What are our priorities?

Not all workers have the same risk of experiencing a work-related health problem, even when they have the same job. Factors that place some workers at greater risk than others include social dynamics such as race, ethnicity, place of birth, age, class, and gender; economic trends such as the growth of the temporary workforce; and organizational factors such as business size. Groups with one or more characteristics are termed ‘priority populations’; such groups may need additional or different tools, strategies and resources to promote occupational safety and health. The National Institute for Occupational Safety and Health (NIOSH) Occupational Health Equity Program seeks to improve occupational health and safety in specific, higher-risk populations with the help of partners in industry, labor, trade associations, professional organizations, and academia. The program focuses on these areas:

- Decreasing injury and illness in industries where priority populations are overrepresented
- Decreasing fatal occupational injuries and illnesses in priority populations

What do we do?

- Improve surveillance to better capture differences in the number and type of injuries, illnesses and fatalities across workers by race/ethnicity and place of birth.
- Use surveillance to better understand how economic costs like days away from work and healthcare expenses vary across workers of different racial and ethnic backgrounds.
- Expand collaborations with researchers studying injuries and chronic diseases (such as cardiovascular disease, diabetes, reproductive disease, and cancer) by including occupational health questions in ongoing studies.
- Document occupational health inequities for groups of workers, and research the causes of those disparities.
- Partner with state and federal agencies interested in worker safety and health, including city and state health departments and other CDC programs to share information and helpful tools with more workers.

What have we accomplished?

- Added questions about occupational health to the 2015 National Health Interview Survey.
- Published study results that use focus group data collected from immigrant workers in Santa Fe, NM and Cincinnati, OH. They describe the ways undocumented status leads to a complex web of consequences and impacts occupational health. The article presents a framework connecting the daily work experiences of immigrants, their coping strategies, and efforts to minimize the impact of structural violence.
- Collaborated with the Mexican Ministry of Foreign Affairs to create a series of multimedia products called Protéjase en el trabajo (Protect yourself at work). The 2 posters, 4 brochures and 5 videos are for organizations that serve Spanish-speaking immigrant workers.

What’s next?

- Share findings from American Indian/Alaska Native Workshop on potential collaborations to include or expand tribal occupational safety and health surveillance and research. Continue building alliances to improve surveillance.
- Use preliminary data from the 2015 National Health Interview Survey to examine the health effects of job insecurity among priority worker populations.
- Examine how the risk factors in the American Heart Association’s Life’s Simple 7 framework relate to working conditions such as shift, hours worked, job strain, and discrimination.
- Study the connection between crime levels and compliance with city convenience store safety laws.
- Distribute the Protéjase en el trabajo (Protect yourself at work) materials through Mexican Consulates, government agencies, and other community organizations.