COVID-19 COMMUNITY IMPACT SURVEY: EMPLOYMENT

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Results as of June 8, 2021
This webinar is meant to be watched after you have already seen the CCIS Introduction Webinar. The introduction contains important background information explaining how to interpret these results, how we did the survey, and how to frame these findings with a racial justice lens so that we can all turn the CCIS data into action!

Visit http://mass.gov/covidsurvey for more!
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Many groups that were critical in the success of this effort and gave important input on the development and deployment of the survey:

- Health Resources in Action (HRiA)
- John Snow International (JSI)
- Academic Public Health Volunteer Corps and their work with local boards of health and on social media
- Mass in Motion programs, including Springfield, Malden, and Chelsea
- Cambodian Mutual Assistance
- The Mashpee Wampanoag Tribe
- The Immigrants’ Assistance Center, Inc
- Families for Justice as Healing
- City of Lawrence Mayor’s Health Task Force
- The 84 Coalitions, including the Lawrence/Methuen Coalition
- Boys and Girls Clubs, including those in Fitchburg and Leominster and the Metro South area
- Chinatown Neighborhood Association
- Father Bill’s
- UTEC
- MassCOSH
- Stavros Center for Independent Living
- Greater Springfield Senior Services
- Center for Living and Working
- DEAF, Inc.
- Massachusetts Commission for the Deaf and Hard of Hearing
- Viability, Inc.
PURPOSE AND INTENT
This webinar will share some key findings from the COVID-19 Community Impact Survey (CCIS) showing how employment has played a role in the pandemic. The goal is that these findings:

- Inform immediate and short-term actions
- Identify ways to advance new, collaborative solutions with community partners to solve the underlying causes of inequities
- Provide data that stakeholders at all levels can use to "make the case" for a healthy future for ALL.

Visit [http://mass.gov/covidsurvey](http://mass.gov/covidsurvey) for all things CCIS!
Contrary to the common belief that an individual can effectively manage their risk if they “just know what to do and care enough to do it,” the data show us that an individual’s risk of COVID-19 is not entirely driven by their own knowledge, beliefs, and behaviors.

Throughout the pandemic, some workers have had to leave home to do their jobs, thereby being put at higher risk of infection, illustrating that the workplace may be an important point of transmission, and therefore a key opportunity for prevention.

Work may also be a driver of racial inequities in COVID-19 risk. Structural racism plays a role in people of color being disproportionally employed in jobs with hazardous physical and/or psychosocial working conditions, and underpins the observed racial inequities in COVID-19 risk.
Objective: To examine the impact of the pandemic on Massachusetts workers and to identify groups or populations that have been disproportionately impacted in order to guide prevention efforts and address potential inequities.

**Change in employment due to the pandemic among respondents employed in the past year:**
- JOB LOSS (permanent, temporary)
- REDUCED HOURS / TOOK LEAVE (paid, unpaid)
- NATURE OF WORK CHANGED (eg. increased hours, change in role, new job, working from home)
- NO CHANGE

**Working from home status among those currently employed:**
- WORKING FROM HOME
- WORKING OUTSIDE THE HOME

**Employer-provided protective measures among those working outside the home:**
- PERSONAL PROTECTIVE EQUIPMENT (PPE)
- SOCIAL DISTANCING IMPLEMENTED
- ADDITIONAL HEALTH AND SAFETY TRAINING
- PAID SICK LEAVE
The pandemic has had a severe impact on Massachusetts workers. Overall, 7 in 10 adults employed in the past year reported changes to their employment status due to the pandemic:
- 10% reported job loss
- 14% reduced hours or took leave
- 41% nature of work changed.

1 in 4 adults employed in the past year reported job loss, reduced hours or taking leave.

Note: Percentages are weighted to the statewide age and educational distribution of those 25 years old or older in Massachusetts.
The following groups were more likely to report:

**JOB LOSS:**
- American Indian/Alaska Native
- Non-binary gender
- Of transgender experience
- Bi/Pansexual, Queer, or Asexual
- Lower educational attainment
- Lower annual household income
- Deaf/Hard of hearing
- Cognitive, Mobility, or Self-care/Independent-living disability

**REDUCED HOURS/LEAVE:**
- American Indian/Alaska Native, Hispanic/Latinx, or Multi-racial
- Non-binary gender or Female
- Of transgender experience
- Bi/Pansexual, Questioning of sexual orientation
- Speak a language other than English
- Aged 25-34 years
- Lower educational attainment
- Lower annual household income
- Deaf/Hard of hearing
- Cognitive, Mobility, or Self-care/Independent-living disability
Workers in the following occupations were more likely to report job loss, reduced hours or taking leave:

- Food Preparation & Serving Related – 3 in 4
- Personal Care & Service – 1 in 2
- Transportation & Material Moving – 1 in 2

Notes: 1) Occupation groups are based on Bureau of Census Occupation Codes (COC); 2) "Other Occupations" = Farming, Fishing & Forestry; "Installation, Maintenance, & Repair"; and Military occupations.; 3) * ^ denotes a statistically significant difference in job loss (*) and/or in reduced hours/take leave (^) compared to the average for all occupations; 4) Percentages are weighted to the statewide age and educational distribution of those 25 years old or older in Massachusetts.
RISK MITIGATION

REASONS FOR CHANGE IN EMPLOYMENT STATUS

Leading reasons among those reporting job loss or reduced hours / took leave included:

1. Employer action (e.g. laid off)
2. Need to take care of children
3. Afraid to get COVID-19 at work

Note: Percentages are weighted to the statewide age and educational distribution of those 25 years old or older in Massachusetts
1 in 4 employed parents lost their jobs or reduced hours/took leave. Parents were 35% more likely to report reducing hours/taking leave than non-parents.

43% of parents who reduced hours/took leave and 32% of parents who lost jobs listed needing to take care of children as a reason.

Populations who have experienced inequities in other areas face additional challenges in balancing parental stressors. The following parental groups were more likely to report a change in status or nature of employment in order to take care of children:

- Questioning of sexual orientation, Bisexual and/or Pansexual, and Queer parents
- Non-binary, and female parents
- Younger (age 25-44) parents
- Hispanic/Latinx and Multiracial parents
- Parents with lower income or lower education
- Parents of children with special healthcare needs
Compared to those with no change in employment, those who lost jobs, reduced hours or took leave were:

1.5 - 2.5X more likely to worry about paying expenses or bills in upcoming weeks
- Housing, utilities, debt, vehicle, insurance, school/daycare

1.5X more likely to report ≥ 15 days of poor mental health in the past 30 days
- Nearly half of those who lost their jobs
- All three groups experiencing a change in employment were more likely than those with no change to report ≥ 15 days of poor mental health

Notes: 1) * denotes a statistically significant difference compared to the reference category of ‘no change’ in employment status or nature of work'; 2) Percentages are weighted to the statewide age and educational distribution of those 25 years old or older in Massachusetts
Among respondents who had ever been tested, those working outside the home were nearly 2X more likely to report testing positive than those working from home.

4 in 5 respondents working outside the home listed work-related reasons for not being able to socially distance (ie. maintain 6 ft. of distance from others).

Respondents in the following groups were more likely to work outside the home and less likely to have employer-provided COVID-19 protective measures at work or paid sick leave.

- Hispanic/Latinx
- speak a language other than English
- lower educational attainment
- lower annual household income
- those with cognitive disability

1 in 2 employed respondents worked a job outside the home, facing increased risk of exposure.
The percentage varied across occupation groups ranging from 98% in Transportation and Material Moving to 13% in Computer and Mathematical occupations.

Working outside the home was most common among respondents working in: Transportation & Material Moving, followed by Food Prep & Serving Related; and Building & Grounds Cleaning & Maintenance occupations.

Notes: 1) Occupation groups are based on Bureau of Census Occupation Codes (COC); 2) *Other Occupations* = Farming, Fishing & Forestry; *Installation, Maintenance, & Repair*; and Military occupations.; 3) *denotes percentage is statistically significantly different compared to the average percentage for all occupations; 4) Percentages are weighted to the statewide age and educational distribution of those 25 years old or older in Massachusetts.
Workers in the three occupations groups most likely to work outside the home were also most likely to report being "very" worried about getting infected with COVID-19.

Notes: 1) Occupation groups are based on Bureau of Census Occupation Codes (COC); 2) "Other Occupations" = Farming, Fishing & Forestry; "Installation, Maintenance, & Repair"; and Military occupations.; 3) Percentage for "Other Occupations" suppressed due to insufficient data; 4) *denotes percentage is statistically significantly different (p<0.05) compared to the average percentage for all occupations; 5) Percentages are weighted to the statewide age and educational distribution of those 25 years old or older in Massachusetts.
The three occupation groups below were most likely to work outside the home and most likely to be ‘very worried’. They were also less likely to report key employer-provided COVID-19 precautions at work.

<table>
<thead>
<tr>
<th>Building and Grounds Cleaning &amp; Maintenance</th>
<th>Food Preparation &amp; Serving Related</th>
<th>Transportation &amp; Material Moving</th>
</tr>
</thead>
<tbody>
<tr>
<td>58%</td>
<td>59%</td>
<td>71% ^</td>
</tr>
<tr>
<td>34%</td>
<td>55%</td>
<td>51%</td>
</tr>
<tr>
<td>24%</td>
<td>35%</td>
<td>29%</td>
</tr>
<tr>
<td>49%</td>
<td>52%</td>
<td>65%</td>
</tr>
</tbody>
</table>

Context: These three occupation groups had higher age-adjusted COVID mortality rates early on in the pandemic (March-July 2020) compared to the average for all MA workers. In fact, they had the 2nd-4th highest rates behind only Healthcare Support workers (1st). (Hawkins et al., 2021)

Notes: ^ denotes estimate is not statistically significantly different from the average for all occupations; Reference: Hawkins D, et al. COVID-19 deaths by occupation, Massachusetts, March 1–July 31, 2020. AJIM, 2021. DOI: 10.1002/ajim.23227

- 77% (3 in 4) of respondents worked in places that provided personal protective equipment (PPE).
- 67% (2 in 3) of respondents worked in places that implemented social distancing.
- 44% (2 in 5) respondents worked in places that provided additional health & safety training.
- 80% (4 in 5) reported having paid sick leave.
The CCIS captured important information on the disparate impact of the pandemic on subgroups of Massachusetts workers.

- Findings revealed **disparities in the economic impact** of the pandemic with certain populations more likely to report job loss, reduced hours or leave due to, for example, businesses closing or in order to care for children. Workers in occupations not able to be done remotely were more likely to experience disruptions to employment.

- A person’s **work may be a risk factor for COVID-19**. Throughout the pandemic some workers have had to leave home to do their jobs, facing increased risk of exposure. In the CCIS, employed respondents working outside the home were nearly twice as likely to report testing positive as those working from home and commonly reported work-related reasons for not being able to socially distance.

- Findings suggest that **work may contribute to observed COVID-19 inequities** in Massachusetts. Certain populations were more likely to work outside the home and less likely to have key workplace COVID-19 protections or paid sick leave, putting them at increased risk of work-related exposure.
Key Finding: The effect of COVID-19 on workers in Massachusetts has been severe, and has disproportionately impacted specific groups of workers.

**Heard:** As we move continue to make efforts to increase vaccination efforts state-wide, we need to recognize that work is an important contributor to COVID-19 risk.

**Actions Taken:**
- Community Liaisons to the 20 Vaccine Equity Initiative (VEI) communities are being briefed on the CCIS employment findings. We are also adding contextual information about the employment make-up of the 20 communities prioritized in the VEI to help increase vaccinations of high-risk worker populations in those communities.
- Advocating for employee centric considerations in vaccination uptake efforts such as appointments available outside of regular working hours, increased mobile units, educating employers about tax credits, etc.
- We have met with the Health Equity Advisory Group (HEAG) as well as the Occupational Health Surveillance Program’s (OHSP) Advisory Board to strategize about ways to engage with workers and employers and are working to implement these ideas.
Key Finding: While vaccination is a crucial preventive measure, CCIS findings suggest that there is still work to be done around improving access to other key employer-provided COVID-19 precautions, especially for workers in high-risk occupations that cannot be done remotely (i.e. public facing, work in close proximity to others, work indoors).

Heard: As vaccination efforts in Massachusetts increase, we must also ensure that other COVID-19 prevention strategies (such as ventilation, personal protective equipment (PPE), social distancing, and health and safety training) are in place in workplaces. Employers have a responsibility to minimize risk of workplace exposure to known hazards associated with serious illness or death.

Actions Taken:
- Messages of the importance of non-vaccine related COVID-19 mitigation measures are included in outreach to employers, municipalities, and community groups.
- Tools have been provided to help the Community Liaisons in the 20 Vaccine Equity Initiative support their communities in obtaining mitigation measures such as PPE.
Key Finding: Availability of paid sick time varies by industry and occupation, as well as between different demographic groups.

Heard: Having paid sick time enables workers to stay home if feeling sick, or recover from related symptoms, benefiting the individual and also reducing risk of workplace transmission. Lack of paid sick time may limit access to vaccination and result in low vaccination rates among certain groups.

Actions Taken:
• As part of outreach to employers, municipalities, and community groups, DPH is sharing information about federally available resources (tax credits) that can assist businesses who don’t currently provide paid sick leave to all employees. These tax credits will cover paid leave for up to $511 per day per employee for up to 10 workdays, or 80 work hours, taken between April 1 and Sept. 30, 2021 for businesses and nonprofits with fewer than 500 employees.
Visit http://mass.gov/covidsurvey for more information on how residents of Massachusetts have been impacted by the pandemic and how we can all work together to turn these data into action!