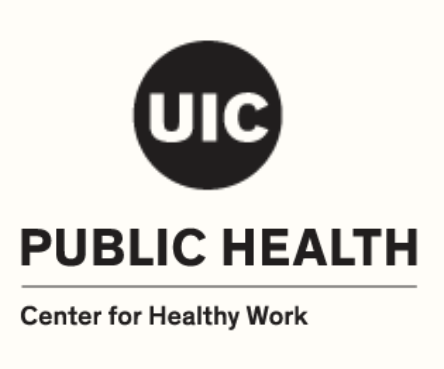
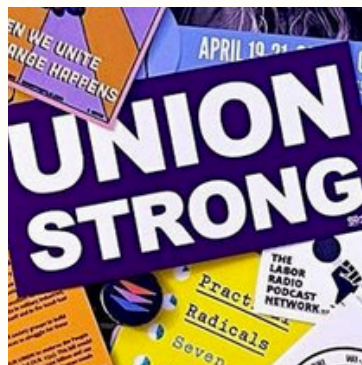
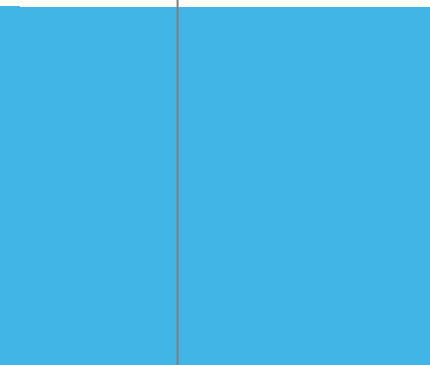
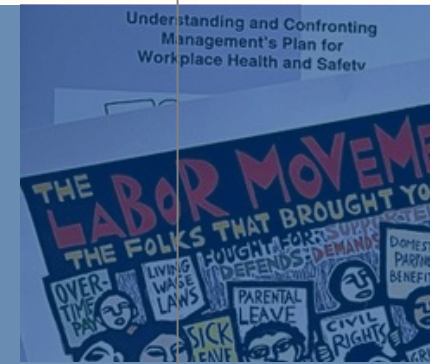


# 2024 Center for Healthy Work Annual Report



# Director's Note

Since our inception in 2016, we at the UIC Center for Healthy Work have been ringing the alarm on the rising prevalence and health implications of precarious employment. Characterized by instability, lack of benefits, and limited job security, precarious employment is increasing for all social groups and economic sectors, with marginalized populations experiencing the most acute degradation of stable employment opportunities.<sup>1</sup> An expanding body of research is elucidating the negative health consequences of precarious employment,<sup>2,3</sup> however more research is urgently needed to fully understand how precarious employment impacts a broad range of employee physical and mental health outcomes

The rapid growth of precarious employment - powered largely by neoliberal policies - brings into sharp focus the need for proactive and innovative measures in occupational safety and health. Precariously employed workers often perform the most hazardous jobs, have fewer protections, and little control over their work environments. Many of these workers lack access to standard safety training, making them particularly vulnerable to injuries, illness, burnout, and mental health challenges. In Chicago, among the most vulnerable workers are new arrivals from Central America, who often have few safe or stable job opportunities. Most migrants, particularly those with undocumented status or limited English proficiency, are relegated to informal or temporary jobs in industries like construction, hospitality, and domestic work. These positions typically force workers to face the constant threat of job loss, wage theft, or exploitation by employers. In Chicago, migrants and other vulnerable workers such as street vendors have also been targets of inexcusable violence on the job and in their communities.<sup>4-6</sup>

In the Center for Healthy Work, we balance research and outreach that meaningfully engages with community, workers, employers, worker representatives, and regulators to protect from unhealthy work. I am very proud to share the achievements of our research and outreach projects in the following pages. Our work remains at the forefront of developing public health approaches to improving worker health through community-engaged research and novel partnerships with employers.

Our work does not occur in a vacuum, however, and I would be remiss not to mention how neoliberalism continues to threaten the work that we do. The stakes for public health and worker protections have never been higher, particularly for those of us who rely on sustained federal investment in worker safety. Though at times it has felt grim, it has also renewed our commitment to tirelessly advocate for policies that extend and enhance protections to all workers, regardless of their employment status. Whether it's ensuring access to healthcare, strengthening labor laws, or developing safety regulations that address modern work arrangements, we must continue to meaningfully act in collaboration with communities, labor organizations, employers, and government to guarantee health and safety as a fundamental right for every worker.



**Kirsten Almberg**

Center for Healthy Work Director,  
Research Assistant Professor

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# Introduction

In the past year, the University of Illinois Chicago Center for Healthy Work (CHW) has been at the forefront of addressing the health and well-being of workers in precarious jobs in Chicago, Illinois, and across the Nation. Public health institutions, healthcare providers, and occupational safety and health allies are increasingly called upon to address the root causes of precarious work as a critical social determinant of health. Recognizing the interconnectedness of work and health inequities, the CHW advocates for innovative strategies that promote healthy work environments, not only within workplaces but also in communities, by leveraging policy, systems, and environmental change.

Our mission is to transform unhealthy work into healthy work by collaborating with communities and organizations to promote healthy work through participatory and collaborative engagement. Through our applied, action-oriented, racial justice-centered research, the CHW supports pathways to jobs that pay a livable wage, are free from workplace hazards, and include benefits such as healthcare, paid sick leave, and retirement savings. We integrate workplace safety and health with a focus on risk factors that affect health-related behaviors outside of work and impact family and community health.

The CHW's Theory of Change serves as a roadmap for our research projects and outreach initiatives, guiding us in creating community, workplace, and policy changes to improve conditions for workers engaged in precarious employment. We invite you to explore the insights and achievements detailed in this report, which reflect our commitment to advancing health equity and promoting healthy work for all.





This annual report provides an overview of our significant contributions to the field of *Total Worker Health*<sup>®</sup>. Each project highlights its innovative approaches to advancing Total Worker Health (TWH), showcasing unique strategies that broaden its scope. Readers will find detailed accounts of our projects' significant accomplishments over the last year, how they have strengthened external partnerships, and the challenges they faced along the way, plus the strategies employed to address those challenges.

**Read on to learn more about the Greater Lawndale Healthy Work project, Workforce Health and Well-being for All as a Sustainable Business Strategy project, and the CHW's outreach core. But first, here is a peek at some of our pride points over the last year.**

**165** Between meetings with community partners, research briefs, and more, we've logged over one hundred and fifty knowledge translation and dissemination activities.

**23** Our faculty and staff successfully mentored ten graduate students, and had thirteen students in our community engagement course, fostering their professional growth, research skills, and understanding of precarious work.

**05** We've sought out multiple funding opportunities; one of which resulted in additional funding for our outreach core! We have also created a one-pager about our acute funding needs and have met with multiple foundations to describe the impact of our work in Chicago's Greater Lawndale community.

**22** Our team actively participated in twenty-two professional development activities, to enhance our Center's expertise and skills.

# Greater Lawndale Healthy Work Project



# Greater Lawndale Healthy Work Project

Building off of nearly 10 years of academic-community collaboration, the Greater Lawndale Healthy Work (GLHW) Project launched in 2016 as a partnership with the Greater Lawndale community to better understand how work impacts community health and to identify community solutions to promote worker health. The Greater Lawndale community is made up of two neighborhoods situated on the southwest side of Chicago, North Lawndale and Little Village, which experience historic disinvestment, health, and income disparities.

As a community-based participatory research project, GLHW interventions are identified in collaboration with community partners through community-academic subcommittees. Three interventions are underway with the aim of increasing recognition of work as a social determinant of health at the neighborhood-level, and implementing community-based strategies for improving availability of healthy and safe jobs in Greater Lawndale. These three interventions include an employer certification program, exploring the feasibility of worker cooperatives, and a photovoice study of informal workers.

Learn more about our three project subcommittees on the following pages!



# Subcommittee 1 Employer Certification Program

Members of the subcommittee who are working on the Employer Certification Program, used a systematic process to identify community organizations with existing local grassroots campaigns to leverage in the employer certification program. The program aims to shift the ecology of largely precarious, local jobs to a landscape of healthy jobs by increasing the number of businesses that apply healthy work principles. Using a democratic consensus-voting process, subcommittee members identified Working Family Solidarity, an organization based in Chicago with the aim of promoting racial equity and economic justice through increasing working families' access to good jobs and affordable housing, and former collaborator with the GLHW Project, to continue to partner with in this effort.

**Working Family Solidarity was selected as our community collaborator based on the following criteria:**

- Demonstrated history of effective collaboration with GLHW Project and other UIC School of Public Health centers through the years
- Shared values of racial justice between Black and Latine workers on the West Side of Chicago
- Staff/personnel capacity
- Present campaign that is in alignment with GLHW project goals and strategies to increase healthy jobs in the Greater Lawndale neighborhoods

In reference to the latter criteria, the GLHW Project is a community-based participatory research (CBPR) project, and in order to remain true to the principles of CBPR, the GLHW project has named the importance of leveraging existing local campaigns and organizations to develop relevant research interventions. WFS has developed trusting relationships with their local constituents, facilitating the process for effective collaboration with workers, employers and policy makers.





## Subcommittee 2 Worker Cooperatives

Building off of the relationships established by our previous community workshops about cooperatives, the subcommittee conducted 12 interviews with worker co-ops and incubators in Greater Lawndale to better characterize their needs, opportunities and gaps, and to inform a neighborhood-wide feasibility study to explore the likelihood that investing in neighborhood-level cooperatives is an effective strategy for the promotion of healthy work at the neighborhood level. Additionally, Sandra Morales-Mirque from the Center for Clinical and Translational Sciences Community Engagement and Collaboration Core at UIC, and with a long and trusted history of working with cooperatives in Chicago, was added to the subcommittee to assist with outreach, development of survey instruments, and data analysis. Furthermore, this subcommittee has formalized open office hours with Renee Hatcher, Assistant Professor of Law and the Director of the Community Enterprise & Solidarity Economy Clinic at UIC Law School, to provide guidance and assist with emerging technical needs.

## Subcommittee 3 Photovoice Study with Informal Workers

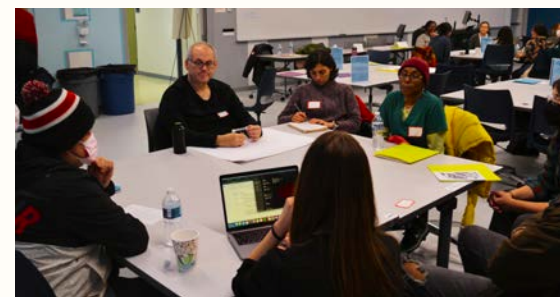
Leveraging GLHW Project Outreach Coordinator and longtime Little Village resident, Dolores Castaneda's relational strengths, the subcommittee recruited 14 street vendors and informal workers to participate as co-researchers in the Informal Workers Photovoice Study. Photovoice is a participatory research method in which participants use photography and analytic narratives reflecting on the photos to identify priority issues and then strategically invite key stakeholders to engage with the photos and narratives to affect social norms and policy change. This work builds off our policy analysis on informal work situations in Greater Lawndale. Additionally, Teresa Berumen, a subcommittee member and Lead Community Health Worker (CHW) with the Rush University System for Health, has invited CHW's to conduct social determinants of health screenings and connect co-researchers to local resources. An emerging partnership with Universidad Popular, a non-profit based in Little Village, has also been strengthened, as they have provided support to co-researchers with tax services to apply for ITIN numbers in order to receive compensation for their participation. Other partnerships have also been leveraged to provide resources and services for co-researchers, such as Taller de Jose, to identify legal services, and Jorge Prieto Health Center, to provide health services.

# Deeply Rooted: Disrupting Community Violence Using Abolitionist Principles

In November 2023 and April 2024, the GLHW Project facilitated two community-academic forums at the UIC School of Public Health to provide space for community leaders to share their critical analysis of the root causes of community violence against recent arrival and informal workers in Greater Lawndale, and for community and academic partners to share their thoughts about the barriers and enablers of violence, and their vision for safe communities, rooted in abolitionist strategies. A summary report describing the takeaways that emerged from the forums is currently being disseminated to attendees and community organizations.

We used thematic analysis to distill themes from breakout group notes taken at the Deeply Rooted event. Initial findings were shared at a Community Share Back event hosted in April. The purpose of the event was to disseminate initial findings and receive feedback from community members about how the initial findings resonate with their lived experiences in Greater Lawndale.

Several GLHW Project team members took notes during the event to capture feedback from community attendees for further data analysis. The GLHW Project team reviewed the notes taken at the event, feedback received in a written format from attendees, and the visual notes. Overall, the feedback received from community members at the Community Share Back aligned with the initial themes that were presented to community members. Community members interpreted these themes by sharing personal stories that reflected our findings.



# Novel Participatory Action Research Methodologies

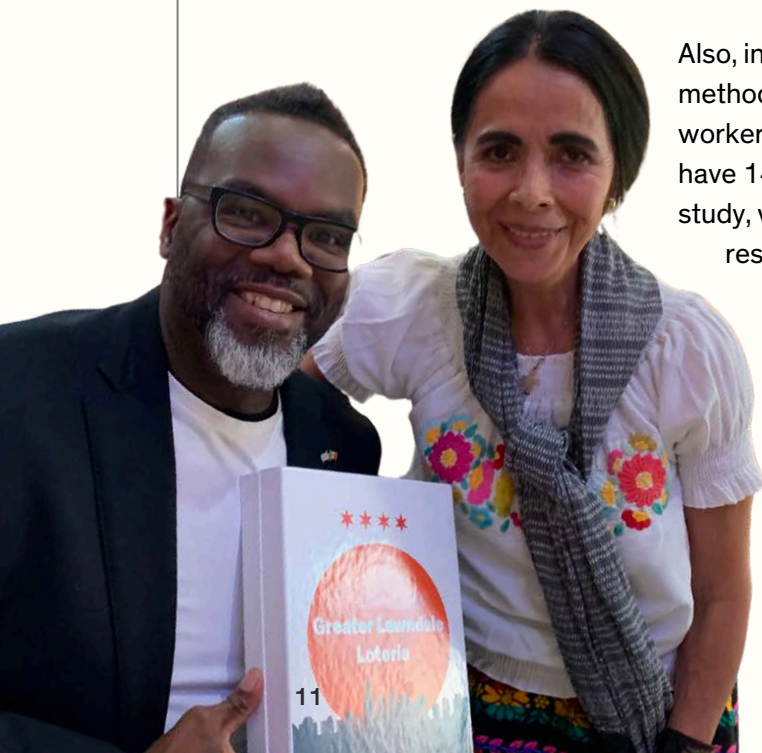
We also contributed to the participatory action research methodology scholarship through our new publication:

**Kersten, M, Avelar, S, Montgomery, A, Castañeda, D, & Hebert-Beirne, J (2024). Methodological Insights About Photovoice as a Pedagogical Tool from Implementation with Graduate Students as Co-Researcher-Participants. *Pedagogy in Health Promotion*, 23733799241287205.**

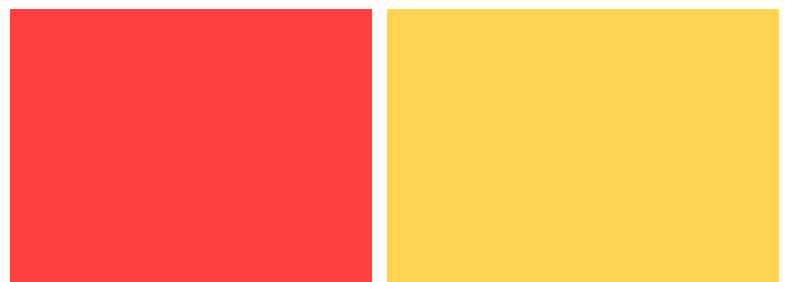
In addition, one of our peer-reviewed manuscripts was selected to be used as one of the articles included as Continuing Medical Education by the Journal of Occupational and Environmental Medicine:

**Bonney, T, Rospenda, K. M., Forst, L., Conroy, L. M., Castañeda, D., Avelar, S., ... & Hebert-Beirne, J. (2022). Employment precarity and increased risk of hazardous occupational exposures among residents of high socioeconomic hardship neighborhoods. *Annals of work exposures and health*, 66(9), 1122-1135.**

Our evidence-informed, historically grounded worker-justice themed Greater Lawndale Loteria (GLL), which we co-created through our community-academic research partnership as both a novel dissemination mechanism of our mixed-methods community health assessment and as a community intervention to increase recognition of work as a social determinant of health at the neighborhood level, was selected as part of an exhibit on health justice at the Centers for Disease Control and Prevention in Atlanta, Georgia. Our GLL has been strategically disseminated locally to community organizations in Little Village and North Lawndale as well as with federal legislators and city officials, including Chicago's Mayor Brandon Johnson, pictured below with GLHW Project Outreach Coordinator Dolores Castañeda.



Also, in terms of novel, participatory action research methodologies, we launched a photovoice study of informal workers in the Greater Lawndale neighborhoods. We currently have 14 research participants enrolled in a 12-stage research study, which will center the research participants as co-researchers and identify barriers and facilitators to informal work, including street vendors and in-home hair stylists. We have secured Institutional Research Board approval, trained our community-academic research team, and prepared for study implementation.



Our team also published guidelines, in September 2023, on how to advance community-based participatory research (CBPR) by centering reflexivity in one's praxis. We were able to share our CBPR approach through a UIC Center for Clinical and Translational Sciences [PI 411 Series](#) in December 2023 and at a UIC Office of Community Engagement and Neighborhood Health Partnerships Research Council meeting last month.

**Hebert-Beirne, J, Gonzalez, S, Chrusfield, M, Holloway, A, Lopez, JP, & Castañeda, D. (2023). Demystifying How Academic-Community Partnerships Use Reflexivity and Praxis to Promote Participatory Research Principles of Equity and Justice. In Ethical Issues in Community and Patient Stakeholder-Engaged Health Research (pp. 65-79). Cham: Springer International Publishing.**

Our methods are also featured in a forthcoming supplement about how labor migration and work precarity impact health at the community level.

**Forst, L obo Greater Lawndale Healthy Work Council, How do communities define “work precarity” and “labour exploitation”? Lessons for research from participatory research in high economic hardship communities in Chicago, Illinois/USA, European Journal of Public Health, Volume 34, Issue Supplement\_3, November 2024, ckae144.180**

## Navigating Challenges

We have faced several challenges over the past year related to budget cuts, sustaining community-academic partner engagement, and University constraints on participant compensation. Due to budget cuts, we were unable to re-hire a research assistant to work with the Employer Certification Program. In lieu of an RA, we have leveraged internal expertise of Ron Neimark, a staff member at the Great Lakes Center for Occupational Health and Safety to assist with the development of healthy work principles and engagement strategies to generate worker and employer feedback.

We have experienced challenges related to time and committee member participation in our Worker Cooperatives subcommittee. CBPR can sometimes move slowly, and it has taken longer than expected to plan and implement the landscape scan of worker cooperatives. In response, we are trying a new approach of providing clear deadlines and an adapted meeting schedule to keep work and decision making moving forward.

Over the past year we encountered recruitment challenges for the Photovoice Study with Informal Workers in one of our partner communities, North Lawndale. Ultimately, we revisited the study design and implemented a staged research approach in which community residents from Little Village participate first and we use the photovoice exhibit as a recruitment opportunity for North Lawndale residents. This recruitment challenge has reminded us of the need to further deepen our relationships in North Lawndale. Our new outlook means that we can learn from one community and apply the findings to the other, allowing us to compare the two and bring them together for the final exhibition. We are also experiencing challenges to compensate our research participants due to institutional barriers, but we are collaborating with the Institutional Review Board to identify solutions.

# Key Accomplishments



**The Employer Certification Program subcommittee has recently started collaborating with Working Family Solidarity to improve labor standards in Planned Manufacturing District #7, an industrial area in Greater Lawndale with a large concentration of manufacturing jobs. Together, we will develop healthy work principles to guide the development of labor standards for the Employer Certification Program.**



**Over the past year, Worker Cooperatives Subcommittee focused their efforts on implementing a landscape scan of worker cooperatives (co-ops) and co-op incubators in Greater Lawndale to better understand the characterization of worker co-ops and incubators that already exist and build relationships with these organizations. All subcommittee members received training on observation and interview methodology, which were used to collect data about co-ops and incubators. The subcommittee also worked together to intentionally co-create a landscape scan protocol including data collection guides and procedures for recruitment, data storage and data analysis. In total we interviewed 12 individuals representing six unique co-ops or incubators. The subcommittee was also trained in qualitative data analysis, and team members memo-ed transcripts to support with analysis. Presently, students on the subcommittee are working to aggregate memos from transcripts. While analysis continues, the subcommittee has also been working to co-create a reimagined feasibility study informed by our preliminary landscape scan findings.**



**In the Informal Workers Photovoice Study, we published a methods piece on photovoice (Kersten et al, 2024) and we trained our community-academic subcommittee members in photovoice methodology. We maintain a google site to share resources on photovoice. All community partners on the subcommittee have been trained in human subjects research. We successfully recruited and consented 14 research participants to the study.**

# Workforce Health & Well-Being for All as a Sustainable Business Strategy



# Workforce Health & Well-Being for All

Employers are key stakeholders in ensuring an equitable and healthy future of work and are now recognizing their role in workforce/population health and well-being. Recently, several workplace health promotion programs have moved beyond addressing physical health to include an array of programs to address the mental, social, and financial well-being of employees. Yet, inequities exist in access and uptake of these programs, especially among low-wage workers, who are disproportionately racial and ethnic minorities.

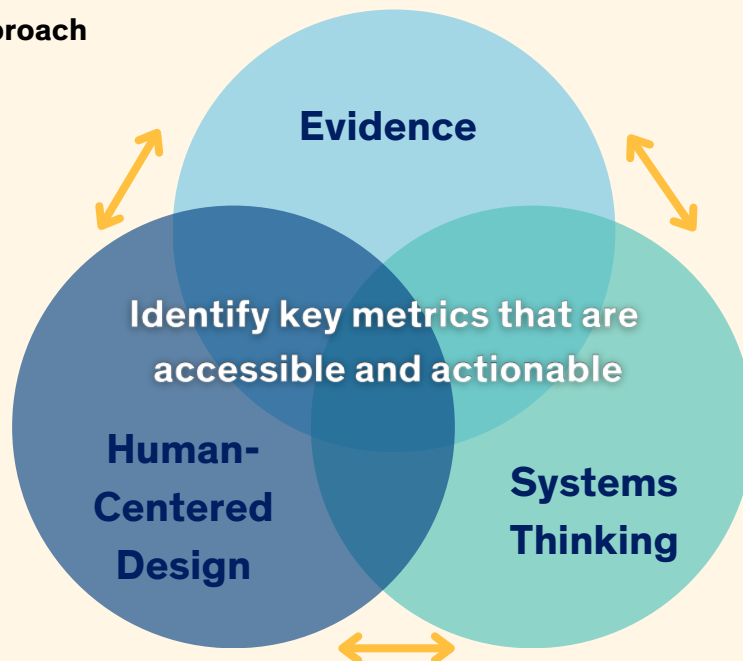
Employer-sponsored health benefits, workplace health promotion, wage structures, and culturally appropriate health and well-being programs are opportunities for businesses to address broader worker health and well-being (HWB) and mitigate health inequities. Although research suggests the importance of workforce health and well-being as a business strategy, this connection has not been fully realized by many organizations.

## Co-Creating Approach vs. Problem-Solving Approach

- Who should be included?
- How can we use participatory action research methods?
- What does a pilot test look like?

## Evidence and Data for Action

- What is working?
- What is not working?
- How can we bring a 'health equity lens' to the existing HWB initiatives?



## Connecting the Dots Across the System

- Who is doing what?
- Who are they already working with?
- What assets exist?

Figure 1. Multi-domain model approach to equitable health and well-being in organizations, Sherman BW, Stiehl E, Gupta R, Pratap PL. The importance of human-centered design in equitable health promotion initiatives. AJPH, 2024

Our project, which partners with a large healthcare system in North Carolina as the research site, has made large contributions to Total Worker Health by advancing a data-driven approach to understanding employee health disparities and health program utilization while integrating principles of systems thinking and human-centered participatory design (See Figure 1) to operationalize health equity within a healthcare system.

Our team has been presenting our findings to increase awareness of employee health equity, and the healthcare system has started pushing forward internal initiatives that have resulted from our work.

We worked with the healthcare system's internal data team to integrate and analyze claims data (healthcare utilization), well-being program participation, and clinical data (chronic condition status) by race and wage categories. Some of the findings are not surprising to organizational leaders, but the data had never been analyzed or communicated to assess health equity. The analysis allowed us to clarify and communicate some of the key challenges around employee health equity, making it easier for the organization to take collective action. Additionally, we have paired this quantitative data with qualitative data from key informant interviews and employee focus groups to strengthen our understanding of the barriers facing employee health. The qualitative data assesses the perceptions of the culture of health and health equity and drivers and barriers to HWB program participation among leaders and low-wage employees (specifically, environmental services (EVS) and nutrition staff). We found that:

- Holistic, multifaceted internal initiatives around health and well-being are available to all employees but, a lack of data hinders actionable responses to address health inequities.
- There is a gap between leader and employee perceptions of culture of health and health equity.
- A lack of belonging and trust limits engagement in HWB programs.
- Wage category and race/ethnicity are associated with differences in: Disease prevalence and control. We find intersectionality between wage category and race/ethnicity, too.
- Health promotion program participation is generally low.
- We see high turnover (within 365 days) among these low-wage worker groups and hypothesize that these business outcomes are associated with health inequities.
- Root causes/contributors to observed findings are multifactorial in nature; and
- Challenges of addressing employee health are multifaceted and require nuanced solutions.



We engaged with key organizational leaders from People and Culture (Human Resources) including Talent and Acquisition, Culture Coalition, People Strategy (Performance), Communication and Wellness and Well-being to share our data findings and explore their experience and existing assets/initiatives to address health inequities within these low-wage worker groups.

**While the healthcare system's leadership is used to addressing health inequities in their communities, they were surprised by the prevalence of health disparities among their employee population, whom they often exclude from their definition of community**

We have been working with leadership to identify key opportunities for having a large impact on employee health. Four key areas for potential interventions include:

- Future-Ready Workforce Initiative: Build external and internal talent pipelines to improve retention and engagement, specifically among front-line workers, reaching potential hires from surrounding communities.
- Wellness Warriors Health Champions: Develop teams of wellness champions to strategically engage with EVS, nutrition, and other front-line staff to improve well-being program awareness and participation.



- New Hire Orientation Reboot: As the organization transitions back to in-person orientation, we will promote more intentional follow-up coaching with new employees in the first 3-6 months
- Center for Health Equity Integration: Position the Center's activities so that they can inform organizational priorities around employee health and wellbeing.

Our findings demonstrate that employees will fully engage with organizations and their HWB programs/ offerings only when there is a culture of trust and belonging. We are proposing an intervention that connects the three spheres in Figure 1 (e.g., evidence, systems-level thinking, and human-centered design) to pilot test the creation of an ecosystem (coaching and mentoring touch points) that fosters health equity and supports new hires, specifically EVS and nutrition staff to:

1. Improve retention and create career pathways for EVS, nutrition, and frontline new hires
2. Enhance the health and well-being of these employees through sustained engagement in HWB programs and offerings

We are working with key leaders from People and Culture (Human Resources) to develop the specifics of the intervention and continue to explore other data sources to add to our existing data warehouse (safety data, workers' compensation claims). We intend to leverage these data to evaluate our interventions.

## Partnerships

We have established a relationship with HERO, a national non-profit dedicated to identifying and sharing best practices in the field of workplace health and well-being (HWB). We presented our research findings at the annual HERO Forums in 2023 and 2024, reaching HWB leaders in large and small organizations. Two potential areas for future collaboration are – to develop a health equity dashboard for employers and to implement our multi-domain model to address HWB inequities in other sectors.

We are making new connections in the Chicago area and plan to share our research findings and explore future collaborations with the following organizations:

- The Chicagoland Workforce Funder Alliance's, whose mission is to foster employer, worker and community collaborations to help ensure their impacts reduce racial disparities in employment and earnings.
- The Chicagoland Healthcare Workforce Collaborative (CHWC), which unites employers and industry partners to support an inclusive healthcare workforce, provide accessibility for Chicagoland's unemployed and underemployed populations, and develop innovative responses to the evolving needs of the healthcare industry.
- Healthcare Council of Chicago, a network of Chicago's healthcare leaders to drive meaningful change and positively influence the conditions that impact the health of our communities (including employees).

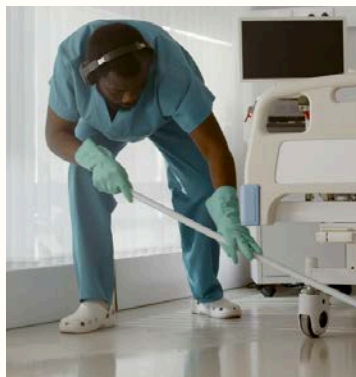
- Midwest Business Group on Health, a 501c3 non-profit supporting employers seeking solutions to better manage the high cost of health care and the health and productivity of their covered populations. The group serves over 150 companies who provide benefits to over 4 million people, with employer members spending more than \$15 billion on health care each year.
- American Heart Association's Health Equity in the Workforce initiative, which is convening employers and industry leaders to build a comprehensive roadmap that creates tools, resources, and knowledge products to help improve the health and well-being of our nation's workforce.

## Navigating Challenges

Since the start of our project, integrating the healthcare system's different datasets into the data warehouse has been a challenge. Initially, changing organizational priorities and a patient-centered focus on metrics hampered our ability to make meaningful progress with our quantitative data analysis for this project. We now have an established relationship and regular data meetings with the internal data team. We are also planning a publication with the data team.

Having quantitative data has made it easier for organizational leadership to advocate for our project interventions. For example, our analysis shows that Black low-wage workers have high Emergency Department visits and low preventive care use, relative to other groups. These workers are disproportionately represented in environmental and nutrition services, both groups that have a high turnover (> 90%) of new hires within the first year of employment.

Aligning our research process and interventions with organizational priorities has helped us address many challenges. Our initial idea was to conduct workshops with employees and leaders to develop our intervention. However, this process did not seem feasible. So instead, we have conducted several meetings with key leaders to identify existing assets and initiatives (addressing health inequities within the sub-populations of interest) that align with our research goals. We will also continue to incorporate employees from EVS and nutrition services into the design, implementation, and evaluation of the proposed intervention.



# Key Accomplishments



**We are developing a three-year well-being roadmap for our project partner. People and Culture leadership is committed to allocating resources to the implementation of this roadmap.**



**Leadership is making a Future Ready Workforce Initiative a strategic priority, so that our work will align more closely with organizational priorities.**



**The healthcare system's Center for Health Equity leadership has expressed interest in partnering with us to implement an intervention for employees coming from patient communities they serve.**



**We have approval to integrate new data sets (i.e., retention and turnover, workers' compensation, and safety data) into the enterprise data warehouse to continue to connect our current HWB inequities with business outcomes.**



**We have established monthly meetings with the internal data team to continue our analysis. Leaders have become more receptive to our work ever since we started reinforcing our qualitative data findings with quantitative data from the organization. This has given leaders the evidence they need to continue to support our work.**

**Select Publications**

Sherman BW, Stiehl E, Wator C, Pratap P. Why don't employees participate in well-being programs? A research-informed systems-based model. *J Occup Environ Med*, 2024;66:156-160. doi: 10.1097/JOM.0000000000003012.

Sherman BW, Stiehl E, Gupta R, Pratap PL. The importance of human-centered design in equitable health promotion initiatives. *Am J Health Promot*, 2024;38(3):443-447. doi: 10.1177/08901171241232057f

Sherman BW, Fendrick AM. Addressing Patients' Unmet Social Needs: Checklists Are a Means, Trust Is Foundational. *Am J Manag Care*, 2024;30(3):110-113. doi: 10.37765/ajmc.2024.89511.

Sherman BW, Henderson R, Kamin L, Phares S. Specialty drug use for autoimmune conditions varies by race and wage among employees with employer-sponsored health insurance. *J Manag Care Pharm*, 2024;30(3). Epub ahead of print March 14, 2024. doi/10.18553/jmcp.2024.23163

Jenkins KR, Stiehl E, Franklin J, Sherman B. The Association of Employee's Unmet Social Needs and Self-Reported Illness Related Absenteeism. Accepted, *J Occ Environ Med*, 2024.

Sherman BW, Tobb K. Trust in the patient-clinician relationship: A cornerstone for achieving health equity. Accepted, *Am J Accountable Care*, 2024.

Dobson, M...Pratap, P... Zoeckler, J. (2024), Re: Schulte et al., "An urgent call to address work-related psychosocial hazards and improve worker well-being": It's time to develop a national regulation regarding work-related psychosocial hazards. *Am J Ind Med*, 67: 1050-1052. <https://doi.org/10.1002/ajim.23657>

Schulte PA, Pot FD, Iavicoli I, Leso V, Fontana L, Almeida IM, Auntunes ED, Araujo TM, Caraballo-Arias Y, Balogun MO, Buralli R, Choi WJ, Cotrim T, Fischer FM, Fisher DL, Martinez MC, de Anchieta Messias I, Oakman J, Olympio KPK, Omokhodion F, Popkin SM, Ribeiro H, Pratap P, Salmen-Navarro A, Violante FS. Furthering decent work by expanding the role of occupational safety and health. *Work*. 2024 Sep 13. doi: 10.3233/WOR-240230.

**Presentations**

Sherman BW. Specialty drug use varies by race and wage among employees with employer-sponsored health insurance. Association of Managed Care Pharmacy, Orlando, FL, September 2023.

Sherman BW. Rethinking Employer Prevention Strategies to Improve, Quality, Safety & Wellbeing [panel]. National Alliance of Healthcare Purchaser Coalitions, Washington, DC, November 2023.

Pratap P, Emily S and Sherman BW. A systems-based approach to achieving health equity in well-being programs. Art & Science of Health Promotion Conference, Hilton Head, SC. April 2024.

Sherman BW. Employee Health, Equity & Outcomes. Cone Health Inaugural Health Equity Summit, Greensboro, NC, 2024.

Sherman BW. Employee Health Equity and Worksite Clinics [webinar]. National Association of Worksite Health Centers, 2024.

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# Our Communication & Outreach Activities

The CHW's Communication and Outreach Group (COG) continues to build networks and strategize with different stakeholders in Chicago, Cook County, Illinois and beyond, to promote worker well-being and share our Center's novel research. The COG is unique because of our priority to promote systems change through intentional partnerships. This systems change perspective allows the COG to explore how multisectoral, multidirectional engagement can be used to promote TWH more effectively. Below are some examples of the COG's unique contributions to the CHW.

The COG continued to work with member organizations of the Illinois Council for Occupational Safety and Health (ILCOSH), where we've begun working in subcommittees to develop ILCOSH's infrastructure, create streamlined communication across the state, and develop accessible materials for workers. The COG is leading ILCOSH's Communications and Resources subcommittees and participating in the Training and Prevention subcommittee, in partnership with the Great Lakes Center for Occupational Health and Safety (GLC-OHS), the International Union of Bricklayers and Allies Craftworkers, and DePaul's Labor Education Center. As a part of ILCOSH, the COG is uniquely positioned to help promote TWH throughout Illinois.

Building on the foundation of the CHW's Healthy Work Collaborative (HWC), UIC's Policy, Practice, and Prevention Research Center (P3RC), is now spearheading the Healthy Work Partnership, in close collaboration with the Cook County Department of Public Health (CCDPH) and Chicago's Raise the Floor alliance, which includes several local worker centers. The Healthy Work Partnership is funded through the American Rescue Plan Act. Through this initiative, CCDPH, the Cook County Department of Human Rights and Raise the Floor Alliance are working together to develop innovative strategies, strengthen labor enforcement mechanisms, and expand outreach to vulnerable workers across Cook County. By building on the successes of the HWC, this partnership

aims to enhance systems that safeguard worker health and well-being throughout the region. The COG provides technical assistance on communication and consciousness-raising for the Healthy Work Partnership. This exciting project allows us to continue building on the HWC's networks and successes.



The COG continued to provide technical assistance to the Public Health Workforce Council (PHWC), led by the Health & Medicine Policy Research Group. Through the PHWC, HMPRG funds public health stakeholders in the Chicago area to participate in the federally funded Good Jobs Challenge. Good jobs are those that align with the Departments of Labor and Commerce Good Jobs Principles. Within the PHWC, our team members engage with the Capacity Building workgroup and Supporting Workers in Action workgroup. We also had the opportunity to lead a PHWC session on 'Systems Change for Healthy Work,' which encouraged our public health partners to shift their paradigms and consider how TWH connects to the Good Jobs Challenge.

In collaboration with UIC's Industrial Occupational Surveillance Program (IOSP), the COG is leading outreach efforts in response to a critical issue emerging in our region. Recent violations flagged by the U.S. Department of Labor and the Illinois Department of Public Health have highlighted a surge in cases of silicosis and other severe lung diseases among workers in the engineered stonework industry. These workers are often exposed to hazardous levels of silica, which can lead to irreversible lung damage, including silicosis. In response, the COG has initiated outreach to affected workers and is working closely with ILCOSH, local health departments, worker centers, and other safety advocates to identify cases, refer workers to no-cost medical treatment, and assist in filing complaints against non-compliant employers. Our goal, in partnership with IOSP, is to build a strong case for the implementation of immediate and stricter safety regulations for employers in this industry.

On the external communications front, our team has strategized the best methods for sharing information on our social media and have developed social media series related to local and federal labor news, labor history highlights, and preparedness for workers, as part of Ready.gov's annual National Preparedness Month campaign. Our social media analytics suggest that our followers love to see our team members highlighted, as well as past and current worker strikes. Our Instagram account received the most engagement and has grown by approximately 100 followers in the last year!



## Partnerships

Our partnerships advance every aspect of the COG's work this year, and every year! Many of our accomplishments are because of our strong partnerships.

The COG's strategic and networked outreach has led to the following:

- We solidified our role in the region as a leader in training for worker health and safety workshops and curricula development,
- We supported simultaneous interpretation technology for hybrid programming in Spanish and English,
- We have a growing network of worker health and safety researchers and leaders to collaborate with on funding proposals, dissemination products, and more, and
- We built a structure to address emergent public health issues in our region and ensure accessible information is available for workers.

The CHW Research Network, led by the COG, aims to connect academic and industry investigators in Chicago who are conducting research on the future of work and the connection between work and health, particularly low-wage or precarious work. The Research Network has facilitated the exciting exchange of ideas and best practices in the field. For example, our team has shared SAS code to help interpret death index data. The COG has also created four research briefs for recent publications from our network and connected members within our division to present their research for our students, faculty, and staff.

We hosted the first CHW Research Network breakfast in May 2024, and will continue to do so annually!



The COG believes there is much to learn from researchers across different fields to support the study of healthy work! We have expanded our research network with six new faculty members from a range of institutions and industries.

- Dana Madigan who studies farmworker injury and surveillance in UIC's Division of Environmental and Occupational Health and Safety,
- Xóchitl Bada and Soledad Álvarez Velasco of UIC's Latin American and Latino Studies, who have a project using local radio shows to promote migrant worker rights,
- Yuka Asada who studies how health and nutrition policy implementation can advance health equity at our School of Public Health, with a particular interest in the food workforce,
- Romero Santiago, an occupational medicine physician at Carle Health and a faculty member of the Illinois College of Medicine, and
- Franklin Cosey-Gay who works in violence recovery and crisis and trauma intervention at the University of Chicago, with a particular interest in the mental health of the violence prevention workforce.

## Curriculum & Training



### Heat Stress

Heat stress at work is a critical issue, exacerbated by climate change, yet there is currently no national standard to protect workers from extreme temperatures. Warehouse workers are particularly vulnerable to these conditions and face heightened risks, as tragically demonstrated by the death of a worker in Joliet last summer, which has sparked Warehouse Workers for Justice and PASO- West Suburban Action Project to reach out to the COG and GLC-OHS to support development of a heat campaign for warehouse workers. We created content for train-the-trainer modules; content focused on recognizing symptoms of heat-related illness (HRI), HRI first aid, workplace controls to prevent HRI, and body and hazard mapping. We are currently in the process of compiling the total number of workers trained.



### Food Worker Health and Safety

For the second year in a row, we have participated in the Food Worker Justice Advocacy Project, facilitated by the Chicago Food Policy Action Council (CFPAC) and Roosevelt University's Policy Research Collaborative. Members and workshop presenters include Warehouse Workers for Justice, Farmworker and Landscaper Advocacy Project, Chicago Community Workers Rights, and Chicago Workers Collaborative.

The Food Worker Justice Advocacy Project hosts workers in the food sector for six workshops throughout the year; the COG has been involved in the planning and facilitation of each workshop. Topics include worker rights, cooperative business models, how to use data for organizing, and more. CHW Center Director, Kirsten Almberg, led the worker health and safety workshop in May 2024. At the health and safety workshop, the CHW invited speakers to talk about issues like workers' compensation and access to healthcare. The COG facilitated body and hazard mapping activities with the participants.

Following the workshop, participants completed surveys to inform future workshops. Participants noted that they enjoyed learning about Workers' Compensation laws in Illinois, as presented by attorney Anita M. DeCarlo, and about the Occupational Safety and Health Administration (OSHA). They also expressed interest in learning more about sick pay, best practices for organizing their coworkers. After the workshop, participants stated that they want to receive better job training, appropriate safety equipment, better wages, and a workplace free from discrimination due to race or sexual orientation. They are also eager to build worker unity. This feedback demonstrates how the workers are feeling confident, empowered, and growing their leadership skills throughout the workshop series.



### **Fight4UR Rights Chicago/Lucha por tus Derechos Chicago**

Led by UIC Latin American and Latino Studies faculty, the COG was invited to collaborate on the Fight4UR Rights Chicago/Lucha por tus Derechos Chicago workers' rights education radio pilot program. Fight4UR Rights Chicago/Lucha por tus Derechos Chicago is targeted at migrant and new arrival workers in Chicago and will be hosted by Lumpen Radio. Each installment will be led by a worker center and cover a specific workers' rights issue or industry such as street vendors, temporary workers, or health and safety. We will be supporting the worker centers in content development for three programs, with the first health and safety program scheduled for December 2024.



### **Domestic Worker Health and Safety**

The COG continues to work in partnership with GLC-OHS to update our previously developed job safety trainings for domestic workers. The trainings are currently being used by worker centers, Latino Union of Chicago and Arise Chicago. The purpose of the project was to update the sources, build on content gaps, create continuity between units and modules, and digitize the complete curriculum. As the final module for caregivers of children is being developed, our team is reviewing the previous modules we adapted to ensure flow throughout each unit, add external resources and media, and build connections across modules. Next year, our goals are to finish our internal and external review processes and make the modules open access.



### **Workers' Rights for Workforce Development**

The COG collaborated with University of Illinois at Urbana-Champaign's Labor Education Program (LEP) to adapt their Workers' Rights for Workforce Development Curriculum. We redeveloped the worker health and safety unit to include more content for young workers, workers in diverse industries, structural causes of unhealthy work, including capitalism, and promoted organizing for health and safety.

This iteration of the curriculum has more connections throughout the units, and includes new media and activities, such as posters inspired by labor movements, videos, poetry, and the CHW's very own Greater Lawndale Lotería game!





We are always proud to present our work and connect with health and safety leaders across the country on novel ways to advance worker safety and health equity. Here are some highlights:

- On November 8th, 2023, our COG director, Liz Fisher, co-presented “Empowering Workers in Precarious Jobs and Influencing Social Change: Lessons Learned from Embodied Theater Practice, Storytelling, and Interactive Theater with the Public” at the Work, Stress, and Health Conference with Jasmine Cardenas and Janise Hurtig of Workers Teatro.
- On November 12th-15th, 2023, our COG director, Liz Fisher, presented “Exploring Occupational Safety and Health Equity Impacts of Artificial Intelligence in the Future of Work” at the American Public Health Association Annual Meeting and Expo in Atlanta, GA.
- Our team flew out to Baltimore for COSHCON from December 6-8, 2023, where our outgoing COG co-director, Guddi Kapadia, co-presented a session with Debora Gonzalez of National Day Laborer Organizing Network (NDLON) titled “How Adults Learn Best - Popular Education Techniques for Worker Education and Training.”
- Also at COSHCON 2023, Guddi and our Outreach coordinator, Rocio Bautista, collaborated with the Great Lakes Center for Occupational Health and Safety (GLC-OHS) and the American Public Health Association (APHA) to host an expo table on APHA’s Decent Work Policy, where we talked to attendees about what decent work looks like to them and built an interactive board around what work they are doing around its 4 pillars. The result was a beautiful poster that represented the contributions of labor organizers and worker health and safety leaders all over the country.
- In March 2024, the COG team presented on power mapping and analysis, in a University of North Carolina at Chapel Hill course taught by Maija Leff and Laura Linnan, directors of the Carolina Center for Healthy Work Design and Worker Well-Being. The COG invited partner, Lori Simmons, of the People’s Lobby of Chicago, to speak about her experience using power mapping to advocate for Chicago’s Rideshare Ordinance, which promotes rideshare driver health and safety. We discussed how power mapping and analysis were used in the Healthy Work Collaborative to help project teams advance their goals.



# Navigating Challenges

Budgets were tight this year, and having our co-director, Guddi Kapadia, step away brought us down to a small but mighty team of two! We have been able to leverage funding through the Healthy Work Partnership and have been continuously reprioritizing our projects to ensure we are maximizing the efforts of our team. Our team also finds small ways to maximize our budget, such as researching tools and technology that allow us to do all of our social media scheduling for free. We have found that being proactive and taking the time to restructure, tap into additional resources, and build partnerships to offset costs is key!

The COG's In a Year's Work™ online game epitomizes our Center's approach to worker health and safety. In a Year's Work™ is an educational game that demonstrates how different workers within the same organization experience the social determinants of health, and how systems change at work and in their community can promote worker well-being. The COG's outgoing co-director, Guddi Kapadia, developed a GEM, or a game-based learning evaluation model, for the game. The GEM consists of a 6-item questionnaire measuring the game's effectiveness in a practical way, with indicators for game-based learning and game design. However, due to limited funds, we were not able to launch the evaluation online. We hope to be able to add this evaluation component to our In a Year's Work™ website soon.

Following feedback from the CHW's External Advisory Committee, the COG has led efforts in the Center to delineate our role in policy change. Historically, our center has approached engagement cautiously, recognizing the limitations of federal funding and that we are not policy advocates. Many of our partners' work heavily revolves around labor policy and the enforcement of worker protections, and we identified a need for an enhanced understanding of policymaking structures and the key actors involved. We also aimed to strengthen our relationships with legislators to effectively share our research findings.

To address these challenges, we initiated outreach efforts with policy champions in UIC's government relations and external communications teams. This partnership has greatly expanded our knowledge and capacity, preparing us to cultivate stronger relationships with our partners and support our research projects in disseminating findings that can be utilized by policymakers and workers' rights advocates to drive policy change.

These connections have proven instrumental in shaping our strategic approach. For instance, policymakers in North Lawndale and Little Village can leverage the Greater Lawndale Healthy Work (GLHW) Project's worker stories as evidence to advocate for necessary policy change in their districts. To facilitate these efforts, our team has developed templates for external communications with government officials, highlighting GLHW's findings and publications.

# Our Strategic Planning & Center Evaluation

The CHW's Planning & Evaluation Core (P&E) plays a critical role in assessing the fidelity and implementation of our Center's mission. The P&E Core, led by Dr. Almberg and Ms. Fisher, is responsible for the Center's strategic planning and ensuring continuous improvement. Our commitment to advancing TWH is reflected in our systematic evaluation processes.

In recent years, the CHW has focused on aligning its evaluation efforts with key themes identified through strategic discussions, including Building Knowledge, Building Awareness, Building Evidence, and Building Networks and Partnerships. Central to our evaluation framework is our Theory of Change, which guides our understanding of how our activities lead to the actualization of the CHW vision for healthy work.

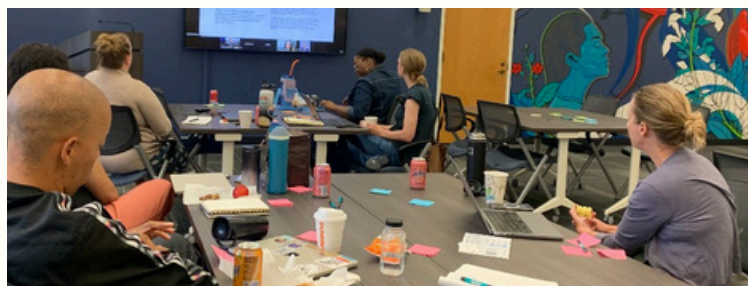
**The future of work promotes inclusive and equitable opportunities for healthy work that are valued in civil society, government, and private sector.**

**Healthy work is...**

- A social and structural determinant of health, and a human right
- A pathway to advancing systemic change and racial justice
- A significant contributor to workforce well-being

By engaging with various stakeholders—such as community partners, GLHW council members, students, CHW investigators, and our external advisory committee (EAC)—we aim to refine our evaluation processes and ensure they align with the needs and realities of the communities we serve.

As part of this process, we collaborated with consultant, Alison Goldstein, to review all previous center evaluation tools and reports. The review identified facilitators and barriers to the Center's activities, as well as potential evaluation metrics. As a follow-up, all internal CHW stakeholders were invited to participate in an online survey about the Center's values, mission, and how we measure our processes and outcomes.



The review identified that:

- Our relationships with community partners and our multidisciplinary approach, which challenges traditional power dynamics, have been unique contributors to our successes; and
- Barriers that have limited our work include hierarchies within academic institutions that challenge our research orientation, language barriers, and limited capacity.

#### **Recent Survey Findings and Retreat Reflections:**

The CHW hosted its annual retreat on July 18, 2024, for all investigators, staff, students, and GLHW council members. At the retreat, we reviewed findings from last year's evaluation survey, which highlighted racial justice as a crucial theme across all projects. Discussions revealed that all Center initiatives inherently address this issue, aligning worker justice with racial justice.

**Participants expressed a commitment to defining racial justice within the context of Total Worker Health and recognized the importance of integrating these concepts into our ongoing work.**

Reflecting on the survey results and discussions, several key themes emerged:

- **Strengths:** Participants noted our strong relationships with community partners and a commitment to interdisciplinary collaboration, which has been pivotal in advancing our mission and achieving Center aims.
- **Challenges:** Some participants identified the need for greater cohesion and communication across the CHW's projects to enhance our collective impact. There was also an emphasis on actively including all voices and perspectives in discussions to foster collaboration and reinforce our commitment to shared leadership.
- **Future Directions:** Participants expressed enthusiasm to continue conversations about how to navigate the intersection of racial and worker justice and a commitment to developing a shared definition of racial justice that reflects our Center's values and advances the field of TWH.

In response to the insights gathered during the retreat and as part of our continuous improvement efforts, the CHW is implementing several innovative evaluation strategies:

- **Realistic Evaluations:** We will focus on realistic evaluation approaches that prioritize delineating the complexities of our work for CHW stakeholders. This involves using an iterative evaluation model that incorporates feedback at multiple levels. In line with our theory of change, we emphasize participatory evaluation methods to engage stakeholders at every level, ensuring that the communities we serve are actively involved in shaping and assessing our programs. In the next grant year, we hope to strengthen the causal chains in our theory of change to ensure our approach to TWH for workers in precarious jobs is intentional and strategic.

- Internal and External Dynamics for Center Success: The retreat and survey findings emphasized the need to strengthen internal dynamics and cross-center communication. To address this, we will prioritize holding monthly full CHW meetings to create open dialogue around power dynamics and team cohesion. These meetings will provide a platform for discussing how our theory of change is being applied in practice across various projects. Externally, we will reconvene the EAC in December 2024 to share insights from our evaluation update and seek input on the strategic direction for the Center. This meeting will focus on aligning our research efforts with the current socio-political context and identifying areas where we can collaborate to amplify the impact of our work. EAC members will also be given the opportunity to participate in semi-structured key informant to help inform CHW evaluation processes and ensure they remain grounded in the lived experiences of the communities we serve.

Through these innovative approaches, the CHW aims not only to achieve its specific project goals but also to contribute to the evolving field of Total Worker Health. Our strategies foster deeper connections between racial justice and worker health, positioning our Center as a leader in advancing equitable health outcomes for vulnerable workers.



# Acknowledgements

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