a therapeutic relationship with a family living in trauma is doing skilled clinical work. The wages do not reflect that skill. The wages reflect a long history of who has done this work and what it has been worth, politically and economically, in North Carolina's labor market.

Early childhood educators in NC are 4.8 times more likely to live in poverty than elementary and middle school teachers — despite holding equivalent or greater responsibilities for children's developmental outcomes.

IMPLICATIONS FOR PRACTICE

What Cross-Sector Professionals Need to Know and Do

1

Name the structural reality in your advocacy.

When you make the case for better-resourced family services — in a board meeting, a funder conversation, or a legislative visit — the data on helper wages is part of that case. A child welfare system cannot retain effective caseworkers at \$38,000 a year. A home visiting program cannot build therapeutic relationships through constant worker churn. Connecting workforce compensation to family outcomes is an evidence-based argument, not a labor grievance.

2

Look for signs of workforce financial distress in your own organization.

The ALICE Threshold data is available by county. If your organization employs home visitors, childcare workers, family support specialists, or case aides in counties where the ALICE Threshold for a single adult exceeds your starting salary — you have workers living below a survival threshold. That matters for retention, for burnout, and for the quality of care your clients receive.

3

Connect the dots between helper turnover and family instability.

When families cycle through multiple workers in a year, document it. When positions sit vacant for months, name the cost to families. The data on turnover and its effects on family outcomes exists — it needs practitioners willing to connect the evidence to their lived experience in the field and take it into policy conversations.

4

Support wage advocacy as family policy, not just workforce policy.

Raising wages for direct care workers, home visitors, and childcare educators is not a labor issue separate from your work with families. It is family policy. When advocates push for increased Medicaid reimbursement rates for home care, or for childcare funding that includes real wage floors, they are advocating for the stability of every family in your caseload.

CONCLUSION**We Can't Stabilize Families With an Unstable Workforce**

North Carolina has built a system of family support that depends on workers who are themselves living without support. The childcare worker earning around \$13–\$14 per hour is responsible for the healthy development of the children in her care. The home visitor earning roughly \$17 per hour — in a county where a basic household budget can exceed \$60,000 a year — is doing the work of family stabilization from a position of economic instability.

The data does not suggest that these workers are failing. It suggests that the system asking them to succeed is failing them. And when helpers cannot stay — because they cannot afford to — the families who need them most pay the price.

Bringing together workforce, wage, and cost-of-living data makes this pattern visible in a way it rarely is in policy conversations. Practitioners who see this reality every day now have the numbers to make the case

DATA SOURCES

1. Early Years NC (Child Care Services Association), "Working in Early Care and Education in North Carolina: 2023 Workforce Study" — wage, benefit, and demographic data on the NC early childhood workforce.
2. Center for the Study of Child Care Employment (CSCCE), "Early Childhood Workforce Index" — national and state-level data on ECE wages and poverty rates, including NC-specific figures.
3. PHI (formerly Paraprofessional Healthcare Institute), "Direct Care Workers in North Carolina" and "Caring for the Future: The Power and Potential of America's Direct Care Workforce" (2025) — direct care wages, turnover, and workforce projections.
4. Bureau of Labor Statistics, Occupational Employment and Wage Statistics — NC 2023 — median wages by occupation for social workers, home health aides, childcare workers, and teacher assistants.
5. United For ALICE / United Way of North Carolina, "ALICE in North Carolina" — ALICE Threshold by county and labor force analysis identifying which occupational categories fall below survival budgets.

6. NC Budget & Tax Center, "State of Working North Carolina 2024" and "5 Things to Know About NC's Economy as 2026 Begins" — wage growth, inequality, and minimum wage context.

7. NC DHHS Division of Child Development & Early Education, NC Child Care & Early Education Interim Report (June 2025) — childcare center closures, workforce shortages, and stabilization data.

AI-Assisted Research: Source, Method & Citation

A transparency document for readers, partners, and policymakers

THE AI SOURCE

Claude by Anthropic

All research synthesis, article drafting, session guide development, and document production in this series was generated with Claude — a large language model developed by Anthropic, PBC — accessed via claude.ai. Claude synthesized publicly available data sources into practitioner-ready documents at the direction of the human researcher.

AI System: Claude (Sonnet series)

Developer: Anthropic, PBC

Access: claude.ai

Period: 2024–2026

Claude did not independently access the internet or retrieve data. All data sources were identified and provided by the human researcher. Claude's role was synthesis and drafting. Verification was the researcher's responsibility at every stage

HOW THE AI WAS DIRECTED — THE PROMPT METHOD

Every article and document began with a structured research directive — a prompt — written by the human researcher. Prompts were not simple questions. They specified which data sources to synthesize, the practitioner audience to write for, the analytical frame to apply, the structural elements required, and the professional voice to use. Representative examples:

PROMPT TYPE	REPRESENTATIVE EXAMPLE
Data synthesis	"Synthesize three major data sources on NC family economic conditions into a single article for cross-sector practitioners. Identify key statistics from each, explain how these data streams reinforce each other structurally, and conclude with five concrete practice implications. Note that the article was AI-generated."
Data update	"New 2024 ACS data has been released. Include these new findings: Gini coefficient rose to 0.478, Black NC household income fell 3%, uninsured rate fell to 8.6%, 515,000 now at risk from federal cuts."

PRIMARY DATA SOURCES

Claude synthesized these sources. The human researcher identified and provided all of them. Cite individual statistics from original sources, not from this series.

2024 ACS (U.S. Census Bureau, Sept. 2025)

Poverty, income, inequality, housing cost burden, health coverage
data.census.gov

United For ALICE / United Way NC (2025)

ALICE Threshold, household survival budgets, rural-urban wage gap
unitedforalice.org

NC Budget & Tax Center

County poverty snapshots, racial income gaps, policy impact
ncbudget.org

Education Law Center — Making the Grade 2025

NC 51st-place school funding ranking, per-pupil gap, teacher pipeline
edlawcenter.org

NC Housing Coalition — 2025 County Profiles

Eviction filings, cost-burden rates, housing wage data

LIMITATIONS

No independent data access Claude did not retrieve data. All statistics were provided by the researcher in prompts.

Synthesis, not verification Claude identified patterns across sources. Verification against original sources was the researcher's responsibility.

Framing reflects prompt framing The structural, equity-centered, practitioner-focused frame is a deliberate human choice embedded in the prompts — not an AI default.

Not peer-reviewed These are practitioner resources, not academic publications. Individual statistics should always be verified against primary sources before use in formal policy contexts.

Hallucination risk AI can generate plausible but inaccurate content. The human oversight and fact-verification process was

nchousing.org

RWJF County Health Rankings 2025

All 100 NC counties — health outcomes and social factors
countyhealthrankings.org

NC Health Professions Data System / Sheps Center

Provider shortages by county, rural workforce data
nchealthworkforce.unc.edu

NC Commerce / LEAD Division (2025)

Hurricane Helene labor market and economic recovery data
commerce.nc.gov

Blue Zones LLC / Buettner (PMC 2018)

Power 9 framework; NC community applications
bluezones.com

Child Care Services Association / Early Years NC

Childcare worker wages, ECE household vulnerability
childcareservices.org

specifically designed to catch and correct errors before publication.

HOW TO CITE

For individual statistics:

Always cite the original data source — not the AI-generated article. The articles in this series are synthesis documents. The authoritative citation for any statistic is the primary source from which it was drawn.