

“Essentially Unprotected: Health Data and Surveillance of Essential Workers During the COVID-19 Pandemic“

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Transcript

Amanda Lenhart

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Hello everyone, and welcome to Databite 153: Essentially Unprotected: Health Data and Surveillance of Essential Workers During COVID-19. I'm Amanda Lenhart, Program Director for Health and Data at Data & Society. I'll be your host for today with Data & Society Researcher Livia Garofalo, alongside the events team, Tunika Onnekikami and Rigo Lara Guzman. We would first like to thank the Robert Wood Johnson Foundation for their support of this research.

For those joining us for the first time, Data & Society is an independent nonprofit research organization. We believe that empirical evidence should directly inform the development and governance of new technology. We study the social implications of data and automation producing original research to ground informed evidence-based public debate about emerging technologies. Data & Society began in New York City, an island node in a large network of hills, rivers, and mountains in the Atlantic Northeast, known as Lenapehoking, homeland of the Lenape Diaspora, and a historical gathering place for many native peoples.

Since the pandemic, we left our Manhattan office and have been connecting online by a different network, a vast array of servers, cables, and computer devices. In the United States, much of this infrastructure sits on stolen land, acquired under the extractive logic of white settler expansion. As an organization, we acknowledge this history and uplift the sovereignty of indigenous people, data and territory around the planet.

I'm excited to introduce my colleague and co-author on this report, one of many, Livia Garofalo, a cultural and medical anthropologist and researcher on the Health and Data team at Data & Society, and she'll introduce today's interpreters and panelists.

Livia Garofalo

[\(01:50\)](#)

Thanks, Amanda. Today we are joined by Claudia Alvarez, who is a translator, interpreter, and localization specialist based in Lima, Peru, as well as Valeria Lara, an interpreter living in Mexico City. To access the Spanish to English interpretation, you can click on the globe on your computer or the three dots if you're using a phone, and then select Spanish. This will enable you to hear the simultaneous interpretation, so gracias Claudia and Valeria.

It's a pleasure for me to introduce our panelists for today who are Angela Stuesse and Irene Tung. Angela Stuesse is an Associate Professor of Anthropology, at the University of North Carolina Chapel Hill. And Irene Tung is a senior researcher and policy analyst at the National Employment Law Project. So, welcome and thank you again for being with us today to discuss this report. We'll start with a short presentation from Amanda to frame this discussion. So back to you, Amanda. Thank you.

Amanda Lenhart

[\(03:00\)](#)

All right. Hopefully everyone can see the screens here. We really wanted to ground this conversation today in the research that Livia and Ireti and Joan and I have been doing for the last almost two years. And as a part of this project, we wanted to understand what workers as particularly essential workers' experiences were with health related surveillance at work during the pandemic and its impact on their lives. We wanted to understand what tools were being used to capture this data and how it was being used. So how do we do that?

We did this by interviewing 50 workers in grocery stores, meat packing and food processing, manufacturing plants and warehouses between October 2021 and March of 2022. We also did nine interviews with additional experts in occupational safety, public health, employment law, and work organizations. We conducted these interviews in English and Spanish over Zoom, and all participants were offered complete anonymity, and the participants were compensated for their time.

So one thing we actually need to talk about before we get into the meat of the findings is that the workers in this study came into the pandemic with an already baseline of precarity. So many of these workers worked in high risk occupations, particularly the meat packers and the folks working in warehouses. Many of them worked in low wage occupations, and almost all of these workers, many of them, had very few supportive policies. In some cases, there was no paid leave of any kind, often no paid sick leave, and many of these workers also had punitive point systems for any type of work they might have missed. Many of them also had no access to health insurance. So already, with a baseline level of security there, many of these workers were also predominantly workers of color who faced disproportionate risks, in their work, in their lives through racism, but also through racism and challenges within the medical system. That meant

that workers of color and their outcomes around COVID-19 were predominantly more negative than white Americans.

Similarly, public health guidance was also super challenging during this time. Public health guidance and the intersection between that and the changing political winds, regional differences in infection, guidance from employers—all of those were constantly changing both across the study time period, but also across the pandemic. And workers were caught in the middle trying to manage these constantly shifting and changing, understandings of the disease and approaches to it, and political approaches to it, and trying to navigate all of it. And so all of these things together created this condition of real stress and difficulty for these workers.

The one thing that came out loud and clear in our study is that these essential workers wanted to know very critical pieces of information when they walked into work. They wanted to know who is sick, is there COVID in the workplace, but specifically who is sick? How close have they come to me and for how long? And will I infect my family? And so employers were doing some things that we'll get to in a second—there's responsibilities that employers have—but they were doing some, taking some steps to try to collect health data about workers as a part of a plan of trying to keep the workplace safe. Some of this happened at the entrance, and that's particularly temperature scans and these symptom and exposure surveys. Some of this happened inside the workplace, such as cameras and human monitors. There was also an enormous number of other types of spatial and temporal shifts, both in scheduling and in locations and space in the workplace that also affected workers.

But one thing that's also important to note is a lot of workers were kind of skeptical of these changes, referred to, in some cases, as hygiene theater, or from our study as COVID theater workers thought this was a performance, they questioned how effective these measures were in actually keeping them safe, felt like it was the employers just trying to demonstrate some sense of care, not caring whether it was effective. At the end of the day, some of these actions, particularly those at the entrance to the workplace, often put workers in closer proximity to each other than they thought was safe and potentially increased their risk. So that was another interesting challenge with this data collection in the workplace. Employers also had a really important needle that they were trying to thread here. The Occupational Safety and Health Act requires employers to provide a workspace that is free from recognized hazards that might cause harm or death. But on the other hand, the Americans with Disabilities Act covers health information in the workplace and requires that these employers keep this information strictly private, particularly information that's about the body, that would be a part of what might be called a medical exam. Other types of information that might pertain to health, such as information about ventilation or about movements in the workplace, not necessarily covered under this, but information about COVID 19 status in particular, your body temperature. All of this had to be held strictly private.

Employers were trying to walk a line here, but what did they do? They did collect some data, as we heard earlier, through these temperature checks and all of these different methods, but they were somewhat haphazard about it. There wasn't a lot of data retention, it was uneven,

sometimes it was just on a piece of paper—it wasn't particularly consistent. The thing that's actually most important though, is that they didn't share this information back with workers. What information they shared was very vague, and unspecific that COVID existed in the workplace, but not with enough informational specificity to workers to help them understand and calibrate their own risk.

This is actually a quote from one of the workers in our study upon him learning that his supervisor has COVID and that his other supervisor lied to him about it. He said “There was no contact tracing, none. I was livid. I couldn't believe that out of, out of every little thing that wouldn't just give me the kindest thing of just saying, go get tested. Not even saying who got it, just saying, go get tested. It's for your own health. Nothing, just wear your mask, which nobody did. And that was that.”

Another thing we need to know here is that Amazon was a particularly well represented employer in this study, and that they are different. We have a part of the report called the Amazon Exception. And really what's important is that Amazon already has a preexisting system for collecting an enormous amount of data about their workers, and they just added onto it through the pandemic. The intensity and expansiveness of Amazon's data capture was unparalleled in our study. They really were a true outlier. But one thing that was quite consistent in which Amazon is just the most extreme version, is that for almost all the employers in our study, data is collected for the benefit of the employer and not for the benefit of the worker. And Amazon, again, just takes that to and to the extreme.

What did workers do? Well, they were afraid. We hear this all throughout the interviews. This was a scary and frustrating, angering time for workers, but workers are also resilient. And they took this opportunity to build on the relationships they had with other workers to build bridges across these informational voids. So they built on these histories of mutual aid working together. You might call it co folk contact tracing, you might call it rumors, you might call it just, kind of coordinating across, but workers work together to try to understand and better understand their risk in the workplace.

Sometimes workers even coordinated to create new policies that would affect a particular subpart of a work site. For instance, workers in our study who created a mask mandate to enter their part of the work site, which ultimately their employer supported, even though the employer was unwilling to place a mask mandate over the whole workspace.

It's also important to remember that unions and work organizations also served a really important role here. In the workplaces where they were present. They served this important intermediate mediating role between workers and employers, holding employers accountable for the safety that both the CDC and public health recommended, but that they promised to do, but also keeping workers accountable and making sure that workers are reporting their own health status.

It's important to note here too, that for workplaces with high turnover or lots of temporary employees where workers don't have such great relationships with each other, this was a lot harder to enact. So at the end of our study, we asked workers what would make them feel more protected? We asked experts this too. The first three bullets on this slide really encapsulate what workers wanted. But critically, workers wanted respect. They wanted respect for their dignity as humans, and they wanted that to manifest through basic safety net policies. They wanted paid sick leave. They wanted paid time off. They wanted a \$15 federal minimum wage. They wanted affordable functional health insurance. They also wanted the respect of clarity about infection in the workplace. They wanted to understand this, and that could be through trustworthy contract tracing. We have very few examples in our study of this, but a couple which use a technology to do contact tracing, and with data minimization policies in place workers accepted and appreciated this type of tra contact tracing.

Other things that were suggested to us through some of the experts at other workers that we talked to were worker health committees. So there are some pilot projects in Los Angeles and New York where workers come together to do peer education, but also to work with employers and with public health to help improve the work, the safety of workers, and the work site. Also, revising ADA guidance to help better balance privacy with safety, particularly with airborne materials. And finally, increasing funding for OSHA. OSHA being the main lever we have in this country to help keep workplaces safe and healthy. OSHA has been chronically underfunded in a bipartisan manner, and so more funding for OSHA would help it actually do the enforcement of the rules we have on the books. And I wanna lead with this quote from one of our workers:

"I just think that the company could do better if they wanted to, rather than just looking at us as just numbers. Try and see us as human beings, as people that have been risking their lives every single day for them." And as I said, this is based on a report that is gonna be fully released on March 1, and we wanna talk about it with you all today. There's a link below that you can access it if you haven't already had a chance to take a look. With that, I'm gonna hand it over to Livia, Irene, and Angela to take this conversation and expand on it. Thanks so much.

Livia Garofalo

[\(13:47\)](#)

Thanks so much, Amanda, for that. You can find all the information in the chat. but thanks so much to our guests for being here, Angela and Irene, who have done extensive work on labor. And so I wanted to start with Angela.

So in our research, we've talked to a lot of meat packing workers across United States, and I wanted to ask if you could talk a little bit about your own work that you've done in poultry processing and what are the structural conditions of precarity in that kind of low wage work that was present even before COVID, and that then led to some of these huge outbreaks in these giant meat packing plants?

Angela Stuesse

(14:33)

Sure, Livia, I'd be happy to, and I'm just really excited to see this essentially unprotected report come out. And it resonates with a lot of my research expertise and also takes it in directions that are exciting. And I was really happy to see the advanced copy and get to learn from you all. Like you mentioned, my research has been largely in the poultry industry, but poultry shares a lot of the same basic contours as meat packing. Rural, physically grueling, low age, low union density, heavy, heavily reliant on Black and brown workers, on refugee and immigrant workers, many of whom are undocumented. Having written a book on this industry called *Scratching Out a Living* in the COVID moment, I was able to bring this expertise to bear and weigh in on the structure of these two industries as it relates to labor, which together, as you noted, became early hotspots of COVID illness and death.

I appreciate the question of what happened pre-COVID because this industry has so long relied on the surveillance of workers to stretch their labor capacity To decrease labor costs and increase profit. So some of my work has looked at what was happening in the 1970s and 80s and even 90s when African-American workers were organizing—US-born workers, largely—black workers, organizing for better wages and working conditions, and gaining some traction. Rather than meeting those basic demands, the industry fought back. And where I've conducted my research in, in rural Mississippi, this took shape in retaliation and violence, and eventually in this very strategic, calculated campaign to recruit and transport thousands of immigrant workers to the area, basically flooding the labor market, and essentially rendering all workers disposable.

For six years, I collaborated with the Mississippi Poultry Workers Center, and I coordinated their workplace injury project, where workers would come when they were sicker and injured as a result of their work in the chicken plants, and when they were unable to access basic medical care and workers' compensation benefits due to their employer's obstructionist tactics, and the worker center could not keep up with the demand for help, there was such great demand.

I think it's worth noting that workers in the industry have long been highly surveilled, not just by their employers and supervisors, but also by government agencies. So in Mississippi, I looked at the role of the State Sovereignty Commission in the 1960s that was there to keep an eye on labor activists, civil rights activists, trying to keep people of color and low wage workers from organizing. Today we can look at the federal agencies. For example, immigration and customs enforcement whose periodic workplace raids have functioned largely as a police force that ensures undocumented workers, but really all workers, keep their heads down and compel them to accept dangerous and dehumanizing conditions. The most recent of these, a coordinated raid right before the pandemic, on seven chicken plants in the towns where I worked, is now known as the largest single state workplace raid in US history, detaining nearly 700 workers. And I think it's also important to note that I said *some* federal agencies, because others like OSHA, Occupational Safety and Health Administration, as you all note in your report, have been extremely underfunded for the duration of their existence, are able to do little to oversee the conditions in the industry.

I guess that's what I share to set the scene for when the pandemic hits, because the factors leading to this industry becoming a hotspot were fundamentally shaped by these political economies of exploitation that are so deeply embedded in this industry's labor practices and in low wage work more broadly.

Livia Garofalo

[\(18:59\)](#)

Yeah. That's really interesting what you mentioned about OSHA, because in these plants, the USDA is also present. There's a lot of surveillance of other entities that are really checking on the quality of the meat. There's a lot of biocontainment stuff going on to ensure that the meat passes all sorts of kinds of checks. But this was not applied, as we heard in our work, to workers. It wasn't really applied to the health and safety of workers who, many of them got infected in these plants.

Angela Stuesse

[\(19:35\)](#)

And I would just add to that, like sometimes food safety comes at the expense of worker safety.

Livia Garofalo

[\(19:41\)](#)

I wanna put a pin in the injury discussion, because I think we can talk about that with Irene when we move to Amazon.

I just wanted to ask a follow up question to Angela. The failures that led to the outbreak, especially in meat packing, how could that story have gone differently? What would the alternative story be—the failures that were so clear also during the Trump administration? We have to remember that that was the moment.

Angela Stuesse

[\(20:21\)](#)

I remember being so struck in the early months of the pandemic when my life and so many of our lives were really transformed dramatically in response to the threat of the coronavirus. We were staying home and nothing was the same in my life. I would talk to workers, who I'm still in touch with, and their lives were basically the same: heightened levels of stress, but nothing had really changed in their daily routines. They were sharing that they were pulling full shifts, that they were still working shoulder to shoulder on lines, not a face covering, not even like a plastic shower curtain barrier between them. I was following in the news workers across the country were, in particular talking about meat and poultry, really making these pleas for paid time off,

which would've allowed them to stay home when they had COVID symptoms or suspected exposure. Those weren't gaining traction locally or in DC.

I'm also thinking back to when, a worker leader and friend of mine said, Sosa Mendoza was dying in the intensive care unit of the university hospital in Jackson, Mississippi. He was, on the early end, he got sick in April and passed on May 2nd. one of the attending physicians said to his family in the waiting room, this place is full of people from the chicken plants. It was kind of a light bulb going off. When the pandemic was raging, workers found themselves, as you guys noted, without sick leave, earning below a living wage, often unable to find another job. Jobs were scarce, undocumented folks have trouble finding jobs anyway. They were largely ineligible for the pandemic driven unemployment benefits, the stimulus benefits, and dividends. They weren't receiving hazard pay. This industry didn't need to offer hazard pay because there were so many other, arguably, so many other mechanisms for compelling them to work. What I was hearing resonated with what came out in the report, but people couldn't risk staying home, felt compelled to show up at work, no matter the cost.

You mentioned the context of the Trump administration and this report in this industry was super important. Even as early as April, the industry was already having conversations with the Trump administration's backroom feeling to ensure continuity of production. Tyson Foods put this famously full page ad in several national papers, warning of supply shortages, and pressured both the CDC and OSHA to relax industry health and safety protections. President Trump then enacted the Defense Production Act, to address, quote unquote liability problems in the food supply. This was essentially signaling to the industry that they could count on the administration to have their backs right in case of worker illness and death.

Public health departments were trying to shut plants down, and it wasn't this that prevented them from doing it. So I think this is why once the industry later, like maybe starting in May and in the summer of 2020, yielded to some of this public pressure and started offering PPE, temperature checks, plexiglass barriers, like some degree of distancing in break rooms. The workers that I was talking to really saw it as this cruel joke. Like, who are they kidding? What's the point of taking our temperature? We've already all gotten sick.

One person sent me a picture of a t-shirt that said, today I'm a food hero. And found it practically laughable. I also wanna mention some meat processors announced that summer that they were gonna open medical clinics inside of the processing facilities. And this was trumpeted in the news as a positive step forward for workers who might not be able to take time off work in order to get medical care or get tested. I think others of us who were pretty familiar with this industry's history of surveillance and retaliation against injured and ill workers, saw it as a big red flag.

Livia Garofalo

[\(25:22\)](#)

Another way of collecting health data haphazardly.

Angela Stuesse

[\(25:30\)](#)

I just wanted to share one more thing. This morning, I checked in with somebody asking what COVID protections and safety measures still exist? There was a report last week indicating that a lot of these have been retired. Their comments really resonated with the reports findings of extensive faulty data collection. "I went to work last week with 103 degree fever, and they pointed that thing at my head, and this happens all the time." And this person, actually—I found it remarkable—they used the word *simulacrum* to describe the health and safety provisions still in place. And I felt like that was also a real echo with Data & Society's work: the sense that there's a performance of care and safety, but not the real thing. I think this kind of surveillance has already always existed, and like you point out, is not for workers' benefits.

Livia Garofalo

[\(26:26\)](#)

Thank you. That, that simulacrum word is, that's incredible.

I wanted to turn to Irene, speaking about giants. Irene, could you share a little bit about your research, about workers' experience with COVID in workplaces? Like in Amazon warehouses, which we talk to a lot of Amazon workers as Amanda, previewed. Amazon, a place that collects every single data point in the world, but again, to the benefit of the employers and not, and not for the benefit of the workers who were working the whole time and are working still.

Irene Tung

[\(27:10\)](#)

Thank you, Livia. It's great to be here today discussing this fantastic report. So a lot of my work has focused on Amazon and surveillance, both before the pandemic and to the present day, also on workers' experiences with retaliation during COVID. Many workers, as Angela has mentioned, faced retaliation for speaking up about their health and safety concerns in the workplace. Starting in March, 2020, we started to hear numerous reports of retaliation, not only from Amazon workers, but across the country, retail workers, all kinds of essential workers, retaliated against for speaking up about COVID in the workplace. And we conducted a nationwide survey of more than 1100 workers in mid-May of 2020, and found that more than one in eight workers reported retaliation, either against themselves or their coworkers for raising COVID related workplace concerns.

We also found that Black workers were more than twice as likely as white workers to have seen possible retaliation by their employer. This was also corroborated by, on the ground reports by Amazon workers. What we saw is that COVID really laid bare the holes, not only in the health and safety regulations in the US, but the lack of protection generally, and specifically in an at-will employment context, in which retaliation is exceedingly hard to prove. In the United States, an employer can fire you for any reason or for no reason at all, so in that context, the burden is on

the worker to prove, to prove that they were retaliated against, it's a very, very difficult to prove the employer could have fired you because they didn't like the color of your eyeshadow, not because they're retaliating against you, because you spoke up about, COVID concerns in your workplace.

Out of the experience of COVID, there's really been a renewed energy to strengthen enforcement and retaliation provisions under health and safety law, but also to look at ending the at-will employment system in the US. We've seen a number of new campaigns started by worker organizations in the last two years to address these issues. In Illinois and in New York City, there are currently bills to establish just cause job protections and to end at-will employment. Those really came out of the experience of workers during COVID and seeing how little protection there was against retaliation. I think that's one important piece. Then I think reading your report, I really want to just lift up how this report does such a good job of explaining the flow and control of employee health data and what employers did or did not do with data, specifically about COVID test results, and how workers created their own systems of informal data sharing.

I'd also like to take a moment just to focus our attention specifically on those COVID test results and on the critical period of time before the data about that test result is reported to the employer. So in other words, the moment of data collection and the worker's role there, we tend to think of surveillance as something that the employer does to the worker in which the workers are essentially just an object of that surveillance.

But I'd like to complicate that slightly, and share the story of a home care worker from Chicago, Manuela Sepulveda, who is a member of the organization, Rise Chicago. and they're part of the campaign for the Secure Jobs Act in Illinois, which would establish just cause job protections, for all workers in Illinois. So Manuela worked for a home care agency in Chicago, and in April, 2020, she tested positive for COVID, but never experienced any symptoms. After a two week quarantine and a doctor's note, approval from her doctor that she could safely return to her job, Manuela called her employer to return to work, and the employer disregarded her doctor's note, and the fact that she had quarantine for two weeks and demanded that she supply a negative COVID test with a very short and arbitrary deadline. At the time, tests were an extremely short supply, and most testing sites would not retest someone who had already tested positive and safely quarantined. When she was finally able to secure an appointment for a test, it was one day after the arbitrary deadline that her employer had given her, and her employer fired her. So, Manuel's experience has been a common one and it really illustrates, I think, an important dynamic in the COVID health surveillance regime, which is that this is an entire system of health surveillance in which employers coerced workers into collecting and reporting their own health data under the threat of losing their job, penalized them when they were unable to access the resources to do so.

And so this of course, shifted a significant portion of the cost, responsibility, and the labor of health surveillance onto the workers themselves. So the workers were far from passive objects of surveillance, but in some sense, we can understand the system as a form of coerced worker

subsidized pay, pay-to-play surveillance. Then as your report so brilliantly shows, while employers demanded the health data from workers as a condition of employment, they didn't necessarily use those data to protect workers' health and did sometimes use those data to discipline and control workers. So that's everything that you're reporting.

Livia Garofalo

[\(33:25\)](#)

That's really an interesting perspective. We heard from so many that even the moment of testing was extremely confusing just logistically. Also, we interviewed workers from the entire country. So the experiences of workers in different parts of the states were very different. They were under very different mask mandates, vaccines. We heard all kinds of attitudes too, in terms of, willingness to get tested, willingness to get vaccinated, willingness to wear a mask. But the confusion was definitely the through line.

Irene Tung

[\(35:41\)](#)

What your report does such a good job of showing is that during the pandemic, for workers, lack of privacy wasn't necessarily the primary problem. Instead, they had many other concerns related to what happened to the data collected and these concerns included, but were not limited to, the asymmetry between worker and employer in access to the data collected, and also the arbitrary and selective use of surveillance data for disciplinary purposes. That section in your report where you talk about how cameras were used retroactively and often selectively for punitive purposes after the fact these are some of the concerns that workers had that we've also heard about. And these concerns really point to fundamental gaps in our current regulatory system governing surveillance in the workplace.

It's because our framework on protecting people from surveillance in the United States is largely based on a consumer privacy model. There's a well developed body of consumer privacy regulation. So policymakers have tended to default framework, and a lot of first worker and workplace surveillance reflected that, almost like they just replaced the word *consumer* with the word *worker* in the legislation. So these bills deal with questions like, are the workers notified when data is collected? Where will the data be stored? Will the data be shared without permission? Will the data be sold? All of these are important questions, but they don't necessarily get to the heart of what you talk about in your report. It's because the power dynamic and the relationship between workers and their employers is funnily different from that between a consumer and a corporation and so workplace data collection has different implications, and the policy really has to address that.

We've been working on developing policy models on workplace surveillance, specifically in New York City as part of the Secure Jobs Act that was just introduced, about a month ago in New York City. I'll just talk a little bit about two important elements that need to be included in any

workplace surveillance policy. The first is access to both individual and aggregate data. This applies not only to health data, but also to Amazon work speed data and data that's collected around quotas that's then used for discipline. So workers need to have access not only to their own individual data, but also to, to aggregate data that's collected in the workplace that affects their job or their health. So obviously anonymized, but this access to the aggregate data is especially important because as your report shows, employers sometimes use surveillance data in arbitrary and selective ways retroactively. And when workers have no access to the aggregate data on the entire workplace, or at least for similar workers in the same establishment, they have no way to prove, for example, that they're being retaliated against. They have no way to prove that the rules are being consistently applied. So that's number one. Secondly, an important element which is related, is establishing legal standards for discipline and termination. This is the work that we've been doing on just cause. Discipline and termination is really where the rubber hits the road for workplace surveillance. This is when workers start to fear for their livelihoods and for their jobs.

But in this country, we don't have any protections related to discipline or termination for workers. So these new surveillance technologies that we've started to see at Amazon and in other places, they basically put our system of at-will employment on steroids. So if we want to address the problems related to surveillance that we've been seeing in the workplace, we also have to address the basic, fundamental lack of protections around discipline and termination for workers in this country. So, as I mentioned before there's a growing movement for policy reform related to surveillance, and related to the at-will employment regime that has really been born in the wake of workers' experience, in the COVID era.

Livia Garofalo

[\(40:42\)](#)

Thank you, Irene. That's really fascinating. I wanted to ask you both what kind of changes—I mean, you've both talked about it, but—what kind of changes we need to see? It's overwhelming because we need to see so many changes at so many different levels. I mean, in many ways this report is about the flow of information and, and health data, but the conversations we had with money workers were about the precarity of US labor, about how there's fundamental brokenness in the system. Starting with a paid time off, paid sick leave. So many workers did not have that right so they decided to go to work sick, knowingly infecting other people, sometimes even saying, I just had to work, please stay away from me. I'm infected.

I like the expression on steroids because in many ways Amazon is the on-steroidization of everything, of the surveillance of the precarity, of the replaceability, of the American worker.

We have one question. Please feel free to put other questions in the chat, either for Amanda and me or for our speakers. Angela and Irene, if we can end with what can we do, what are the gaps and regulations that we need to see both on a policy level and, to improve labor conditions for these workers who are not essential anymore? There was the heroic phase, and that was,

you spoke to that Angela, the contradiction and absurdity of being essential and yet dispensable at once. Angela, if you wanna start, that'd be great.

Angela Stuesse

(42:43)

Your report highlights it so beautifully. We need to listen to workers and what they're saying. Thinking about the COVID moment, this was primarily sick leave. We need to be able to stay home and not risk our jobs and not risk our livelihoods. I just think that the voice of workers is so important in guiding the development of policy and really needs to be included in the populations at the table as we imagine and plan for future pandemic responses. They need access to the basic protections of workers' comp, and as the report found, to mental health resources in their native languages, given the immense stress of working through a pandemic. They need OSHA to be more fully resourced and empowered to protect workers. To Irene's point, they need protection against reporting illness and injury. They need protection for workplace organizing, protection against retaliation in these cases.

It shouldn't have to be the hashtag children of Smithfield who did amazing work, advocating for their parents. Workers should be able to share information, health information, and organize without fear of losing their jobs. Or in the case of a lot of immigrant workers, being detained and deported.

I think the report also lifts up the important role that unions played in the helpful circulation of health data. And this should be the rule, not the exception. In scoping out just a little bit more, and then I'll hand it over to Irene. I think that the **food chain industry in particular determined decades ago that mass production and vertical integration and the exploitation of undocumented labor are really the keys to corporate profit.** And this **business model has been taken up by many other low age industries, and I think it's also facilitated by us as a society that devalues and criminalizes and exploits the most vulnerable among us.** The pandemic just made this more visible. So when I think about what needs to change, I think about the ways in which we need to think about a different ethic. When that values people over profit, your report talks about this in terms of respect, but I remember during the pandemic coming to this understanding that the **root problem is really that corporations are accountable solely to their investors and shareholders and this puts so much pressure on corporations. Surveillance disciplines workers to make sure that as much labor is extracted in the lower lowest at the lowest possible cost.**

Could we imagine a **different ethic in which corporations were not only held accountable to shareholders, but also to the communities where they work and to the workers.** I think the pandemic was a moment to do that re-imagining, and this report is another crucial intervention to allow us to reflect on who our system is benefiting and what might be possible. So thank you. I hope we don't let that moment slip away.

Livia Garofalo

[\(46:20\)](#)

I like the re-imagining, because that is a bold re-imagination, thinking about rebalancing corporate power, especially in this country and in talking about Amazon. We didn't talk about this, but the carceral feel that both Amazon and some of the meat packing places share, even in their apparatus. There's a history there—that's for a whole other conversation. Irene to you.

Irene Tung

[\(46:51\)](#)

I think Angela pretty much covered it!

Angela Stuesse

[\(46:56\)](#)

Say it again, Irene. Say it again!

Irene Tung

[\(46:58\)](#)

I think the one thing that I would also highlight on more of a micro level in terms of the warehouse workers, are these warehouse worker protection acts. 8701 was passed in California about a year ago. What it is, is transparency for quotas for warehouse workers, so that employers like Amazon that are constantly changing what the expectations and the quotas are by algorithm are at least required to disclose that to the workers. This was passed in California and also in New York State. What we were able to get also is giving workers access to not only their own individual data, but also the aggregate data, which as I would mentioned before is just critical to how we approach any kind of policy towards surveillance and worker data in the workplace moving forward.

Those bills are just a start. They're a toe hold onto these questions that Amazon has opened for all of us about what is the future of work and how we can respond to that as a movement. I don't want to sound like a broken record, but of course also establishing just-cause job protections and ending at-will employment is foundational to any vision of a fair workplace and economic, racial, and social justice in this country. I'll pass it back to you, Livia.

Livia Garofalo

[\(49:06\)](#)

Bold, bold imaginings. I like that.

We're about to close, but I wanted to address some of the questions that are in the Q&A before we wrap up. There's a question here that's interesting about the report authors, which I guess is me at this moment, talking about how public health surveillance plays a protective role or if there were any cases of COVID surveillance used responsibly.

We have in our studies, some people who worked for manufacturing companies that were highly specialized workers. In these companies, there was already an attitude towards health and safety because hazards were present in these workplaces. The transition between that and having an ethos of health and safety around COVID was easier than in other industries.

We had a couple of workers who used some interesting contact tracing devices. There were little pins that didn't collect really any extensive amount of data, but let people know when they were close to each other and would inform, through a manager, if someone had a contact. This system worked also because there was a lot of trust between the managers, the employers, and the workers, because we can see how that could be definitely mismanaged. In general, there were a lot of employers who really tried to do the right thing, and we didn't get to a lot of the confusion around health information and the ADA and many of the workers cited HIPAA as the reason why. They weren't comfortable sharing their own information also about vaccination or why employers couldn't share they were sick.

HIPAA actually has nothing to do with this. HIPAA has been invoked so much during the pandemic and it is actually not that relevant outside of clinical settings. That created a lot of confusion even for workers, even for employers who were really trying their best to protect their own workers.

There's some other questions. The other group that we spoke to were grocery store workers, which we didn't really talk about. Grocery store workers, and retail workers in big box stores who were open during the beginning of the pandemic, had a very different environment because they were in contact with the public. So they were also in an environment where they couldn't control who was coming in and out of their stores with different kinds of mask mandates, very different attitudes about customers wanting to wear a mask, not wanting to wear a mask in certain states and so those environments were different because they had contact with people who were not part of the workplace. Trying to maintain distance was something that was very, very stressful to them.

I think we are going to wrap up. Thank you so much for your questions and please feel free to email Amanda and I if you have any questions about the report.

I really want to thank Angela Stuesse and Irene Tung for being here and for all the work that you've done and shared with us, and for really graciously reading our report and uplifting it. Thank you, so much for that. Thank you for your interpretation to Valeria Lara and Claudia Alvarez in Mexico City. Thank you Rigo and Tunika for making this event possible and going smoothly.

Thank you to our other co-authors on this report, Ireti Akinrinade Joan Mukogosi for all their hard work. We worked two years on this project, so, a shout out definitely goes to them. And our gratitude really goes to the essential workers who spoke to us and shared their experiences. It was very strange in some instances to have the privilege to work virtually, and hear these experiences while these workers did not have that privilege. So we are very grateful.

You can take a look at the advanced embargoed copy of the report in the chat. The full release will happen next Wednesday, March 1st, after which please feel free to share this far and wide. You can reach out with any questions or comments. I think that is a wrap. Thank you all for attending and take care.

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