UCLA Asian American Studies Center

ASIAN AMERICAN & PACIFIC ISLANDER POLICY INITIATIVE

FILIPINO AMERICAN ESSENTIAL AND FRONTLINE WORKERS BATTLING MULTIPLE CRISES

COVID-19, ECONOMIC INEQUALITY, AND RACISM



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DISCLAIMER

The views expressed herein are those of the authors and not necessarily those of the University of California, Los Angeles. The authors alone are responsible for the content of this report.

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EXECUTIVE SUMMARY

Despite being hailed as "heroes," essential workers on the frontlines of the pandemic have faced profound health, economic, and social challenges. Among frontline workers, Filipino Americans are disproportionately employed in healthcare and other essential industries, making them vulnerable to contracting and dying from COVID-19 (Wong, 2020; National Nurses United, 2020).

Filipino Americans comprise the largest Asian American ethnic group in California, making the state home to 43% of all Filipino Americans nationally, yet their needs remain hidden when grouped among Asian American and Pacific Islanders as a whole. To address the lack of disaggregated race/ethnicity data, this policy report highlights key findings from the Work and Wellness among Filipino Americans during COVID-19 (WWF) Study, conducted by UCLA and the Filipino Migrant Center (FMC), with the goal of informing an inclusive and equitable pandemic recovery response.

KEY FINDINGS

- Economic hardship and workplace concerns:
 55% of survey participants earned \$35,000 or less annually well below California's median income (\$41,870 in 2019) and 38% are concerned about not having paid sick days.
- 2. COVID-19 safety at work: 64% of survey participants fear contracting COVID-19 at work and the majority (58%) report they do not feel safe at work.
- 3. Health and mental health: 55% of survey participants experience symptoms of burnout a few times a month; about 11% report symptoms of burnout every day. Nearly two-thirds (65%) report feeling anxious, nervous, or on-edge and half (50%) reported feeling depressed and hopeless for several days over the last two weeks.
- 4. Anti-Asian racism: Filipino American healthcare workers, in particular, felt targeted and labeled as "disease carriers" due to their race as well as occupation.

RECOMMENDATIONS

- 1. Provide economic support and workplace protections.
- 2. Implement workplace safety measures.
- 3. Increase access to health and mental health care.
- 4. Prevent and address racial violence.
- **5. Support community-based organizations** servicing the needs of Filipino Americans.

INTRODUCTION

Despite being hailed as "heroes," essential workers on the frontlines of the pandemic have faced profound health, economic, and social challenges. Among frontline workers, Filipino Americans are disproportionately employed in healthcare and other essential industries, making them vulnerable to contracting and dying from COVID-19 (Wong, 2020; National Nurses United, 2020).

Since 2020, the high fatality rates and heavy psychological toll of pandemic stress among Filipino nurses have become widely recognized (Escobedo, Morey, & Ponce, 2021; Morton, 2021). Yet, even before the onset of COVID-19, Filipino Americans— particularly women and immigrants—employed in home health and residential care, manufacturing, retail, food services, and other service-based industries, faced economic hardships that have only worsened as the pandemic lingers (Nasol & Francisco-Menchavez, 2021; Gaitens et al., 20221).

All of this has occurred against the broader backdrop of racism and xenophobic hate directed toward Asian Americans, including highly publicized cases targeting Filipino Americans that have created a climate of fear and anxiety about issues of community safety (Yee, 2022; Grossman, 2021).



ethnic group in California, making the state home to 43% of all Filipino Americans nationally, yet their needs remain hidden when grouped among Asian American and Pacific Islanders as a whole. To address the lack of disaggregated race/ethnicity data, this policy report highlights key findings from the Work and Wellness among Filipino Americans during COVID-19 (WWF) Study, conducted by UCLA and the Filipino Migrant Center (FMC), with the goal of informing an inclusive and equitable pandemic recovery response.

METHODOLOGY

STUDY OVERVIEW

WWF study results presented here come from focus groups with essential workers (N=38 participants) and survey data (N=404 survey participants) of Filipino American workers in California, collected between November 2021 and May 2022. The survey oversampled immigrants, who made up a majority of the sample (65%, compared to 50% foreign-born Filipino Americans nationally). **Figure 1** highlights essential industries among survey participants.

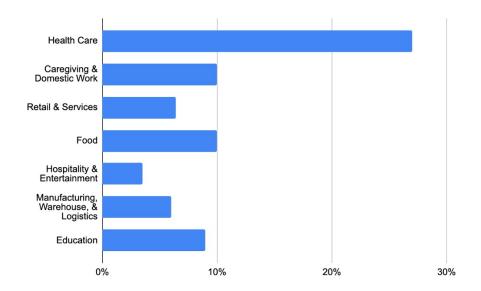


Figure 1: Essential and frontline industries represented among Filipino American workers from the Work & Wellness among Filipino Americans during COVID-19 Study.

RESEARCH METHODS

Focus groups, as well as surveys, were conducted in English and Tagalog. Participants were recruited via social media, email, announcements at community events, and word of mouth. To be eligible for focus groups, participants needed to: (a) identify as Filipino or Filipino/a/x American, (b) be eighteen years or older, (c) speak Tagalog or English, (d) live in California, and (e) be currently employed as an essential worker in the industries of healthcare, retail, food services, caregiving, education, or cleaning/janitorial services. Survey eligibility criteria were similar, with the exception that participants could be employed in any industry (i.e., inclusive of essential and nonessential workers).

DATA & FINDINGS

ECONOMIC HARDSHIP AND WORKPLACE CONCERNS

Over half (55%) of survey participants earned \$35,000 or less - well below the State of California's median income (\$41,870 in 2019); moreover, 41% of survey participants believe they do not earn enough to support their families, with 38% of survey participants concerned about not having paid sick days. Importantly, 25% of survey participants are concerned about being paid less than minimum wage and 19% of survey participants are concerned about wage theft from their employers. Reflecting these findings, focus group participants employed as caregivers in home health care settings reported forms of economic exploitation (e.g., wage theft) and emotional abuse—with one participant stating she felt as if she was made a "slave" (Caregiver, female, age 45-49). Essential workers expressed fear of "living paycheck" to paycheck" to support their families in the U.S. as well as in the Philippines, as articulated by a focus group participant (Retail worker, male, age 40-45).

COVID-19 SAFETY AT WORK

Nearly two-thirds (64%) of survey participants fear contracting COVID-19 at work and the majority (58%) of survey participants report that they do not feel safe at work. Although the shortage of PPE at the start of the pandemic was ubiquitous, lack of adequate and consistent PPE over

time has contributed to a sense of demoralization; one focus group participant explained, "If you're on the floor and you're reusing the same thing over and over and then COVID is everywhere, it doesn't really make you confident or feel safe working, putting that mask on over and over" (Nurse, female, age 40-44).

HEALTH AND MENTAL HEALTH

More than half (55%) of survey participants report they experience symptoms of burnout a few times a month; about 11% report symptoms of burnout every day. Nearly two-thirds (65%) report feeling anxious, nervous, or on-edge for several days over the last two weeks. Further, half (50%) of survey participants report feeling depressed and hopeless for several days over the last two weeks. Healthcare workers were chronically exposed to trauma on the job: as one focus group participant who worked as an ICU nurse for several years stated, "I have never experienced this much death and dying" (Nurse, male, age 35-39).

ANTI-ASIAN RACISM

About one-quarter (24%) of survey participants report feeling treated with less courtesy and respect a few times a month or more; on top of that, 10% of survey participants report being threatened or harassed a few times a month or more. Filipino American healthcare workers, in particular, felt targeted for violence and labeled as "disease carriers" due to their race

as well as occupation. One focus group participant recalled, "Because of wearing scrubs... we're [seen as] spreading the virus" (Nurse, female, age 35-39).

Older women focus group participants who relied on public transportation commonly experienced harassment. One participant shared an experience of assault on the way to work: "The people in the car said, 'Asian.' I immediately thought that there was hate for Asians going on. The other one came down from the car. Chasing me and throwing things at me. I was thankful that somebody came and blocked them, they even brought me to where I was working. I did not do anything at that time because I was trembling in fear" (Caregiver, female, age 60-64).



RECOMMENDATIONS

1. Provide Economic Support and Workplace Protections.

To provide tangible support for frontline workers who have risked their lives and the lives of their family members by reporting to work:

- Reinstate hazard pay for all essential and frontline workers;
- Implement year-round paid COVID-19 sick leave to ensure workers stay home when ill or when they must care for ill family members;
- Empower regulatory agencies by ensuring adequate staffing to enforce and strengthen labor laws, as well as protect against employer retaliation;
- Enhance economic safety net and benefits for essential workers, including undocumented workers; and
- Protect the right to collective bargaining and increase worker representation through unions.
- 2. Implement Workplace Safety Measures. To protect against COVID-19 and future outbreaks, ensure access to:
 - Adequate personal protective equipment (PPE);
 - Onsite (or time-off work to obtain) vaccine/booster shots and COVID-19 testing; and
- Improved pandemic preparedness, protocol, and health literacy education, as well as enforcement of financial penalties for employers who do not comply.

- 3. Increase Access to Health and Mental Health Care. To address the physical and mental health fallout of the pandemic:
- Increase healthcare funding for preventative, primary, and mental health care services that are culturally and linguistically appropriate as well as trauma-informed;
- Improve healthcare education and coverage for employees in low-wage and informal labor settings; and
- Fund organizations that provide community-based health programs (e.g., community clinics, access to healthy food, health education, culturally sensitive mental health education) serving Filipino Americans.
- **4. Prevent and Address Racial Violence**. To counter anti-Asian racism:
- Enforce stricter laws and prosecution of individuals and groups who commit hate crimes;

- Fund and partner with local organizations that work directly with impacted Asian American and Pacific Islander communities;
- Support violence prevention programs and resources geared for the workplace and the community at large, including bystander training; and
- Ensure stronger safety protections in public transportations systems, including education and training for transit operators to intervene.
- 5. Support Community-Based Organizations Servicing the Needs of Filipino Americans.
- Increase funding for community-based organizations to implement programming that supports Filipino American workers, including education on workplace rights, occupational safety, and capacity building for worker leaders.



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