



**Impact of COVID-19 and
Related Recommendations
To Improve the Status of Women of Color**
Massachusetts Commission on the Status of Women
May 2021

“The COVID-19 pandemic has magnified the urgent need for equity and social justice to be at the center of policy and decision making. Action must be taken to address true systemic barriers to gender equality and the disproportionate disadvantages that permeate all aspects of life of women of color.

Opportunities and resources must be free from existing bias and unjust systemic barriers and policies. Inequities that disparately affect women of color must be eliminated. The future success of an entire generation of women of color in Massachusetts depends on how the Commonwealth approaches recovery from the pandemic.”

Massachusetts Commission on the Status of Women

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About the Commission

The mission of the Massachusetts Commission on the Status of Women (MCSW) is to provide a permanent, effective voice for women and girls across Massachusetts and to ensure that they can achieve full equity in all areas of life. The MCSW is composed of 3 staff members, and 19 volunteer commissioners who are appointed by the Governor, the Senate President, the Speaker of the House and the Caucus of Women Legislators. In addition, 11 regional commissions composed of 103 women appointed by the MCSW exist in communities across the Commonwealth.

In the past thirteen months, pursuant to its statutory authority, the MCSW has been gathering, evaluating, and reporting information on how COVID-19 is impacting women in the Commonwealth. It is the MCSW's intention to offer well-informed recommendations as programs and policies are being developed to meet the needs of Massachusetts constituents.

Evolution

Shortly after Governor Baker declared a state of emergency on March 10, 2020, the MCSW created a COVID-19 Action Committee to research and report on the status of women and girls during the pandemic. The MCSW has conducted three studies and produced three reports:

1. *April, 2020: “The Impact of COVID-19 and Related Policy on Massachusetts Women and Girls*
2. *October 2020: “Child Care and Education During COVID-19: A Report on the Economic and Social Impact on Women in Massachusetts”*
3. *May, 2021: “Impact of COVID-19 and Related Recommendations to Improve the Status of Women of Color”*

Methodology

Based on stark realizations that the pandemic was disproportionately impacting women of color (WOC), the MCSW determined that it was critical to reach out to WOC across the Commonwealth to gather data and to use that data to foster critical change. The initiative included a virtual hearing and an online survey.

The following methodology was implemented to increase engagement with WOC:

- Graphics and messaging for all outreach and promotions were designed to appeal to women of color
 - Women of all races were welcome to participate in the initiative
- The MCSW utilized a virtual hearing and a survey to collect data

- The data was gathered electronically
 - Participation was limited to those who had access via phone or the internet. For this and other reasons, the data is not scientific
- Grocery store gift cards were offered to public hearing participants
- Organizations known to support and service women of color were identified and included in all outreach via email, direct contact, social media, and the MCSW newsletter
- Marketing materials, the survey, and the virtual hearing were provided in English, Spanish, and Portuguese
- American Sign Language and closed captioning were also provided during the hearing
- The survey was anonymous for those who chose not to share their identifying information

While the MCSW acknowledges that the hearing and survey were geared to lift the voices of women of color, it is necessary to provide complete data from all women who responded to the survey in order to highlight disparities and inequities that exist for women of color throughout all aspects of their personal and professional lives. Based on data collected, this report provides findings and actionable recommendations to elected officials.

At the completion of the survey, the MCSW referenced the 2019 American Community Survey for the demographics of women in Massachusetts and compared them to the demographics of survey respondents. The comparison is as follows and reflects great success in reaching a large percentage of WOC:

Massachusetts demographics

As reported by the 2019 American

Community Survey (ACS) Data:

White alone, not Hispanic or Latino:	71.1%
Black or African American:	9.0%
Asian alone:	7.2%
Hispanic or Latino:	12.4%
Two or more races:	2.6%
Native American:	0.5%
Hawaiian/Pacific Islander:	0.1%

MCSW Survey Respondents*:

Caucasian:	50.5%
Black:	14%
Black/Non Hispanic	10%
Asian:	4%
Latina/Hispanic/Latinx:	9.3%
Two or more:	9.7%
Native American:	0.5%
Prefer not to answer:	2.5%

*Respondents were able to choose multiple options

The Hearing

A virtual hearing titled ***Women of Color: Let's Walk in Our Power by Raising Our Voices for Action*** was announced for Thursday, February 24, 2021, 6:00 PM - 8:00 PM, resulting in 199 attendees. Written testimony was submitted prior to and after the hearing, and verbal accounts were shared during the hearing. The minutes and the audio file from the hearing may be found on the MCSW's [website](#).

Featured speakers were:

Congresswoman Ayanna Pressley, who represents Massachusetts' 7th Congressional District in the U.S. House of Representatives. Congresswoman Pressley is the first woman of color elected to Congress from the Commonwealth of Massachusetts.

Psychologist Dr. Charmain Jackman, a Harvard-trained psychologist with over 23 years in the mental health field. Dr. Jackman is the founder of InnoPsych, Inc., an organization on a mission to disrupt racial disparities in mental health.



"We have to organize and legislate like lives depend on it, because they do. If we can legislate hurt and harm, then I do believe that we can legislate healing, that we can legislate equity, that we can legislate justice."

- Congresswoman Ayanna Pressley

The Survey

Six days prior to the virtual hearing, February 18, 2021 the MCSW launched an online survey (included in the appendix) to gather specific, quantitative data that would supplement the testimony from the hearing.

The survey was completed by 816 Massachusetts residents from 200 communities throughout the Commonwealth. Responses came from 393 WOC (48%) (in 107 communities) and 423 (52%) who were not women of color (NWOC).

Direct quotes from hearing participants and survey respondents are provided throughout this report.

Impact of COVID-19

Report Overview

This report combines data from the hearing and the survey. It includes key findings summarized in the following categories:

- The Impact of COVID-19 on Race
- Employment and Income
- Health and Healthcare
- COVID Diagnosis and Vaccination
- Housing and Safety
- Food Insecurity
- Caregiving / Family and Dependents
- Essential Needs

Areas for Immediate Attention

A section titled *Areas for Immediate Attention* is included at the end of this report to help inform and guide decisions about resources and public policy to address critical issues.

THE IMPACT OF COVID-19 ON RACE

The MCSW survey asked: If you are a woman of color, do you feel that the COVID-19 pandemic has affected you differently because of your race and if so, how? **45% of WOC answered yes**

These are some of the direct comments provided by survey respondents (which have not been edited for grammar or spelling):

"The recent attacks on the Asian community, especially among the elderly, are of a huge concern to me. The community has been targeted due to racial sentiment and prejudice that stemmed from the COVID-19 virus."

"The increase in hate-crime against Asian Americans concerns me greatly just do leave the house and do routine errands (grocery shopping, getting gas, etc.)."

"These past four years as a woman of color my race seems to be at the forefront of every conversation more than ever before, which sculpts how I'm treated in every situation."

"Black and brown people inevitably are and have been impacted the most in the worst ways possible. Covid has killed black and brown people, set black and brown people back financially and overalls mentally drained."

"I experienced workplace microaggressions, lack of understanding, lack of flexibility and support due to having 20 family members who experienced COVID in the US and Ecuador with a loss due to lack of healthcare."

"I have witnessed more discriminatory practices for people who were sick and were trying to return to work. I have seen more poverty, unemployment, more of us getting infected, sick and dying from covid."

"Most of my providers when I finally was able to access health care did not look like me or understand my lived experiences. They often times disregard or invalidate Intergenerational and personal racial trauma and the impacts it was having on my mental health. For example, they encouraged me to try showing up in work places authentically "no matter what" in an attempt to empower and did not understand the implications (from simple micro aggressions to job insecurity) showing up as a BIWOC individual in an all white spaces are. Another instance was that there was recently a murder a few feet from my home. My partner and I heard the shots, people coming out of their homes crying and wailing in communal mourning, and now everyday there are new candles being brought to the site in remembrance. We were/are very shaken... I expressed to a counselor that I now fear walking outside which was my only effective coping skill at this point. She replied stating that I should perhaps "take a walk on a Sunday when couples are pushing baby carriages and people are walking their dogs." She is a great person and excellent clinician, however her blind spot was my tender spot."

EMPLOYMENT AND INCOME

Testimony gathered from the hearing and data from the survey indicate that economic losses are widespread.

A. Income

When asked about how COVID impacted employment and personal income, **43.8% of WOC reported that they had lost personal income** with 33% attributing the loss of income to quarantining, the inability to qualify for unemployment, hours reduced by an employer, and elder and/or child care

requirements, as compared to 23% of NWOC reporting that they had lost income.

28% of WOC respondents reported a weekly reduction in household income of \$250-\$999 per week

How much weekly income have you and your household been losing as a result of the COVID-19 outbreak?	WOC 393 %	NWOC 423 %
No loss	45.5	59.1
Less than 250	4.3	8.5
250-499	13.7	10.6
500-749	7.9	5.4
750-999	6.4	4.7
1000-1999	6.4	3.5
2000+	4.6	2.8
Prefer not to answer	11.2	5.2
Total	100	100

Loss of income for the women of Massachusetts—and in particular, for the women of color of Massachusetts remains a paramount concern to be addressed in the fallout from the COVID-19 pandemic.

B. Employment

While unemployment and the exit of women from the workforce in general must remain a top concern, and addressing it a top priority, this is especially so for the WOC of Massachusetts, who have, according to the MCSW survey results and studies reported elsewhere, experienced disparate effects on employment and their ability to return to work.

During the COVID-19 pandemic, **24.9% of the WOC survey respondents reported disruption of work, whether as a**

furlough or lay off. In contrast, **15.3% of NWOC said they had experienced work disruption** at some point during the pandemic.

Among those women experiencing a disruption in work, **34% of WOC stated that their employment status had been directly impacted by changes in childcare and education** as compared to 26.4% of NWOC.

Approximately **one in eight women of color who were in the Massachusetts workforce prior to COVID-19 remain absent from it, at roughly double the rate of NWOC.**

Of survey respondents, **46.6% of WOC stated that they were essential workers, with 64% of these essential workers employed in healthcare, education and government.**

"We were already the victims of economic injustice. Lower paying jobs come with less benefits, less power and less personal consideration. Living paycheck to paycheck where ends don't already meet makes you closer to the street (as in out on the street). Your choices are more limited because of lack of funds, which often causes other resources to be limited or non-existence. Most lower paying jobs cannot be done from home, so you often have to go in even when they do not fully provide the necessary precautions they allow the State to assume have been. You're risking your life to make a living!"

"As a woman of color, I was paid less than my white male partner, so I was the one who put their career on hold."

"I continue to work because I could not get paid time off. I do not have access to Family Paid Leave even though there is a law."

HEALTH AND HEALTHCARE

A. Medical Health

The MCSW looked at health and healthcare for women including access to feminine hygiene products, birth control and reproductive health services, childbirth (including home births), access to prescription drugs, traditional medical care, and insurance coverage to support such care.

Overall health:

When summarizing the overall impact of COVID-19 on their health, **the top concerns cited by WOC and shared by NWOC were:**

- **Postponement of medical treatment (17.1%)**
- **Deterioration of overall health (13.9%)**
- **Accessing healthcare in general (11.1%)**

There is additional concern that conditions and illnesses that are more unique to POC are not covered by insurance (e.g. Vitiligo)

B. Maternal Healthcare:

Access to prenatal care and maternal health remains of concern to survey respondents. As studies elsewhere have shown,^{*}

"Women make up about half the MA undocumented population. They are mothers, daughters, survivors of violence, essential workers. Thousands of whom are at risk of losing work or losing pay because of COVID. When a woman is unable to obtain a driver's license because of her immigration status this significantly limits our ability to go about daily tasks which can also affect physical and mental health."

maternal health outcomes for Black and Native women are highly disproportionately negative when compared to NWOC.

33.3% of WOC and 12% of NWOC who were pregnant or who recently gave birth conveyed an interest in home birth.

(Meanwhile, most insurance companies do not cover the cost of a midwife.)

C. Healthcare and Health Insurance:

WOC have lost access to medical care and medical insurance at twice the rate of NWOC.

- **20% of WOC and 10.6% of NWOC reported that they are having difficulty accessing medical care (nearly 2:1)**
- **7% of WOC and 3.3% of NWOC had lost their medical insurance (a ratio of over 2:1)**

"Many hospitals were willing to withhold medicine and treatments to prioritize white patients and sent many people of color home to mixed age households with elderly people in close quarters that speaks to poverty and discrimination."

"My mother and I received poor care while suffering from COVID 19. My mother died from it."

"My access to healthcare is much different than that of my non BIPOC female peers."

"I have asked for a checkup after being sick with covid, and not having any medical attention as the lingering symptoms are affecting my daily life."

"What I am concerned about is Black maternal health... the only data I could find was from 2013 saying that Black women have a very high rate of morbidity in MA and instead of getting better over the past 10 years it's been declining rapidly."

"Around the time covid hit, it was really hard to get follow up appointments for her (very young daughter) and as young as she is, you want her to continue to see the doctor" "I wouldn't be able to go in and see the doctor, it would be a nurse calling me over the phone just asking questions about what her symptoms were"

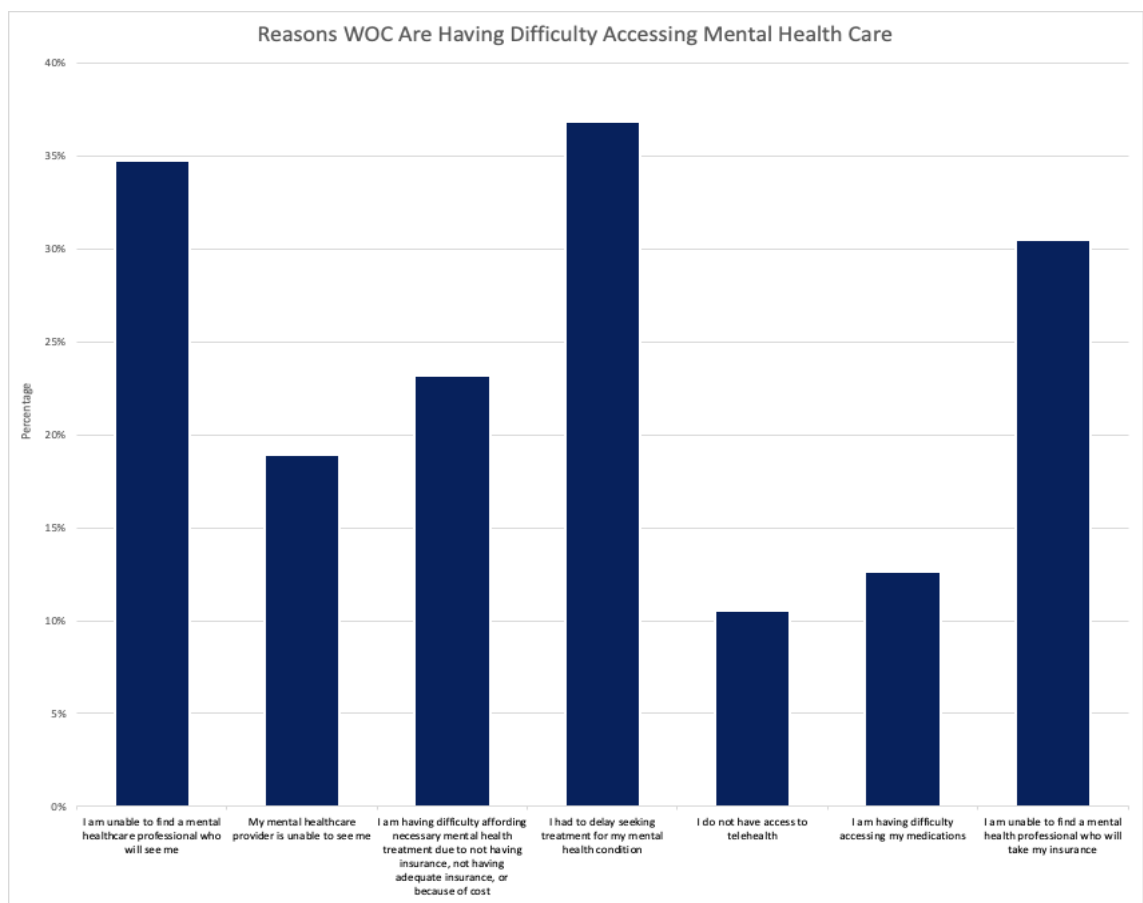
D. Mental Health

The emotional consequences of the pandemic and related policies have had a significant and concerning impact on women.

Women continue to experience anxiety and depression at a rate of 43% (compared to 5.5% diagnosed with depression in 2018 according to Blue Cross Blue Shield). In addition, now, 51% are also concerned about mental health issues facing family members. One of the biggest challenges is a lack of access to mental health care:

34.3% of WOC are having difficulty obtaining mental healthcare in comparison to 24.5% of NWOC.

WOC survey respondents cited the following reasons for difficulty obtaining mental health care:



"My son's mental health has deteriorated and he attempted suicide. He is only 10."

"As a WOC I'm already facing several barriers to access healthcare, but because of COVID myself and my peers are experiencing a serious mental health crisis and have nowhere to turn. Tele Health isn't accessible for everyone and providers are more likely to push your appointments and let you fall through the cracks. In addition it is increasingly difficult to maintain and advance a career while trying to stop the burning ship from sinking."

"I have great anxiety because family members have passed from Covid and were not able because of mental illness to get help. Also I worry other family members with conditions will get covid and I have conditions and I worry I could get it a mild case even though I have had my first shot already and I worry some family members are refusing to get vaccine sighting history of mistreatments, etc."

"My children had become suicidal and had mental breakdowns."

"COVID-19 has forced people to quarantine and spend more time behind screens. There has been an overwhelming flood of traumatizing images and videos of people harming black Americans and it is posted with good intentions but it really just makes me scared and sad."

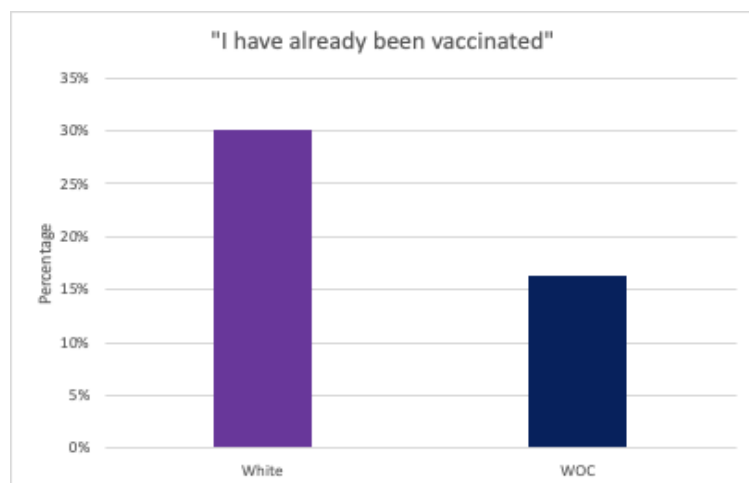
COVID DIAGNOSIS AND VACCINATION

Data from the survey indicates that ongoing health complications from COVID-19 will remain a challenge which will have functional, financial, and healthcare implications **with 43% of the WOC continuing to have lingering health issues from the virus as well as 33% of NWOC.**

Relief care for side effects from the virus are critical.

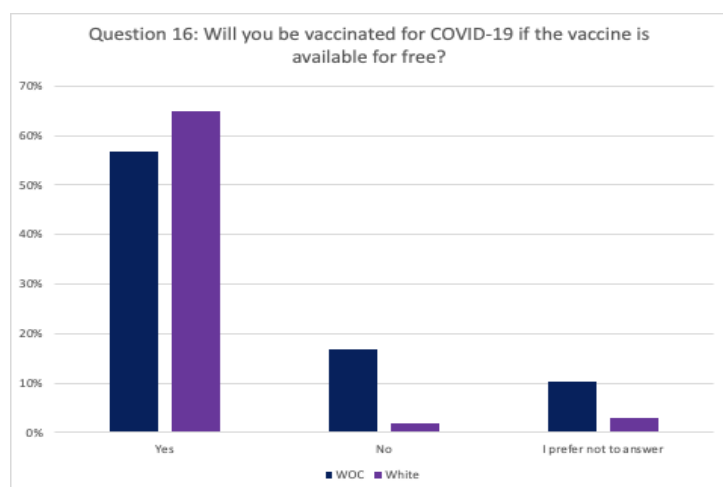
"After I had Covid-19, I had to go back to work after two weeks with lingering brain fog and lethargy."

"I'm more vulnerable to contracting covid because blacks tend to suffer from diseases such as hypertension more than whites. I'm hypertensive."



"Not only do they (undocumented immigrants) not have financial assistance from federal government, but they also cannot have access to testing sites and vaccine sites because they can't drive."

"I have asked for a checkup after being sick with covid, and not having any medical attention as the lingering symptoms are affecting my daily life."



Women of color are more skeptical of the COVID-19 vaccine with 17% saying they would not be vaccinated vs. 2% of NWOC. They cited these reasons:

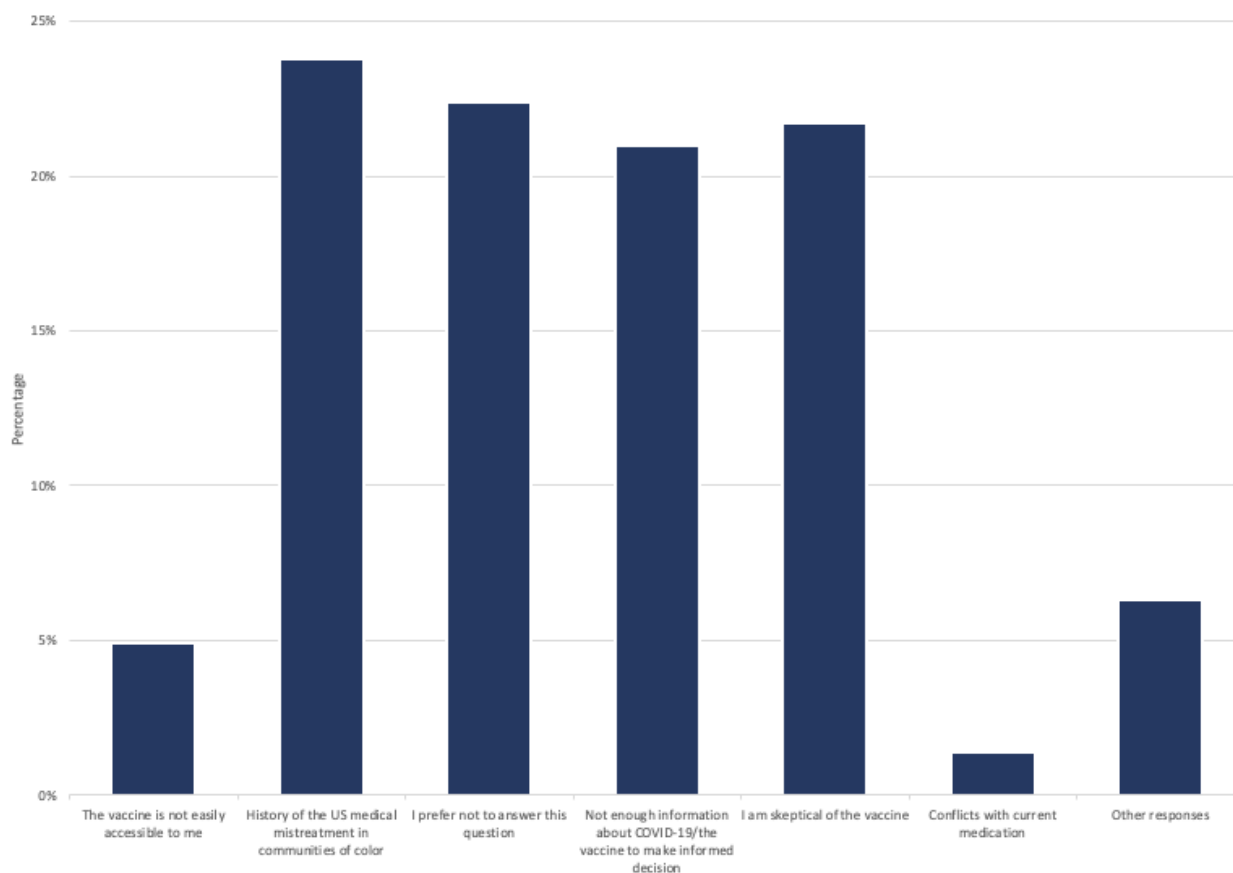
- History of US medical mistreatment in communities of color (23.8%)
- Not enough information about the COVID-19 virus and/or the vaccine to make an informed decision (21%)
- Skepticism about the vaccine (21.7%)

"The vaccine is not easily accessible to me in the area I live in. I do not have enough information about the vaccine to make an informed decision. I am skeptical of the vaccine. There is a history of the US's medical mistreatment in communities of color."

"I am very concerned about the racial injustice that has limited access to covid vaccines in my hometown region. My mom really struggled to get an appointment for a vaccine. Too many of elder women in the community do not have family members to help them with this (vaccine registration). The appointment my mom received is in Gillette stadium, a 45-minute drive. Thankfully she's mobile and has access to a car, but again many elders do not have access to these privileges."

"I just cannot fathom getting the vaccination. I just need more information that the vaccination is up to par, that the quality, the integrity of the vaccination is being stored and prepared correctly. Are there any injustices when it comes to getting the vaccination out to certain individuals, marginalized populations? I want education and I am looking for transparency."

Reasons WOC Will Not Be Vaccinated



HOUSING AND SAFETY

A. Housing

Job and income loss as a result of COVID-19 will have further downstream effects on housing stability. It has already caused **13.5% of WOC to report in this survey that they were falling behind on their rent or mortgage vs. 3.5% of NWOC. The difficulty finding affordable housing was reported at the rate of 3:1 for WOC vs. NWOC, with 4.1% reporting that they were on a waitlist for subsidized housing.**

"We are going to have an unavoidable housing crisis in the next few months. Right now a lot of people are protected from eviction but when they are not, what is going to happen to these families who have not been able to pay rent, particularly the single parent families, the single mother families, what resources are available, where can we direct our communities to go to get help and pay back rent so they can stay in their house during the pandemic?"

"I have tenants and it would be nice if banks, who are making out during this pandemic, allowed a moratorium on collecting mortgages to allow me to not have to collect rent. This would help if no-one has to play catch up later."

"I have become homeless and I need shelter. I can not find affordable housing."

B. Safety at Home

The stay-at-home orders led to safety issues at home for nearly 6% of WOC.

"Being in a toxic environment and isolated while being completely dependent on a family member for food, shelter and transportation as a disabled woman is so difficult."

"Isolated at home, with no access to treatment, life is dangerous"

Safety at home is a great concern for essential workers who fear bringing the virus home to others. As previously noted, 50% of WOC say they are essential workers - with 64% of those essential workers in healthcare, education, and government jobs which present high COVID-19 exposure and risk.

"Essential workers [with their] kids homeschooling presents difficult [COVID-19] safety challenges and increased family anxiety and stress."

FOOD INSECURITY

During the pandemic food insecurity became an even greater challenge with **13.4% of WOC respondents reporting they are having difficulty accessing food for these reasons:**

- I can not afford food
- I do not qualify for EBT
- I am accessing food from organizations
- I am accessing food from school

"COVID had impacted food. Lines at the food pantries and particularly to see so many people are struggling just for milk or bread or rice or chicken...we need more relief for food."

"Women were not able to buy many WIC products because consumer hoarding depleted inventory."

"Because I don't have a job now I can only rely on government subsidies."

CAREGIVING - FAMILY AND DEPENDENTS

As part of what is known as the "sandwich generation" women are often the primary providers of care for children and older adults, which is more prevalent for WOC. Of the respondents to this survey, **53% of WOC vs. 49% of NWOC were caring for children and/or older adults living with them.**

A. Children Under 21

Data gathered indicate concern about the impact that COVID-19 has had on children. **Women cited these top three impacts of COVID-19 on their children:**

- 37% of WOC and 34% of NWOC listed **Social and emotional progress as a primary concern**
- 23.4% of WOC and 38.1% of NWOC stated **Mental Health as a top concern**
- 13% of WOC and 10.8% of NWOC stated **Education access and progress**

B. Caring for Adults 21+ and Older Adults

WOC caring for others in their home are concerned about losing pay to take time off to provide care for family members and they seek assistance with:

- Home medical care for older adults, including through a home health care worker or other assistance to the caregiving respondent
- Care for persons with disabilities

"I have a family member who suffered a stroke and heart attack. The individual is a senior and my sister. She is alone now because she has no children that live in Mass other than a son. She is seeking some type of care of having someone come in to help her with preparing and paying her bills, getting her to the supermarket. My daughters and I do whatever we can. We will not desert her."

"I continue to work because I could not get paid time off. I do not have access to Family Paid Leave even though there is a law."

ESSENTIAL NEEDS

Women were asked to rank specific areas of need for assistance. **The top needs among WOC respondents included a one-time payment to help with expenses; affordable housing, and deferment or moratoria on bills, mortgages, rents and utilities and student loans.**

Assistance Needed	WOC Rank	Assistance Needed	NWOC Rank	Assistance Needed	ALL Rank
A one-time payment to help with expenses	1	A one-time payment to help with expenses	1	A one-time payment to help with expenses	1
Affordable housing	2	Paid leave	2	Paid leave	2
Deferment/more time to pay bills	3	A Moratorium on student loans	3	Affordable housing	3
A Moratorium on mortgages, rents and utility bills	4	Affordable housing	4	A Moratorium on student loans	4
A Moratorium on student loans	5	Deferment/more time to pay bills	4	Deferment/more time to pay bills	5
Paid leave	6	A Moratorium on mortgages, rents and utility bills	4	A Moratorium on mortgages, rents and utility bills	6
Access to low interest personal loans	7	A \$15 minimum wage	5	A \$15 minimum wage	7
SNAP, WIC, etc.	7	Access to low interest personal loans	6	Access to low interest personal loans	8
A \$15 minimum wage	8	SNAP, WIC, etc.	7	SNAP, WIC, etc.	9
Access to low interest business loans	9	Emergency home repair	8	Access to low interest business loans	10
Eviction protection	10	Job training to redirect my career	9	Emergency home repair	11
Job training to redirect my career	11	Access to low interest business loans	10	Job training to redirect my career	11
Emergency home repair	12	Eviction protection	11	Eviction protection	12
Access to transportation	13	Domestic violence protection/shelter	12	Access to transportation	13
Domestic violence protection/shelter	14	Access to transportation	12	Domestic violence protection/shelter	14

"Challenges that low income single mothers have been experiencing to try and have internet access so that their children can have remote instruction. What is happening is that many have been hit hard by the pandemic but it has been even harder on low income single moms, especially immigrant moms. What we have notices in our schools is the fact that many single moms lost jobs or had to stay home in order to help their children with remote learning and they are often unable to afford internet access in order for their children to have remote learning. We have heard of cases of kids having to use their mom's cell phones in order to get their instructions because that is where internet access is available. Cases where mom has to go to a doctor's appointment or go to the supermarket and mom takes the cell phone with her and that means the child is not able to continue receiving instruction for the day causing a number of black and brown children to receive less education and instruction than other middle income or upper income children. [We need to] contact the governor's office and ask for the state to provide free Internet access to families whose children are receiving remote instruction"

The following are additional areas of assistance requested from survey respondents and hearing participants:

- Vaccinations for children
- Medical coverage for conditions more prevalent for WOC (e.g. Vitiligo)
- One-stop shopping for navigating the system for medical and mental health benefits with better trained employees and more comprehensive, easy to understand information
- Tax free cancellation of student loan debt - not just a moratorium
- Searching for employment opportunities
- Driver's licenses for undocumented immigrants

WOC are less likely to reach out to someone in government to seek assistance. When asked if they had contacted anyone in the local, state or federal government about any of their concerns, **70.5% of WOC said they had not.**

"The umbrella concern for me I think we all have awareness of things we need and need to be changed, but what covid has taught me is we need to move urgently from awareness to establishment. We've brought awareness to needs and issues and there are laws that continue to be put on the books... but we are far behind these laws and regulations becoming our reality. How can we turn what we fought for into what we live."

Areas for Immediate Attention/Additional Inquiry

Strategic planning for an economic recovery in the Commonwealth must include a new baseline that is more equitable along racial lines. The current baseline is severely flawed in that it incorporates and accepts racial disparities which are present in existing policies. Economic racial justice requires a new model. A new model requires intervention.

The following are categorical action items to intervene, to create a new model, to put the Commonwealth on more solid ground by ensuring a more equitable recovery and a more stable foundation to build upon.

The Impact of COVID-19 on Race

- First, at the base of all action there is a willingness and a commitment to change.
 - **The Governor, the House, and the Senate must take an official public position against racism in the Commonwealth. (The MCSW requests adoption of the resolution in the appendix A.)**
- Eliminate Inherent Racism from policies, practices, and resources across the entire Commonwealth with a commitment from each of the 351 cities and towns
 - **The MCSW sees an opportunity for equity initiatives to be incorporated into the Governor's Community Compact Initiative (CCI).** (Executive order 554 of 1/23/15)
<https://www.mass.gov/executive-orders/no-554-creating-the-community-compact-cabinet>

- The CCI program sets goals for the Commonwealth and then offers incentives to towns and cities that undertake specific initiatives to help achieve those goals. The CCI cabinet should include women of color and should work on establishing new goals to address systemic racism through updates and changes in policy and increased availability of critical resources
- Commit to achieving gender and racial parity in state and municipal hiring and in appointments to boards and commissions
- Provide MBTA discounts and discounts on Mass Health Connector benefits for people who work in essential services and people who have lost income during the pandemic
- Develop a minimum recommended package of benefits for all private sector workers (full-time, part-time, small businesses, etc.) and offer tax incentives to businesses who provide those benefits to all of their employees.
- Equalize the quality of education in all public schools by reducing the reliance on property taxes for education funding
- Change the public school curriculum to eliminate racist materials
 - Incorporate the revised history curriculum into future standardized tests
- Allow time for students to recover from lost education during the pandemic - eliminate school district penalties for lower MCAS scores during a designated period of recovery
- Incentivize and reward students who dropped out or didn't attend school during the pandemic to return and to graduate from high school
- Implement a required patient form to collect data about service experiences with medical providers. Report on that data quarterly aggregated by race and act on the findings

- Pass the Family Mobility Act (S.2289/H.3456) to prevent criminalization and discrimination against undocumented immigrants for activities of daily living which require mobility

Employment and Income

- Provide incentives for employers to rehire WOC who were furloughed
- Provide easy to qualify, low interest loans for those who have lost jobs and income during the pandemic
- Explore a moratorium and relief on student loans
- Provide education loans at low interest rates and scholarships for education and training required for essential jobs
- Create an emergency Earned Income Tax Credit
- Offer Unemployment and Transitional Aid to Families with Dependent Children (TAFDC)
- Explore expansion of the Paid Family Medical Leave program to include brief periods of time off, and/or unpaid leave with job return guarantees
- Provide emergency healthcare services (during the pandemic recovery period) to those who remain unemployed due to the Pandemic
- Incentivize the business community to adopt policies that allow flex time (separate from extended leave) to help workers care for children and older adults
- Adopt laws that protect employees from employers who try to avoid providing benefits and award employers who do provide comprehensive benefits
- Provide childcare, alternate housing, and adequate safety provisions for essential workers during a Pandemic and recovery
- Advance hazard pay for essential workers, with a special consideration for minimum wage workers
- Pass An Act Removing Barriers to Justice in the Workplace (H1641)

Health and Healthcare

A. Medical Health

- Determine and plan for which emergency healthcare services will be provided during a Pandemic to ensure the continuation of timely medical attention
- Develop emergency procedures to ensure access to essential medications during a Pandemic
- Provide free and adequate transportation to medical facilities during a Pandemic to ensure access to healthcare when needed
- With hospitals, physician and healthcare associations, develop racial disparities issues and related corrective actions
- Evaluate long-term effects of COVID related illnesses and provide support and assistance to those who have contracted such illnesses

B. Maternal Health

- Support insurance coverage for midwives, doulas, and at home births
- Provide out of hospital birth options including pop-up birth clinics and emergency home-birth policies
- Ensure protection for pregnant workers at risk of exposure to COVID-19 and other public health risks

C. Health Insurance

- Provide health insurance coverage for (Vitiligo and other) conditions that may be unique to or disproportionately impact WOC
- Provide multilingual detailed instructions on how to receive medical support and how to access programs and benefits
- Develop a patient advocacy agency that helps people navigate through complex health situations and Pandemics

D. Mental Health

- Continue to explore immediate and continual opportunities and pathways to dramatically increase mental health resources including hotlines, expansion of mental health resources and emergency measures
- Support entities that provide mental health resources to those in need, especially for increased services related to pandemic related mental health issues of stress, anxiety, depression, etc.
- Increase insurance coverage for mental health services
- Ramp up mental health services for children in school to help recover from increased anxiety, depression and isolation
- Support legislation to include a crisis text phone number on all student IDs
- Provide financial incentives to students who graduate college to become a mental health professional

Food Insecurity

- Allow purchases with an EBT card to include a greater variety of food brands, feminine hygiene products, and diapers

COVID Diagnosis and Vaccination

- Increase efforts by the Department of Public Health to collect and report on COVID-19 cases disaggregated by race to acquire data which will inform better decisions
- Ensure ongoing access to testing and a commitment to reporting on COVID-19 cases
- Prepare to track and study the long term health implications of COVID-19
- Ensure that insurance companies cover medical treatment for the lingering health issues resulting from COVID-19
- The guidelines of how medical care - including use of ventilators - (based on a point system that includes health conditions), should be revised. It has a disparate impact on communities of color due to Black and Brown individuals being more likely to suffer the

types of health conditions (asthma, diabetes, heart disease)
making them more vulnerable to COVID-19

- Eliminate the risk of deportation for non-documented immigrants who seek COVID-19 testing
- Consider that undocumented immigrants who don't have driver's licenses may not be able to get tested or vaccinated and weigh that type of circumstance into support for the Family Mobility Act (S.2289/H.3456)
- More validated information needs to be disseminated to the population about the benefits of getting tested and being vaccinated, assuring communities of fair and equal treatment and access

Housing and Safety

- Create an incentive program for qualified developers to build housing that meets specific affordability requirements
 - For example - a statewide rebate program on qualified purchases of building materials purchased to construct "affordable" housing that meets specific criteria
- Use federal American Rescue funds to protect landlords who are at risk of defaulting on mortgages due to lost rental income if they continue to allow their tenants to stay in the rental property and begin paying rent again
- Continue legislative efforts to impose a moratorium on evictions of tenants who are unable to pay rent due to job/income loss along with support for their landlords
- Prohibit banks from foreclosing on mortgages held by people who lost their jobs or were furloughed during the pandemic. Consider the catch up to be at the end of the term through an extended loan period
- Extend the rent and eviction moratorium

- Provide funding to municipal housing authorities to purchase, refurbish and create more affordable housing units
- Conduct a comprehensive study on affordable housing - housing for minimum wage earners

Caregiving / Family and Dependents

The survey's results, consistent with the MCSW's previous survey regarding COVID-19, childcare and education, and the job statistics cited within, demonstrate that changes in childcare and education, and care for children directly impacts the women of the Commonwealth and their ability to work, including and especially the Commonwealth's women of color, and that responding to address those changes is essential.

- During a Pandemic and its recovery period, alternative childcare services and in-home healthcare services are essentials for working parents who are caring for children, older adults and persons with disabilities
 - Pass Common Start (H605/S362) to address childcare issues for WOC and all women
- Work with local communities to ensure there are equitable family care policies across the entire Commonwealth
- Conduct research that includes input from more people in underserved communities including door to door research and outreach.
- Establish recommended guidelines for business to provide paid days/time to care for family members (separate from extended leave such as PFML)
- Provide additional supplemental services for students on IEPs who lost critical progress from specialized services during the pandemic
- Pass Partity on Boards (S2077/H.3157) and Campaign Funds for Childcare (S475/HD.1418).

***Additional Data Resources Related to the Finding in this Report**

Racial and Ethnic Disparities Continue in Pregnancy-Related Deaths, Centers for Disease Control and Prevention (Sept. 5, 2019), available at <https://www.cdc.gov/media/releases/2019/p0905-racial-ethnic-disparities-pregnancy-deaths.html>.

See, e.g., Nik DeCosta-Klipa, **‘It must change now’: Equity advocates knock Massachusetts vaccine rollout**, Boston.com (March 12, 2021), available at <https://www.boston.com/news/coronavirus/2021/03/12/massachusetts-vaccine-rollout-equity-advocates>

Nambi Ndugga et al., **Latest Data on COVID-19 Vaccinations Race/Ethnicity, Kaiser Family Foundation** (Apr. 14, 2021), available at <https://www.kff.org/coronavirus-covid-19/issue-brief/latest-data-on-covid-19-vaccinations-race-ethnicity/>

Marie Szaniszlo, **“One year into coronavirus pandemic, Massachusetts among hardest hit by hunger,”** Boston Herald (Mar. 11, 2021), available at <https://www.bostonherald.com/2021/03/13/0314-bh-n-food/>

Janelle Nanos, **“Study: A million people in Mass. don’t have enough food,”** Boston Globe (Nov. 5, 2020), available at <https://www.bostonglobe.com/2020/11/05/business/study-million-people-mass-dont-have-enough-food/>

The MCSW: **Impact of COVID-19 and Related Policy on Massachusetts Women and Girls**, April 2020

The MCSW: **Childcare and Education During COVID-19: A Report on the Economic and Social Impact on Women in Massachusetts**, October 2020

Appendix A

Proposed Resolution

SUMMARY of the Massachusetts Commission in the Status of Women, Women of Color COVID19 Report: The MCSW recommends that the Governor; act within the Executive Branch to counter gender and race discrimination; and ensure that systemic racism is addressed in the Commonwealth of Massachusetts.

“We have to organize and legislate like lives depend on it, because they do,” Pressley said. “If we can legislate hurt and harm, then I do believe that we can legislate healing, that we can legislate equity, that we can legislate justice.”
Congresswoman Ayanna Pressley.

This resolution supports measures to address the disproportionate impacts of the COVID-19 (i.e., coronavirus disease 2019) pandemic on women and girls especially WOC. Supports and recommends preventive health care legislation, the purpose of which is to improve specialty training for treating low-income individuals and women of color and to require the Department of Public Health to conduct research to better understand and address the health care needs of women across the Commonwealth;

This resolution urges the Governor to (1) uphold the rights of crisis-affected and forcibly displaced populations further affected by COVID-19.(2) to place mental healthcare as a priority in the Commonwealth, (3) to ask all of the 351 cities and towns to also support this resolution.

RESOLUTION

Recognizing the disproportionate impact of COVID-19 on women and girls especially women of color in the Commonwealth.

WHEREAS: the COVID-19 crisis exacerbates existing vulnerabilities for women and girls and has an outsized effect on health, safety, and livelihoods for marginalized communities; and

WHEREAS: prejudices against gender and race have served to make it difficult for women to fill roles demanded of them by society and their professions and whereas men who wish to fulfill both professional and family roles are prevented from doing so by rigid practices which demand full-time devotion to a profession and the relegation of family duties to their wives, whereas all people are affected by societal gender expectations as to both professional and family roles, leading to gender-disparate levels of participation in the workforce and the home; and

WHEREAS: women of color are not free from psychological and social bondage, either to work or study, while bearing disproportionate responsibility for childcare, and cannot readily or affordably obtain child care;; and

WHEREAS: there is evidence that discrimination on the basis of race, ethnic background, gender, sexual orientation, age and disability continues to exist in employment and educational settings, despite years of effort to eliminate it; and clearly delineated institutional policies and procedures designed to assure fairness and equality can deter such discrimination (Report of the Federal Glass Ceiling Commission, 1995); and

WHEREAS: it is estimated that the disruption of sexual and reproductive health care services and supply chains caused by the COVID-19 crisis caused women to stop using contraceptives during just the first 6 months of the crisis, likely resulting in unintended pregnancies, major obstetric complications, maternal deaths, newborn deaths, and;

WHEREAS: lockdowns, quarantines, and other movement restrictions related to COVID-19 have disrupted access to legal and social services, as well as access to counseling, safe shelters, and medical treatment, exacerbating vulnerabilities for women and girls; and

WHEREAS: gender-based violence, such as domestic violence, child abandonment, sex trafficking, has increased, and is expected to continue to increase, as a result of the COVID-19 crisis, including—

(1) an estimated increase in gender-based violence cases during the first 6 months of shutdowns;

(2) An increase of disappearance and missing persons reports; and

WHEREAS: women play significant roles in the healthcare workforce, comprising 70 percent of health care workers Massachusetts.; and

WHEREAS: women and girls perform 3 times the amount of unpaid care work in homes and in their communities a burden that has increased during the COVID-19 crisis as women and girls are disproportionately responsible for the care of sick and elderly family, and community members ,limiting the ability to perform income-generating work, pursue education or skills building, or avoid exposure to COVID-19; and

WHEREAS: women in Massachusetts are the largest demographic living in poverty females from age 25-34 at the top and then ages 18-24. The data also shows that poverty by race 203k Latinx then Black 96k, and the ethnic breakdown is Latinx 12.3%, Black (non-hispanic) 7% and Asian 6.7%;- has increased due to COVID19- Including

Economic insecurity is a particular problem for women, who earn less than men over their lifetimes and live longer. In Massachusetts, 65 percent of single older women have incomes that fall below the economic insecurity benchmark financial insecurity, as women have much lower, if any, pensions, retirement savings, or other assets to mitigate shocks as compared to men loss of necessary income that female-headed households depend on, (include info from report): and

WHEREAS: food insecurity in the home has unique effects on the nutrition and health of women and girls, Pre-COVID food insecurity rates for children in Massachusetts 1 in 11, (during 2020) 1 in 6, 1 in 9 (2021 projected), often relying on one nutritious meal each day from feeding programs at schools shut down due to

the COVID-19 crisis, and face shortages in nutritious food and nutrients given social norms that dictate that women and girls eat last and least when food is scarce. At the end of March, Feeding America released updated food insecurity projections that still show that the state of Massachusetts saw the greatest percentage increase in food insecurity in the country in 2020 due to the pandemic, a 47% increase over 2019. ;


WHEREAS: closures of schools due to the COVID-19 crisis decreased girls' access to remote education and skills building programs, increased the exposure of girls to gender-based violence, increase the vulnerability of girls to early pregnancy and childbirth-related complications, and impede girls' access to information about the prevention of COVID-19, protection services, and pathways to report abuse;

WHEREAS: the self-image and general mental health of countless numbers of women and their concern for family members have been damaged by COVID-19 restrictions and the repercussions of lost resources for self care and restrictions on their freedom of choice and movement in society; and

WHEREAS: the diversion of resources and services away from existing primary health care needs to address the COVID-19 crisis and contain the spread of COVID-19 will have particular effects on women and girls, including disruptions in the provision of life-saving health services unrelated to COVID-19, such as maternal health care and sexual and reproductive health services, and the loss of critical services and support to respond to gender-based violence; and

WHEREAS: a full reversal of the processes resulting in discrimination against women will not be possible without strong support and leadership from the Commonwealth legislative body and the Executive Branch; and

BE IT RESOLVED: that the legislators go on record endorsing the recommendations of the Massachusetts Commission on the Status of Women (as summarized below), and that the Governor be notified of this endorsement and urged to implement the recommendations at state level:



1) Affirm the critical importance of gender balance and inclusivity in bodies responsible for coordination and decision making related to the COVID-19 crisis, including in structures and task forces of the Government charged with developing policies and responses to the crisis;

(2) Promote integrating a gender lens throughout the response to the COVID-19 crisis by analyzing and tracking the effect of and response to the crisis on gender, including gathering evidence from data that is disaggregated by gender, age, and other specific variables (which is included in the MCSW WOC report);


(3) Support measures to ensure that life-saving health services including sexual and reproductive health and gender-based violence prevention and response are well resourced and supported, including within the COVID-19 Plan coordinated by the legislative body, and that funding earmarked for those services is not reduced, canceled, or diverted to other COVID-19 response activities;

(4) Support measures to ensure the continuation of adequate food and nutrition security for women and girls across the Commonwealth affected by COVID-19, including women of color, and women and girls in disenfranchised communities in light of the unique challenges described in the preamble of this resolution;

(5) Reinforce the need to ensure that short-term relief programming and longer-term economic strategies address the specific effects of COVID-19 on women and girls statewide, especially lower income, migrant, displaced, and other marginalized women;

(6) Support robust funding contributions by the United States for statewide response to the COVID-19 crisis in support of vulnerable women and girls affected by COVID-19 and underlying emergencies;

(7) Commit to continuously assess and eliminate any impediment to the delivery of and access to assistance;



(8) Address barriers to equitable COVID-19 treatment and vaccine access for women, girls, and marginalized communities as part of a holistic response to the global COVID-19 pandemic.

(9) Incorporate these priorities and goals into the 2022 Community Compact Initiative

(10) Conduct further research on all women of color across the Commonwealth with a focus on reaching women who are not readily easily accessible through technology outreach methods to get a true representation and understanding of their status.

Appendix B

WOC Survey on the Impact of COVID-19

The actual survey text is included below. All questions marked with an asterisk (*) were mandatory.

The Massachusetts Commission on the Status of Women invites all who live in Massachusetts to take this survey. Former First Lady Michelle Obama said “The only limit to the height of your achievements is the reach of your dreams and your willingness to work for them.”

The MCSW is committed to the work to achieve our dreams of improving the lives of our Black and Brown sisters within the Commonwealth of Massachusetts. Your responses will inform the development of public policy that intends to advance Women of Color.

Thank you for bringing your voice and perspective to the table by completing this survey.

Employment and the Financial Impact of Covid-19

1. What is your employment status?*

- I am employed by an employer
- I am self-employed/business owner
- I am unemployed - not by choice
- I am a student and I am not working
- I am Retired
- None of the above

2. Have you been laid off or furloughed due to COVID-19?*

- I was laid off due to COVID-19 and I remain out of work.
- I was furloughed due to COVID-19 and I remain furloughed.
- I was laid off or furloughed and have returned to work
- I was not laid off or furloughed due to COVID-19
- None of the above

3. If you lost any paid employment during the COVID-19 pandemic, please indicate when that happened:

- In the last month
- In the last 6 months

- In the last year
- This question does not apply to me

4. How has your source of personal income been impacted since the COVID-19 Virus outbreak? (Select all that apply)*

- My source of income has not been impacted
- I have received unemployment benefits
- I lost income and I do not qualify for unemployment
- My employer reduced my hours which resulted in decreased income
- I chose to reduce my hours to provide child or elder care in my home
- I have been unable to work due to increased child or elder care responsibilities
- I am self-employed and my income has decreased since the pandemic began
- I am self employed and could get PUA but did not qualify for DUA
- I own a business and I need financial help sustaining it or I have gone out of business
- I did not receive a raise or a bonus compared to receiving a raise or a bonus in prior year(s)
- I lost pay due to quarantining
- I prefer not to answer this question

5. Are you an Essential Worker?*

- Yes
- No

6. If you are an Essential Worker (under the Governor's COVID orders), what is your job category?

- Child care/dependent care
- Education (teacher/administrator)
- Financial Services
- Food service (catering, prepared food, pantry, other than restaurant)
- Grocery store/retail (including liquor, pet)
- Restaurants
- Healthcare
- Public Works and Infrastructure Support Services
- Government (all categories)
- Law Enforcement, Public Safety, First Responders
- Transportation, Utilities, and/or Infrastructure
- Communications and Information Technology

- Other Community, Education, or Government-Based Operations and Essential Functions
- Manufacturing
- Residential/Shelter Facilities and Services
- Construction-Related Activities

7. How much weekly income have you and your household been losing as a result of the COVID-19 virus outbreak?*

- I have not experienced a loss of income
- Less than \$250
- \$250-\$499
- \$500-\$749
- \$750-\$999
- \$1,000 - \$1,999
- \$2000+
- I prefer not to answer this question

Health: Access to Medical Services and Direct Covid Impact / Prevention

8. Are you having difficulty accessing medical healthcare?*

- Yes
- No
- I am currently not seeking medical healthcare

9. If you are having difficulty accessing medical health care which of these apply? (Select up to 3)

- I am not able to get healthcare that I need
- I am not able to get my prescription medication(s)
- I lost medical insurance during COVID-19
- I feel that my overall health is deteriorating
- I am unable to access telehealth
- I have put off medical treatment
- I am having difficulty accessing feminine hygiene products
- None of these apply
- I prefer not to answer this question

10. Do any of these mental health issues apply to you as a direct result of COVID-19? (Select all that apply).*

- I do not have access to therapy or psychiatric services

- I am experiencing anxiety and depression
- I am feeling isolated
- I have thought about suicide
- I am concerned about mental health issues facing family members
- None of these apply
- I prefer not to answer this question

11. Are you having difficulty accessing mental health care?*

- Yes
- No
- I am currently not seeking mental healthcare

12. If you are having difficulty accessing mental health care which of these apply (Select up to 3)

- I am unable to find a mental health care professional who will see me
- I am unable to find a mental health professional who will take my insurance
- My mental health care provider is not available to see me
- I do not have access to telehealth
- I am having difficulty accessing my medications
- I had to delay seeking treatment for my mental health condition
- I am having difficulty affording necessary mental health treatment due to not having insurance, not having adequate insurance, or because of cost
- None of these apply
- I prefer not to answer this question

13. If you are pregnant or recently had a baby, which of these apply to you?*

- This question does not apply to me
- I cannot or choose not to access prenatal care at this time
- I have been told I might not be able to have support people (my partner, doula, etc) with me during delivery
- I would prefer a home birth if this was a possibility
- I don't have access to abortion services
- I can not or am choosing not to access lactation support.
- I can not or am choosing not to access pediatric care for my baby.
- I am having a difficult time securing formula or diapers for my baby.
- Other

14. Did you/Do you have COVID-19 or symptoms?*

- Yes and I tested positive

- Yes and I tested negative
- Yes but I did not get tested
- No

15. If you did have COVID-19 or symptoms of COVID-19 please select all that apply:

- I continued to work because I could not get paid time off
- I was hospitalized
- I recovered but I am still experiencing lingering health effects of COVID-19
- Other...

15a. If other, please provide a short explanation

16. Will you be vaccinated for COVID-19 if the vaccine is available for free?*

- Yes
- No
- I have already been vaccinated
- I prefer not to answer
- 16a. If you will NOT be vaccinated for COVID-19 please select all that apply:
- The vaccine is not easily accessible to me (due to transportation, locations, scheduling, etc.)
- I do not have enough information about COVID-19 and/or the vaccine to make an informed decision
- I am skeptical of the vaccine
- The history of the United States' medical mistreatment in communities of color
- I prefer not to answer this question
- Other...

16b. If other please provide a short explanation:

Home and Family Life: Safety / Food / Dependents

17. Have the stay at home advisories led to an unsafe situation for you in your home?

(The answer to this and all questions will remain on your computer until you hit the submit button at the end of the survey.)*

- Yes
- No
- I prefer not to answer this question

17a. If yes, please provide an explanation:

18. Are you having difficulty accessing food? (Check all that apply)*

- No
- I need food and can't afford it
- I need food but I do not qualify for EBT
- My family is accessing food through school sources
- My family is accessing food through other organizations
- I prefer not to answer this question
- Other

18a. If other, please provide an explanation:

19. Has your overall workload changed due to COVID-19?*

- Yes
- No
- This question does not apply to me

19a. If your overall workload has changed please select all of these that apply:

- I am working remotely putting in more work hours
- I work remotely at home while also caring for others (children, older adults, etc.) at home
- I work remotely at home while assisting student(s) with virtual learning at home
- I am spending more time caring for family members now than I did before COVID
- Other...

19b. If other, please provide an explanation:

20. Do you have children living with you at this time?*

- Yes, I have child/ren under 21 living with me
- I have adult "child/ren" 21+ living with me
- No

21. If you have child/ren under 21 what is most concerning to you about the impact of COVID-19 on your child/ren? (Select up to 3) (Skip this question if it does not apply.)
first concern, second concern, third concern

- I do not have concerns
- Mental health
- Social and emotional development
- Educational access and progress
- Access to specialized educational services (ex: SPED, EIP, ELL, 504, etc.)

- Screen time
- Access to healthy food and good nutrition
- The lack of sports and/or physical activity
- My child has stopped attending school
- My child has dropped out of school to work

21a. If other than listed above, please provide an explanation:

22. If you are caring for children living with you at this time what assistance do you need to provide that care? (Check up to 3) (Skip this question if it does not apply.)

first need, second need, third need

- Child care services so I can continue working
- Assistance homeschooling my children
- Reopening of schools
- Assistance caring for a child with an IEP and/or special needs
- The ability to take paid leave from my employment
- I need WIFI service/internet access which is not available in my area
- I need WIFI service/internet access but I can't afford it
- COVID-19 vaccinations

22a. If other than listed above, please provide an explanation:

23. If you are caring for adults living with you at this time what do you need to provide that care? (Check all that apply) (Skip this question if it does not apply)

first need, second need, third need

- In home medical care for older adults
- Assistance caring for a person with a disability in my home
- Assistance providing care for a person(s) in my home
- Home healthcare or a VNA, Aide, PCA
- I need WIFI service/internet access which is not available in my area
- I need transportation to access services and other needs
- The ability to take paid leave from my employment
- I do not have older adults living with me at this time

23a. If other than listed above, please provide an explanation:

24. Have changes in child care, education/school directly impacted your employment status?*

- Yes

- No
- This question does not apply to me

24a. If yes, how have changes in child care, education/school directly impacted your employment status? (Select all that apply)

- I lost my job because I had to take off time to be home with my child(ren)
- I have been furloughed because of child care
- My employer reduced my work hours because of child care
- I am considering reducing my work hours
- I have already reduced my work hours which resulted in lost wages
- I have chosen to reduce my hours using vacation time, PFML, FFCRA, etc.
- I am considering quitting my job
- It has affected my performance and/or my performance rating
- This question does not apply to me
- None of the above

24b. If other, than listed above please provide an explanation:

25. Do any of these housing issues apply to you as a direct result of COVID-19? (Select all that apply)*

- I am behind on my rent or mortgage
- I have become homeless and I need shelter
- I am in a shelter
- I can not find affordable housing
- I am on a waitlist for subsidized housing
- I have been evicted or I have been threatened with eviction
- None of these apply
- I prefer not to answer this question
- Other...

25a. If other than listed above, please provide an explanation:

26. If you and/or your family need assistance, which of these would help you most? (Select up to 3)

first need, second need, third need

- Affordable housing
- Eviction protection
- Access to low interest business loans
- Access to low interest personal loans

- Food programs (i.e. SNAP, WIC, etc.)
- A one-time payment to help with expenses
- Deferment/more time to pay bills
- Domestic violence protection/shelter
- A Moratorium on mortgages, rents and utility bills
- Emergency home repair
- Access to transportation
- A Moratorium on student loans
- Job training to redirect my career
- A \$15 minimum wage
- Paid leave

26a. If you need assistance other than what's listed above, please provide an explanation:

27. Have you contacted anyone in the local, state, or federal government about any of your concerns?*

- Yes
- No
- I prefer not to answer this question

28. If you are a woman of color, do you feel that the COVID-19 pandemic has affected you differently because of your race?*

- Yes
- No
- I am not a woman of color
- I prefer not to answer this question

28a. If you feel that COVID-19 has affected you differently because of your race please explain:

Demographics

This information will help determine how people are being impacted

D1. Do you live in Massachusetts?*

- Yes
- No

D1a. If yes, what city or town do you live in?*

D2. What is Your Age Range?*

- Under 18
- 18-24
- 25-34
- 35-44
- 45-54
- 55-64
- 65-74
- 75-84
- 85+
- I prefer not to answer this question

D3. What is Your Gender Identity?*

- Male
- Female
- Gender Non-Conforming / Non-Binary
- Other
- I prefer not to answer this question

D3a. If other, preferred identity?

D4. What is Your Race/Ethnicity? (Check all that apply)*

- White
- Black
- Black (non-Hispanic)
- Latino/Hispanic/Latinx
- Asian
- Native American
- Native Hawaiian or Pacific Islander
- Other/Unknown
- I prefer not to answer this question

D5. What is Your Marital Status?*

- Single
- Married
- Domestic Partner
- I prefer not to answer this question
- D6. Parental/Guardian Status

- Co-Parent/Guardian
- Single parent/Guardian
- I am not a parent

D7. What is Your Annual Household Income Range? *

- Less than \$25,000
- \$25,001 - \$49,999
- \$50,000 - \$74,999
- \$75,000-\$99,999
- \$100,000-\$124,999
- \$125,000-\$149,999
- \$150,000-\$174,999
- \$175,000-\$199,999
- \$200,000+
- I prefer not to answer this question

D8. Are you registered to vote in Massachusetts*

- Yes
- No
- I prefer not to answer this question

D8a. If you are not registered to vote in Massachusetts, Why?

If you would like to receive our monthly newsletter and the report of this survey, please provide your email address, and we will also be able to include you in future outreach and keep you informed of the Commission's initiatives. (optional)