PHWINS
PUBLIC HEALTH WORKFORCE INTERESTS AND NEEDS SURVEY

WHAT IT WAS LIKE WORKING DURING COVID-19

AS PART OF PHWINS 2021, 5,169 PUBLIC HEALTH EMPLOYEES SHARED THEIR THOUGHTS AND EXPERIENCES WORKING THROUGH THE COVID-19 PANDEMIC.

SEVEN IN TEN EMPLOYEES (72%) WERE PART OF THE COVID-19 RESPONSE: 76% AMONG LOCAL HEALTH DEPARTMENT EMPLOYEES AND 62% AT THE STATE AGENCIES.

THE RESPONSE SPANNED PROGRAM AREAS. AT THE PEAK OF THE PANDEMIC, COVID-19 RESPONSE TOOK BETWEEN 48% AND 83% OF EMPLOYEES' TIME.

1. PRIDE IN PUBLIC HEALTH WORK and/or MISSION

"WE HAVE TRIED DILIGENTLY TO RESPOND APPROPRIATELY TO COVID IN OUR CLINIC, EVEN WITH **TIRELESS HOURS AND TEARS SHED**. I CANNOT SPEAK FOR THE ENTIRE HEALTH DEPARTMENT, BUT OUR CLINIC SPEARHEADED THE RESPONSE AND CONTINUES TO DO SO **WITH OUR HEADS HELD HIGH**."

"I WAS GLAD TO HELP, BUT IT WAS DIFFICULT WORKING THE EXTRA HOURS AND GETTING MY DAILY WORK DONE AT THE SAME TIME."

RECOMMENDATION

FOSTER A WORKPLACE CULTURE THAT VALUES **TEAMWORK AND A MINDSET OF SHARED RESPONSIBILITY** TO ACKNOWLEDGE CONTRIBUTIONS DURING A HARD TIME.

"WE HAVE **STRUGGLED TO FIND A BALANCE** BETWEEN OUR MAIN LINES OF BUSINESS – FIRST STEPS, WIC, DENTAL, FAMILY PLANNING AND PRIMARY CARE CLINICAL SERVICES – AND PANDEMIC RESPONSE."

2. LEADERSHIP

COMMON THEMES

- VARYING FAITH IN LEADERS
- LACK OF PERCEIVED LEADERSHIP
- UNEVEN LEVELS OF SUPPORT

"OUR LEADERSHIP SEEMS TO BE **UNDERMINING OUR EFFORTS** TO KEEP THE COMMUNITY SAFE. I FEEL THAT OUR MAIN LEADERSHIP IS **ANGLING FOR RE-ELECTION** RATHER THAN COMMUNITY SUPPORT."

"I FELT VERY WELL-SUPPORTED AND CONFIDENT IN MY ASSIGNMENT THROUGHOUT THIS RESPONSE. ALSO, ONCE ADDITIONAL CONTRACT PERSONNEL WERE BROUGHT ON, ROLES WERE MORE WELL-ORGANIZED AND MORE EASILY EXECUTED. I FEEL OUR HEALTH DEPARTMENT DELIVERED A STRONG RESPONSE DURING SUCH A DIFFICULT AND STRESSFUL TIME."

RECOMMENDATION

REVIEW EXISTING **EMERGENCY PREPAREDNESS PROTOCOLS** IN THE CONTEXT OF LESSONS LEARNED DURING THE COVID-19 PANDEMIC TO IMPROVE COMMUNICATION AND ORGANIZATIONAL CULTURE.

3. BURNOUT or FEELING OVER-WHELMED

"STRESSFUL – VERY DIFFICULT TO MANAGE, ESPECIALLY WHEN YOU HAVE A FAMILY AT HOME. THERE CAME A TIME WHEN I FELT RESENTFUL FOR ALL THE HOURS I WAS WORKING AND THE **LACK OF OPPORTUNITY FOR REST**."

RECOMMENDATION

PRIORITIZE **EMPLOYEE WELLNESS** DURING NORMAL OPERATIONS, KNOWING SOME BURNOUT AND STRESS MAY BE UNAVOIDABLE DURING AN EMERGENCY RESPONSE.

4. COMMUNICATION

"COMMUNICATION HAS BEEN HORRIBLE. EVERYTHING I LEARN ABOUT COVID COMES FROM FACEBOOK AND THE NEWS BEFORE I HEAR IT FROM MY OWN ORGANIZATION."

INTERNAL

EXTERNAL

"ALIGNING MESSAGING WITH CURRENT FACTS AND POLITICAL STRUCTURES, ALONG WITH **FINDING A WAY TO SPEAK THAT MADE SENSE TO THE PUBLIC**, WAS A HUGE CHALLENGE. SILOS AND LIMITATIONS MADE IT MUCH HARDER."

RECOMMENDATION

CREATE CHANNELS FOR **CLEAR COMMUNICATION** DURING TIMES OF CHANGING INFORMATION TO HELP EMPLOYEES FEEL PREPARED AND VALUED DURING AN EMERGENCY RESPONSE.

5. OVERTIME/ EXTRA WORK

"DOING ALL THAT I WAS DOING ALONE WAS CHALLENGING. I NEEDED **MORE HELP AND BETTER PAY**."

"WE DESPERATELY NEED STAFF. I AM THE SOLE EMERGENCY PREPAREDNESS COORDINATOR AND I HAVE BEEN AT THE HELM OF THE RESPONSE WORK SINCE MARCH 2020. NOT HAVING ADDITIONAL BACKUP OR STAFF THAT ARE PLANNING-ORIENTED SEVERELY HINDERS OUR AGENCY'S ABILITY TO LEAN FORWARD AND GET AHEAD OF ISSUES. **WE WERE ALWAYS REACTIONARY**."

RECOMMENDATIONS

LEARN FROM EMPLOYEES' EXPERIENCES WITH **TELEWORKING AND TASK SHARING** AND CREATE MORE EQUITABLE GUIDELINES TO BETTER PREPARE AGENCIES FOR FUTURE CHALLEGES.

DEVELOP PLANS OR RESERVE FUNDS TO PROVIDE **OVERTIME COMPENSATION** DURING FUTURE EMERGENCIES.

OTHER THEMES IDENTIFIED

COMPENSATION
TEAMWORK
POLITICIZATION
UNAPPRECIATED
STAFF SHORTAGES
LOW PUBLIC SUPPORT
TELEWORK
STRAIN ON CORE RESPONSIBILITIES
EMPLOYEE WELLNESS
EMERGENCY RESPONSE PROTOCOLS

"I HAVE **ENORMOUS RESPECT FOR THE EMPLOYEES AND LEADERSHIP** AT THE DEPARTMENT OF HEALTH. I FEEL THAT THE PUBLIC DOES NOT VALUE THEM ENOUGH. TOO MANY PEOPLE SEE THEIR ROLE IN THIS PANDEMIC AS SELF-SERVING WHEN IT IS THE OPPOSITE."

NOW IS THE TIME TO INVEST IN THE PUBLIC HEALTH WORKFORCE

STAFFING AND HIRING FOR THE COVID-19 PANDEMIC RESPONSE WAS A LARGE EFFORT THAT SPANNED ESSENTIALLY ALL OF 2020 AND 2021, AND EVEN INTO 2022.

DESPITE THE MANY PUBLIC HEALTH EMERGENCIES SINCE 2000, FEDERAL INVESTMENTS IN PUBLIC HEALTH HAD DECLINED IN THE DECADE PRIOR TO THE PANDEMIC. THESE BUDGET CUTS ALONG WITH ONGOING RECRUITMENT AND RETENTION ISSUES LED TO PERSISTENT CHALLENGES IN EMERGENCY RESPONSE.

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