

# California Local Health Department Actions for Worker Health and Safety During COVID-19

## Executive Summary

The COVID-19 pandemic forced many Californians to work in unsafe conditions that threatened their health and safety, with workers in essential and low-wage jobs facing the biggest risks and inequities in health outcomes, including death. Local health departments (LHDs) play a critical role in ensuring everyone has the protections needed to stay safe and healthy at work during public health emergencies. Most LHDs do not have occupational health expertise or staff, and lack the time, resources, and information about the activities they can do to support worker health during COVID-19. COVID-19 has forced health departments into unprecedented territory, and many LHDs across the state took bold and urgent moves to protect worker health. Yet there are still more actions they wish they could accomplish to protect workers in COVID-19, vaccination, and recovery, and many lessons learned from the past year.

This guide can serve as a resource for California LHDs to learn about the range of actions they can take to protect and support workers during the pandemic and beyond. We used in-depth interviews with governmental public health practitioners and community organizers to uncover key issues impacting worker health and safety during COVID-19, and to learn what additional resources and actions are needed to support workers. We review the literature and policies supporting worker health during COVID-19 in California and the US. We provide examples and case stories of innovative approaches that California LHDs took to protect workers in their jurisdiction, and offer recommendations and actions LHDs can take to protect workers.

### Recommendations for LHDs to support worker health and safety

Based on interviews with seven county LHDs, we've distilled the following eight recommendations for LHDs to protect worker health and safety during COVID-19:

1. Issue health officer orders for worker health and safety
2. Partner with Cal/OSHA district offices to manage problematic worksites
3. Develop and disseminate guidance based on local industries and worker needs
4. Develop and disseminate communications materials with trusted community partners
5. Collect, analyze, and disseminate data by work sector to identify inequities
6. Activate relationships with community partners to build power for systems changes
7. Facilitate intersectoral Health in All Policies work
8. Create worker-focused practices, programs, and services

We discuss the major barriers LHDs faced in protecting worker health during the pandemic, including inadequate public health resources, infrastructure, and capacity due to historic disinvestment and austerity, polarized political environments, pushback from employers and businesses, community mistrust of government due to immigration policy, deportations, and racial profiling, pre-existing inequities across social determinants of health, and lack of data and data transparency on occupational and workplace exposure, illness, and death.

Based on our research and interviews with LHDs, we propose state-level approaches to address the harms that workers in low-wage essential jobs in California are experiencing. Lawmakers, government agencies, and employers need to work in partnership with community organizers, worker centers, academic labor centers, unions, and advocacy organizations to advance worker protections. In this way, millions of Californians can work safely through this and future pandemics, and benefit from improved worker health and safety, economic and housing security, and recovery efforts.

### **State-level recommendations to address worker health for COVID-19 and beyond**

1. Provide an online clearinghouse of resources, templates, LHD guidances, health officer orders and ordinances, and practices for protecting worker health. Create guidance and training for how to work with the range of entities in the agricultural community. Increase the ability of Cal/OSHA and its regional offices to conduct enforcement and reinforce LHD efforts. LHDs expressed the need for increased and flexible funding during emergencies and local-assistance grants to support development of worker health programs and establish relationships with local partners.
2. Create and widely disseminate a communications campaign targeting local governments and businesses supporting the importance of public health emergency protocols and practices, in order to shift narratives and remedy polarized political environments and pushback against local public health.
3. Address pre-existing inequities across multiple social determinants of health by: Convening Health in All Policies process and actions with partner agencies to address key drivers of COVID-19 inequities amongst workers. Consider extending current policies and enacting stronger policies outlined in the [CDPH COVID-19 Health Equity Playbook](#). Support regional agencies and organizations to coordinate actions and share data at the regional level. Prioritize and assist all essential workers getting the COVID-19 vaccine by delivering vaccinations to worksites in partnership with trusted local organizations.

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