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We are health social scientists, public health ethicists and full-time research academics. Our research interest are the social and ethical dimensions of infectious disease control and prevention, with a particular focus on pandemics, vaccination, One Health and tuberculosis. As values-based researchers our goal is to develop practical guidelines and action-oriented taxonomies to guide public health decision-making and practices. Our submission pertains to the outcomes of an ongoing NHMRC funded research project – *'Preparing Australia for the next pandemic; Managing controversy, promoting trust'* [2010593]. As part of this project, we have just completed a study comprised of in-depth interviews with 32 supermarket workers from NSW and Victoria. Our aim was to capture the perspectives and experiences entailed by being a low-paid but essential worker in a non-healthcare setting during a pandemic.

Summary of Study Methods

Combining deductive and inductive qualitative research approaches we undertook 32 in-depth interviews with people employed at supermarkets in metropolitan and regional New South Wales (n=17) and Victoria (15). Participants were employed as cashiers (11), store assistants (17), warehouse/delivery drivers (3), and managers (4). Recruitment: in NSW we advertised the study using stories in newspapers, radio interviews, and fliers placed on supermarket noticeboards. We also employed a research services provider to identify participants in both NSW and Victoria using social media advertisements on Facebook. Data collection took place between June 2022 and May 2023. Interviews were conducted either by teleconferencing or via phone call. A semi-structured interview guide was used, within which questions had a particular focus on exploring participant's perspectives on uncertainty, stigma, trust and social and economic inequality in shaping their experiences of essential work. Each interview lasted between 20 and 53 minutes, with manager interviews typically taking much longer to complete than other staff levels.

Summary of Results - What we learned from our discussions with supermarket workers

- Unlike doctors and nurses, essential workers in nonhealthcare industries never anticipated being expected to work while risking life-threatening infection.
- Supermarket workers found themselves on the frontlines of efforts to minimise overcrowding in public spaces, ration resources and manage panic buying.
- Reflecting on their pandemic experiences many participants described themselves feeling like society was becoming untethered such that going to work often felt weird and scary.
- At the same time, going to work was also reassuring as a constant while everything else was changing.
- Described by one participant as constantly living with *"two kinds of feelings"*, this sense of duality, where two seemingly opposite things can coexist or be true at the same time reoccurs across many dimensions entailed by supermarket work during the first two years of the pandemic.
- In what follows we provide a synthesis of their experiences of performing a low paid essential role during a global public health emergency.

Being both essential and replaceable

Supermarket workers were acutely aware they were at greater risk of catching COVID-19 than most other people.

- Yet their attitudes towards still being in face-to-face contact with colleagues and the broader public were mixed.
- Some participants told us they were grateful to have a job where they left for work every day.
- Others were far more circumspect about being an essential worker, especially in the context of what continuing to work in face-to-face role meant for them and their families.

- Many felt, and some were explicitly told by managers that they were easily replaced. Therefore, the availability of 'JobKeeper' for workers in furloughed industries caused resentment.
- Rather than feeling like they were essential, working in a supermarket remained a low-paid and low-status job, within which you simply kept your head down and did what you were told.

Many supermarket staff quickly became resigned to catching COVID-19 at work.

- Even though they feared infection, almost all of them took as much work as they were offered.
- Several told us their workload became overwhelming during the Delta and Omicron wave as co-workers became ill to the point where they were completely burnt-out.
- Being exposed to others also meant they needed to perform extensive self-surveillance.
- People varied in how sick was sick enough to not go to work – with many opting to continue working unless they thought their symptoms could easily be noticed by others.
- That supermarket staff were at higher risk, being asked to over-work while not being given a higher remuneration or priority for COVID vaccinations in Australia provoked responses ranging from anger to ambivalence.
- During our discussions, it was occasionally noted that even though they were essential, they were not essential enough to pay danger money too or to vaccinate earlier than the general population.

Being both at risk and a risk

When little was known about the virus, most of the workers we spoke with felt completely exposed.

- Every surface in the workplace and every interaction with a colleague or customer was a risk.
- While some were not overly concerned about the risk of infection, many became hyper vigilant.
- Introducing Perspex screens and heightened cleaning protocols were appreciated and close compliance with public health advice provided these staff with some sense of control.
- However, there were always customers who seemed not to care about supermarket staff and either deliberately or unthinkingly put them at risk.
- Workers interpreted this behaviour as being driven by a basic lack of empathy or respect.
- Even when mandates were in place, most workers felt relatively powerless if a customer was not wearing a facemask or came too close.
- All they could do was respond to the customer's request and then get away as quickly as possible

What was particularly galling were customers who took it upon themselves to criticise workers who were trying to keep themselves safe.

- The stakes for many were even higher because more than their health was at risk.
- Because they could easily and unknowingly bring COVID home, some participants had moved away from their families, slept in the garage, on a co-worker's couch or in their car.
- Almost all described their daily reliance on a decontamination routine when returning from work to domestic spaces.
- They felt caught in a trap where the fear of getting ill, not being paid or losing their job was overwhelming.
- Marked by their jobs as being different, some felt alienated, even from friends and family.
- Being essential in a low-paid non-healthcare role meant the risk to your health was bound up with the risk of greater economic insecurity.

Being both a target for and spectator of public misbehaviour

Supermarket workers were exposed to the impacts of uncertainty and fear on public behaviour.

- When lockdowns were in place, trips to supermarkets became one of the few indoor places most people could go aside from their homes.
- During interactions with staff most customers were respectful and polite.
- Yet almost all participants also described situations where members of the public were abusive and aggressive towards them and they just had to stand there and take it.

- Most customers knew about masking requirements and item restrictions, but some still sought to vent their frustration at staff who had no power to do anything differently.
- On a regular basis this hostility would manifest as verbal abuse, and occasionally physical violence.

Workplace unpredictability and conflict intensified when staff were given the role of trying to enforce public compliance with density limits and masking requirements.

- This was compounded by a public expectation that staff would enforce the rules.
- Customers would abuse staff and complain about the compliance and attitudes of others.
- Supermarket workers unexpectedly found themselves in the middle of, and expected to somehow arbitrate, a public debate about what level of infectious risk people should expect in public spaces.
- Rather than risk conflict, many refused to ask customers to behave differently.
- For supermarket staff, their workplace could flip unpredictably from being a benign to a hostile working environment without warning.
- When tensions were high, some staff felt more at risk from customer behaviour than the risk posed by COVID infection.

Managing rules to control risks that create risks

Several participants noted that rules put in place to manage infectious and supply chain risks were inflexible, impractical, and not easily enforceable.

- This meant that rules meant to control risks had unintended effects.
- For example, during the height of restrictions, purchasing limits on items had disproportionate impacts on large intergenerational households who could not buy enough to meet their needs.
- Many older people did not have credit cards and could only use cash, which ran counter to directives requiring contactless payment.
- Situations where rules clearly created hardship and unfairness were distressing.
- Because some customers were clearly struggling, several participants described circumstances and events where they had bent or ignored rules.
- They would simply give extra purchase-limited items free of charge to customers who obviously had large families or pack the bags of elderly customers or to make they got what they needed.
- If a customer looked like they were *“doing it hard”* managers and staff would turn a blind eye to theft of basic items like milk and bread.
- Some cashiers were encouraged to provide advice and update regular customers who were English speakers or unlikely to be able to access news or online assistance.
- This group included many of their elderly customers, particularly those from migrant communities, who did not understand what was going on.
- In this way, at least in some communities, supermarkets became a forum where people could access the latest advice and information during periods of uncertainty and rapid changes in rules.

Recommendations for better social preparedness for future pandemics

Our analysis of these interviews is ongoing. But drawing on our discussions with supermarket workers and their reflections on what could be done better the next time there is an infectious disease emergency we have the following preliminary recommendations:

1. Prioritise acknowledging in government and public health communications the importance of and need for respect for supermarket workers and others in essential non-healthcare roles.
2. Recognise that during lockdowns supermarkets become a unique public space within which vulnerable groups can be provided with advice and extra support by staff and other agencies.
3. When mandates are in place, provide dedicated and appropriately trained security staff at all stores to enforce compliance with public health rules and moderate public behaviour
4. Provide free or cheap accommodation for supermarket staff who live in households with people at higher risk of a poor outcome from infection
5. Provide appropriate remuneration for supermarket staff when they are working in conditions of increased risk to themselves and their families during public health emergencies