

Investigating COVID-19 Impacts on the Healthcare Sector

I *do not* give my permission for my report to be shared.

Summary

My project investigates the impact of the COVID-19 pandemic on healthcare workers in the US. It will analyze how employment and union membership trends have changed from 2017 to 2023, covering pre-pandemic period (2017 to 2019), the pandemic period (2020 to 2021), and the post-pandemic period (2022 to 2023). Additionally, it will examine how National Labor Relations Board (NLRB) election outcomes reflect these trends. This project intends to provide insights in healthcare unions struggles before and after the pandemic and advocate for systematic changes in the healthcare sector to better support healthcare workers, both mentally and physically.

Problem Diagnosis

The COVID-19 pandemic has highlighted the urgent need for reform within the healthcare system, particularly in labor unions contracts, to improve working conditions.

Healthcare workers, a critical component of society, provide essential health services in schools, hospitals, clinics, and other medical facilities. The pandemic caused unprecedented changes in their working conditions, “facing staffing shortages and fighting burnout”¹ and financial hardships. Additionally, they have higher exposure to COVID-19 and other diseases compared to the public. The Massachusetts General Hospital found “frontline health care workers had an

¹Evans, M. (n.d.). Healthcare Workers Throw Out UAW’s and Writers’ Strike Playbook. WSJ.

<https://www.wsj.com/health/healthcare/kaizer-strike-healthcare-workers-update-7104dc23>

²Ramachandran, S. (2020, July 7). New York Nurses Union Files Labor Charges, Seeking Coronavirus Data on Hospital Staff [Review of New York Nurses Union Files Labor Charges, Seeking Coronavirus Data on Hospital Staff]. Wall Street Journal.

<https://www.wsj.com/articles/new-york-nurses-union-files-labor-charges-seeking-coronavirus-data-on-hospital-staff-11594159351>

³Philbrick, I. P., & Abelson, R. (2021, January 28). Health Care Unions Find a Voice in the Pandemic. The New York Times. <https://www.nytimes.com/2021/01/28/health/covid-health-workers-unions.html>

⁴Goldstein, J. (2024, August 14). A Nurses’ Union Flexed Its Power. One Hospital Is Pushing Back. The New York Times.

<https://www.nytimes.com/2024/08/14/nyregion/nurses-unions-new-york-presbyterian-hospital-supreme-court.html>

⁵Study Reveals the Risk of COVID-19 Infection Among Health Care Workers. (n.d.). Massachusetts General Hospital.

<https://www.massgeneral.org/news/coronavirus/study-reveals-risk-of-covid-19-infection-among-health-care-workers>

11.6-times higher risk of testing positive and those who reported that they had inadequate access to PPE had a 23% higher risk.”⁵ The higher exposure rate increased illnesses and death among healthcare workers, impacting their ability to care for the public.

Before the pandemic, healthcare workers already faced demanding schedules, high-stress environments, and unionizing for better wages³. The pandemic heightened these challenges and introduced new stressors, fear of contracting the disease, financial strain, and lack of access to health and safety information. For example, workers reported difficulties obtaining information on “tallies for union nurses who reported Covid-19 symptoms, received tests, tested positive, and have been off work sick for any amount of time”².

Additionally, healthcare workers received “mixed messages from government and hospital leaders...about when sick workers should return to work”², leading to chaotic and uncertain work environments. These conditions impacted their wages, benefits, and mental and physical health. Patients and the public have also felt the effects, “dealing with call center wait times, appointment rescheduling and temporarily closed departments or offices”¹.

Post COVID-19 pandemic, there has been a record increase in healthcare unions and strikes. As of 2023, union membership increased ~0.4%. Although not high, healthcare unions should leverage their experiences during COVID-19 to demand better compensation and safeguards against future hazards. While some healthcare professions, selected nurses, have received increased wages, many struggle to unionize for better health benefits, working hours, staffing levels, and access to mental health services. Some companies are attempting to prevent unionization and strikes through tactics that intimidate employees⁴.

It’s important to understand how COVID-19 has impacted the healthcare sector to ensure that future healthcare workers are supported both mentally and physically and to mitigate staff shortages. The rise in organized unions reflects the growing need for systematic changes in the healthcare sector, enabling healthcare workers to maintain quality care for patients.

¹Evans, M. (n.d.). Healthcare Workers Throw Out UAW’s and Writers’ Strike Playbook. WSJ.
<https://www.wsj.com/health/healthcare/kaiser-strike-healthcare-workers-update-7104dc23>

²Ramachandran, S. (2020, July 7). New York Nurses Union Files Labor Charges, Seeking Coronavirus Data on Hospital Staff [Review of New York Nurses Union Files Labor Charges, Seeking Coronavirus Data on Hospital Staff]. Wall Street Journal.

<https://www.wsj.com/articles/new-york-nurses-union-files-labor-charges-seeking-coronavirus-data-on-hospital-staff-11594159351>

³Philbrick, I. P., & Abelson, R. (2021, January 28). Health Care Unions Find a Voice in the Pandemic. The New York Times. <https://www.nytimes.com/2021/01/28/health/covid-health-workers-unions.html>

⁴Goldstein, J. (2024, August 14). A Nurses’ Union Flexed Its Power. One Hospital Is Pushing Back. The New York Times.

<https://www.nytimes.com/2024/08/14/nyregion/nurses-unions-new-york-presbyterian-hospital-supreme-court.html>

⁵Study Reveals the Risk of COVID-19 Infection Among Health Care Workers. (n.d.). Massachusetts General Hospital.

<https://www.massgeneral.org/news/coronavirus/study-reveals-risk-of-covid-19-infection-among-health-care-workers>

Research Questions

- RQ1: How have employment levels and union membership rates in the healthcare industry changed pre and post COVID-19 pandemic from 2017-2023?
- RQ2: How has the number of successful versus unsuccessful National Labor Relations Board (NLRB) election outcomes changed pre and post COVID-19 pandemic from 2017-2023?

Findings

The COVID-19 pandemic has impacted the healthcare sector as employment and union membership decreased. Also, a modest decline in the success rates of NLRB union elections is suggested by the data. Overall these findings suggest that workers were vulnerable to employment shifts, wages, mental health, and working hours during the pandemic, highlighting the urgent need for support systems for healthcare employees and unions. The healthcare sector should create and implement adaptive strategies to maintain fair labor practices, as it is crucial for healthcare workers to have the resources they need for potential future pandemics

¹Evans, M. (n.d.). Healthcare Workers Throw Out UAW's and Writers' Strike Playbook. WSJ.

<https://www.wsj.com/health/healthcare/kaiser-strike-healthcare-workers-update-7104dc23>

²Ramachandran, S. (2020, July 7). New York Nurses Union Files Labor Charges, Seeking Coronavirus Data on Hospital Staff [Review of New York Nurses Union Files Labor Charges, Seeking Coronavirus Data on Hospital Staff]. Wall Street Journal.

<https://www.wsj.com/articles/new-york-nurses-union-files-labor-charges-seeking-coronavirus-data-on-hospital-staff-11594159351>

³Philbrick, I. P., & Abelson, R. (2021, January 28). Health Care Unions Find a Voice in the Pandemic. The New York Times. <https://www.nytimes.com/2021/01/28/health/covid-health-workers-unions.html>

⁴Goldstein, J. (2024, August 14). A Nurses' Union Flexed Its Power. One Hospital Is Pushing Back. The New York Times.

<https://www.nytimes.com/2024/08/14/nyregion/nurses-unions-new-york-presbyterian-hospital-supreme-court.html>

⁵Study Reveals the Risk of COVID-19 Infection Among Health Care Workers. (n.d.). Massachusetts General Hospital.

<https://www.massgeneral.org/news/coronavirus/study-reveals-risk-of-covid-19-infection-among-health-care-workers>

Analysis for RQ1

In Figure 1 below, the data between employment and union membership remains consistent, with both variables rising and falling around the same years. Pre-pandemic (2017-2019), both employment and union membership declined slightly. During the pandemic (2020-2021), there is a decrease in both variables, represented by the percentage of union members falling from ~5.6% to ~3.5%, ~36% drop. This decline likely resulted from the COVID-19 pandemic. Post-pandemic (2022-2023), employment and union membership rates increase but remain below their pre-pandemic levels. The percentage of union membership increases slightly, ~0.4%, higher than the pre-pandemic starting point. In Figure 2 below, overall employment and non-union members proportionally change around the same years. This pattern does not show a significant conclusion in the data, as both variables decrease by a small percentage. While these findings provide valuable insights into my research question, limited dataset coverage from pre- and post-pandemic years in the Union Membership and Coverage Database limits my analysis. My limited datasets may lead to inaccurate conclusions or biased results due to lack of representation from a wider range of data sources, including data before 2017 and after 2023, making it difficult to generalize findings to a larger population. Furthermore, the mix of manual and automated data entry may introduce inconsistencies or errors in the databases, potentially impacting the reliability of the results.

Visualizations:

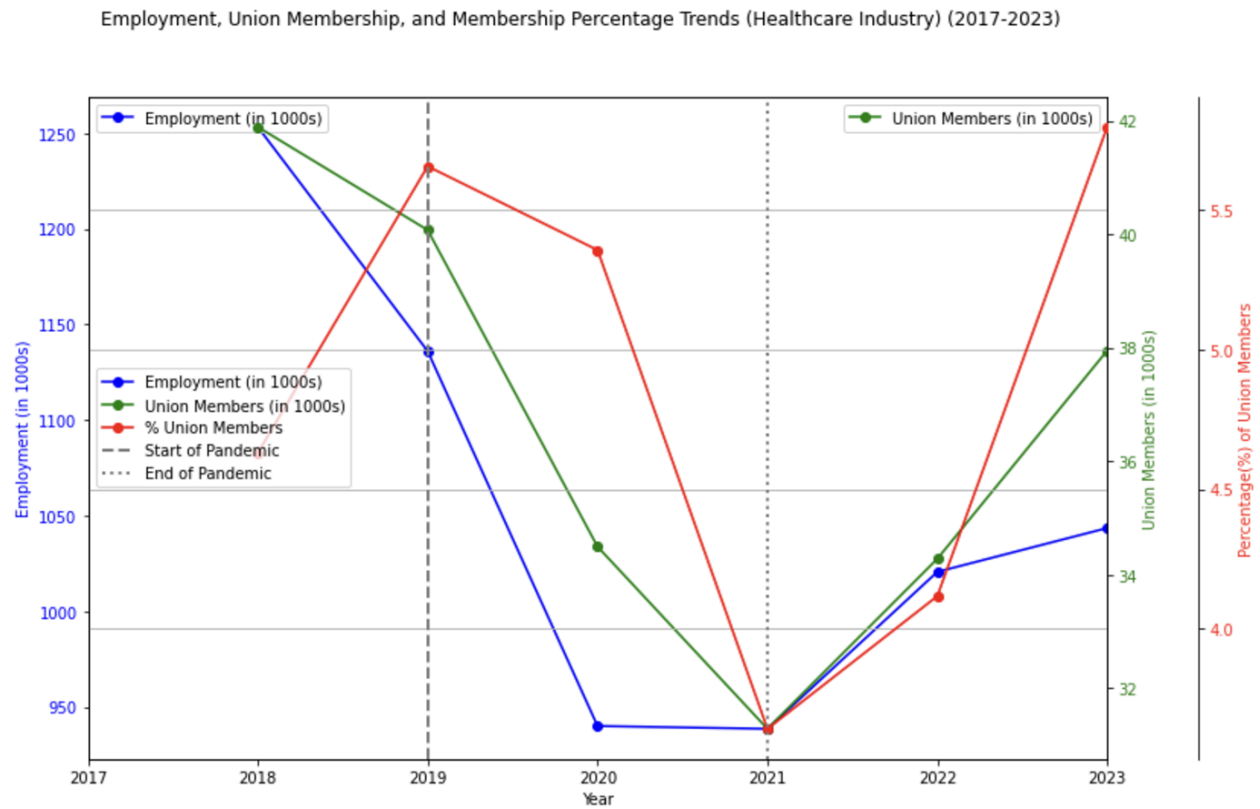


Figure 1. This plot chart above illustrates the trends in employment, union membership, and membership percentage in the healthcare sector pre- (2017-2019), during (2020-2021), and post-COVID-19 pandemic (2022-2023).*

**Data from 2017 had problems with plotting.*

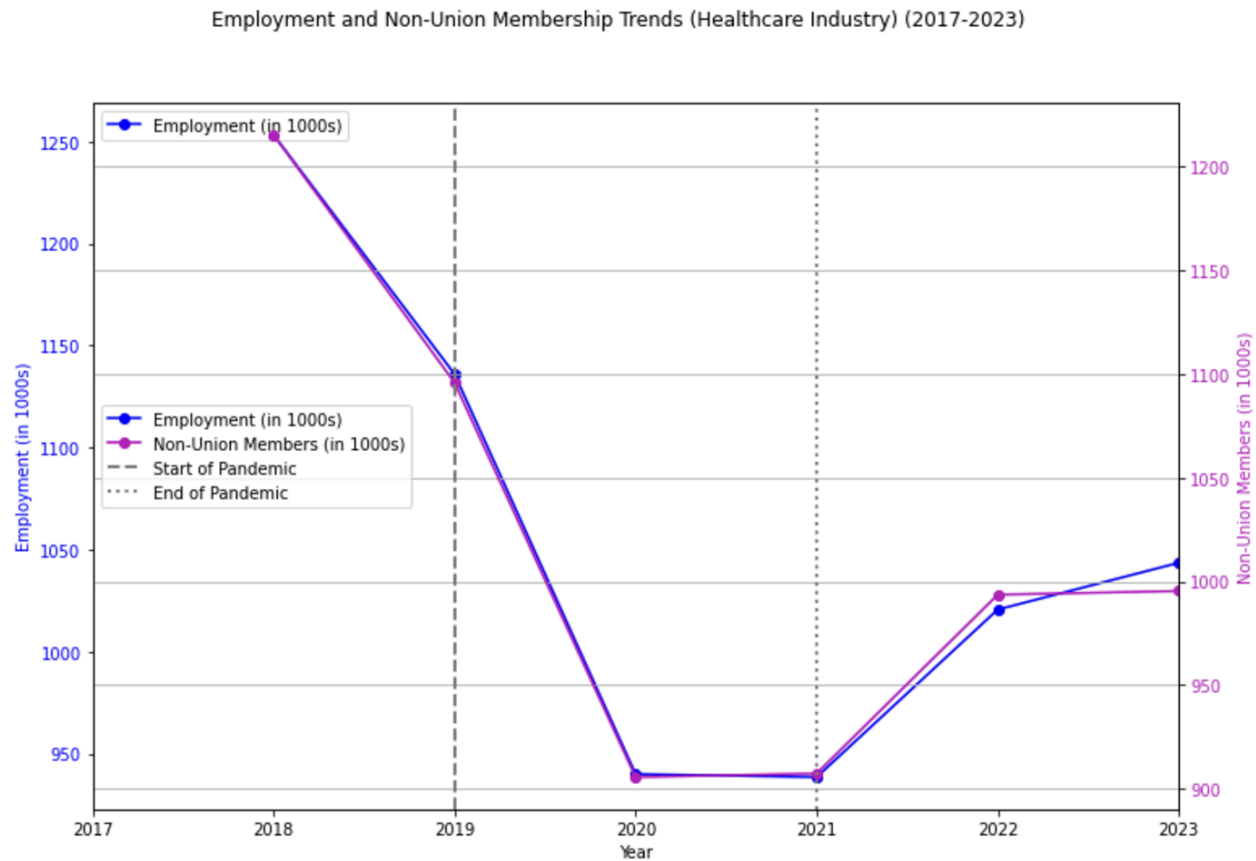


Figure 2. This plot chart above illustrates the trends in employment and non-union membership (employment - union membership) in the healthcare sector pre- (2017-2019)*, during (2020-2021), and post-COVID-19 pandemic (2022-2023).

*Data from 2017 had problems with plotting.

Interpretation of RQ1 Findings

The analysis indicates that the COVID-19 pandemic has had an impact on employment levels and union membership rates in the healthcare industry. Pre-pandemic employment levels and union membership were decreasing, but rates were still higher than post-pandemic. Due to the limited dataset covering pre- and post-pandemic periods, the results do not show a significant conclusion. The data contradicted my expectations, the relationship between the two variables was not as pronounced, as I anticipated significantly lower employment rates post-pandemic and a much larger increase in union membership rates. With the evidence gathered, it can be inferred that the decrease in employment within the healthcare industry may have been due to COVID-19 illness and/or other mental or physical challenges. The higher percentage of union membership post-pandemic compared to pre-pandemic suggests more employees might be inclined to join unions to secure better working conditions and wages, due to their experiences during the

pandemic. This raises the question of how successful and unsuccessful NLRB elections were pre- and post-pandemic, given the overall decline in employment and union membership rates. In regards to implications for policies, policy makers should consider implementing programs and/or policies that help protect healthcare workers, so that they can have the resources they need to give the highest level of care to the public.

Analysis for RQ2

In Figure 3 below, from 2017 to 2023, the number of union elections dips during the height of the pandemic and recovers, indicating the amount of union activity overall was reduced during the pandemic. Figure 4 shows the rate of union elections appears relatively flat from 2017 to 2020, a slight dip at the most intense period of the pandemic, and then recovered and improved in the last data available, in 2023. It appears that success rates have a positive trend post-pandemic. The slight difference in success rates suggests that the height of the pandemic's impact lasted for more than one year. As mentioned above, these results may be limited by the dataset coverage in the NLRB dataset from years 2017 to 2023. Due to this, the analysis might not fully capture longer-term trends and other external factors influencing union election outcomes outside this timeframe.

Visualizations:

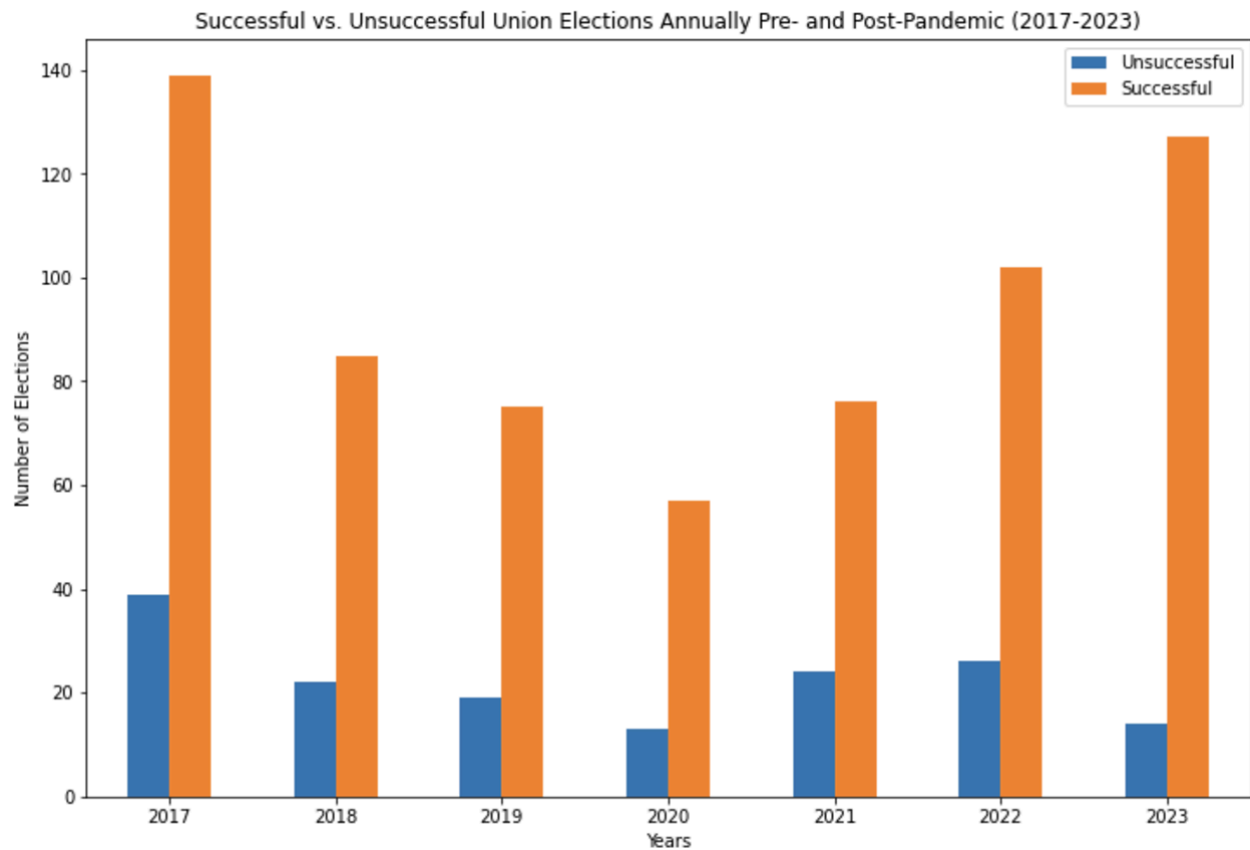


Figure 3. The bar chart above illustrates the successfulness and unsuccessfulness** of NLRB union elections pre- (2017-2019), during (2020-2021), and post-COVID-19 pandemic (2022-2023).*

**successfulness: an agreement was reached between employees and employer and votes passed*

***unsuccessfulness: an agreement between employees and employer was not reached and votes were not passed*

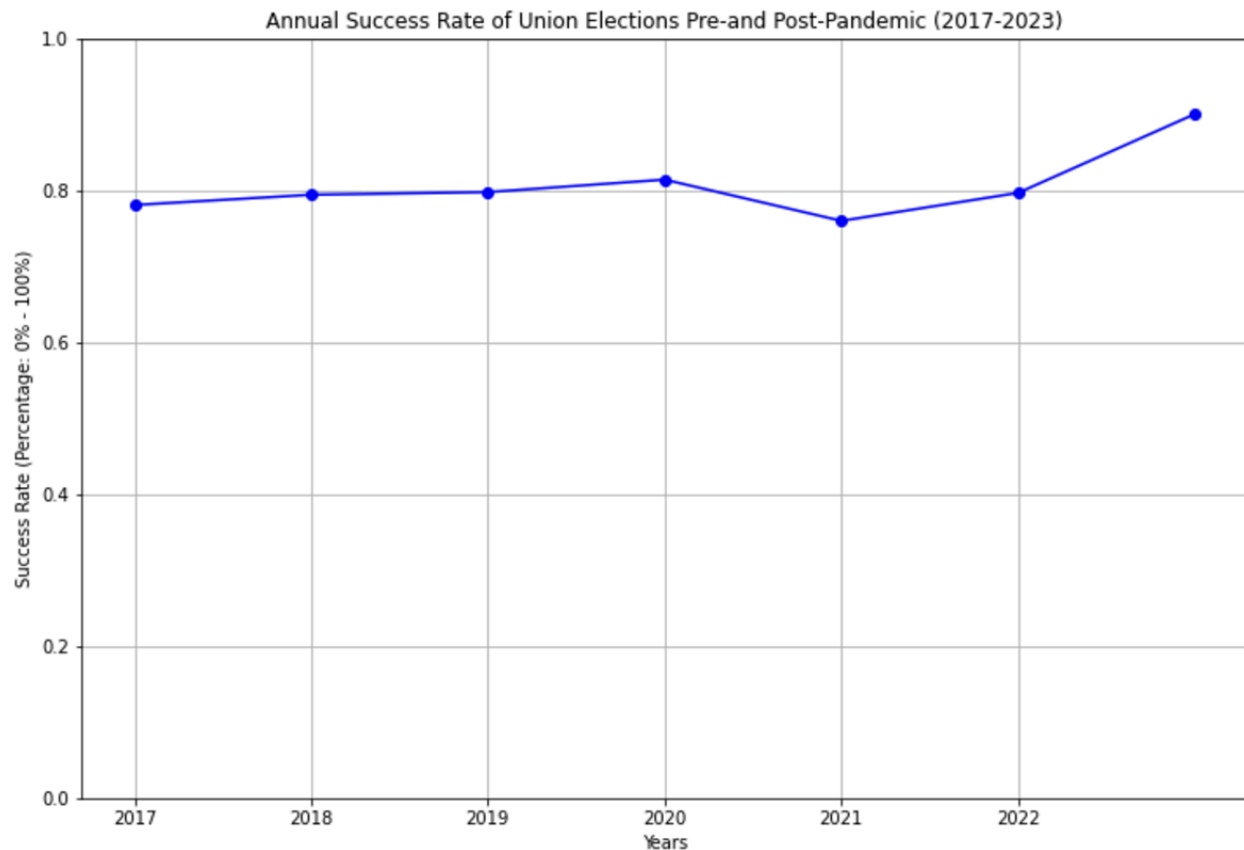


Figure 4. The plot chart above illustrates the success rate* of union elections pre- (2017-2019), during (2020-2021), and post-pandemic (2022-2023).

*success rate: the percentage (0% to 100%) of votes passed; an agreement was reached between employees and employer

Interpretation of RQ2 Findings

Even though Figure 3 provides inconclusive evidence on whether the pandemic affected the success rates of union elections, Figure 4 shows more clarity. Figure 4 indicates that the COVID-19 pandemic slightly impacted the success rate of NLRB union elections by a decline of ~5% in successful union elections and an increase of ~15% post-pandemic. While this evidence does not definitively explain the relationship between the pandemic and union election outcomes, it can be inferred that the minimal decline in success rates may have been due to the NLRB lacking resources and employees to manage and oversee union contracts and elections, as suggested by the CDC's social distancing and stay at home guidelines. Due to limited data, it is hard to conclude the exact reasons for the post-pandemic increase in success rates. These findings align with my expectations, but show less substantial evidence than anticipated to illustrate the pandemic's impact on unionization efforts, given the economic uncertainty it

caused. Labeling the pandemic period as 2020 to 2021 was appropriate, as the data above reflects clear changes in union election success rates during these years. This analysis informs policy by highlighting the need for stronger representation for healthcare unions, so employers reach an agreement that meets employees needs, especially during crises.

Conclusion & Recommendations

Recommendation 1: Enhance Support for Labor Unions During Crises

Audience: National Labor Relations Board (NLRB) and Government Agencies

In response to my analysis indicating a weak but slightly modest, but positive correlation between the COVID-19 pandemic and the success rates of union elections, I recommend enhancing support for labor unions during times of economic and health crises. While the evidence of the pandemic's direct impact on the success or failure of union elections is not substantial, it is well-known that the pandemic affected companies and businesses globally, with some still feeling its effects. It can be inferred that the pandemic likely had some effect on union elections. This is why I propose increasing funding, resources, and staffing for the NLRB and other relevant government agencies to ensure labor relations and agencies can effectively support and oversee union activities, during global crises. Investing in a digital infrastructure where remote working is more accessible to labour unions, will help unions continue maintaining collective bargaining processes, and protect workers rights in challenging times.

Recommendation 2: Promote Employer Collaboration with Unions

Audience: Employers and Labor Unions

In response to my analysis indicating inconclusive results, the data did illustrate a slight decline in successful union elections during the pandemic, followed by a slight increase post-pandemic. Since the relationship between the COVID-19 pandemic and the success rates of union elections is not definitive, it is challenging to make conclusive recommendations. As I do not know the relationship between the decline of employment rates, union membership, and union election successes during pre-, during, and post-pandemic periods. However, the data does suggest that the pandemic may have affected employment rates, union membership, and union election success to some extent. Therefore, I recommend fostering collaborative relationships between employers and unions to enhance collective bargaining. This is why I propose that employers recognize the benefits of union collaboration in improving employee satisfaction, retention rates, and productivity. Labor unions should support both employees and employers and such collaboration can be beneficial to both parties. By ensuring employee well-being and motivation this is essential for a company's long-term success.

Conclusion

In conclusion, the COVID-19 pandemic has affected the healthcare industry, but not as drastically as I initially thought. While the pandemic disrupted employment levels, union election success rates did not change significantly. I may not have been able to come to definitive data results since I had limited datasets and did not analyze more data from pre- and post-pandemic periods. However, the available data showed a modest correlation between the effects of the COVID-19 pandemic and the success rates of union elections. This suggested that the pandemic created opportunities for labor unions to gain better support and advocate for improved working conditions for healthcare workers. Increased unionization and membership in the healthcare sector may occur over time, as healthcare workers resist employer resistance to unionization, find a way to care for their patients while advocating for better working conditions and pay, and address employee shortages exacerbated by the pandemic. The COVID-19 pandemic will continue to impact the healthcare industry and other sectors forever, though not as significantly as during its height. How different labor unions and work sectors deal with the repercussions of the pandemic's effects will either strengthen their ability to advocate for workers' rights or highlight the need for further industry reforms to ensure fair labor practices that benefit as many employees as possible.