

Work is Changing

How is that impacting our communities?

Americans value hard work. However, millions of Americans are trapped in precarious work, or jobs that make it difficult to lead a healthy life.

What is precarious work

and how does it affect a person's health and well-being?



Precarious Employment

is also known as:

- Non-Standard
- Contingent
- Alternative Work
- Gig Employment
- Temporary Work

**Nearly
1 in 5
adults work in
non-standard
work
arrangements.³**

Why Is This Happening?

The way our employment is structured is changing. Outsourcing, downsizing, automation, the advancement of app-based technology, and contracting out jobs have pushed entire industries towards precarious work.² Some people in your business who may be employed in precarious jobs are: security guards, data entry clerks, janitors, landscapers, cafeteria workers, warehouse workers, drivers and other employees hired on a contract or project basis. Increasingly, more jobs are structured with the elements of precarious work.

**Everyone deserves
healthy work.**

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Those Impacted the Most Are:

YOUNGER

The mean age of core contingent workers is around 40 years old.⁴

MORE OFTEN HISPANIC

Nearly 3 in 10 core contingent workers identified as Hispanic.⁴

LESS LIKELY TO HAVE A HIGH SCHOOL DEGREE

The proportion of contingent workers who reported not completing high school was 4× greater than standard full-time workers.⁴

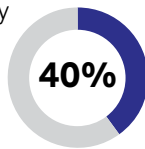
HAVE LOW FAMILY INCOME

Core contingent workers are 3× more likely to have low family income compared to standard full-time workers.⁴

Working Till We're Sick:

Due to the nature of precarious work, workers may have to work long hours at several jobs to make ends meet, which limits opportunities for adopting healthy behaviors such as eating right, exercising, or accessing primary/preventative care.

Workers with low job security have a **40% excess risk of developing a heart condition** than workers with secure jobs.⁵



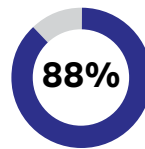
Among the working age population, **10-20% of all cardiovascular disorder deaths can be attributed to work.**⁸



Individuals working non-standard hours have **more poor days of mental health.**⁶



Workers without paid sick leave are **more likely to be injured on the job.**⁶



High job strain may lead to an **88% increased risk for a heart attack.**⁷

Workplaces that pay a thriving living wage, provide benefits, offer job security, opportunities for advancement, and are free from workplace hazards represent a healthy work environment. Explore the resources below to begin your organizations path towards Total Worker Health®.

National Institute for Occupational Safety and Health: Total Worker Health® Approach



NIOSH's *Total Worker Health®* program provides research-based evidence and practical solutions to help address today's changing workplace and the challenges for workers health that arise. Tools include organizational self-assessment and action plan guides, CDC Worksite Health ScoreCard, and evaluation resources.

University of Illinois at Chicago: Center for Healthy Work



The *How to Promote Healthy Work in the Workplace* one pager created by the Center for Healthy Work recommends various policies, programs, and practices to establish health-promoting changes in your workplace.

For more information:



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¹ Benach, J., Vives, A., Tarafa, G., Delclos, C., & Muntaner, C. (2016). What should we know about precarious employment and health in 2025? framing the agenda for the next decade of research. *International Journal of Epidemiology*, 45(1), 232–238. doi: 10.1093/ije/dyv342

² Kalleberg, A. L. (2009). Precarious Work, Insecure Workers: Employment Relations in Transition. *American Sociological Review*, 74(1), 1–22. doi: 10.1177/000312240907400101

³ Alterman, T., Luckhaupt, S. E., Dahlhamer, J. M., Ward, B. W., & Calvert, G. M. (2012). Prevalence rates of work organization characteristics among workers in the U.S.: Data from the 2010 National Health Interview Survey. *American Journal of Industrial Medicine*, 55(6), 647–659. doi: 10.1002/ajim.22108

⁴ U.S. Government Accountability Office. (2015, April 20). PDF: Washington, D.C.

⁵ Ferrie, J. E., Kivimäki, M., Shipley, M. J., Smith, G. D., & Virtanen, M. (2013). Job insecurity and incident

coronary heart disease: The Whitehall II prospective cohort study. *Atherosclerosis*, 227(1), 178–181. doi: 10.1016/j.atherosclerosis.2012.12.027

⁶ Cho, Y. (2017). The effects of nonstandard work schedules on workers health: A mediating role of work-to-family conflict. *International Journal of Social Welfare*, 27(1), 74–87. doi: 10.1111/ijsw.12269

⁷ Chou, L.-P., Tsai, C.-C., Li, C.-X., & Hu, S. C. (2018). Prevalence of cardiovascular health and its relationship with job strain: a cross-sectional study in Taiwanese medical employees. *BMJ Open*, 6(4). doi: 10.1136/bmjopen-2015-010487

⁸ Tsutsumi, A. (2014). Prevention and management of work-related cardiovascular disorders. *International Journal of Occupational Medicine and Environmental Health*. doi: 10.2478/s13382-014-0319-z