

Less than half of essential workers willing to report to work during a serious pandemic

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Although first responders willingly put themselves in harm's way during disasters, new research indicates that they may not be as willing— if the disaster is a potentially lethal pandemic.

In a recent study, researchers at Columbia University's Mailman School of Public Health found that more than 50% of the first responders and other essential workers they surveyed might be absent from work during a serious [pandemic](#), even if they were healthy.

The study, reported online in the October issue of the [Journal of Occupational and Environmental Medicine](#), involved over 1100 workers recruited from six essential workgroups, all located in the New York metropolitan area. The workgroups included hospital employees, police and fire department personnel, emergency medical services workers, public health workers, and correctional facility officers.

The researchers found that while 80% of the workers would be able (i.e., available) to report to duty, only 65% were willing. Taken together, less than 50% of these key workers were both willing and able to report to duty. According to the lead author, Dr. Robyn Gershon, Professor of Clinical [Sociomedical Sciences](#) and Associate Dean for Research Resources at Columbia University's Mailman School of Public Health, and Faculty Affiliate at Columbia University's National Center for Disaster Preparedness, "these data indicate that non-illness related shortfalls among essential workers could be substantial."

In anonymous surveys, workers reported on their willingness to work during a serious pandemic; the percent willing ranged from a high of 74% (public health workers) to a low of 56% (correctional workers). The researchers found that motivation to work during a serious pandemic was associated with workplace [safety measures](#) and trust in the employer's ability to protect workers from harm. Workers were also more willing to report to duty if their employer provided them with respirators and pandemic vaccine and had an established pandemic plan. Willingness was also tied to past experience; essential workers who had responded to a previous disaster were significantly more willing to report during a pandemic.

The researchers found that workers' ability or availability to work during a serious pandemic was closely linked to their personal obligations. Referred to as "dilemmas of loyalty," otherwise healthy essential workers might stay at home to care for sick family members or their children—if schools are closed. Organizational policies and programs that help workers meet their personal obligations will also increase workers' ability to work. "Even something as simple as ensuring that workers can communicate with their families while they are on duty, can have a big impact on both ability and willingness," reports Dr. Gershon.

Even though the Centers for Disease Control and Prevention (CDC) made workplace pandemic planning and training materials readily available, the Columbia study did not find much evidence of preparedness. Only a small proportion of the workers (9%) were aware of their organization's pandemic plans, and only 15% had ever received pandemic influenza training at work. As Dr. Gershon notes, "the study findings suggest that these preparedness steps are important in building worker trust. Workers who trust that their employers can protect them during a communicable disease outbreak will be significantly more likely to come to work and perform their jobs- jobs that are vital to the safety, security and well-being of the entire community."

To help ensure adequate staffing levels, employers should focus preparedness efforts on worker protection and the development of policies that facilitate the attendance of healthy workers. The authors suggest a number of relatively straightforward strategies that employers can take to support employees' response during pandemic outbreaks. These include:

- Prepare a plan to quickly and easily vaccinate essential workers and their families, so that when a vaccine is available it can be readily distributed.
- Discuss respiratory protection needs with [public health](#) officials. They can provide guidance on the need, feasibility, and use of these safety devices.

Provided by Columbia University's Mailman School of Public Health

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