Heroes Work Here: The Experiences of Essential Workers in Ohio During the Pandemic
Essential Ohio, a coalition of organizations fighting for improved rights and protections of essential workers, in collaboration with Cleveland State University.

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The purpose of the study was to document conditions for essential workers in the state of Ohio during the COVID-19 pandemic. The study design used participatory inquiry, involving a collaborative of university researchers and those locally involved in the problem of study through community organizing and strategic use of local resources and knowledge. Data sources included a survey and oral histories on the experience of essential work during the pandemic. Data collection occurred from April through November of 2021 and included questions on respondents' experience dating as far back as March 20, 2020.

While survey findings suggest essential workers have experienced the strain of functioning in the midst of the pandemic, the data underscore effective protections and benefits available within some workplaces, particularly unionized settings, and the stark absence of protections and benefits in other work settings. The study reveals the intersecting structural dimensions that position essential workers in greater precarity due to patterns of exclusion related to gender, race and ethnicity, immigration status, and language, among other forms of discrimination, inaction, and harm.

While survey findings point to the need for greater state action to ensure the rights of essential workers, they also reveal stories of worker agency and expertise through informal practices of notifying coworkers of COVID outbreaks in work settings, enforcing protections, questioning policies of inaction, drawing on faith and spirituality, and the ongoing struggle to achieve wages and benefits commensurate with the essential nature of their work.

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**Executive Summary**

*I am the only one working full time. I also have many medical issues and I always have to decide between paying medical bills or paying the rent or [buying food]...My kids are not included in my health insurance because that would add $200 to my monthly bill and I cannot afford it...[During the pandemic] we received warnings from the school [about attendance]. The school later called me, and I tried to explain to them that I cannot be at home supervising [my children] during school hours. They did not seem to understand my reality.*

—Essential worker, Agricultural Industry

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The Context of COVID

The COVID-19 pandemic unquestionably altered all facets of human life locally and globally. In the United States alone, there have been more than 80 million cases of COVID-19, and more than 981,000 COVID-19 related deaths since January 2020 (Centers for Disease Control and Prevention, 2022). In an effort to “slow the spread,” many workplaces were forced to shut down, lay off, furlough, and even terminate employees. Schools and higher education institutions made efforts to combat the virus by transitioning to remote learning, forcing many to choose between staying home with their children and returning to work. The result has been devastating. Two years into the pandemic, governments around the world continue to struggle with policies to address the persisting threat of exposure in workplaces brought on by mutations of the virus and questions surrounding vaccination (Occupational Safety and Health Administration, 2022).

For essential workers, COVID-19 exacerbated already existing inequitable conditions in the workplace. The negative impacts of the pandemic extended outward into the home and affected economic security. It also had a harmful impact on the physical and mental health and well-being of working people and their families, as well as children’s education.

The Essential Worker

When the pandemic started, the company never closed. They gave us masks to use and trained us on how to use the masks. There was disinfectant at all doors and the bathroom and common areas. We were given a letter that was saying that we were essential workers and we had to go to work. This was in case the police would stop us.

—Essential worker, Agricultural industry

The context of the pandemic has drawn special attention to essential employees in Ohio and the nature of essential work. Although many people faced unemployment due to the pandemic, essential workers were confronted with a different challenge. Tasked with maintaining normalcy for the rest of society, this ubiquitous labor force consists of educators and healthcare workers and those working in agriculture and food production, childcare, critical retail and critical trades, transportation, manufacturing, and wastewater treatment, among other crucial industries.¹

Heroes Work Here reveals the intersecting structural dimensions that position essential workers in greater precarity due to patterns of exclusion related to gender, race and ethnicity, immigration status, and language, among other forms of discrimination, neglect, and harm. Policy reports tracking the impact of the pandemic on essential workers offer further context. Conditions of precarity are evident in that one-third of workers in front-line industries live in low-income families, many have family-care responsibilities, and many are uninsured (Rho, Brown, & Fremstad, 2020). Two-thirds of workers in

¹ The U.S. Department of Homeland Security defined essential workers as early as March 19, 2020, in relation to sustaining critical infrastructure during the pandemic. From its updated August 10, 2021, memorandum by the director of Cybersecurity and Infrastructure Security Agency (CISA), essential workers “conduct a range of operations and services that may be essential to continued critical infrastructure operations” and are defined as represented by, but not limited to, the following industries: medical and healthcare, telecommunications, information technology systems, defense, food and agriculture, transportation and logistics, energy, water and wastewater, and law enforcement. See also National Council on State Legislatures January 11, 2021, report, COVID-19, Essential Workers in the States.
Study Design

The purpose of the study was to document conditions for essential workers in the State of Ohio during the COVID-19 pandemic. The study design used participatory inquiry, involving data collection and analysis within a collaborative of university researchers and those locally involved in the problem of study through community organizing, union activities, and strategic use of local resources and knowledge. These organizations are as follows: Central Ohio Workers Center, Cleveland Jobs With Justice, Justice for Migrant Women, La Conexión, and the Office and Professional Employees International Union, Local 1794. Their geographic outreach extends across Northwest, Northeast, and Central Ohio. Data sources included a survey and oral histories on the experience of essential work during the pandemic. Depending on the regional context, the survey was conducted online using SurveyMonkey or by participating community organizations speaking with individual members by phone or in person. Of the total 192 surveys administered by community-based organizations and unions across Northern and Central Ohio, 132 respondents completed the entire form, and 11 agreed to oral histories, which

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2 In the report, there is some variation of the numbers of responses, depending on the question. For example, 152 of the participants completed the question on workplace protections. However, 132 of the respondents actually completed the entire survey.
Study Sample

The sample of participants is representative of the communities served by the community-based organizations (CBOs) and unions within the collaborative research team, and there are some categories of essential workers that are not represented here. Figure 1 provides a visual representation of industry breakdown for this study’s sample. The median age group for this sample of essential workers was in the range of 41-51. However, the ages ranged from approximately 18 to 70. Of those who responded to the question...
The following report outlines the quantitative and qualitative results from the survey and the oral histories. The descriptive statistics reflect the prominence of economic insecurity and anxiety of the essential worker due to the lack of workplace benefits and protections. Also evident are instances of worker protection through worker advocacy and/or union involvement. Identified from the oral histories are themes of confusion, invisibility, fear, disposability, as well as dignity, responsibility, and solidarity over the course of the pandemic.

regarding gender, 39% identified as Male, and 61% identified as Female. Over half of the respondents identified as Hispanic/Latinx, 40% as White, around 3% as Black, and around 4% identified as other. The most common level of educational attainment in this sample was high school graduate/equivalent. More than 50% of respondents had a high school diploma/equivalent or less. Figure 2 provides a bar graph of levels of educational attainment among workers in this sample.
Workplace Protections

With the onset of the COVID-19 pandemic in March 2020, essential workers experienced daily fluctuations in routine, procedure, and policy while elected officials and employers scrambled to mitigate the spread of the virus. A worker in the retail industry reported, “We sensed what was coming as masks, sanitizing products sold out.” Part of these fluctuations involved workplace protections, which changed often, as new information about COVID-19 emerged. Several essential workers shared their fear, uncertainty, and confusion surrounding shifting decrees regarding safety procedures from health and government officials that they and their supervisors experienced in the early days of the lockdown. While one essential employee in the financial sector heralded managers who “think on their feet,” a worker in the janitorial sector said it was “always an emergency,” and she was left alone “grasping this change, that change.” A survey respondent called the situation “chaos.”

Overall, essential employees said, initially, information was difficult to find, and some employers did not provide protections until workers started getting sick. Workers recounted in oral histories how supplies were inadequate, especially at the start of the pandemic. Those who could afford the safeguards said that they often bought their own face masks or shields, gloves, and antibacterial wipes to use at the workplace. A letter carrier reported, “At first I brought my own masks, gloves, and hand sanitizer...there was no limited occupancy at the post stations and carriers often traveled among them, increasing risk of exposure.
After about two months, precautions were taken to limit employees’ direct contact with the public.” A worker in the meatpacking industry indicated that while management mandated masks, the workers were required to bring their own. Later this changed, and management provided masks. A factory worker for construction materials narrated a lack of oversight on the part of employers:

There were no safety precautions there. No disinfections. Masks were not given to the employees. They had to take their own masks. There was a table with a staff person at the entrance taking temperature. However, that staff person was not always there, and employees would come in without inspection. Things began to change as people began to get sick.

Essential workers from unionized work settings narrated greater protections. A truck driver for food distribution noted that once masks became available the union distributed them to its members. From an oral history provided by a unionized employee in the financial industry, it was noted:

Each employee had been provided with two cloth masks. Employees were placed into pods and rotated work schedules. There was plexiglass placed in the areas exposed to the public. Everything was sanitized and wiped down several times a day, and hand sanitizer was available to employees and the public.

With CDC guidelines posted in April 2020 on the use of face coverings to protect from COVID-19 transmission (Dwyer & Aubrey, 2020, April 3), national data point to an increase in employers providing masks and requiring masks in the work setting (Wolfe, Harknett, & Schneider, 2021, June 4), though calls continued for enforcement in particular essential work industries.³ Survey data reflect these trends, with fewer than 10% of survey respondents reporting the absence of the mandatory use of face masks. Similarly protections such as social distancing, hand sanitizing, and adequate washing facilities as provided by employers were also reported at high rates by the time of survey administration (April - November 2021).

Even where high rates of workplace protections were evident, survey data suggest that the guarantee of workplace protections was not available to all workers. Employer enforcement of masking among workers and those they interacted with as customers was uneven, as has been found nationally (Ho, Schneider, & Harknett, 2020, December). Oral history narratives document

³ On April 29, 2020, Governor DeWine reemphasized that face coverings are required for employers and employees while on the job, and on July 23, 2020, a statewide mandate of the use of mask coverings was issued by DeWine (Ohio: State-by-State COVID-19 Guidance, HuschBlackwell). In its August 28, 2020, report, Policy Matters called on the DeWine administration to create, retain, and enforce statewide workplace safety standards (Shields, 2020, August 28). For evidence of persistent lack of enforcement, see Testimony of Debbie Berkowitz, March 2, 2021, on the absence of protections for meatpacking, poultry, and agricultural workers (National Employment Law Project, 2021, March 2).
the layer of inconsistency and/or refusal on the part of management toward enforcement of basic workplace protections. In her oral history, a factory worker who packed materials in a plant manufacturing home construction products narrated that she had a female worker packing right next to her in the line. The woman was visibly sick. The factory worker approached the supervisor to check on her co-worker, and she told him that she was feeling unsafe working right next to the sick worker. The supervisor told her that the woman had “worked in the plant for 14 years and had never [gotten] sick.” The supervisor dismissed her concerns, responding that “the whole COVID thing was a complot to get President Trump off his office.” A survey respondent who worked in a healthcare setting reported, “minimal items in place. Three masks have been provided since the start of this. The products to clean are limited.” The survey data and oral histories underscore how CDC and state guidelines were unevenly carried out with essential workers bearing the brunt of the lack of employer accountability.

Furthermore, a number of basic workplace protections were less evident in the survey data. Of the 152 participants responding to questions about workplace protections, 35.1% reported no barriers where six-foot distancing was not possible; 38.8% reported no reduction in maximum occupancy; 44.3% reported no to increased ventilation; and 46.7% reported no training on workplace safety.

Fewer workers reported the disinfection of work areas following incidents of infection, with 26.4% of respondents reporting their workplaces did not provide deep cleaning after confirmed cases. Survey data suggest the need for greater communication to workers about the confirmed case, with 42.2% workers reporting an absence of notification of workers who came into contact with a person infected with COVID. An agricultural worker reported it was not until October 2020 when the first coworker got sick and was sent home for two weeks. According to the agricultural worker, “The company never told us if he had the virus. None of us quarantined. He came back on a Wednesday, and by Friday I was having symptoms. He and I work next to each other in the same department. I had fever, a headache, and body aches.” A retail worker identified August 2020 as a time when social distancing among workers was no longer enforced in her retail worksite, particularly in the areas not visible to the public, such as where workers processed pallets of new products delivered to the store. This work involved unpacking items, processing at several levels, and putting items on the floor. The worker said the pallets “kept coming” and there was a lot of pressure to get products into the store and on the shelves. The work was very physical and draining, and each week 3-6 new employees would show up, with a number of them not lasting the week. The conditions were “really hot, really sweaty,” and “close contact was the reality.” When deep cleaning was provided, it was appreciated. However, in the absence of notification, deep cleaning led to distress rather than solace.

In an oral history, an essential worker expressed frustration and fear about the lack of contact tracing. She and other employees would arrive at work to witness more detailed cleaning procedures than usual, but she was unaware when colleagues became ill or if she had been in contact with co-workers who tested positive. Worker anxiety was exacerbated by reliance on management discretion as to whether workers would be notified if they were in danger. A retail employee cited similar circumstances

4 Workplace protections were the focus of the first question in the survey. Responses to this question were higher than questions located later in the survey.
Worker Benefits During the Pandemic

Survey respondents were asked whether their employers gave essential workers wage increases or any other benefits during the pandemic. Benefits included as responses were wage increases, paid sick leave, bonuses, telework, paid family leave, flex scheduling, or other benefits. Among those responding, 24.5%, or one out of every four essential workers, reported they did not receive any benefits during the pandemic. Flexible scheduling was available to 15%, but only 8% of essential employees were afforded telework.

In terms of sick pay, only 12% responded they had sick pay, and even fewer – 7% – indicated they had received time away from work when a member of their family became ill as part of pandemic-related benefits. A worker in the agricultural industry said her son was sick but she did not know if he had COVID because “the COVID test was very expensive, and I could not afford medical bills. My kids are not included in my health insurance because that would add $200 to my monthly

regarding notification when coworkers became ill. She reported that in the late summer of 2020, there was “intense pressure” from corporate management to increase productivity. Workers used social media as a means to communicate who was ill and what was happening. The company had “stopped notifying us when people got sick and quarantined.” She noted “nobody knows,” but that she and her colleagues tried to keep track of the workers in the organization who “disappeared.” There was push back on the part of herself and some employees toward management about the conditions at work, indicating that “this is not ok, not safe.”

In sum, an average of close to 40 percent of essential employees across industries reported receiving no protections across a number of basic safeguards for their health. Nine percent of the survey respondents said their employers refused to follow or required the worker to ignore safety guidelines during the pandemic. As a result essential workers did not consistently receive access to workplace safety measures that were recommended by the CDC and State of Ohio.
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oral histories, some workers noted that while they did technically receive bonuses or wage increases, these extra benefits were small or very temporary. One worker described getting an extra 20 dollars per day, and others said they received an increase, but it only lasted for the two months of the lockdown. As one worker described, “We got jack shit.” Figure 4 (next page) provides a visual representation of employer-offered pandemic benefits and their varying frequencies. As noted below, in Figure 3 (next page), the most common response when asked about extra benefits during the pandemic was “none.”

Economic Security

While nearly 21% of respondents reported having received free meals or groceries, almost a third were not completely confident in their ability to pay their next rent or mortgage on time, and around 10% reported the likelihood of having to leave their home in the next six months due to eviction or foreclosure. One essential worker in retail explained, “I always have to decide between paying the bill, and I cannot afford it.”

A survey respondent reported that they faced disbelief on the part of employees when calling in sick, and this worker was fired from the job: “Me despidieron porque no creían que tenía COVID.” The lack of sick pay may have contributed to the spread of COVID in the workplace. Workers who typically did not receive any sick time reported to work even when they were experiencing symptoms. As a worker in the meatpacking industry noted:

[I was] given 14 days at home. I was amazed when they paid us for those lost days. I was so worried about losing two weeks of pay. I know of other workers who were feeling sick, but they did not take the test because they could not pay [for] it. The company would only send you home if you had temperature. So, workers who had other symptoms did not say anything and continued working.

Fewer than 14% of survey respondents indicated they received wage increases, and only 11% of essential employees reported bonuses during the beginning months of the pandemic. In the oral histories, some workers noted that while they did technically receive bonuses or wage increases, these extra benefits were small or very temporary. One worker described getting an extra 20 dollars per day, and others said they received an increase, but it only lasted for the two months of the lockdown. As one worker described, “We got jack shit.” Figure 4 (next page) provides a visual representation of employer-offered pandemic benefits and their varying frequencies. As noted below, in Figure 3 (next page), the most common response when asked about extra benefits during the pandemic was “none.”

5 In a February 2021 letter to Governor Mike DeWine, Essential Ohio underscored the need for protections for agricultural workers, particularly those living in rural, hard-to-reach areas who are “among the lowest paid in the state and work under dangerous conditions.” The letter urged the governor to provide the following: provision of vaccine distribution sites free from employer interference and influence; advanced access to culturally sensitive informational materials in all relevant languages; early interagency coordination with local health districts and necessary international authorities (consulates, embassies, etc.); assurances that all essential workers, including farm and migrant workers in Ohio, receive access to the vaccine; and provision of flexibility and paid time off to receive the vaccine, including paid time off if necessary to recover from potential side effects from the vaccine (Letter from Essential Ohio to Governor Mike DeWine and Director of Ohio Department of Health Stephanie McCloud, 2021).

6 The data for the Essential Ohio survey were collected between April and November of 2021. From a study of data collected in October and November of 2020, Mabud, Paye, Pinto, & Pinto (2021) found nearly 1 in 3 (31%) workers reported that they did not have access to paid sick and family leave. In their analysis, the authors report: “During the pandemic, such leave has not been fully and evenly accessible to workers whose employers technically offer it; this is the case despite the Families First Coronavirus Response Act [FFCRA] providing reimbursements to employers for various types of COVID-related leave between April and December 2020” (p. 17). Among frontline workers requesting paid sick or family leave during the pandemic, 20% reported “their employers denied a request for paid sick or family leave during the pandemic, compared to 7% of workers not classified as frontline” (p. 17).
Figure 3. Survey Distribution of Employer-offered Pandemic Benefits

![Bar chart showing workplace benefits and their respective number of workers: Wage Increase (26), Sick Pay (23), Bonus Pay (21), Telework (15), Paid Family Leave (14), Flexible Schedule (29), None (47).]

Figure 4. Frequencies of Capacity to Afford Household Expenses during the Pandemic

![Pie chart showing frequencies: No Changes (57%), More Difficult (3%), Less Difficult (40%).]
medical bills or paying the rent or [purchasing food].” More than a quarter of respondents reported a loss of household income. In addition to those who reported their household lost income since the start of the pandemic, almost 12% said they lost income from having to quarantine or isolate. Among respondents, 40% reported that paying for expenses was more difficult during the pandemic. Figure 4 shows reported changes in capacity to pay.7

Invisibility and Responsibility

In oral histories, some essential employees compared their jobs to military service, reflecting contrasting feelings of invisibility and responsibility. While they said they take pride in how they make a living, they knew they were risking their lives every day they reported to work. An essential worker in the truck driving industry recognized the terror, the dread his service caused family members who were hoping and praying that he would return home safe each day as if from war. That same truck driver

7 For those essential workers reporting “no change,” data on the economic insecurity of essential workers point to the possibility that these respondents had experienced economic and health insecurity even before the pandemic (Hayes & Mason, 2021; Mabud, Paye, Pinto, & Pinto, 2021; Paxson, 2021; Rho, Brown, & Fremstad, 2020; Shields, 2021).
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Dehumanization and Indignity

Particularly in the oral histories, a sense of dehumanization among essential workers was evident. As they fulfilled basic societal functions and human needs, they narrated how their humanity seemed diminished. A retail worker recalled how wearing a mask, though necessary for safety, made her feel even more invisible and unfamiliar to customers. She noted she felt like a servant or a robot, not a human being. She explained how customers treated employees as “less than human...to a level that disturbed me.” Essential workers noted the lack of care extended to them as evident in the public’s uneven adherence and sometimes refusal to follow basic protections, such as using a mask or practicing hygiene such as washing hands. A worker said, “People discard us. They don’t think of us as people,” contributing to a feeling of being “unappreciated, invisible, like discarded trash sometimes.” The oral histories also conveyed essential workers’ awareness of their role in maintaining basic services, easing and carrying the anxiety of those who remained safely at home.

While some workers reported dissension among essential employees who were allowed telework compared to those who were required to show up on site each day, most seemed to close ranks to face the pandemic. In some of the oral histories, essential workers narrated their strategies for the safety and well-being of their co-workers. One worker explained that colleagues would gather each day on the job to share information about health and safety, offer sympathy and support to those with loved ones in danger, and to build encouragement and community. “We were all we had at the time,” she said. “We’re not gonna let it take us.”

associated working in the field during the pandemic with “martial law” because people often did not follow CDC or health department guidelines. An employee in the janitorial industry explained how the trip to work each day via public transportation, especially during the initial lockdown, felt like the “end of days.” She was completely alone except for the few other essential employees driving the bus and train and those at her workplace. Speaking about the experiences of letter carriers, a study participant said, “Postal workers had to carry on like normal.” The survey data and oral histories reflected an awareness on the part of essential workers as to their role in maintaining basic services, easing and carrying the anxiety of those who remained safely at home.
Physical and Mental Wellbeing of the Essential Worker

Health and sustaining wellbeing were the most critical concern for every person during the pandemic, as were essential workers in the front lines. A screenshot from the Ohio Department of Health in Appendix 3 documents COVID-19 cases, hospitalizations, and deaths since May 2020. Related to the overall health during the pandemic, 22% of the survey participants reported having excellent health, 65% reported having very good and good health, 13% reported having fair health, and 0% reported having poor health. Several participants noted they became infected with the virus through the course of their essential work. More than a third said they either contracted COVID or had to isolate or quarantine. One survey participant shared that four of the six housekeepers at their workplace contracted COVID. Another respondent said the pandemic affected “everyone in my home.” Also evident in the responses was the impact COVID had on the physical health of essential workers and their families. Many reported they are not completely healthy today: “After you have it, it changes you.” One worker reported permanent organ damage, one still lacks her sense of smell and taste, some said they are afraid of going to public places now, and several fear for their children or family members becoming sick. A worker in the janitorial industry said, “I’m afraid I’m going to die.” Another worker mourned that “a lot of relatives and friends have died during this time.” While sick herself, a factory worker in construction struggled caring for her daughter, and she experienced fear and isolation, as documented below by the interviewer for this worker’s oral history:

Having COVID was a very traumatic experience for her with dire consequences for the whole family. Her oldest girl, who is now 12, also got sick with COVID...She was sick with the virus for three weeks and her daughter for four weeks. Her daughter suffered the most consequences. Her liver seems to be permanently damaged. She had some form of asthma and is still using an inhaler. Both she and her daughter were experiencing panic attacks and ended up being medicated for anxiety and depression: “Nobody helps you because everybody is afraid of contracting the disease, so you are all alone. Sometimes I wanted to get out of my home and shout ‘ayúdenme!’ (help me!).

Essential workers also reported concerns associated with mental health, indicating feelings of anxiety, hopelessness, and worry. A majority of the survey respondents, 53%, reported feeling “concerned, worried for me and/or others.” Among survey respondents, 30% responded they felt “nervous, anxious, on the edge” and 17% felt “down, hopeless, depressed.” One respondent wrote, “This pandemic has taken a toll on a lot of peoples’ mental health.” Survey responses regarding mental health also introduced faith-based comments about how the survey participants were feeling, such as “Good, thanks [to] God” and “I trust that everything will be fine in the next few months.”

Workers who already had health issues expressed a great deal of concern. For example, one participant wrote, “Just had major surgery. Been off 6 weeks. Still on light duty. I have never been more worried.” Others reported a decline in mental health due to their jobs. A respondent described experiencing stress “due to the amount of work that has been dumped on me because [employees] don’t want to show up to work.” Another reported that working with the public worried her and was very stressful. Being home would help sometimes, though a family member was “one of the ones who thought this [telework] is stupid.” She tried to talk to him, to help him understand. She became more hopeless and more depressed, asking “Is it ever
going to end?” She asked her doctor to increase her antidepressant. She was not as active as before the pandemic. She gained weight. She said her employer did not offer support with these issues. A truck driver for food distribution narrated his fears and experience of loss:

Things concern me that the vaccine has become a political platform. I am more afraid of that than the pandemic itself. Two of my drivers died because of this. That was very, very painful for all of us. It was horribly tragic for all of us, and I do not want that for anyone. One of them was very vocal about...the politics of this pandemic. They are not going to be forgotten.

Intersections of Work, Family, and Education

On March 12, 2020, Governor DeWine announced all public and private schools in the state of Ohio would close as of March 16. Ten days later, the state of Ohio issued its Stay-at-Home order for the period of March 23 to April 6 (Ohio Department of Health, 2020, March 22). Essential workers were confronted with the immediacy of childcare needs for school-age children as schools were shuttered. On April 20, Governor DeWine announced Ohio school buildings would remain closed through the end of the school year, putting working parents in difficult situations in which they had to maintain employment and facilitate their children’s education. On July 2, 2020, DeWine released guidelines for school reopening, but at the beginning of the 2020-2021 school year, only about one-half of Ohio schools were providing in-person instruction (Ballotpedia). During the 2020-2021 school year, districts oscillated between remote learning and in-person classes in accordance with the severity of county-level COVID-19 transmission. Essential workers with school-age children, if afforded flex-time through union negotiated benefits, could provide supervision as needed for their children’s remote learning. Those without this option, and without affordable childcare, were unable to provide supervision, or relied on older children to take on these responsibilities (Khazan & Harris, 2020, September 3).

The survey responses on education reflect the aforementioned struggles essential working parents are facing due to the lack of paid family leave and universal childcare options. In the survey sample, 44% of those who responded to the question on education indicated they had children enrolled in a K-12 school during the 2020-2021 school year. Results of the survey and the oral histories revealed that shifts to remote learning were challenging for both children and parents. About 43% of parents indicated their child/ren had struggled with online learning, and almost 32% indicated their child/ren fell behind or their grades suffered during the pandemic. Open-ended responses portrayed the frustration of working parents in having to deal with fluctuations in routine. Essential workers in this sample felt the pressure to help their child succeed in spite of the pandemic. A financial worker noted that while she was grateful to work from home during the beginning of the pandemic, much of her time was spent “playing fourth-grade teacher.” She said, “My main worry wasn't work; my concern was my son. I wanted to make sure I didn’t fail him. I am still worried because he is back in school face-to-face and too young to be vaccinated.” In her oral history, this financial worker described a process in her worksite that considered worker responsibilities to children, whereby management in this unionized setting arranged for employees with children to work at home while those without children received bonuses and alternated working from home and working on site. While this worker was fortunate in being able to work from home and with a flexible schedule, others were not. One respondent indicated she had to reduce her hours in order to accommodate her child’s schooling, a second revealed the shift to remote learning...
A worker in the agricultural industry provided in her oral history the ways in which these structural layers of precarity impacted her son’s education:

...It’s always been hard for my family to survive economically, specifically since my husband was deported and I am the only one working full time. I also have many medical issues, and I always have to decide between paying medical bills or paying the rent or [buying food]. My son resents that and hates the school because he says he should be working to help me sustain the house. He is the only male in the house now. During COVID, my children were going to school some days and working online some other days. I leave my home very early and cannot supervise them during the week. My son would not go to school or would not connect to the online classes from home...They sent us to court for truancy.

The survey data and oral histories on education reveal variation in the degree of economic precarity and risk essential workers face as it relates to supporting their children’s learning during the pandemic. This task appeared to be largely taken up by women across essential work industries. It is not surprising that with two-thirds of the survey respondents identifying as women, and approximately one-third of respondents reporting having school-aged children, there was agreement among 75% of those with children that the pandemic has affected how their children receive increased her responsibility of having to facilitate her child’s education, and another noted the constant rearranging of schedules to accommodate schooling.

In essential work without insurance benefits or involving low wages, workers were unable to supervise their children during remote learning. In an oral history, an employee in the meatpacking industry reported that he did not have health insurance and was limited to a few days that could be used for vacation or sick days. He noted, “My major concern was [that I might] lose my job...I have three children at home and my wife cannot work, so thinking about that possibility terrified me. We can’t pay for childcare...I was very worried about my family and losing my job. It took a toll on my mental wellbeing, too much stress.” This individual noted that his oldest son, whose high school was in remote learning, was affected, too: “He could not follow the online classes. The school gave him a computer, and we were paying for the internet. But our internet is very slow. My son would be late to classes or would miss classes. His grades suffered significantly.” Later in the year with his wife’s advocacy and a return to in-person classes, the son completed the coursework and advanced to his next grade.

Intersections of economic and social structures faced by essential workers, such as low wages, inadequate health care, and mixed family immigration status, created great strain on some families of essential workers.

8 The Coronavirus Aid, Relief, and Economic Security (CARES Act) was passed by Congress on March 25, 2020, and signed into law on March 27, 2020. The Consolidated Appropriations Act (2021) was passed by Congress on December 21, 2020, and signed into law on December 27, 2020. These provided economic aid to employees and to employers affected by the pandemic. (U.S. Department of the Treasury, n.d.). According to the Migration Policy Institute (MPI) “the $2.2 trillion CARES Act enacted last March excluded 5.1 million U.S. citizens and legal immigrants from up to $1,200 each in stimulus payments because they were the children or spouses of unauthorized immigrants. MPI estimates that nearly 3 million of these excluded Americans and legal immigrants, who meet income thresholds, are now eligible for up to $600 in tax rebate payments under the new stimulus package and for retroactive receipt of CARES Act payments. The 9.3 million unauthorized immigrants whose incomes are low enough to meet the eligibility thresholds were—and remain—ineligible under both stimulus packages” (Gelatt, Capps, & Fix, 2021, January)
education. Education of children, an outgrowth of family health and wellbeing, was compromised not only by the pandemic but also by an absence of worker benefits and protections. Adequate wages, health insurance, sick leave, flex options, and other workplace policies surface as critical dimensions to family health and wellbeing and worker safety and satisfaction.

**Failure to Acknowledge Worker Expertise**

A common theme derived from the surveys and the oral histories with essential employees was the feeling of being left out of the conversations surrounding the workplace, and this is reflected in responses from non-union versus union members. Only 38% of the survey sample reported being a member of a union, leaving nearly two out of every three essential workers without representation. Nonunion members more frequently reported no benefits than union members, highlighting the need for collective bargaining in the workplace and a lack of voice or agency.

The aforementioned implications point to the importance of treating workers as experts in crafting standards for their workplaces. Only 38% of essential workers reported that they have “voice” in the workplace. When an essential worker, who is a member of a union, brought up concerns to management about health, safety, and compensation during the pandemic, this worker was told, “I was whining,” and “I have to be silent.” A survey respondent echoed that essential employees were rarely involved in conversations: “Employers did not really take in consideration of how things affected workers in the field.” Another survey respondent noted management rarely asked for worker perspectives: “No piden opiniones a los trabajadores.” A union member reported that the union kept open communication and heard the workers’ concerns. He stated that he drafted a letter to explain processes to customers, and the union adopted that idea. At the same time, it was suggested that collective representation was not a failsafe but more a work in progress, especially in essential industries. As noted by a worker “I’m fortunate to have a union, but every day is a fight [in] this job.”

9 According to the National Labor Relations Board *Immigrant Employment Rights Under the National Labor Relations Act*, workers have a right to organize a union, including undocumented workers. Retaliation by employers is unlawful, including retaliation by reporting undocumented workers to U.S. Customs and Immigration Office. However, these forms of retaliation take place and before the violation of the National Labor Relations Act can occur, the workers are deported (Spiggle, 2019). If workers are not deported, employers can prove an undocumented worker is not authorized to work, and the worker is not entitled to backpay and may not be able to get the job back. While acknowledged as essential in the pandemic (Jordan, 2020), undocumented workers in essential industries remain vulnerable to a lack of protection and benefits during the pandemic (Perez & Maye, 2021). Counteracting legal action toward crucial immigration reform (Wong, Flores, Rodriguez Knic, Fierro Ruiz, & Prchal Svajlenka, 2022) and legislation increasing enforcement of workers’ rights are at work while still in the shadow of the pandemic (McNicholas, Poydock, & Rhinehart, 2021).
Conclusion
The pandemic has drawn special attention to essential employees in Ohio and the nature of essential work. Although many people faced unemployment due to the pandemic, essential workers were confronted with a different challenge. Tasked with maintaining the safety and wellbeing of local communities and regions across the state and sustaining normalcy at a time of great uncertainty, this labor force is ubiquitously present in meeting every facet of human need.

At the same time, essential workers are invisible to the public they serve. Further, their safety, compensation, health, and family wellbeing have not been sufficiently acknowledged or addressed by elected officials at the local and state levels. While survey findings suggest all have experienced the strain of functioning in the midst of crises, the data underscore effective protections and benefits in place within some workplaces and a profound absence of these in other work settings. In the case of the latter, the level of economic vulnerability experienced by essential workers in these sites stems from the failure on the part of their employers to offer a livable wage, health care security, and paid sick leave among other benefits and protections.
Together, the results of the survey and the narratives of the essential workers also underscore the need for better policy solutions that address issues of paid leave, premium compensation, workplace safety, and affordable and reliable childcare. Furthermore, the stories told by the essential workers in this project demand attention from employers, the state of Ohio, and the federal government. If workers are to be considered essential to the functioning of society, they should not only be compensated as such, but treated in a way that reflects their value and expertise.

For further information, please read the Essential Ohio Policy Agenda [https://www.essentialohio.org/_files/ugd/8c1f20_e5bea17dc1e44e2bc298fc2d569c07.pdf](https://www.essentialohio.org/_files/ugd/8c1f20_e5bea17dc1e44e2bc298fc2d569c07.pdf)

Economic vulnerability and social marginalization produce consequential ripple effects of precarity in the health, economic security, and children’s education of essential workers employed in the least visible and often most crucial industries. From an angle of vision deeply cognizant of the critical nature of their work, a worker claimed power in her identity: “A doctor can’t do work until we have cleaned up. We are the essential workers.” Acting as agents of change within the workplace, essential workers spoke of solidarity through informal practices in notifying coworkers of COVID outbreaks in the work settings, of enforcing protections, of questioning policies of inaction, of faith and spirituality, and of ongoing work in the struggle to achieve wages and benefits commensurate with the essential nature of their work. The survey responses and oral histories reflect yearning and action among essential workers toward achieving respect, recognition, and equitable employment practices.

This report, participatory in its research methods and design, aims to make visible the experience of essential workers, to bring readers closer to the human realities and structural dimensions of essential work, particularly in the context of an ongoing and unpredictable pandemic. As noted in an essential worker’s oral history, “It shouldn’t take a pandemic for people to make a livable wage.” The essential workers who participated in the survey and oral histories underscore the cost, ethically and economically, of inaction.
Appendix 1: Geographical Outreach Areas of Collaborating Community-Based Organizations and Unions

La Conexión
Justice For Migrant Women
Cleveland Jobs With Justice
Central Ohio Worker Center
OPEIU Local 1794 and Cleveland Jobs With Justice
### Appendix 2. Timeline of Collaborative Research Activities

<table>
<thead>
<tr>
<th>Method of Data Collection</th>
<th>La Conexion</th>
<th>Office and Professional Employees International Union</th>
<th>Cleveland Jobs with Justice</th>
<th>Justice for Migrant Women</th>
<th>Central Ohio Workers Center</th>
</tr>
</thead>
<tbody>
<tr>
<td>Surveys via phone and in person; Oral Histories</td>
<td>Surveys online; Oral Histories</td>
<td>Surveys online; Oral Histories</td>
<td>Surveys in-person and via phone</td>
<td>Surveys in-person and via phone</td>
<td></td>
</tr>
<tr>
<td>Date(s) of Training</td>
<td>Mar 30</td>
<td>Apr 7</td>
<td>Apr 7</td>
<td>Jun 28, Aug 2</td>
<td>Oct 4</td>
</tr>
<tr>
<td>Start of Data Collection</td>
<td>Apr 8</td>
<td>May 7</td>
<td>May 19</td>
<td>Jun 29</td>
<td>Nov 7</td>
</tr>
<tr>
<td>End of Data Collection</td>
<td>May 2</td>
<td>Jun 18</td>
<td>Aug 25</td>
<td>Jul 18</td>
<td>Nov 11</td>
</tr>
<tr>
<td>Debrief/Discussion of Results</td>
<td>Jun 16</td>
<td>Aug 30</td>
<td>Aug 30</td>
<td>Nov 30</td>
<td>-</td>
</tr>
<tr>
<td>Oral History Collection</td>
<td>Jun 21-Jul 21</td>
<td>Sept 9-Oct 5</td>
<td>Sept 9-Oct 5</td>
<td>-</td>
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Appendix 3. Time Period of Essential Ohio Data Collection in the Context of State of Ohio Cases, Hospitalizations, & Deaths

Cases
2,643,929

Hospitalizations
111,511

Deaths
35,493
References


Mollo, E., Ramírez, M., Maya, B., Kline, D., Shields, M., Tramonte, L., Orlander, M., & Ingles, S. (2021, February 8). Letter from Essential Ohio to Governor Mike DeWine and Director of Ohio Department of Health Stephanie McCloud.


Essential Ohio is grateful for the work that essential workers have always done and will continue to do as we rebuild.

We acknowledge the sacrifice essential workers had to make during the COVID-19 crisis to not only keep their families afloat, but also to keep us safe. We continue to advocate alongside them to transform what’s possible for essential workers.

Heroes Work Here was developed in collaboration with Cleveland State University and authored by: Anne Galleta Ph.D., Paula J. Baughn, Vilmarie Perez, and Chloe White.

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Essential Ohio is anchored by Justice for Migrant Women. Coalition members include: Advocates for Basic Legal Equality, Central Ohio Worker Center, Cleveland Jobs with Justice and La Conexión.