

**UMASS  
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**"We are not heroes because it is not a choice":**

**A Survey of Essential Workers' Safety and  
Security During COVID-19**

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## Introduction

While most of the country shelters in place due to the COVID-19 pandemic, essential workers continue to do their jobs — often at great personal risk to themselves and to their families. Essential workers sustain our ability to live during this crisis, providing critical food, shelter, transportation, and health. They work in a range of industries from healthcare and transportation to social services and public safety.<sup>1</sup> This study describes the experiences of essential workers in Western Massachusetts, providing some of the first survey data to capture the safety and security concerns of these critical workers in the time of COVID-19.

Massachusetts has been hit extremely hard by coronavirus. As of late April, Massachusetts had the third highest COVID-19 case count of all states, with over 60,000 cases and 3,400 deaths.<sup>2</sup> Western Massachusetts has not been spared. Two cities in Western Massachusetts rank among the cities with the highest death rates in the country: Springfield at #7 and Greenfield at #11. Boston stands at #10.<sup>3</sup>

In this project we looked to learn more about the experiences of essential workers in the four counties of Western Massachusetts (Hampden, Hampshire, Franklin and Berkshire). We focus on their experiences of health and safety at work during this unprecedented crisis. We also wanted to better understand their needs and their ability to secure adequate food, housing, childcare, and sick care for themselves and their families.

In order to answer these questions, we administered an online survey through Facebook. The survey was promoted with paid advertising targeting Western Massachusetts workers, as well as shared by essential workers themselves. Available in both English and Spanish, the survey received over 1,600 responses from workers who were at work between April 17, 2020 to April 24, 2020.

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<sup>1</sup> COVID-19 Response Reporting. (n.d.). Retrieved April 27, 2020, from <https://www.mass.gov/info-details/covid-19-response-reporting>

<sup>2</sup> The New York Times. (2020, March 3). Coronavirus in the U.S.: Latest Map and Case Count. Retrieved April 30, 2020, from <https://www.nytimes.com/interactive/2020/us/coronavirus-us-cases.html#states>

<sup>3</sup> The New York Times. (2020, April 23). Five Ways to Follow the Coronavirus Outbreak for Any Metro Area in the U.S. Retrieved April 27, 2020, from <https://www.nytimes.com/interactive/2020/04/23/upshot/five-ways-to-monitor-coronavirus-outbreak-us.html>

## Key Findings

- Over half of all essential workers surveyed— 51%— report that they do not feel safe at work.
- Their assessment appears to be warranted: 65% are unable to practice social distancing, 29% did not receive any COVID-19 transmission training, 21% lack masks, 17% lack hand sanitizer, 8% lack regular hand washing, and 16% were asked by their employers to not share their health information with co-workers.
- 67% of grocery and other retail workers report feeling unsafe at work.
- Low wage workers (< \$20/hour) were 2 to 3 times more likely than high wage workers (>\$40/hour) to lack access to safety measures that reduce the transmission of COVID-19, including masks, hand sanitizer, regular hand washing, and training.
- Low wage workers report that they have been unable to meet their family's food needs (34%), housing needs (9%), and childcare needs (16%) in the last week.
- This food insecurity is concentrated among Latino workers: 38% report food insecurity, compared to 21% of white essential workers.
- For about half of respondents (52%), work has become more intense.
- Only 20% of respondents report receiving hazard pay.
- Not all essential workers receive paid sick leave (17%). Roughly half report that they are unable to use paid time off if a family member falls ill.
- Health and safety protections, hazard pay, greater enforcement of municipal ordinances, and protection of workers' rights to self-organize, are critical to improving worker safety.

## Identifying Essential Workers

As cities and states around the country began to enact stay-at-home orders in early March 2020, they exempted a subset of workers whose job is to, “protect their communities, while ensuring continuity of functions critical to public health and safety, as well as economic and national security.”<sup>4</sup> Many of these workers are in healthcare, providing direct care to impacted patients. Others are engaged in the essential work of protecting our food supply either by working in agriculture and food production, or working on the retail side supporting groceries, convenience stores and farmers markets. Workers in public safety, transportation, and public works were also deemed essential.

Respondents to our survey reflected the wide range of industries where essential workers can be found. The majority of the respondents were in healthcare. Others could be found in retail, manufacturing, transportation, and public safety. We have selected these categories to highlight because they had the greatest number of respondents in the same industry. The “Other” category comprises a range of workers across different industries: some are on the frontlines, such as social workers and therapists who continue daily to care for clients, while others such as bankers support the critical infrastructure needed to maintain safety and basic services.

Table 1: Survey Respondents by Industry

All Respondents	n=1629
Healthcare	n=733 (45%)
Grocery and Other Retail	n=255 (15.7%)
Manufacturing	n=97 (6%)
Transportation, Construction and Utilities	n=111 (6.8%)
Public Safety	n=58 (3.6%)
Other	n=374 (23%)

Almost three quarters (72%) of our survey respondents were women. This reflects the large number of healthcare professionals that responded. Among healthcare workers 90% of respondents were women. Grocery and other retail stores were also female dominated, with women making up 64% of those workers. Other key industries that we heard from were male dominated

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<sup>4</sup> Guidance on the Essential Critical Infrastructure Workforce. (2020, March 19). Retrieved April 30, 2020, from <https://www.cisa.gov/publication/guidance-essential-critical-infrastructure-workforce>

and included manufacturing (56% male), transportation and construction (74% male) and public safety (60% male).

Of the survey respondents, 90.8% were white non-Latino, 1.7% were black non-Latino, 5.7% were Latino any race, and 1.7% were “Other”. The “Other” category combines groups that had small sample sizes, including Asian, Pacific Islander, and American Indian. Ninety-four percent were US-born.

Respondents represented a wide age range, with 30% under the age of 34, and 22% over the age of 55.

We also asked respondents about wages. Forty-seven percent earned under \$20, 26% earned \$20-\$30, 14% earned \$30-\$40, and 12% earned over \$40 an hour. Among all respondents, 20% were union members.

Survey researchers have increasingly used social media platforms, such as Facebook, to capture emergent or hard-to-reach populations.<sup>5</sup> Targeted advertisements allow researchers to reach specific groups of people that would be hard to connect with through more traditional sampling methods. Furthermore, this approach provides a way to connect with workers at a time when statewide stay-at-home orders have eliminated the possibility of field research. Focused on Western Massachusetts residents, the survey’s advertisement only asked potential respondents whether they were currently working. Neither the advertisement nor the screening process suggested that the survey focused on safety issues.

A key issue in survey data is how well the characteristics of the survey respondents compare to the population — in this case essential workers in Massachusetts during COVID-19. Because statewide closures are unprecedented, prior research has not analyzed the demographics of essential workers. To estimate the population, we use the list of essential services ordered by Massachusetts to identify industries that are allowed to operate during the pandemic. We then use the American Community Survey (ACS) to estimate demographics of essential workers. Many demographic variables were similar between the ACS and our survey, including, income, race, and age. We do observe some differences in our survey, with more women and healthcare workers in our sample; however, as we describe below, these traits do not appear to drive our results. See the Methodological Appendix for details.

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<sup>5</sup> Schneider, D., & Harknett, K. (2019). What’s to Like? Facebook as a Tool for Survey Data Collection. *Sociological Methods & Research*. <https://doi.org/10.1177/0049124119882477>

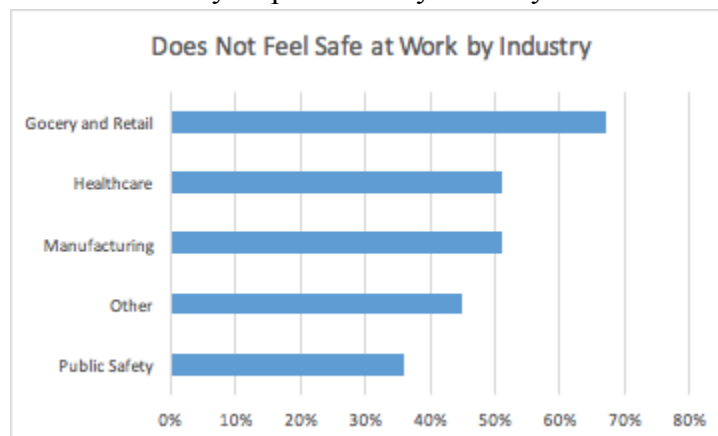
## Safety at Work During COVID-19

Every day that essential workers go to work they risk COVID-19 exposure. These risks multiply without proper safety measures. Healthcare workers, especially, have gained national attention for their lack of Personal Protective Equipment (PPE). Stories of improper protection for healthcare workers have flooded the media, with workers describing the dangerous conditions that they face on the job.

This survey reveals a concerning finding - it is not only healthcare workers who feel unsafe at work. Over half of all essential workers surveyed — 51% — report that they do not feel safe on the job. Some groups of workers feel even less safe than healthcare workers. Notably, grocery and other retail workers report feeling particularly unsafe — 67%. Over half of transportation, construction, and utility workers, as well as manufacturing workers report not feeling safe. Among “other” industries, which represents a large range of workers, 44% of workers report feeling unsafe. Public safety officers report the least safety concerns, but even among this group 36% report feeling not safe at work.

The concerns these workers express are not overblown. On April 30th, 2020 a Walmart in Worcester, just 30 miles to the east of the region we surveyed, was ordered to close after 23 employees tested positive for COVID-19.<sup>6</sup> That one location employs about 400 workers who are currently being tested.

Chart 1. Safety Experiences by Industry



<sup>6</sup> 18 more Walmart store employees test positive for COVID-19, bringing total to 41. (2020, April 30). Retrieved April 30, 2020, from <https://www.wcvb.com/article/worcester-walmart-store-ordered-closed-after-23-employees-test-positive-for-coronavirus/32321303>

Workers report widespread failures to engage in basic safety practices. These lapses in safety practices occur across multiple industries, from transportation to manufacturing to grocery workers. Twenty-nine percent report that they received no training on how to prevent COVID-19 transmission. Sixty-five percent say that they do not have the ability to social distance at work. This is particularly concerning, because many report that they also are unable to practice other basic safety measures, including access to regular hand washing (8%), employer-provided masks (21%), and hand sanitizer (17%). Similarly, 12% reported that their employers do not encourage them to stay home if they feel sick. Another 16% report that their employer had asked them to not share with their coworkers or others if they have COVID-19.

Low wage workers face more dangerous conditions than high wage workers. Across income levels, essential workers were unlikely to be able to practice social distancing. However, low wage workers were far less likely to have access to safety measures that reduce the transmission of the disease when social distancing is not possible. They were 2 to 3 times more likely to not have access to masks, sanitizer, training, or regular hand washing. Not surprisingly, low wage workers reported feeling less safe at work than high wage workers. While 44% of workers earning over \$40 an hour report not feeling safe, this percentage increases by ten points to 54% for low wage workers.

Table 2. Safety Experiences of Low and High Wage Workers

	<b>Low wage— under \$20</b>	<b>High wage— over \$40</b>
Does not feel safe	54%	44%
No social distancing	66%	70%
No training	35%	15%
Not provided mask	25%	11%
No hand sanitizer	21%	6%
No regular hand wash	10%	3%

Low wage workers often lack the option to quit if they feel unsafe. With little savings, low wage workers depend on their paycheck — walking away can feel like it is not an option. One worker reports:

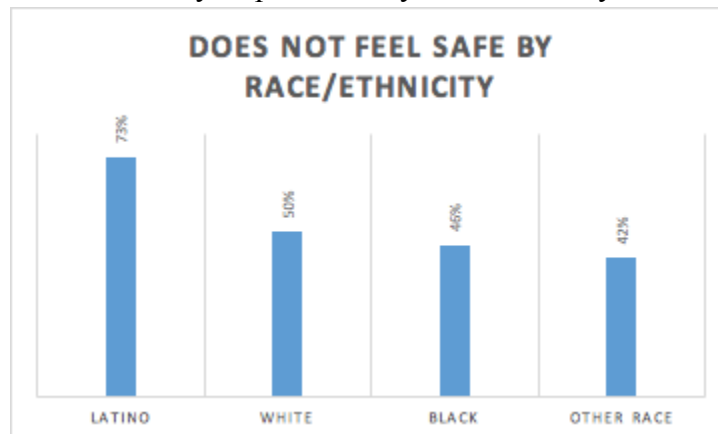


*I go to work 6 days a week. I go in after all employees have left to clean and disinfect the entire bank. I do 6 a night. When I am home I do not leave my house for anything. I get all food/supplies delivered. What would improve my situation would be to not be working so I can stay home, as I'm quite afraid to leave my house now. But that's not financially possible.*

Another succinctly writes, *“We are not heroes because it is not a choice.”*

Latino workers disproportionately work in these low wage jobs — 70% of Latino essential workers earn under \$20 an hour, compared to 45% of white essential workers. In addition, Latino workers also face other obstacles, including being less likely to have health insurance or paid sick days. These discrepancies mean that Latino essential workers are particularly likely to feel unsafe at work.

Chart 2. Safety Experiences by Race/Ethnicity



Forty-nine percent of workers report that they do feel safe at work. These workers tend to be higher wage workers, and the qualitative responses suggest a few trends. Many of these workers report being managers or working in white collar office jobs. Some acknowledged how lucky they feel to be in a safer position. One nurse writes, *“I’m fortunate enough to be on the better side of healthcare but am supporting my team who is at the bedside with COVID patients.”* Another writes, *“Given the circumstances I am very lucky.”*

Several industries show particularly concerning safety practices. About a third of transportation workers report that they don’t have the ability to regularly wash their hands, no access to hand sanitizer, and no mask provided by the employer. Sixty percent report that they are unable to practice social distancing at work, making these basic safety practices even more critical to their health.

One bus driver respondent described this situation explaining:

*All of the buildings we used to go to on campus are closed, as well as stores and restaurants. We can't wash our hands because of this (but we do have sanitizer) and bathroom breaks are so much more difficult than they already were.*

One group of workers stood out as having particularly severe safety concerns: those working at grocery and retail stores. They described how the safety challenges they face on the job come from a high level of interaction with a public who may not always be following stay-at-home guidelines and rules for social distancing in public spaces— and employers who may not step in to enforce them. A convenience store worker explains:

*The part that makes me feel unsafe is the customers. People are only supposed to come out for essential things and that is not the case. People that are staying at home come in for a cup of coffee five times a day (make it at home). People do not know the difference between what they want and what they need.... About 50% of guests have no concept of 6 feet. They think because our backs are to each other it's fine... or just quickly getting a coffee it's ok to not be within 6 feet of each other.*

Another convenience store respondent echoes this same concern saying:

*I see a lot of the same people coming in several times a day because they're bored, they want their lottery tickets, they're meeting up with friends, etc. The customers are mostly wearing masks and gloves, but usually not properly, and very few stand 6 feet away from other people.*

A hardware store employee similarly explains:

*People staying at home going to a hardware store and buying bird food is not really essential and it's putting us at risk.... Customers don't seem to care about this virus that's going around making us workers not feeling safe.*

Not all of the safety concerns workers experienced were from customers, however. Others highlighted the lack of concern and clear direction they felt from their employer. One respondent said:

*I work in a commercial laundry facility, where we wash dirty uniforms of people who are deemed essential. That means water and sewer, fire department, and many more. I don't feel my company takes enough precaution when transporting and cleaning the clothes.*

A direct care worker working in a residential human services agency said that it would help, “*If our company would be more transparent about positive COVID cases.*”

A health care worker explained:

*My employer has said to work unless you have a fever. We are wearing surgical masks longer than we should and not using N95 respirators. We have been given mixed messages about when to stay home and when to get tested.*

Another worker describing the lack of clear direction said:

*Managers are constantly making changes in policy and procedures and not telling us. It's frontline workers that have to explain changes and new policies to customers, and this adds to an already stressful work environment.*

Large numbers of survey respondents wrote that their employers did not supply adequate masks, sanitizer and other supplies. A personal care assistant describes:

*I work as a PCA. We cannot get a hold of hand sanitizer, we can't get any cleaning products to protect my client from nurses and other PCAs coming in. Going to the store for her is scary because we don't have things available to protect us except a cloth mask. I wish the main office would provide all PCAs the things needed.*

Many report frustration with multiple parties. They are frustrated with customers who do not wear masks or who appear to be purchasing non-essential items. They are frustrated with their employers, some of whom have not 1) required customers to abide by safe guidelines, 2) provided adequate protective gear and support, or 3) clearly communicated safety protocols. Some also expressed frustration with state officials for not stepping in to clearly support workers' safety.

A worker of a large big box retail store sums up how actions by customers, employers, and government officials interact to create a dangerous situation:

*There are way too many people being let into the building at one time when there is a city rule saying there's supposed to be a limit of 300 INCLUDING the workers..... The City of [omitted] Health Department needs to step up and take notice and stop the spread of this disease inside of the local [omitted employer name]; it's dangerous and scary for everyone inside.*

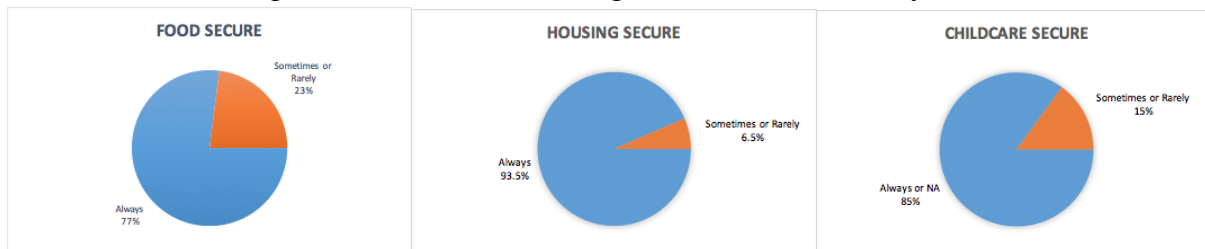
In sum, the survey data helps us to better understand the safety experiences of essential workers. Importantly, over half of essential workers report feeling unsafe. Their assessment appears to be warranted—substantial numbers report that they are unable to practice social distancing and that they do not have adequate equipment or training to prevent virus transmission. The situation is the worst for low wage workers and Latino workers. We also see that grocery and retail workers report particularly high levels of dangerous conditions. These workers experience frequent customer interactions, but do not have consistent access to gear or training. Workers identify multiple ways that could improve their safety, including actions by customers, employers, and state officials.

## The Security of Essential Workers

Although essential workers earn a paycheck, a substantial minority still face basic security issues, including inadequate food, housing, childcare, and health support.

The survey asks workers if they have been able to adequately provide food for their family during the pandemic. Although 77% responded that they always were food secure, 23% reported that they were only sometimes or rarely able to meet their food needs. This number is far worse among low wage workers. An alarming 34% of workers earning under \$20 per hour report food insecurity. This insecurity is concentrated among Latino workers: 38% report food insecurity, compared to 21% of white essential workers.

Chart 3. Workers Experiences of Food, Housing and Childcare Security



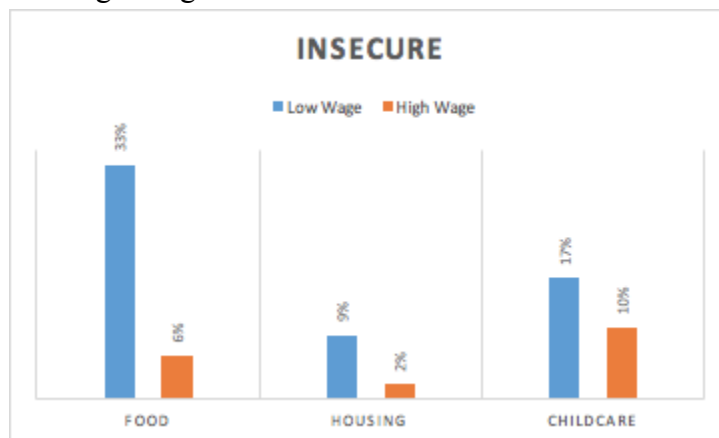
Women workers also reported experiencing food insecurity at higher rates than men. Overall 24.2% of women reported that they were only rarely or sometimes able to meet their food needs as compared to 20.6% of men. This gender difference was amplified among Latino respondents where 43% of Latina women were not able to always meet their food needs. One woman explained in Spanish:

*We are risking infecting our family by working, and they don't give us anything extra in our paychecks to be able to buy more food. What we earn is for paying rent, electricity, insurance, and the rest is barely enough to buy food.*

We see similar patterns among childcare insecurity. Fifteen percent reported that they were unable to always meet their childcare needs. This number jumps to 32% for Latino workers.

Among all essential workers in the survey, an additional 7% were unable to meet their family's housing needs. This number jumps to 10% of low wage workers, and 21% of Latino workers.

Chart 4. Workers Food, Housing and Childcare Security for Low and High Wage Workers



Even among workers who may be able to meet their childcare needs, the reality can challenge the whole family as workers struggle to meet the demands of their job and to find ways to protect their children from exposure to the virus. One retail worker making under \$20 per hour explains:

*I am currently still working and so is my husband, therefore my 10 year old is with his grandparents. To keep everyone safe he's quarantined with them and I haven't seen my son in a month."*

In addition to food, housing, and childcare insecurities, some essential workers also face health care insecurities. By reporting to work, these essential workers face exposure to COVID-19. However, they do not all have adequate healthcare or sick leave. Four percent report that they did not have health insurance. Transportation workers reported having the highest uninsured levels at 9%. Those that lack health insurance are clustered in low wage work. Seven percent of all low wage workers report no health insurance, while no high wage respondents are uninsured.

Fifty-eight percent of respondents have insurance through work. While these workers are able to rely on their health insurance should they fall ill, work-provided insurance also means that they are tethered to their jobs. If they quit due to unsafe conditions, they will likely lose their insurance.

An additional 17% report that their employer does not provide sick days. Again, these numbers are greater for low wage workers (23%) and Latino workers (33%). And, if a family member falls

ill, only about half (49%) report that they are allowed to use paid time off to care for sick family members.

One way that some employers have tried to compensate workers for the increased health risks they are exposed to is through hazard pay. Only about 20% of respondents reported receiving hazard pay, with the majority of these (56%) working in grocery or other retail industries. Among those workers who are receiving hazard pay, however, there was little difference in levels of reported food insecurity (19.9% v. 20.9%), suggesting that the current amount provided is not enough to improve a worker's ability to meet their basic needs.

The qualitative responses indicate that many workers feel that they should receive hazard pay to compensate for increased risk and workload they are experiencing. One writes:

*I feel that staff should receive hazard pay as we have furloughed some staff but many of my staff are working to make sure the people we support, developmentally delayed, are safe and taken care of during this time.*

Another agricultural worker says:

*I know that margins are so slim in farming and my employer is already paying me more than he pays himself, but some sort of supplemental hazard pay/compensation would be so helpful. I usually have 2 jobs, and one is non-essential so my overall weekly hours have been reduced, but not enough for me to be eligible for unemployment benefits. It's putting a huge financial strain on me, and if I do get sick, it will be devastating. I am very afraid for the financial implications this whole situation could have for me, but I feel very proud to be doing the meaningful work I am doing, and hopefully I can keep myself protected.*

## **Intensity and Stress at Work**

The intensity of work has changed due to the pandemic. For about half of our respondents (52%), work has become more intense. This appears to be particularly the case for healthcare (58%) and grocery and other retail workers (67.2%). Many of these same workers report longer hours as well. However, about 19% report that work has become less intense.

Qualitative responses help to illustrate why work has become more intense for some. One grocery worker reports: “*Shoppers are becoming more belligerent and less friendly. I cry almost every shift. Please be kind to retail workers.*”

Another writes: “*Many people wear bandanas and joke about holding up the store - which is not cool to experience when you are a young woman and a cashier.*”

One worker reflects: *“We're overloaded with customers, but we're trying our best. We're exhausted — essential feels a lot like sacrificial.”*

Another says: *“We are all feeling burned out.”* Similarly, a worker states, *“I just want a day off. I'm tired.”*

Another describes that they:

*Wish customers knew how hard we are trying and how stressed we are. I've had a couple of days that I've gone home and just cried the whole way home because I am so stressed and just keep getting yelled at and have people take their frustrations out on me day after day. I get yelled at by a manager who isn't even my store manager. I'm from a different store just helping her out. I get yelled at by customers when something isn't available or when an item gets cancelled or because, god forbid, we don't have any elastic or sewing machines. We are trying so hard and none of us signed up to be an essential worker.*

Another writes:

*Work is busier than ever but more stressful because of the online ordering with curbside pick up and phone orders, while still managing the customers inside the store!*

Healthcare workers also express high stress. One writes:

*None of us signed up for this. Yes, we are healthcare workers and of course we will take care of these patients because we are healthCARE workers. But this is very different, it is uncertain, and it is scary. The hospital calls us “heroes” yet apparently doesn't think we deserve hazard pay. Our sacrifices, coming into work everyday to a Covid positive unit, uncertain of what effect this will have on us/our family - seems to be undervalued and underappreciated. As if just because we're healthcare workers, we're automatically expected to do this. Expected to put any concern for ourselves and our families aside. And because we're “expected” to do this, we don't deserve hazard pay or proper compensation. This doesn't just take a physical toll; this isn't only physically exhausting. This job has become emotionally and mentally draining-- we are getting burned out at an increasing rate.*

## Recommendations

### *Health and Safety Protections*

Over half of the workers who responded to our survey did not feel safe at work. Many of them are in occupations that put them at greater risk of contracting COVID-19 and do not have what they need to do their jobs safely. At a minimum all employees, without exception, should have access to necessary amounts of PPE and testing at no cost to the employee.

The Occupational Safety and Health Administration (OSHA) is the federal agency whose mission it is to protect workers' health and safety. While the agency should be at the heart of efforts to protect workers, declines in funding and the number of inspectors have left it ill positioned to do so. According to the National Employment Law Project, at the start of 2020, OSHA had only 862 inspectors, the lowest number since 1975.<sup>7</sup> To better protect workers, the agency needs to be better supported, allowing it to provide stringent expanded health and safety standards that are applied to all workers as well as improved enforcement. Current OSHA rules are less stringent than in previous outbreaks such as the 2009 H1N1 flu pandemic, only requiring that employers consult Center for Disease Control (CDC) guidance, rather than requiring that they follow it. This lower standard makes it less likely that inspectors will actually issue any citations.<sup>8</sup>

Current OSHA directives prioritize investigating complaints at “high and very high exposure risk jobs, such as hospitals, emergency medical centers, and emergency response facilities.”<sup>9</sup> For other industries, complaints of health and safety violations only trigger a letter to the employer detailing the complaint and informing them that the complaint, “will not normally result in an on-site inspection.”<sup>10</sup>

Our research shows how critical it is that OSHA expands its enforcement directives beyond healthcare settings. We found that while healthcare workers may experience high levels of stress at work, they are not the group that reports feeling the least safe at work. These workers were much more likely to have access to other safety measures like training, masks, and sanitizer when social distancing was not possible.

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<sup>7</sup> Report: Number of Federal Workplace Safety Inspectors Falls to 45-Year Low. (2020, April 28). Retrieved April 30, 2020, from <https://www.nelp.org/news-releases/number-federal-workplace-safety-inspectors-falls-45-year-low/>

<sup>8</sup> Grabell, M., Yeung, B., & Jameel, M. (2020, April 16). Millions of Essential Workers Are Being Left Out of COVID-19... Retrieved April 30, 2020, from <https://www.propublica.org/article/millions-of-essential-workers-are-being-left-out-of-covid-19-workplace-safety-protections-thanks-to-osha>

<sup>9</sup> Department of Labor Interim Enforcement Response Plan for Coronavirus Disease 2019 (COVID-19). (2020, April 13). Retrieved April 30, 2020, from <https://www.osha.gov/memos/2020-04-13/interim-enforcement-response-plan-coronavirus-disease-2019-covid-19>

<sup>10</sup> Department of Labor Interim Enforcement Response Plan for Coronavirus Disease 2019 (COVID-19). (2020, April 13). Retrieved April 30, 2020, from <https://www.osha.gov/memos/2020-04-13/interim-enforcement-response-plan-coronavirus-disease-2019-covid-1>



As a number of scholars have pointed out, one of the best ways to enable workers to feel more safe is by empowering them to identify hazards and develop the solutions they need to protect themselves.<sup>11</sup> Workers themselves should be involved at every step in setting safety standards and determining specific workplace protocols.

### *Emergency Paid Sick Time*

There is no doubt that essential workers are at higher risk of COVID-19 exposure. There is also no doubt that COVID-positive cases can spread quickly through workplaces, as we saw with the hundreds of workers who contracted COVID-19 at the Smithfield meat plant in Sioux Falls, South Dakota in early April 2020.<sup>12</sup> To keep workers safe, it is urgent that all essential workers have access to a robust paid sick leave program that makes it easy to take time off to care for themselves or a family member.

There are some existing provisions that provide sick leave benefits to workers in Massachusetts, but these do not go far enough. One of the most important of these is the Earned Sick Time Law. Passed in 2015, this law requires employers with more than 11 workers to offer paid sick leave. Workers are provided with one hour of paid time off for every 30 hours worked, up to a maximum of 40 hour per year in order to care for themselves or a sick family member. Similarly, at the federal level, some essential employees may receive access to paid sick leave under the Families First Coronavirus Response Act (FFCRA).<sup>13</sup> This legislation requires that employers offer up to two weeks of paid leave if a worker tests positive or has to be quarantined. Again, this legislation is limited, only applying to workplaces with more than 500 workers. According to the Center for American Progress this would exclude roughly 1.8 million workers in Massachusetts.<sup>14</sup> While together these benefits may put Massachusetts workers ahead in some respects, the policies exclude far too many essential workers.

This was clear among our survey respondents. Seventeen percent reported that they do not have paid sick leave. Paid sick leave allows workers to protect their health and the health of their coworkers, without having to weigh what losing a paycheck may mean for basic food or housing security.

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<sup>11</sup> Callaci, B. (2020, April 26). Unsanitized: Frontline Workers Deserve More Than Hazard Pay. Retrieved April 30, 2020, from <https://prospect.org/coronavirus/unsanitized-frontline-workers-deserve-more-than-hazard-pay/>

<sup>12</sup> Dickerson, C., & Jordan, M. (2020, April 15). South Dakota Meat Plant Is Now Country's Biggest Coronavirus Hot Spot. Retrieved April 30, 2020, from <https://www.nytimes.com/2020/04/15/us/coronavirus-south-dakota-meat-plant-refugees.html>

<sup>13</sup> Frequently Asked Questions About COVID-19: Employee Rights and Employer Obligations. (n.d.). Retrieved April 29, 2020, from <https://www.mass.gov/service-details/frequently-asked-questions-about-covid-19-employee-rights-and-employer-obligations>

<sup>14</sup> Glynn, S. J. (2020, April 17). Coronavirus Paid Leave Exemptions Exclude Millions of Workers From Coverage. Retrieved April 29, 2020, from <https://www.americanprogress.org/issues/economy/news/2020/04/17/483287/coronavirus-paid-leave-exemptions-exclude-millions-workers-coverage/>

Legislation to expand the existing paid sick time policies to fill some of the gaps in coverage is currently being forwarded in Massachusetts.<sup>15</sup> This proposed legislation would provide workers with up to an additional 80 hours of paid sick leave to be used during a declared state of emergency or a disaster. Workers would be paid by their employers up to a maximum of \$850 per week. Employers would then be reimbursed by the state. This type of policy solution can help address critical limitations in existing paid sick leave policies and ensure that essential workers never have to choose between their paycheck and their health.

### *Hazard Pay*

The majority of survey respondents described working harder, experiencing more stress and greater risk to their personal safety. Providing essential workers with additional compensation during the COVID-19 emergency would go a long way to addressing some of the stress and inequities. These workers put themselves at risk to care and provide for our communities and their efforts should be recognized through some form of additional payment.

This additional compensation is particularly critical for the nearly one in four essential workers we heard from who described experiencing some form of food insecurity. For some low wage workers, going to work actually becomes a financial disadvantage because they are paid less than they would receive on unemployment with the additional \$600 per week provided by the Federal Pandemic Unemployment Compensation (FPUC) provision of the CARES Act.

The financial disadvantage experienced by low wage workers was described by respondents who noted that it was fundamentally unfair that their wages were less than what they would receive if they had been laid off. When asked what they want people to know about what is happening inside their workplace, one worker responded, *“That we are getting paid peanuts compared to people collecting unemployment.”* As another worker explained:

*It's not fair that we are out risking our lives and families lives to keep our job. People that are on unemployment got more and people that receive food stamps had it raised and because my employer stayed open and made us work to stay employed we should receive some kind of compensation.*

Another said, *“We should be paid more to work during this. Unemployment gets extra \$600 per week and we get nothing.”*

While some of the largest retail chains like Stop and Shop, Big Y, Target, and Walmart provided employees with some form of additional compensation beginning in early March, this practice is not required. Additionally, in Massachusetts unions that represented state healthcare workers were able to negotiate a pay increase of \$10 per hour that will remain in place through May 30th, 2020

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<sup>15</sup> *An Act Relative to Emergency Paid Sick Time* Massachusetts Bill SD. 2918. <https://malegislature.gov/Bills/191/SD2918>

as well as a one-time bonus of \$500 for workers who have not missed a day of work since the crisis began.<sup>16</sup> This benefit however, was not applied to non-union workers nor to private sector workers, and so did not address the full scope of the need.<sup>17</sup>

There are a number of current proposals at the state and federal level that aim to provide additional compensation for essential workers. At the federal level Senate Democrats have proposed a “Hero’s Fund” that would offer hazard pay of \$13 per hour up to a maximum of \$25,000 for workers earning less than \$200,000 per year.<sup>18</sup> In Massachusetts, legislation has also been proposed that would provide hazard pay for private sector workers.<sup>19</sup> Our findings show that these programs should be implemented as quickly as possible, and inclusive of workers in all industries in order to provide the greatest possible benefit.

### *Employer Enforcement of State and Local Mandates*

While non-essential businesses around the state have closed and residents have been advised to stay at home and avoid any unnecessary travel, many essential workers we heard from described the experience of regularly contending with a public who is not fully following these guidelines. They described shopping trips for items that could hardly be described as essential and failing to engage in the necessary planning to limit the number of times they come in contact with essential workers. This failure also extends to the guidelines around wearing masks in public spaces and social distancing.

When customers fail to follow these guidelines and business managers fail to enforce them, essential workers face increased risk of exposure to the COVID virus. While individuals should take it upon themselves to follow all of the state and local guidelines, workers should not have to shoulder the burden of this risk themselves. Employers and managers must take a greater role in stepping in to respond to these violations.

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<sup>16</sup> Croteau, S. J. (2020, April 15). Thousands of state health care workers to receive hazard pay amid COVID-19 pandemic. Retrieved April 30, 2020, from <https://www.masslive.com/coronavirus/2020/04/coronavirus-thousands-of-massachusetts-health-care-workers-to-receive-hazard-pay-amid-covid-19-pandemic.html>

<sup>17</sup> Solis, S. (2020, April 14). COVID-19 hazard pay for health care workers doesn't include non-union workers, some nurses. Retrieved April 30, 2020, from <https://www.masslive.com/coronavirus/2020/04/covid-19-hazard-pay-for-health-care-workers-doesnt-include-non-union-employees-some-nurses-at-long-term-care-facilities-in-massachusetts.html>

<sup>18</sup> Bolton, A. (2020, April 8). Senate Democrats propose \$25,000 hazard-pay plan for essential workers. Retrieved April 30, 2020, from <https://thehill.com/homenews/senate/491547-senate-democrats-propose-25000-hazard-pay-plan-for-essential-workers>

<sup>19</sup> An Act providing hazard pay for essential workers in the COVID-19 emergency. Massachusetts Bill HD.5031 <https://malegislature.gov/Bills/191/HD5031>

## *Support for Workers' Rights and Collective Action*

In the absence of strong protections from employers and from the state, essential workers are likely to find that collective action is a powerful vehicle to address their workplace concerns and make sure that they have the things they need to do their jobs safely.

We have begun to see some of this organizing happen with some of the largest employers like Amazon and Whole Foods, and extending to gig economy companies like Instacart that have come to play a key role since the pandemic.<sup>20</sup> According to Payday Report, which has been tracking wild cat strikes since the pandemic began, there have been 150 strikes in the months of March and April.<sup>21</sup> Some employers have retaliated against these efforts, including Amazon firing a worker who organized against dangerous conditions.<sup>22</sup>

Policy makers can support workers by making sure that their rights to collective action are protected and ensuring that workers are protected from retaliation when they voice concerns on the job.

## **On Re-opening the Economy**

Across the country, states are constructing plans on how to re-open the economy. In Massachusetts, Governor Baker appointed a 17-member advisory board to guide the plan for the Commonwealth, consisting of 10 business leaders and a mix of public health officials and municipal leaders.<sup>23</sup> This is a challenging task in an unprecedented health crisis. This research offers insight into the concerns of the people who do the work and some of the continued challenges of meeting basic safety standards among the most essential workers in the state. As Massachusetts begins to re-open, supporting the Commonwealth's workers is key to success.

## **Authors' Notes**

We thank Cedric de Leon, Renier Estevez Quintana, Tom Juravich, Katherine Maich, and Eve Weinbaum for their comments.

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<sup>20</sup> Scheiber, N., & Conger, K. (2020, March 31). Strikes at Instacart and Amazon Over Coronavirus Health Concerns. Retrieved April 30, 2020, from <https://www.nytimes.com/2020/03/30/business/economy/coronavirus-instacart-amazon.html>

<sup>21</sup> Elk, M. (2020, April 30). COVID-19 Strike Wave Interactive Map. Retrieved April 30, 2020, from <https://paydayreport.com/covid-19-strike-wave-interactive-map/>

<sup>22</sup> Weise, K. (2020, April 28). New York Attorney General Scrutinizes Amazon for Firing Warehouse Worker. Retrieved April 30, 2020, from <https://www.nytimes.com/2020/04/27/technology/amazon-fired-worker-attorney-general-coronavirus.html>

<sup>23</sup> Chesto, J. (2020, April 28). Baker appoints advisory board to guide reopening of Mass. economy - The Boston Globe. Retrieved April 30, 2020, from <https://www.bostonglobe.com/2020/04/28/business/baker-appoints-advisory-board-guide-reopening-mass-economy>

## Methodological Appendix

This survey focuses on Western Massachusetts essential workers— those going to work, not working remotely or laid off— during the COVID-19 pandemic.

This project uses targeted Facebook advertisements to recruit participants. Facebook has the largest user base of any social media platform, with over 221 million users in the United States. A growing body of research uses Facebook and other social media platforms to survey hard-to-reach populations. Probability sampling can be difficult for new, emerging, or hidden populations. Facebook’s marketing program allows advertisements to target specific groups of people, which enabled us to study emergent working conditions for a new category of worker: essential workers during the COVID-19 pandemic. This on-line strategy was particularly important to studying COVID-19, since in-person interviews were not safe.

We targeted Facebook advertisements specifically to residents of Western Massachusetts. The survey was open for one week, April 17 to April 24, 2020. The text said, “Are you at work? We want to hear from you!” Upon clicking, the respondent was directed to a survey within the University of Massachusetts *Qualtrics* account that housed the *Western Mass COVID-19 Essential Workers Survey*. Respondents were invited to participate if they answered “yes” to two screening questions: “Are you working as of April 15, 2020?” and “Are you working in-person (not remotely)?”. Safety concerns were not mentioned in the advertisement or the survey homepage.

How do the survey respondents compare to the population of essential workers in Massachusetts? To approximate this, we generated a list of essential industries in Massachusetts. At the federal level, the Department of Homeland Security (DHS) released guidance on essential critical infrastructure workers. The Brookings Institute identified 33 additional industry classifications that fall outside of the DHS specification, but were still likely working during the pandemic. These are largely critical manufacturing industries. The Brookings Institute estimates that combined, these industries employed roughly 34% to 43% of the total U.S. workforce before the pandemic.

Massachusetts-specific parameters were broader than guidelines released by DHS, and included work such as garden centers, funeral homes, veterinary services, hardware stores, and restaurants. We identified additional industry codes based on guidelines for essential services in the state of Massachusetts. While we typically included all employment for each industry, for restaurants we excluded front of the house occupations, such as waiters, bartenders, and hosts, because restaurants were restricted to take-out and delivery in Massachusetts. Using these industry codes, we estimated characteristics of essential

workers working in Massachusetts before the pandemic with the American Community Survey (ACS). The ACS is an ongoing survey conducted by the U.S. Census Bureau, providing demographic, employment, and other data. We used the five year survey, 2013-2018.

This method was only able to provide us with very rough estimates of essential workers' characteristics. Numerous issues make a precise employment estimation difficult. For example, some businesses were allowed to be open, but opted to close, such as many dentists and restaurants. Furthermore, although restaurants were allowed to stay open for take-out and delivery, the Massachusetts Restaurant Association reported a 93% drop in restaurant employment during April. In addition, some essential service workers were able to work from home. Some medical workers, for example, were able to do tele-medicine, and some public administration workers were able to work remotely or do a mix of in-person and remote. We are unable to capture these nuances.

While flawed, using the ACS to approximate COVID-19 related employment is currently the leading approach as we wait for more data to be released. We estimated the demographics of these workers using the ACS and then compared them to the survey respondents. Again, because the actual employment patterns during COVID-19 are difficult to pinpoint, these estimates should be used with caution.

We see that the survey is similar to ACS estimates for most demographic categories, including age, race/ethnicity, wages, and union membership.

- The mean age for ACS essential workers was 41. The survey asked age ranges, and 48% of respondents were aged 35 to 54 years.
- Race and ethnicity estimates for the ACS and survey respondents were also similar. The ACS estimates that essential workers were about 76.9% White, 6.4% Black, and 8.6% Latino for all of Massachusetts. The population of white people is greater in Western Massachusetts, and survey respondents reflected that with 90.8% White non-Latino, 1.7% Black non-Latino, and 5.7% Latino.
- The median yearly income for ACS essential workers was \$47,132, or roughly \$23 an hour for full time workers. The survey asked wage bands, with 47% earning under \$20 an hour and 26% earning \$20 to \$30 an hour.
- Union membership is another critical comparison group. Because union members may have different experiences with safety issues than workers without unions, it is important to not disproportionately sample union members. Although the ACS does not ask about union membership, we do know that 51% of public sector workers

and 7% of private sector workers in Massachusetts are union members. Twenty percent of the survey respondents were union members, which is reasonable since essential workers are a mix of public and private sector workers.

There were considerable differences between the ACS estimates and survey respondents for two variables: healthcare workers and gender.

- ACS estimates report that healthcare workers made up roughly 15% of essential services that are allowed to be open; they represented 45% of survey respondents. To account for the potential sampling difference, we made sure to present industry specific numbers when necessary. If anything, the high numbers of healthcare workers bias the results towards more safe workplaces, since healthcare workers were more likely to report that they had safety mechanisms in place (e.g., training, sanitizer, etc).
- Women represented 50% of ACS estimates and 72.5% of survey respondents. This is in part because a high number of survey respondents were healthcare workers, which is an industry dominated by women workers (the ACS shows that 76% of healthcare essential workers were women). With the exception of food security, we see little difference by gender in responses to safety questions. Therefore, the potential over-representation of women survey respondents does not substantively bias our results.

In sum, these comparisons lead us to believe that the survey sample is relatively representative of essential workers in Western Massachusetts. As more employment data and worker surveys are released in the coming months, researchers should continue to compare estimates of essential workers, building our understanding of who goes to work in a crisis.