



The Role of Work in Health Disparities in the United States

September 28 – 29, 2020

WebEx Virtual Meeting



National Institute
on Minority Health
and Health Disparities

Workshop Overview



Rada Dagher, Ph.D., M.P.H.

Scientific Program Director

National Institute on Minority Health and Health Disparities



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Disclaimer

This presentation was prepared by Dr. Rada Dagher in her personal capacity.

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COVID-19 And Racial/Ethnic Disparities In Health Risk, Employment, And Household Composition

[Thomas M. Selden](#) and [Terceira A. Berdahl](#)

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ABSTRACT

We used data from the Medical Expenditure Panel Survey to explore potential explanations for racial/ethnic disparities in coronavirus disease 2019 (COVID-19) hospitalizations and mortality. Black adults in every age group were more likely than White adults to have health risks associated with severe COVID-19 illness. However, Whites were older, on average, than Blacks. Thus, when all factors were considered, Whites tended to be at higher overall risk compared with Blacks, with Asians and Hispanics having much lower overall levels of risk compared with either Whites or Blacks. We explored additional explanations for COVID-19 disparities—namely, differences in job characteristics and how they interact with household composition. Blacks at high risk for severe illness were 1.6 times as likely as Whites to live in households containing health-sector workers. Among Hispanic adults at high risk for severe illness, 64.5 percent lived in households with at least one worker who was unable to work from home, versus 56.5 percent among Black adults and only 46.6 percent among White adults.



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Background

- The experience of work among US adults is strongly patterned by identities we consider when measuring health disparities:
 - ✓ Race/ethnicity and Immigrant status
 - ✓ Socioeconomic status
 - ✓ Gender
 - ✓ Rural/Urban
 - ✓ Sexual minority status
- Occupational disparities research has mainly examined work as a source of hazardous exposures.
- Research on the social production of health inequities (health disparities research) has seldom considered work.

(Ahonen et al. 2018. *AJPH*, Vol.108, No.3)
- The different work experiences across populations affected by disparities present an underexplored opportunity for research



The Scientific Method

“The duty of a man who investigates the writings of scientists, if learning the truth is his goal, is to make himself an adversary of all that he reads, and...attack it from every side. He should also suspect himself as he performs his critical examination of it, so that he may avoid falling into either prejudice or leniency.”

-- Ibn al-Haytham (Alhazen)



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Potential Research Contributions

- Disparities in Maternal Mortality
 - Do different working conditions and unequal access to leave benefits contribute to increased maternal mortality among African American women?
- Disparities in Opioid Use Disorder (OUD)
 - Does occupational segregation and differential patterning of unemployment rates contribute to disparities in OUD?
- Disparities in COVID-19 severe illness and deaths
 - Could the unequal distribution of essential jobs by race/ethnicity and unequal access to job flexibility (telework) contribute to these disparities?



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Goal of Workshop: Advance Work as SDOH

- Identify priority research areas to understand and address the role of work as a SDOH that contributes to health disparities.
- Promote multidisciplinary health disparities research by convening experts from broad range of scientific fields.



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Workshop Planning Committee



Rada Dagher, Ph.D., M.P.H.

Scientific Program Director

National Institute on Minority Health and Health Disparities



Nancy Jones, Ph.D.

Scientific Program Director

National Institute on Minority Health and Health Disparities



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Session Moderators

In addition to **Rada Dagher** and **Nancy Jones**,



Rina Das, Ph.D.

Scientific Program Director

National Institute on Minority Health and Health Disparities



Nadra Tyus, Dr.PH., M.P.H.

Scientific Program Director

National Institute on Minority Health and Health Disparities



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Workshop Agenda

Day 1 – Overview and Conceptual Grounding

- Theoretical Foundations
- Operationalizing the Concept of Work
- Analytical and Data Approaches

Day 2 – Mechanisms and Pathways

- Occupational Segregation
- Worksite Segregation
- Lifecourse and Intergenerational Transmission
- System-Level Influences

Q&A and Discussions



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Thank You!



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