



Evaluation Results from the Healthy Work Collaborative: A Cross-Sectoral Capacity Building Partnership to Address Precarious Employment

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What is the issue?

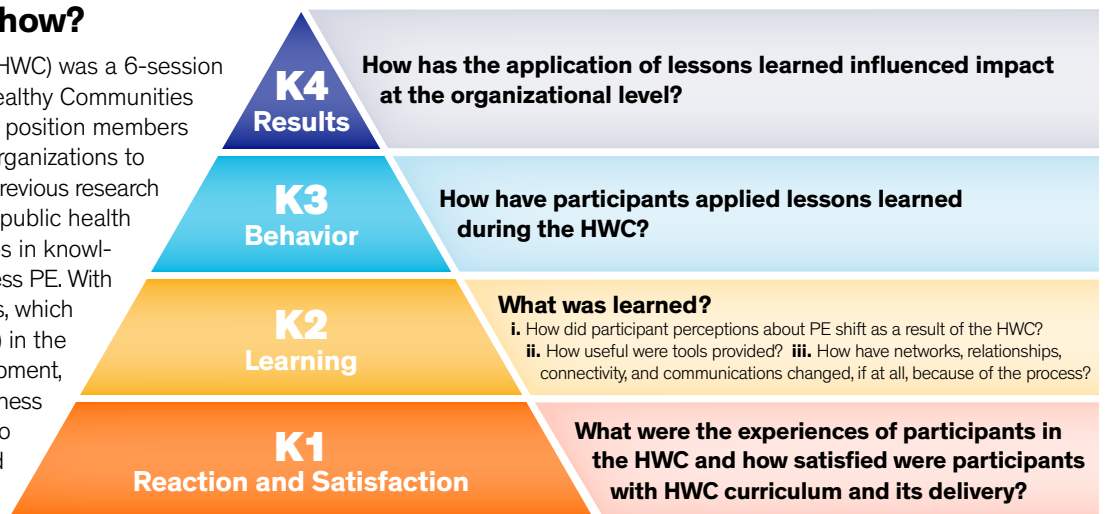
The COVID-19 pandemic spotlights the profound health and safety risks experienced by workers in precarious employment (PE). Workers were forced to continue working in unsafe conditions during the pandemic which put them and their families at increased risk of contracting COVID-19. PE is a social determinant of health (SDOH) that disproportionately impacts workers of color due to long-standing historical and structural racism. PE is defined by low wages, hazardous conditions, unstable work schedules, no termination protection, and few benefits.

Before COVID-19 there were calls for public health and healthcare to address the structural factors that influence health, including PE. There are gaps in the health sector's knowledge of and ability to address PE (Welter et al., 2020), but initiatives that address policy, systems, and environmental changes (PSE) are likely to be most impactful in addressing social determinants of health, like PE.

The brief outlines evaluation findings from the Healthy Work Collaborative. The study evaluated a university supported partnership between the health and labor sectors to address precarious employment through the development and implementation of policy, system, and environmental change approaches.

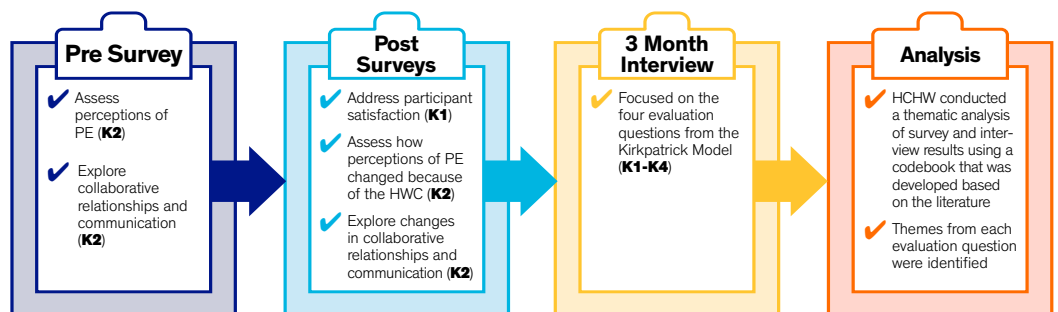
What did we do and how?

The Healthy Work Collaborative (HWC) was a 6-session learning initiative facilitated by Healthy Communities through Healthy Work (HCHW) to position members of public health and healthcare organizations to address precarious employment. Previous research findings from HCHW highlighted public health and healthcare organizations' gaps in knowledge about and initiatives to address PE. With the support of labor organizations, which provided technical assistance (TA) in the form of education and skill development, the HWC aimed to increase awareness and shift perceptions of PE and to provide the skills and tools needed to implement PSE initiatives that address PE (Welter et al., 2020; Bonney et al., 2021).



HCHW conducted a mixed-methods evaluation of the HWC by using the Kirkpatrick Model. The Kirkpatrick Model consists of four levels: reaction, learning, behavior, and results, which HCHW translated into the above evaluation questions (Kirkpatrick & Kirkpatrick, 2006).

Participants completed a survey before and after the HWC sessions to assess how their perceptions of PE shifted and to explore how collaborative relationships and communication may have changed because of the HWC. Following the HWC, participants were surveyed about their satisfaction with the HWC and the usefulness of tools presented.



What did we find?

Experiences and reactions of participants in the HWC

The survey following the HWC's last session indicated that most participants were satisfied with the HWC curriculum and how the information was presented. Participants liked the overall structure of the event and said that the use of TA furthered their learning, especially with resources for policy change and how to involve workers in PE. Participants were particularly pleased with the intimate environment and small groups because they created a space for focused collaboration, trust, and accountability. However, participants did say that they would have liked more dialogue instead of activities during the collaborative.

What did we learn in the HWC (K1 and K2)?

Participants comfort level in explaining PE increased 50%. One of the most impactful approaches to improved understanding of PE was when participants learned about lived experiences of workers. The three-month interviews found that participants benefitted from the differing expertise of the labor sector because they learned from organizers who work with immigrant and underemployed workers every day. Participants saw different perspectives, partnerships, and issues more clearly with Power Analysis and Theory of Change tools.

Application of Lessons Learned During the Collaborative (K3)

The HWC helped participants reflect on ways they employed and worked with people in their own lives. Participants gained an increased sensitivity for people they hired and were more mindful of their leadership style, so they were not creating a precarious work environment. Three months after the completion of the HWC, a few participants had applied skills they learned, while others planned to apply the skills in their next project.

Application of Lessons Learned Influenced Impact at the Organizational Level (K4)

Three months after the HWC, multiple participants had invited labor partners to conduct staff trainings or workshops on PE at their organizations. A few participants mentioned changes to their organizational policies and plans such as increasing paid internships, changing their workforce development plan to address concepts learned in the HWC, and applying for grants to help them address PE.

What does this mean and for whom?



The Healthy Work Collaborative may have provided health promotion practitioners an evidence-based framework to address SDOH like PE through PSE change. The HWC emphasized the importance of worker voice and labor sector participation in public health and healthcare interventions. Public health may benefit from TA from other sectors who have varied expertise, like the labor sector, to enhance collaborative PSE initiatives. The COVID-19 pandemic highlights the need for collaborative PSE initiatives to support workers in PE inside and outside of the workplace. The HWC may be a model capacity building process for addressing PE using cross-sectoral partnerships to implement PSE change initiatives.

Who was involved in the study?

The Healthy Work Collaborative (HWC) was developed by the University of Illinois Chicago's Healthy Communities through Healthy Work (HCHW) project of the University of Illinois Chicago Center for Healthy Work (CHW). The Center for Healthy Work is a National Institute for Occupational Safety and Health (NIOSH) funded Center of Excellence for *Total Worker Health*®. Healthy Communities Through Healthy Work collaborated with Illinois-based public health, healthcare, social service, legal and advocacy, as well as labor organizations to implement and evaluate the Healthy Work Collaborative. This research was deemed exempt research by the Institutional Review Board of the University of Illinois Chicago (# 2018-0370).

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