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Curbing the pandemic and creating quality careers through contact tracing

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Public investments in a contact tracing workforce are key to mitigating the spread of COVID-19 and getting the economy running again.

Public health experts agree that contact tracing is necessary to safely reopen communities and get the economy back up and running. Across the country, state and local public health departments are hiring contact tracers to reduce the spread of coronavirus. Contact tracers call people who have tested positive for COVID-19, identify other people with whom they may have come into contact, and then call those who have been exposed — protecting patients' confidentiality while also providing information about testing, health services, and containing spread to both sick and exposed people. Contact tracing is a key strategy that has been used for decades to contain the spread of other infectious diseases.

Many states are still building their contact tracing workforces in order to safely reopen while curbing transmissions. A June survey found that only seven states and D.C. had enough contact tracers to contain outbreaks in accordance with benchmarks set by public health officials. Since then, U.S. single-day COVID-19 cases have only increased. Despite the importance of contact tracing, state strategies for building a contact tracing workforce vary. Some states are reassigning existing government workers or building out a volunteer corps while others are hiring new workers through online advertising or contracting with a vendor.

To be effective in the fight against COVID-19, states need to do more than just use digital solutions or recruit volunteers to make calls. Contact tracing is just one of several things that public health departments are doing to contain the spread of COVID-19. Accordingly, contact tracers must do their work in active collaboration with other public health workers — from data analysts to epidemiologists — and therefore are likely to be more successful if they are operating as part of a larger public health team. To quickly build this capacity, states must invest in a contact tracing workforce.

Summary
Contact tracing is key to curbing COVID-19 transmission so that states can safely reopen communities and get the economy running again. Success relies on contact tracers who can build trust with people by using strong interpersonal skills, appropriate cultural and linguistic competencies, and a deep knowledge of the community they are canvassing. At a time of record unemployment, state investments in contact tracing also have the potential to create new jobs for workers. Workers in customer-facing industries like hospitality and retail, as well as workers of color, have faced disproportionate job losses due to COVID-19 shutdowns. Yet few states have developed intentional strategies for ensuring that workers most impacted by the COVID-19 crisis can train for and access contact tracing jobs, even though many of these very workers have skills and assets that are critical to contact tracers’ success. This brief offers a six-point strategy for states to build an effective contact tracing workforce now, while also training contact tracers for longer-term quality careers in health-related fields as the economy recovers from the pandemic recession.
A community-based approach to training and hiring is key to contact tracing’s success.

Public health experiences indicate that contact tracers with the capability to demonstrate empathy, build trust, and educate patients will have more success working with patients who are concerned about sharing personal information or dealing with crises such as food and housing insecurity amidst job loss. Contact tracers with deep knowledge of the local communities they are canvassing, as well as relevant cultural and linguistic competencies, are likely to have more success building trust and connecting patients with resources. Community health workers who have a trusting relationship with members of the community they serve have long played a critical role of connecting communities to health information and services and demonstrate the value of this model. Contact tracers, just like other frontline public health workers, should reflect the demographics of the community they are serving.

Indeed, states can increase the success of their contact tracing efforts by intentionally recruiting, training, and hiring contact tracers for local communities that have disproportionately felt the health impacts of COVID-19, particularly communities of color that have faced higher incidence and morality rates as a result of structural racism. By taking a community-based approach to training and hiring contact tracers, states can leverage the talents of both existing community health workers and workers who lost their jobs due to COVID-19-related layoffs. Many people who recently lost their jobs have relevant cultural and linguistic competencies, as well as transferable skills from recent customer service, hospitality, or healthcare occupations.

As states and localities recruit contact tracers, they should seize the larger opportunity to grow the diverse and equitable health workforce that our country needs.

States should not stop investing in health workers once they train and hire contact tracers. Instead, states should also support contact tracers in training for and transitioning to longer-term careers that emerge as the economy recovers and temporary contact tracing roles decline. Done right, contact tracing jobs can provide an on-ramp to quality, health-related careers for thousands of workers who lost their jobs and need to train for entirely new ones as a result of COVID-19. These could include permanent public health or social services roles or other healthcare occupations, such as those in the allied health professions.

Such an effort can also help build a diverse and equitable health care workforce — an imperative for strong health care systems that can effectively meet patient care needs.

Voters support hiring and training contact tracers right now to fight COVID-19.

Two out of every three voters support spending public money to train people who have lost their job to be contact tracers, and nearly as many support hiring contact tracers from heavily impacted communities.

Black, Latinx, and Asian American voters were especially supportive of requiring contact tracers to be trained and hired from communities that have been hardest hit.
needs now and in the future. By 2045, most U.S. residents will be people of color. Yet racial inequities in healthcare treatment and delivery continue to yield racially disparate health outcomes. Racial and ethnic diversity in the workforce helps healthcare systems increase their cultural and linguistic competencies and patient satisfaction, which in turn can increase the effectiveness of care and associated health outcomes. Moreover, a diverse workforce can give health care providers a competitive edge, as patients seek care from providers who they trust.

As policymakers provide additional training opportunities to contract tracers, they should ensure that such training leads to quality, family-supporting careers and advances equity within the workforce. Currently, Black and Latinx women are more concentrated in low-wage health care occupations than any other group of workers, a trend that career pathways should look to disrupt. Meanwhile, health policy decisions — such as a lack of sustainable funding for community health workers and cuts to investments in public health infrastructure — can impinge on the quality and stability of public and community health jobs despite their importance to our local communities and economies. In creating pathways to longer-term careers for contact tracers, policymakers should also look toward policies and public investments that would support quality health-related occupations. Career pathways should support contact tracers in stepping into a quality career, not put them on a path to a lower-paying job.

Here are six steps states and localities can take to build a successful contact tracing workforce now while also training those workers for longer-term quality careers in health-related occupations.

1 **Recruit, train, and hire contact tracers from local communities that have been disproportionately impacted by the COVID-19 crisis, particularly communities of color.**

The impact of systemic racism on both health and the workforce is reflected in the COVID-19 crisis’ disparate impacts on people of color. Black and Latinx people have been nearly twice as likely to die from COVID-19 than whites and three times as likely to become infected. Indigenous people are also disproportionately impacted. States must make every effort to reach Black, Latinx, Indigenous, and other communities of color in their public health responses.

Meanwhile, the economic shutdown has exacerbated racial and ethnic inequities that already existed in the workforce. People of color are overrepresented in jobs hit hard by the economic downturn, such as low-wage
service sector jobs. And the majority of Black, Latinx, Pacific Islanders, and Native American workers are in occupations likely to take longer to return to the economy.

To mount an effective contact tracing effort, states should intentionally seek to recruit, train, and hire contact tracers from local communities that have disproportionately felt the health and economic impacts of COVID-19, particularly communities of color. In doing so, states can tap the cultural and community knowledge that is critical to contact tracers’ success. Many people who recently lost their jobs have relevant cultural and linguistic competencies, as well as transferable skills from recent customer service or hospitality occupations. Indeed, the interpersonal and problem-solving skills required for customer-facing jobs that were lost due to the shut-down are important skills for contact tracers.

States and localities can do this by:

- Identifying priority impacted communities by zip code or similar neighborhood boundaries and setting targets for hiring contact tracers from those communities.

- Funding community-based organizations and workforce training providers to partner with workforce boards and public health agencies in conducting outreach, recruitment, quality and cost-free training, and supports for contact tracers. Community-based organizations specifically have extensive knowledge of social and community services for those facing health challenges or economic hardship due to COVID-19. Together, these organizations should be able to:
  - Demonstrate their success in serving impacted communities and their commitment to promoting racial equity.
  - Assess workers’ skill needs and incorporate essential skills training — such as digital skills — into short-term contact tracer training curriculum.
  - Serve as a hiring intermediary for agencies hiring contact tracers.

- Eliminating unnecessary hiring requirements, such as criminal background checks or credit checks, which can have discriminatory effects for Black and Latinx job seekers due to over-policing/mass incarceration and the racial wealth gap respectively.

**Chicago’s COVID Contact Tracing Corps**

The Chicago Department of Public Health is investing $56 million in two-year grants for community-based organizations to hire, train, and support 600 workers to conduct contact tracing in communities heavily impacted by COVID-19. The COVID Contact Tracing Corps will prioritize hiring for residents of neighborhoods with high economic hardship, people with historic involvement in the justice system, and people with demonstrated barriers to employment. Through the initiative, community-based organizations will support workers in their jobs as contact tracers, as well as in continued training for longer-term quality careers.

The initiative is designed to advance racial equity in health and the workforce. The Request for Proposals (RFP) requires applying organizations to demonstrate a proven commitment to advancing racial equity, with questions on how organizations’ work to remedy policies and practices that compromise the well-being of communities of color and how people of color are included in decision-making, among others. The program also prioritizes grants to organizations located in or primarily serving communities with high levels of economic hardship. The initiative will publish aggregate, anonymized information on the characteristics of contact tracers hired, including race, ethnicity, and community of residence.

The Chicago Cook Workforce Partnership — the organization that operates the region’s public workforce system — will administer the program in collaboration with public health institutions, universities, and community colleges. In addition to providing grants to community-based organizations, the initiative will also offer technical assistance to community-based organizations to build their capacity to support public health and its workforce.
2 Set quality standards for contact tracing jobs to ensure they create economic opportunity for workers and their families while also building a talent pipeline for other health-related occupations.

Many people who lost their jobs when the economy shut down in March were low-wage workers living paycheck to paycheck. Layoffs worsened the economic pain that many low-wage workers already felt, leaving families scrambling to try and cover rent and put food on the table. Indeed, over half of low-income adults said they would have trouble paying some of their bills in April, and less than a quarter had emergency funds on hand to cover expenses for three months. Workers without a bachelor’s degree, as well as Black and Latinx workers, also experienced disproportionate job losses while having fewer financial resources to weather the economic crisis.

As people in search of work take contact tracing jobs — which are essential to the physical and economic health of our nation’s people — policymakers should ensure that these jobs provide a clear pathway to economic opportunity instead of keeping people on the margins of our economy. In doing so, states can also build a pipeline of skilled workers who can train for and advance into other health-related jobs because they have already built key competencies through contact tracing.

States and localities can do this by:

- Using competency-based qualifications for hiring instead of requiring degrees and setting a target for a majority of hires to be workers without a bachelor’s degree.
- Providing family-supporting wages, access to health care (including mental health services), and access to other supportive services, such as childcare and transportation, and rental assistance. States should explore whether federal funds can be used here.
- Supplying contact tracers with the equipment required to conduct their jobs. For those working remotely, this could include computers and phones, as well as the costs of broadband internet access. For those working in offices or conducting in-person outreach, this should include adequate and appropriate personal protective equipment, as well as training on workplace health and safety.
- Ensuring that contract tracers work as employees of or with public health agencies or partnering nonprofits so they can easily transition into other public health careers. If non-governmental agencies are employing contact tracers, states and localities should ensure wage parity among those employed by the public and nonprofit sectors.
- Supporting and investing in career pathways programs described in this paper so that contact tracers can pursue longer-term health-related careers.

Baltimore Health Corps

The Baltimore Health Corps was launched through a public-private partnership in order to recruit, train, and employ over 300 unemployed residents as contact tracers and care coordinators. The Baltimore City Health Department will hire Corps members from communities most impacted by COVID-19 by partnering with the Mayor’s Office of Employment Development and others.

Corps workers will be paid a living wage, receive a health insurance stipend, and have access to legal and behavioral health services. Contact tracers and care coordinators will start conducting work virtually and will only conduct in-person outreach when it is safe to do so based on community transmission rates and the availability of personal protective equipment. Baltimore Health Corps has increased access to these jobs by offering free community health worker training and ongoing training in public health. They will also provide career navigation services to help health workers transition to permanent employment. The Baltimore Health Corps will also utilize and support a network of nonprofits who can provide essential services and resources to city residents.

The $12 million initiative is funded through public and private dollars. The City of Baltimore has committed $4.5 million, leveraging federal CARES Act funds, while the Rockefeller Foundation and other local and national private funders have invested more than $5 million thus far.
As policymakers provide additional training opportunities to contract tracers, they should ensure that such training leads to quality, family-supporting careers and advances equity within the workforce.

3 Fund and support industry partnerships to develop career pathways to quality health careers that will remain in the labor market when contact tracing declines.

Many contact tracing jobs are likely to be temporary, lasting for twelve to eighteen months. However, over the next decade, jobs in healthcare are expected to grow more than in any other occupational group. Compared to other service-oriented industries, healthcare has had fewer job losses during the COVID-19 crisis. Many health-related jobs — from some public health occupations to a range of allied health professions — require credentialing beyond high school but not a four-year degree.

To support contact tracers in preparing for and transitioning into other jobs in the health field later, states should fund and support industry partnerships that can align training with industry talent needs as the economy recovers. In addition to funding, states can provide technical assistance and resources to these partnerships. Such support could include data on labor market trends for the industry, peer-to-peer communities of practice, and professional development on training and hiring practices that advance racial equity.

Funded partnerships should be responsible for the following:

- Convening multiple employers in the industry — including public health departments and healthcare providers — with organizations that provide education, training, and services to workers. The latter should include local community-based organizations that provide culturally and linguistically competent services, workforce development boards, community and technical colleges, and labor partners.

- Identifying in-demand, quality careers that contact tracers can transfer into if they so choose, and their associated skill needs (including digital skills) and industry-valued credentials. In doing so, partnerships should work to advance equity by paying special attention to wages and other measures of job quality in target occupations. As mentioned earlier, Black and Latinx women are more concentrated in low-wage health care occupations than any other group of workers due to occupational segregation, and industry partnerships should aim to disrupt that trend.

- Informing career exploration modules for contact tracers who are interested in training for another health-related occupation. Career exploration modules should ensure that all interested workers are exposed to the full range of available careers so as not to reinforce occupational segregation.

- Providing input on career pathways training programs and career advancement strategies for workers, as well as recruitment and hiring strategies for employer partners.
4. **Provide contact tracers with career pathways training grants so they can continue their training and transition to their next job.**

Even after they are hired, contact tracers will likely need additional skills training in order to transition into another health-related occupation. However, contact tracers may not be able to afford additional training. Workers who are still paying past-due bills that accrued during a COVID-related unemployment spell may especially have a hard time paying for training. States can support contact tracers’ transition to their next job by offering them training grants that cover the costs of participating in health-related career pathways programs. States could use federal and state workforce funds to pay for such training grants. These public dollars can leverage training investments from employers who participate in relevant industry partnerships.

Training grants should be available to contact tracers who pursue training in approved career pathways programs that are connected to and informed by health-related industry partnerships.

**Approved career pathways programs should:**

- Directly provide or partner with community-based organizations to provide career navigation and counseling services with culturally and linguistically competent case managers
- Ensure that credentials offered through the program meet quality assurance criteria
- Shorten the cost and time of training by counting competencies that contact tracers gained in their job toward program credit or training hours
- Integrate foundational skills training, including digital literacy, with occupational skills training

Some states already have career pathways programs that meet these criteria. By providing training grants to contact tracers, states can ensure that contact tracers have the financial resources to participate in these programs. In addition to training grants, states and localities could support contact tracers in training for longer-term careers by providing paid release time or cohort-based training at worksites.
Create supportive service funds that provide contact tracers with time-limited financial assistance.

Due to the severe impact of COVID-19 on many families’ financial resources, contact tracers may face financial emergencies, like a broken-down car or a past-due electric bill, that have the potential to interrupt their work and training. While contact tracers should earn family-supporting wages, workers may not have enough savings in their first year of work to cover these types of emergency costs. States and localities can address this by creating an emergency supportive service fund available to contact tracers.

Supportive service funds should:

- Identify the types of expenses that can be covered, such as transportation, child care, books and supplies, equipment, rent and utilities, and food.
- Cap the amount available to each contact tracer.
- Be available to each contact tracer for up to one year after their initial hire date.
- Make counseling available to contact tracers who need assistance navigating social and community services available to them.

Colorado’s Employment Support and Job Retention Services Program

In 2019, Colorado established this program to make funds for emergency supportive services available to low-income people in training, job search, or at the start of employment. Eligible workers can access up to a certain amount each year to help cover the costs of a number of training and work supports, including but not limited to transportation, emergency child care, emergency housing, training- and work-related fees, work tools and equipment, food and nutrition, utility, telephone, and internet bills. The program is administered by a nonprofit that works with public agencies and nonprofit community organizations to distribute emergency funds.

6 Provide transparency on the training and job placement of workers in contact tracer jobs.

A racially and ethnically diverse workforce is instrumental to the success of contact tracing efforts and healthcare, as well as to health and workforce equity. States should provide transparency on how the training and job placement of people in contact tracer jobs supports a diverse workforce. Beyond reporting the number of people who get employed, summary data on the demographic characteristics of workers will be necessary to evaluate progress toward the goals of creating a racially and ethnically diverse contact tracing workforce and providing contact tracers with greater access to quality, health-related careers.

To do this, states and localities should:

- Provide public disaggregated data on the individuals who get trained and hired for contact tracer jobs, by race, ethnicity, gender, geographic region, language(s) spoken, prior employment status, or other characteristics as deemed necessary to reflect the diversity of a state or local areas in which workers are place. Data should not report personally identifiable information, should protect the privacy of individuals, and should maintain data security.
- Require data sharing partnerships between public health, education, and workforce agencies to perform follow-up reporting on contact tracers’ future job training pathways, employment, and wages outcomes.
- Obtain consent from the contact tracer workforce who is participating in job training grants or other career counseling services that permits the state to measure their longer-term education and employment outcomes.

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