

Exploring Domestic Workers’ Risk Work During the COVID-19 Pandemic

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Abstract. While many occupations turned to remote work during the COVID-19 pandemic, domestic work by definition requires workers to enter other people’s households, and they often work in close proximity to their employers. With domestic workers proactively handling COVID-19 risks as part of their already precarious jobs, there is a need for a conceptual understanding of risk management to aid this occupational group during a public health crisis. Our findings emerge from a preliminary qualitative study interviewing occupational groups who adopted risk work practices during the pandemic, providing insight into their risk perceptions and practices. In this paper, we focus on paid domestic workers recruited to investigate how they engaged in situated ‘risk calculations’ to assess different risks present at work. This paper invites an initial discussion on risk practices, communication, and policy to support domestic workers during crises.

Keywords: Risk Management · Domestic work · COVID-19.

1 Introduction

Domestic workers, such as housekeepers and babysitters, are a labor force performing usually in private households [12]. They often face staggering job losses, health hazards, and limited labor protection under labor laws due to their informal or temporary arrangement [15]. While there are over 2.2 million domestic workers in the United States [2], research shows how safety and health regulations still cannot fairly serve this occupational group [21]. When most occupations transitioned to remote work to reduce exposure during the COVID-19 pandemic, domestic workers were subjected to a higher risk due to close proximity to people outside their social bubbles [25]. Pre-existing risks of domestic workers such as under compensation [18], lack of worker rights [13], safety in the household [1], and social protection [17] were further aggravated during the pandemic [15]. The complex interactions between inconsistent risk information and people’s perceptions of it which varied depending on social and environmental contexts further complicated individuals’ risk work [16]. The boundary of domestic work is often obscured due to its embeddedness in everyday household settings and its typically informal employment structure. Given these characteristics of the context, it is especially worth investigating during a public health crisis as it presents unique challenges.

A growing body of literature has examined the situated risk management practices of professionals to manage and mitigate risks [4, 9]. Professionals studied in the literature are often tasked with established risk management structures and are subjected to greater scrutiny due to an institutional focus on harm reduction [23]. People form their understanding of risk based on the shared knowledge from economic, political, and social situations, using it to navigate risks [5]. Gale et al [7] defines ‘risk work’ as “working practices framed by concepts of risk.” They identified three types of risk work carried out by healthcare professionals: translating risk (tailoring abstract knowledge for specific contexts), minimizing risk (implementing actions to mitigate risks), and caring in the context of risk (supporting higher-risk individuals amidst social, political, and ethical considerations). Although the risk work model was developed within the professional healthcare domain, it provides an initial scaffolding to understand risk work practices of domestic workers. This understanding can contribute to information science by broadening the contexts of human information behavior to encompass risk work.

This paper leverages the risk work model by Gale et al [7] to investigate the reconfiguration of domestic workers’ risk work practices. This approach allows to understand risk information behaviors, such as information seeking and sharing [26, 14], navigating and making sense of available information [11], facing information overload [6], and experiencing information avoidance [10]. While past research of risk work mainly focuses on work environments with subject-specific risk (e.g., hospitals, nuclear plants), this study aims to investigate risk work carried out by individuals in household settings, particularly those who have to balance between exposure risk and other situational risks. Their risk calculations in the context of the pandemic extend the understanding of risk practices and risk information behavior during a public health crisis. The findings can inform risk information policies, specifically for low-security jobs.

2 Methods

Participants were recruited for our occupational group study with the criterion that they are English-speaking, 18 years or older, residing in the U.S., and employed part-time or temporarily for domestic work from clients’ homes during the COVID-19 pandemic. Our study sample is composed of 6 participants hired as housekeepers, in-home health aides, babysitters, pet sitters, or private chauffeurs. Those who fell under “essential workers” were not considered for this study as the focus was on individuals who leveraged the flexibility in decision-making to work during the pandemic. During recruitment, prospective participants were asked to answer a pre-screening survey on their demographic information, employment, financial, and situational circumstances. They were interviewed via Zoom or phone call that lasted an average of 45 minutes in July 2021. The study procedure was approved by the Institutional Review Board from the authors’ institutions.

In-depth semi-structured interviews were conducted with the aim of uncovering how these individuals perceive COVID-19 risks while navigating their employment as domestic workers. The questions primarily focused on participants' perceptions of risk, the information they were seeking, changes in employment and work, and any the resources they were utilizing to manage health and financial risks. Participants were asked about their daily decision-making to mitigate the risks during the pandemic in July 2021 in comparison to their outlook on the pandemic in the beginning phase of March 2020. We used the abductive approach to analyze the interview data [24], where we initially generated themes using open coding and iteratively refined those themes to capture elements of risk work such as COVID-19-specific risk practices, balancing of other risks with the COVID-19 risk, and perception of COVID-19 vaccination.

3 Findings

Based on the codebook generated from the analysis, we discuss the types of risk work carried out by domestic workers.

3.1 Understanding the Risk

Although participants similarly perceived COVID-19 as a highly contagious respiratory infection from a health perspective, understanding the risk was dependent on making sense of the situation through institutional observation, economic conditions, and social relations impacted by the pandemic. For example, participants mainly monitored the response of government and healthcare officials to make sense of the situation due to the pandemic. Since participants found work through informal platforms (such as word-of-mouth or online platforms), they did not have access to explicit guidelines on how to interact at work during the pandemic. The lack of information induced fear in taking up jobs at first. Having lived over a year in the pandemic and navigating the lack of information, the participants felt that they perceive risks still at large better to be able to balance those risks with work.

“We have become more used to the situation. The fear is less as we have more information about the virus, so we now go about it and stay safe. We are handling it much better than we did in the beginning. It was all panic but now it is calm”

Participants believed in the vaccination that was made available to the public during the time of the study. Apart from an elderly participant to whom the vaccine was made available at the time, other participants expressed their desire to seek vaccine. Two participants expressed how they considered people who were not inclined to get vaccinated as a threat to society. However, they also understood that the vaccination did not provide complete immunity against COVID-19, and risk-minimizing practices must be continued even after receiving it.

“I trust the vaccine—but it is not a magic bullet. I will still continue to wear a mask.”

3.2 Translating into Situated Risk Calculation

Based on risk information they sought, participants translated their risk knowledge into actionable decisions. Risk information from legitimate sources and official guidelines were used to calculate risk in a personal context and make decisions on practices to be implemented in daily life. These decisions were often personalized to cater to the situational risks perceived by the individual. For domestic workers who are working in other people’s households, these risk practices need to be carried out for a prolonged duration. Participants mentioned how this could be at times inconvenient but had to be adopted.

When asked about the risks due to the pandemic apart from contracting the virus, participants pointed to financial risks they faced. The participant who worked as a housekeeper during the pandemic surfaced how the low-security nature of jobs has forced them to balance exposure risks with other situated risks in order to find work.

“I’d say the fear between being afraid to get the virus and the need to having to go out [to work], there is no way you’re gonna make it just staying indoors. . . So it was kind of conflicting. I need the money, I need the job. But there’s still this fear of contracting the virus.”

Meanwhile, having a better understanding of risk has now incorporated certain actions such as wearing a mask, washing hands, and social distancing into daily life in a way that people fear exposure to the virus less than they did at the beginning of the pandemic.

“The more we’ve learned about it, the more knowledge we have on how to go about our daily lives. . . Always wash your hands, wear your mask, all of that just became a habit after a while.”

These preventative measures for domestic workers, while they are working with their clients, give a sense of safety when they go about their everyday work.

3.3 Caring in the Context of Risk

Providing care and support for social relations during this time has not been easy due to the risk of exposure. Especially, for domestic workers, it was observed how it could be challenging to provide support to people in their own households when their work entails exposure to risk. Participants spoke about their efforts to check in with their friends and family during this time through video calling and other platforms.

Domestic workers had to cautiously balance the exposure to risk with the financial risk if they chose not to work to avoid exposure to themselves and their

household members. An in-house health aid participant shared that he could not care for his child or spouse after work due to the risk of exposing them to the virus through him.

“My kid is young, so when I get home from work I feel even if I sanitize, what are the preventive measures I should be taking? I am afraid I could give COVID—we don’t hang out as we used to.”

The workers who had a more personal connection to their job, such as in the case of the health aid and nanny, found themselves extending their care and caution in everyday activities to avoid infection for not only their family but also their clients, thus building trust during the time of crisis.

“I didn’t even go to the grocery store, I would do curbside pickup... I didn’t want to expose this little girl to anything, you know. And I had to think of others, my family and their family.”

Domestic workers have benefited from maintaining good social relations during this time of limited work. Participants, a pet sitter and a housekeeper, shared anecdotes where they often found jobs through word of mouth or even helped other domestic workers they knew through their contacts. The elderly participant working as a nanny mentioned that she did not wear a mask while at work as she maintained transparency about strictly maintaining her social bubbles to only include the family and her own to reduce exposure to the virus. The housekeeper also emphasized the preventive measures set by the household in their occupation.

“You don’t just ignore them, you have to listen to them, especially if you’re going to interact with somebody in their home.”

4 Discussion

Unlike in the professional contexts previously studied for risk work, the domestic workers were not supplied with information and guidelines to navigate COVID-19 risks at their work. This occupational group was monitoring and seeking information from their trusted sources (among personal contacts and officials) to understand the risk and reduce the fear of taking up jobs. In making sense of the pandemic-related risks, they identified other “downstreaming” risks such as financial, institutional, and social risks, which made risk management during the pandemic more challenging [16]. The information behavior literature of domestic workers pointed to the significance of “weak ties” (people within their social bubble with low level of intimacy) in information seeking [3]. However, their profession, during a time of uncertainty, depended on building trust with their client. Understanding how to manage their risk practices helped build this trust. Their provision of care and support was not only to their loved ones but also extended to the people they work with. To maintain appropriate risk practices, they had to educate themselves on the risk at hand and how to manage it.

Our findings provide implications for the conceptual models of risk work carried out by domestic workers. The fact that a nanny chose to uncover the mask as a means to manage social relations with the family members at work indicates that the interplay between social relations and intervention might be moderated by the work context or cultural factors embedded in the workplace [26]. Furthermore, some domestic workers chose to take on the work due to financial risk despite high-risk infection. This suggests that there might be complex interactions between different types of risk work. These interpretations open up the possibility of revisiting the understanding of risk work and risk information behavior by incorporating the tensions that could be created due to complex concerns during crises.

Additionally, the anecdote of the nanny provides opportunities to further develop the risk work model theoretically. Situated risk calculations by domestic workers were not only about abiding by the public health officials' guidelines but also about involving the assessment of how it would be beneficial in their contexts and making adjustments accordingly. This often involved balancing the tensions between social relations, risk information, and interventions to prevent potential harms [4]. Practices of managing such tensions indicate that future studies may need to further investigate possible tensions between the components of risk work and their manifestations during a public health crisis.

Finally, the findings suggest that risk information plays a vital role in times of crisis [3, 19]. Risk has become the basis of decision-making, communication, and evaluation of professionals [4]. Interdisciplinary research in fields of human-computer interaction, crisis informatics, and digital civics are fundamentally changing how risk is handled by occupations tasked with managing it in various ways [8, 22, 20]. The results can inform the design of work practices or technologies tailored to this occupational group because the study provides implications for domestic workers' decision-making processes while navigating risks in their line of work. These insights gained from our preliminary analysis suggest that future studies may have to further examine risk work, which involves risk information seeking and behavior, of individuals who are working precarious jobs. This is because this context poses unique theoretical and practical challenges due to the obscured boundaries between private and professional work settings, potential tensions that could be created in managing multiple risks, and vulnerability of the workers.

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