

The Nature of Employment in a High Socioeconomic Hardship Community

Data From the Greater Lawndale Healthy Work Survey

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Objectives: This cross-sectional survey aimed to examine employment characteristics and their associations with employment precarity in two high socioeconomic hardship Chicago neighborhoods. **Methods:** We used a community-based participatory approach to develop and administer a survey to residents who perceived their work situations to be precarious. **Results:** A total of 489 residents were surveyed. Responses were skewed toward the most precarious work situations, with the majority of respondents employed outside of a traditional arrangement. Those in the highest precarity category were most likely to identify as Latinx and born outside of the United States. Unstable, low-quality employment conditions were nearly all significantly associated with highest precarity work situations. **Conclusions:** Precarious employment is an important predictor of other employment conditions, and characterizing these at a hyperlocal level allows for a nuanced understanding of work as a determinant of health.

Keywords: precarious work, community based participatory research, socioeconomic disparities in health, occupational health, community health, social determinants of health

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CME Learning Objectives

After completing this enduring educational activity, the learner will be better able to:

- Characterize different employment arrangements among worker-patients.
- Outline workplace conditions that are likely to be associated with high precarity working conditions.
- Discuss worker experiences that are likely to be associated with high precarity work.

Because of macrolevel social changes including globalization, a decrease in unionization, pressure for employment flexibility, and weakening of the social contract between employers and workers, employment precarity is increasingly common in many countries including the United States^{1–3} and is recognized as an upstream determinant of health, rooted in longstanding structural economic and social policies, which contributes to health inequalities.^{4,5} Although there is no single agreed-upon definition for employment precarity, occupational health and policy researchers increasingly agree that precarious employment is characterized by nonstandard, unstable employment relationships in which workers lack power and have difficulties exercising their rights, have few employment benefits, and have little or no opportunity for advancement.^{6,7} Longitudinal investigations of employment precarity based on a multidimensional understanding of this construct have shown that precarity is increasing among all workers, even among groups that have historically been more advantaged, namely, men and those with higher education and income.⁸ Because employment precarity can adversely impact social advantage, which is well known to be associated with health,^{9,10} increasing employment precarity across the US workforce has raised concern that a public health crisis may be looming. Additionally, coronavirus disease 2019 (COVID-19) and the recent wave of migration have increased risk for employment precarity at the population level and within low-income, racially marginalized groups. This suggests a rising need for occupational and community health research in this area, particularly in communities with a high proportion of residents who experience socioeconomic hardship.

Precarious employment is likely to be concentrated at the neighborhood level because of broader historical and structural factors—social, political, and economic policies, which segregate people based on social identity and produce inequitable distribution of resources. We can understand the contributors that compound barriers to high-quality, stable, and well-paying employment through a Critical Race Theory lens, whereby the determinants of these experiences are structural and race is a socially constructed indicator of these phenomena.¹¹ Precarious employment is more common among individuals who identify as Black, Indigenous, people of color (BIPOC), immigrants,

and women.^{6,8,12–14} This aligns with the argument of Bodin et al.⁶ that social context, particularly what they term “axes of inequality” involving intersecting characteristics such as gender, race/ethnicity, and education, impact experiences of precarity and are historically associated with economic disadvantage. This includes fewer opportunities for work in neighborhoods where BIPOC and non-US citizens live, particularly jobs that are traditionally seen as “good” employment, characterized by full-time salaried work with social benefits. In combination with employment discrimination, this can force BIPOC individuals to accept insecure and poor quality employment, including working conditions that contribute to increased risk of occupational injury/illness and stress.¹⁵ Low or irregular income associated with these types of jobs further contributes to perpetuation of the cycle of socioeconomic disadvantage and concentration of economic and health disparities at the community level when people in precarious jobs are segregated within neighborhoods.¹⁶ There is limited research, however, related to how work impacts health at the community level: this question gave impetus to the Greater Lawndale Healthy Work (GLHW) Project.

The GLHW Project

The GLHW Project is a community-based participatory research project being conducted under the aegis of the University of Illinois Chicago Center for Healthy Work, a NIOSH-funded Center of Excellence in Total Worker Health® that centers academic-community collaboration at each phase in the research process.¹⁷ The GLHW Project consortium team is consisted of academic and community partners (community members and representatives of community-based organizations) in two contiguous neighborhoods in Chicago, Illinois, that experience high socioeconomic hardship: South Lawndale (known as Little Village/La Villita by residents) and North Lawndale (together constituting Greater Lawndale). Estimates for the time period 2016 to 2020 indicate that approximately 81% of Little Village residents identify as Hispanic or Latinx,¹⁸ with about 37% of residents not born in the United States and 37% speaking limited English (University of Illinois Chicago School of Public Health Chicago Health Atlas, 2020). Over 82% of North Lawndale residents identify as Black or African American.¹⁹ The non-US born residents of Little Village are predominately from Mexico, whereas North Lawndale has a very low proportion of residents born in another country (less than 5%). Compared to the City of Chicago overall, both neighborhoods have a lower percentage of residents who have completed high school and a higher percentage of residents with a household income of less than \$25,000 per year. More detail about the community characteristics can be found in prior publications from this study.^{20–23}

Prior collaborative community health assessments in Little Village identified “work” as a key factor mentioned by community residents when asked about influences on their health; they particularly emphasized work that is precarious, uncertain, or unstable in nature. The consortium expanded on this research by seeking to understand the occupational health needs of workers employed in precarious employment situations living in Greater Lawndale by using a mixed methods approach to needs assessment. This included interviews,²⁴ focus groups,²¹ concept mapping,²² and a landscape assessment,²⁰ with the long-term goal of informing the development of community-based interventions to promote healthy work. Based on themes identified through these study components and input from consortium members, the GLHW research team developed a community health assessment survey to characterize the nature and context of work among residents in Greater Lawndale.

For this article, we use data from this survey to examine characteristics of employment in Greater Lawndale. Our aims for this article are to (1) examine the frequencies of a robust set of employment characteristics reported in a sample of Greater Lawndale residents and (2)

explore associations between precarious employment, measured with the Poverty and Employment Precarity in Southern Ontario (PEPSO) Employment Precarity Index, and measures of residents' experiences with precariousness and material deprivation. Collectively, these data can provide insight into characteristics of employment and their impacts experienced by Greater Lawndale residents, which may have implications for the health of the community more broadly.

METHODS

Survey Development and Relevant Measures

Following the principles of community-based participatory research, the GLHW Community Health Assessment Survey was developed through collaboration of academic researchers and community researchers (CRs; members of our research team who live and/or work in Greater Lawndale).^{25,26} Beginning in August 2016, a series of bi-monthly meetings were held with consortium members to develop a shared conceptual grounding and implement the qualitative components of the project. Informed by consortium member input and these qualitative methods, the research team developed a 192-item community health survey in English and Spanish to capture comprehensive characteristics of residents' employment and working conditions, as well as facilitators and barriers to employment, health conditions, and sociodemographic characteristics. Measures included in the survey instrument to capture facets of residents' employment arrangements and conditions, which are the topic of this article, are further described below.

Employment Precarity

We used the PEPSO Employment Precarity Index (EPI), which was developed to assess employment precarity in a series of large scale representative surveys in Southern Ontario, Canada.^{27,28} The EPI has 10 components: (1) employment type (type of contract and whether one gets work from a temporary employment agency), (2) standard employment relationship (single employer that provides at least 30 hours per week), (3) on-call work, (4) employer provided benefits, (5) getting paid if one misses work, (6) income variability week to week, (7) percent of income paid in cash, (8) likelihood of paid employment being reduced in the future, (9) knowing schedule at least 1 week in advance, and (10) being able to exercise health and safety rights without retaliation. We selected the EPI for inclusion in the survey because it contained questions about type of employment contract and benefits, which were identified by consortium members as particularly important elements. We supplemented the EPI with several additional items to capture objective elements of residents' work arrangements, including working hours,²⁹ membership in a labor union,³⁰ number of hours worked per week,³¹ payment method³² and frequency of payment for work, and number of people employed at the respondent's place of work.

Experience of Precariousness

In addition to capturing the precarity of residents' employment relationships using the EPI, we included items from existing measures and from items developed based on consortium member input to obtain residents' perceptions of their work situations. To capture residents' perceptions of power over their work situations, we included items on residents' perceptions of their control over how their work schedule is set,³³ how easy it is to take an hour or two off during working hours,³³ opportunity to work flexible hours, and whether refused unsafe work in year prior to survey. We also captured the degree to which respondents felt informed about their rights as workers.³⁴ To capture residents' experiences with unfairness at work, we included items on residents' experiences with and frequency of discrimination and experiences of wage theft (whether ever not paid or received less than expected). To capture perceptions of the on-the-job opportunities

afforded by their work situations, we included items to capture the opportunity to receive support from coworkers and opportunity to socialize, opportunity to feel proud of one's work, and opportunity for job advancement. We also included a series of questions from the National Healthy Worksite Program's Health and Safety Climate Survey³⁵ regarding whether the participant believed their "job provides an opportunity to..." live tobacco free, eat healthy, manage stress, and work safely.

Material Deprivation

We included two items to capture residents' perceptions of whether their job provided adequate resources to maintain their standard of living. Specifically, we included an item to gauge whether the resident's work enabled them to pay bills and an item to gauge whether their work enabled them to meet their basic needs.

Social Context

The following demographic measures were also included in the survey: gender (male, female, trans male/trans man, trans female/trans woman, genderqueer/gender nonconforming, prefer to self-describe), Latinx identity (yes/no), race (non-Latinx White/Caucasian, Black/African American, Asian, Pacific Islander, other race or ethnicity), age, and education (no school degree, high school graduate or GED, college graduate or higher, other).

Once a semifinal draft of the survey was complete, the survey was translated from English to Spanish by multiple consortium members, one of whom is a professional translator. The survey was then pretested in English and Spanish with friends, family, and colleagues of consortium members. Items were revised based on feedback.

Sampling and Recruitment

Sampling and recruitment procedures for this survey are described elsewhere.²³ Briefly, CRs prioritized recruitment of up to 500 adult (18+) English- or Spanish-speaking residents of Little Village or North Lawndale (250 per neighborhood), apportioned across grids of the geographical neighborhood area, who had worked for pay at some point within the previous 2 years and who believed that their work was precarious. In our screener, we defined precarious employment as having any of several characteristics (irregular or unpredictable schedule, cannot count on the job continuing/temporary or seasonal work, does not pay a living wage, no paid benefits, dangerous working conditions, little or no opportunity for advancement). CRs employed a convenience sampling approach and administered surveys in community settings one-on-one or in small groups from August 2018 through August 2019. Respondents were given a \$25 gift card for completing the survey. Data were double entered in Qualtrics and checked by University of Illinois Chicago researchers and member checked by CRs.^{36,37} This research was approved by the University of Illinois Chicago Institutional Review Board (protocol no. 2013–1028). The entire consortium received requisite Human Subjects training and respondents provided verbal consent and received a printed consent form from CRs. This article was prepared following the STrengthening the Reporting of OBservational Studies in Epidemiology (STROBE) reporting guidelines (see STROBE checklist as Supplementary Data 1, <http://links.lww.com/JOM/B680>).

Data Analysis

We used frequencies and percentages to describe demographic characteristics of the sample and employment characteristics (Aim 1). We divided our sample into tertiles of approximately equal size using scaled EPI scores and defined these as lowest, middle, and highest precarity. We used χ^2 analyses to examine the association between EPI precarity category and the items used to capture residents' experiences with precariousness and material deprivation (Aim 2). Significant findings are further interpreted based on the distribution of

standardized residuals, with standardized residuals with an absolute value greater than two indicating a greater- or lesser-than-expected proportion of the sample falling in that cell. For missing data on the EPI, we conducted multiple imputation using an iterative Markov Chain Monte Carlo method to replace missing values. We conducted 10 iterations with five imputations, employing Rubin's rules to combine imputed estimates.³⁸ We conducted all quantitative analyses using SPSS Statistical Software version 26. We did not impute missing data for demographics or for individual precarity items, as we felt that missing data on these items may reflect a valid response option of unwillingness or discomfort answering questions about work.

RESULTS

CRs collected 489 surveys in Greater Lawndale, and of these surveys, 479 met the study criteria and were included in analyses (eg, respondents met the eligibility criteria, responses were appropriately marked on paper instrument). We imputed missing data for EPI measures in approximately 15% of the 479 surveys analyzed.

Aim 1: Examine the Employment Characteristics Reported Most Frequently in a Sample of Greater Lawndale Residents

Table 1 summarizes demographics of the sample and the relationships between demographic categories and tertiles of employment precarity categories as measured by the EPI. There was no significant relationship between gender or age category and precarity tertile. Of those classified as highest precarity, a significantly higher percentage were from Little Village (60.5%) compared to North Lawndale (39.5%). Those in the highest precarity category were most likely to identify as Latinx ethnicity born outside of the United States (48.2%) and those in the lowest precarity category were most likely to be non-Latinx ethnicity (59.2%). Those who were non-Latinx Black made up the vast majority of non-Latinx people in the sample; thus, power was not sufficient to adequately test differences in precarity by race. In terms of education, those categorized as highest precarity were more likely to have less than a high school degree (41.4%), and those in the least precarious jobs were more likely to have a college degree or higher (29.7%) and less likely to have no degree (14.6%).

Table 2 shows frequency of each EPI employment precarity indicator reported in this sample. Of the EPI items, the most frequently experienced work characteristics (over 50% of the sample) were not being paid for missing a day's work (78.1%), having something other than a permanent full-time position (73.0%), lacking employer-provided benefits like health or dental insurance (70.8%), and lacking an employer-provided retirement or pension plan (68.3%). Experiences that were reported by less than half but more than one third of the sample included getting at least half of one's pay from temporary employment agencies (40.3%), working on call at least half of the time (39.2%), schedule known less than 1 week in advance (42.2%), and job loss fairly or very likely in the next 12 months (36.7%). The remaining aspects of precarity measured by the EPI were reported by between 20.7% (income varies a great deal week to week) and 32.8% (hours likely or very likely to be reduced in the next 6 months and being paid in cash) of respondents.

Aim 2: Explore Associations between Precarious Employment Relationships, Measured With the EPI, and Measures of Residents' Experiences With Precariousness and Material Deprivation

Table 3 includes the additional, non-EPI objective employment characteristics reported in this sample. The relationships between response options for each characteristic and level of precarity generally followed the same trend, whereby those in the lowest precarity group (ie, the respondents with the most stable employment situations) were

TABLE 1. Employment Precarity and Social Context (Imputed Data, N = 479)

Characteristic	n	Precarity Level (EPI Tertiles)		
		Lowest (n = 147, 30.8%)	Middle (n = 167, 34.9%)	Highest (n = 164, 34.3%)
		n (col%)	n (col%)	n (col%)
Neighborhood*				
North Lawndale	234	91.6 (62.1)	77.6 (46.4)	64.8 (39.5)
Little Village	245	55.8 (37.9)	89.8 (53.6)	99.4 (60.5)
Gender		n = 146.6	n = 157.4	n = 159.4
Male	231	75.4 (51.4)	72.6 (46.1)	83.0 (52.1)
Female	220	69.6 (47.5)	78.4 (49.8)	72.0 (45.2)
Transgender or nonbinary	12	1.2 (0.8)	6.4 (4.1)	4.4 (2.8)
Ethnicity*		n = 138.8	n = 147.2	n = 153.0
Latinx — born in the US	80	25.2 (18.2)	28.6 (19.4)	26.2 (17.1)
Latinx — born outside the US	160	31.4 (22.6)	54.8 (37.2)	73.8 (48.2)
Non-Latinx	199	82.2 (59.2)	63.8 (43.3)	53.0 (34.6)
Race		n = 82.2	n = 62.8	n = 53
Non-Latinx White	6	5.0 (6.1)	1.0 (1.6)	0.0 (0.0)
Non-Latinx Black	181	74.2 (90.3)	58.8 (93.6)	48 (90.6)
Non-Latinx other/>1	11	3.0 (3.6)	3.0 (4.8)	5.0 (9.4)
Age, years		n = 131.4	n = 157.4	n = 151.2
18–29	143	46.8 (35.6)	53.6 (34.1)	42.6 (28.2)
30–44	173	42.4 (32.3)	60.4 (38.4)	70.2 (46.4)
45–64	115	41.2 (31.4)	38.6 (24.5)	35.2 (23.3)
65+	9	1.0 (0.8)	4.8 (3.0)	3.2 (2.1)
Education*		n = 138.2	n = 150.8	n = 143
Less than high school	131	20.2 (14.6)	51.6 (34.2)	59.2 (41.4)
High school graduate	228	77.0 (55.7)	83.2 (55.2)	67.8 (47.4)
College graduate	73	41.0 (29.7)	16.0 (10.6)	16.0 (11.2)

Note: Counts are from imputed data pooled analyses averaged over five imputations and so may include nonwhole numbers. Percentages may not sum to 100% due to rounding or missing data. χ^2 values computed for pooled estimates.

* $P < 0.001$.

most likely to report the response option reflecting the most stable or highest quality employment condition (eg, working a regular daytime schedule, weekly hours at or above 35 hours per week, payment by salary or by the hour, weekly or monthly paychecks, union membership, and employment at a business with more employees). Conversely, respondents in the highest precarity group were more likely to report response options reflecting less stable or lower quality employment conditions. Differences in responses between precarity groups were statistically significant for all employment characteristics assessed except for union membership.

Table 4 includes the remaining measures assessed in this survey, which reflect respondents' perceptions of various elements of the work situation at their main job. Similar to the non-EPI objective employment characteristics described above, the relationships between response options for each work situation element included in the table and level of precarity generally followed the same trend. Differences in response options between precarity groups were statistically significant for 3/5 indicators of respondents' power over their work situations: opportunity to work flexible hours (highest precarity respondents were least likely to agree), refusing unsafe work (highest precarity respondents were least likely to refuse), and being well-informed about rights at work (highest precarity respondents were least likely to report being very well or well-informed). Differences were statistically significant for 2/3 indicators of unfairness at work: discrimination based on identity being a problem or barrier when looking for work (highest precarity respondents were least likely to report "never") and experiences of wage theft (highest precarity respondents were most likely to report "yes"). Differences were statistically significant for all but one of the on-the-job opportunities assessed (highest precarity respondents were least likely to report opportunity to feel supported by coworkers, to have the opportunity to socialize,

to feel proud of their work, to have the opportunity for advancement, to have the opportunity to live tobacco free or eat a healthy diet, or to have the opportunity to work safety). Finally, responses for both indicators of material deprivation were significantly different by level of precarity: the highest precarity respondents were least likely to report that their main job provided them the opportunity to pay bills or to meet basic needs.

DISCUSSION

The survey instrument employed in this study included a robust and comprehensive set of employment-related measures that allowed us to capture nuanced data about the employment situations of a sample of Greater Lawndale residents. Although some employment-related measures are available, at least to some degree of specificity, at the neighborhood level via national population surveys in the United States (eg, the American Community Survey, the Current Population Survey), these surveys capture a more limited set of objective employment indicators as compared to our survey and are thus of limited utility when seeking to characterize a wide variety of employment characteristics and their impacts. Further, for some indicators, data from national population surveys are only available at a larger geographic level (eg, at the Chicago city-level), limiting their utility for characterizing hyperlocal conditions.³⁹ This study enabled us to more extensively examine characteristics of neighborhood residents' employment situations, particularly among those who may be underrepresented in population level surveys; this allows for a more nuanced understanding of worker experiences at a hyperlocal level.

Our findings showcase the disproportionate precarity of employment reported by this sample of Greater Lawndale residents, all of whom perceived their work situations to be precarious (per our

TABLE 2. Frequency of EPI Items (Nonimputed Data, N = 479)

Precarity Indicator	n (%)
Total sample	479 (100.0)
Main job employment type	
On-call, day labor, temporary work with no contract or contract <1 year	173 (36.1)
Fixed-term contract >1 year	44 (9.2)
Self-employed	18 (3.7)
Permanent part time, <35 hours/week	72 (15.0)
Permanent full-time, 35+ hours/week	118 (24.6)
Selected more than 1 or other	43 (9.0)
Missing	11 (2.3)
Last 12 months, portion of pay from temporary employment agencies	
All or most	141 (29.4)
Half or Some	52 (10.9)
None	242 (50.5)
Don't know	32 (6.7)
Missing	12 (2.5)
Employer provides benefits such as, health, dental, vision, or life insurance	
Yes	115 (24.0)
No	339 (70.8)
Don't know	19 (4.0)
Missing	6 (1.3)
Employer provides retirement, pension accounts, 401K or 403b	
Yes	107 (22.3)
No	327 (68.3)
Don't know	39 (8.1)
Missing	6 (1.3)
Likelihood total paid hours would be reduced in next 6 months	
Very likely or likely	157 (32.8)
Somewhat	69 (14.4)
Not likely or not likely at all	162 (33.8)
Don't know	54 (11.3)
Not currently working	29 (6.1)
Missing	8 (1.7)
In the next 12 months, likelihood to lose main job/be laid off	
Not at all likely	107 (22.3)
Not too likely	147 (30.7)
Fairly likely	94 (19.6)
Very likely	82 (17.1)
I am not currently working	43 (9.0)
Missing	6 (1.3)
In the last 12 months, frequency of working on an on-call basis	
All the time	84 (17.5)
Most of the time	69 (14.4)
Half of the time	35 (7.3)
Some of the time	117 (24.4)
Never	169 (35.3)
Missing	5 (1.0)
Notice of schedule changes	
Schedule known weeks before job or schedule does not change	239 (49.9)
Schedule known days before job	46 (9.6)
Schedule known a day before or the same day	156 (32.6)
Other	13 (2.7)
Missing	25 (5.2)
Paid for missed work day	
Yes	91 (19.0)
No	374 (78.1)
Missing	14 (2.9)
In the last 12 months, portion of money made received in cash	
Most or all	102 (21.3)
About half or some	55 (11.5)
None	288 (60.1)
Don't know	18 (3.8)
Refused to answer	10 (2.1)
Missing	6 (1.2)
Last 12 months, how much income varies week to week	
A great deal/a lot	99 (20.7)
Some or a little	240 (50.1)

TABLE 2. (Continued)

Not at all	115 (24.0)
Don't know	16 (3.3)
Missing	9 (1.9)
Retaliation or fear of retaliation for reporting health and safety issues	
Experienced bad treatment	138 (28.8)
Worry about bad treatment	28 (5.8)
Unsure	24 (5.0)
No	256 (53.4)
Missing	33 (6.9)

Note: Nonimputed data. Percentages may not sum to 100% due to rounding.

screening criteria). Although we largely explored the relationships between discrete characteristics of residents' work situations and relative precarity in this sample, it is important to acknowledge findings that elucidate the precarious nature of work in this sample more broadly: although most of the indicators that we measured are not available in population-level data sets, when they are available, the differences are stark. For example, available data for the City of Chicago around the same time period as our survey indicate that over 80% of Chicago residents had employment-related health insurance, and just over 60% of Greater Lawndale residents had this benefit,³⁹ as compared to just 24% of respondents in our sample. Clearly, we were able to reach particularly precariously employed workers, achieving our goal to understand their challenges and, in turn, informing the development of multilevel and community-oriented interventions to promote healthy work.

When we look beyond the EPI indicators, we continue to see high proportions of respondents who report conditions or experiences reflecting less stable or lower quality work characteristics, even as we observe disproportionate reporting of these characteristics among the highest precarity respondents (collectively shown in Tables 3 and 4). This again reinforces the skewness of our sample toward work situations with generally undesirable characteristics or repercussions (eg, work situations where the workers have little power over their working arrangements or conditions, where discrimination is commonplace, where opportunities to improve worker well-being are limited if available at all, and which result in conditions of material deprivation). The comprehensive nature of the data from our survey thus highlights its utility to inform targeted interventions to address both the primary dimensions of employment precarity as well as the downstream consequences of precarious employment situations experienced by residents of high hardship communities like Greater Lawndale.

Several of the core dimensions of employment precarity are amenable to policy-level intervention: for example, there are laws that establish rights and protections for those working outside of standard employment relationships (eg, employed through third-party temporary staffing agencies, day laborers, domestic workers).^{40–42} Paid sick leave policies are increasingly becoming law in states and local jurisdictions across the United States⁴³; these laws may cover employees regardless of tenure or, in some cases, after accrual of a certain number of hours (eg, 1 hour of paid leave for every 30 hours of work in California⁴⁴). Since our survey was conducted, Illinois passed an amendment to its Day and Temporary Labor Services Act, which mandates that day and temporary workers who are assigned to work at a third-party establishment for 90 or more days receive pay commensurate to direct-hire employees with the same duties.⁴⁵ Illinois also has a new Illinois Paid Leave for All Workers Act, which allows workers to earn up to 40 hours of paid leave annually.⁴⁶ Although these policies are likely to ameliorate employment inequalities for many workers, the most precariously employed workers, such as temporary workers assigned to a third-party establishment for less than 90 days, may be excluded. Notably, many jurisdictions lack policies that explicitly target the characteristics of employment that make it precarious, and in jurisdictions that do have such policies, enforcement can remain

TABLE 3. Frequency of Non-EPI Employment Characteristics and Bivariate Association With EPI Category

Employment Characteristic	n (%)	Precarity Level (EPI Tertile)			Pooled χ^2 Value (df)
		Lowest n (col%)	Middle n (col%)	Highest n (col%)	
Hours usually worked at main job					
A regular daytime schedule	225 (47.0)	89.2 (60.5)	76.2 (45.5)	59.6 (36.3)	45.95 (18) $P = 0.001$
A regular evening shift	37 (7.7)	12.2 (8.3)	10.8 (6.5)	14 (8.5)	
A regular night shift	27 (5.6)	6.4 (4.3)	11.2 (6.7)	9.4 (5.7)	
A rotating shift (changes am/pm/nights)	43 (9.0)	14.2 (9.6)	14.6 (8.7)	14.2 (8.6)	
Spilt shift (two distinct periods each day)	15 (3.1)	4 (2.7)	8.8 (5.3)	2.2 (1.3)	
Variable schedule (changes by day/week)	48 (10.0)	7 (4.7)	21.8 (13.0)	19.2 (11.7)	
Depends on the opportunity for business	24 (5.0)	1 (0.7)	6.2 (3.7)	16.8 (10.2)	
Other	9 (1.9)	3 (2.0)	4 (2.4)	2 (1.2)	
More than one checked	43 (9.0)	9.4 (6.4)	10.6 (6.3)	23 (14.0)	
Missing	8 (1.7)	1 (0.7)	3.2 (1.9)	3.8 (2.3)	
Member of a labor union at main job					
Yes	47 (9.8)	18 (12.2)	16 (9.6)	13 (7.9)	4.76 (6) $P = 0.691$
No	394 (82.3)	118.8 (80.6)	140 (83.6)	135.2 (82.3)	
I don't know	33 (6.9)	8.6 (5.8)	11.2 (6.7)	13.2 (8.0)	
Missing	5 (1.0)	2 (1.4)	0.2 (0.1)	2.8 (1.7)	
Number of hours worked per week at main job					
Less than 20 hours	87 (18.2)	11.2 (7.6)	43.4 (25.9)	32.4 (19.7)	39.36 (8) $P < 0.001$
20–34 hours	102 (21.3)	24 (16.3)	42.6 (25.4)	35.4 (21.6)	
35–40 hours	197 (41.1)	85 (57.7)	57.6 (34.4)	54.4 (33.1)	
More than 40 hours	85 (17.7)	26.2 (17.8)	20.6 (12.3)	38.2 (23.3)	
Missing	8 (1.7)	1 (0.7)	3.2 (1.9)	3.8 (2.3)	
Payment method for main job					
By salary	59 (12.3)	27.4 (18.6)	13.8 (8.2)	17.8 (10.8)	38.20 (10) $P < 0.001$
By the hour	312 (65.1)	109.6 (74.4)	103.8 (62.0)	98.6 (60.0)	
By job/task	63 (13.2)	7.2 (4.9)	24.6 (14.7)	31.2 (19.0)	
Paid some other way	17 (3.5)	0 (0.0)	9.4 (5.6)	7.6 (4.6)	
I refuse to answer	10 (2.1)	1 (0.7)	5 (3.0)	4 (2.4)	
Missing	18 (3.8)	2.2 (1.5)	10.8 (6.5)	5 (3.0)	
Frequency of payment for main job					
Daily, on the days worked	53 (11.1)	1 (0.7)	19.6 (11.7)	32.4 (19.7)	85.20 (8) $P < 0.001$
Weekly	179 (37.4)	33.4 (22.7)	73.4 (43.8)	72.2 (44.0)	
Every other week or monthly	225 (47.0)	110.6 (75.0)	67 (40.0)	47.4 (28.9)	
Other	18 (3.8)	2 (1.4)	5 (3.0)	11 (6.7)	
Missing	4 (0.8)	0.4 (0.3)	2.4 (1.4)	1.2 (0.7)	
How many people are/were employed at place of work					
I am the only employee	43 (9.0)	2 (1.4)	14.8 (8.8)	26.2 (16.0)	71.99 (16) $P < 0.001$
<15	107 (22.3)	17 (11.5)	34.6 (20.7)	55.4 (33.7)	
15–19	40 (8.4)	10 (6.8)	15.6 (9.3)	14.4 (8.8)	
20–49	73 (15.2)	33.8 (22.9)	28.8 (17.2)	10.4 (6.3)	
50–99	46 (9.6)	15 (10.2)	17 (10.2)	14 (8.5)	
>100	95 (19.8)	44 (29.9)	26 (15.5)	25 (15.2)	
Don't know	63 (13.2)	24.4 (16.6)	25.6 (15.3)	13 (7.9)	
I refuse to answer	7 (1.5)	0.2 (0.1)	3.8 (2.3)	3 (1.8)	
Missing	5 (1.0)	1 (0.7)	1.2 (0.7)	2.8 (1.7)	

Notes: Counts are based on crosstabs between categorized imputed EPI scores and nonimputed precarity items, averaged over five imputations, and so may include nonwhole numbers. Percentages may not sum to 100% due to rounding. χ^2 Tests include missing values.

challenging.⁴⁷ Monitoring the implementation and impacts of these policies is integral to ensuring that employment characteristics and conditions improve for workers, especially for those who are most precariously employed.

Our findings contribute to the body of evidence showing that precarious employment is associated with material deprivation, unfair labor practices and frank discrimination, and lack of opportunities for health promotion.⁶ The survey items designed to capture downstream impacts of precarious employment also have implications for facilitators of individual worker health. High precarity workers are disproportionately exposed to high hazard work, adding the risk of occupational injury and illness to the inequalities associated with precarious work. A particularly distressing finding is that nearly 30% of respondents reported retaliation after reporting a health and safety issue at work, and another 6% were afraid of poor treatment should they report such a

concern: the risk of work-related injury is increased by workers needing to prioritize avoidance of poor treatment or job loss, which further showcases the likelihood that workers will continue to work in hazardous environments, even when there are risks of injury or illness.^{48,49} There is evidence to suggest that experiences of discrimination, which were prevalent in our sample, increase odds of occupational illness, injury, or assault,⁵⁰ as well as the odds of adverse mental health outcomes.⁵¹ Mechanisms that facilitate reporting and protect workers from retaliation can include grassroots programs that conduct outreach about labor rights and facilitate worker reporting of hazardous conditions and labor abuses⁵²; municipal reporting and enforcement agencies, such as the City of Chicago's Office of Labor Standards⁵³; and state and federal programs to support communications with workers, such as the US Occupational Safety and Health Administration's Regional Labor Liaison program.⁵⁴

TABLE 4. Frequency of Characteristics of Precarious Experience, Material Deprivation, and Bivariate Association With EPI Category

Perception of Work Situation	n (%)	Precarity Level (EPI Tertile)			Pooled χ^2 Value (df)
		Lowest n (col%)	Middle n (col%)	Highest n (col%)	
Power over work situation					
Control over how work schedule is set					
Set by employer with no changes	270 (56.4)	85.8 (58.2)	87.8 (52.4)	96.4 (58.7)	13.79 (10) <i>P</i> = 0.268
Choice of employer-fixed schedule	74 (15.4)	27 (18.3)	20.8 (12.4)	26.2 (16.0)	
Adapt hours w/in limits or set own hours	101 (21.1)	28.2 (19.1)	44.4 (26.5)	28.4 (17.3)	
Other	17 (3.5)	4.2 (2.8)	8 (4.8)	4.8 (2.9)	
Checked >1	9 (1.9)	1 (0.7)	2 (1.2)	6 (3.7)	
Missing	8 (1.7)	1.2 (0.8)	4.4 (2.6)	2.4 (1.5)	
How easy/difficult it is to take 1–2 hours off for personal matters					
Very easy or fairly easy	231 (48.2)	86.2 (58.5)	76 (45.4)	68.8 (41.9)	13.50 (8) <i>P</i> = 0.358
Fairly difficult	90 (18.8)	25 (17.0)	32.8 (19.6)	32.2 (19.6)	
Very Difficult	95 (19.8)	25.2 (17.1)	31.4 (18.8)	38.4 (23.4)	
Impossible	49 (10.2)	8 (5.4)	22.6 (13.5)	18.4 (11.2)	
Missing	14 (2.9)	3 (2.0)	4.6 (2.7)	6.4 (3.9)	
Job provides opportunity to work flexible hours (to take care of family, other responsibilities)					
Strongly disagree	93 (19.4)	18.4 (12.5)	28.2 (16.8)	46.4 (28.3)	37.95 (10) <i>P</i> < 0.001
Disagree	104 (21.7)	18.6 (12.6)	38 (22.7)	47.4 (28.9)	
Neither disagree nor agree	84 (17.5)	28.4 (19.3)	34.4 (20.5)	21.2 (12.9)	
Agree	133 (27.8)	54.8 (37.2)	44.8 (26.8)	33.4 (20.3)	
Strongly agree	59 (12.3)	26 (17.6)	19.2 (11.5)	13.8 (8.4)	
Missing	6 (1.3)	1.2 (0.8)	2.8 (1.7)	2 (1.2)	
Refused unsafe work in past 12 months					
Yes	82 (17.1)	13.2 (9.0)	20.4 (12.2)	48.4 (29.5)	46.09 (8) <i>P</i> < 0.001
No	338 (70.6)	124.8 (84.7)	117 (69.9)	96.2 (58.6)	
I don't know	26 (5.4)	1.2 (0.8)	16 (9.6)	8.8 (5.4)	
I refuse to answer	11 (2.3)	2 (1.4)	3 (1.8)	6 (3.7)	
Missing	22 (4.6)	6.2 (4.2)	11 (6.6)	4.8 (2.9)	
How well informed about rights at work					
Very well informed	119 (24.8)	46.6 (31.6)	40 (23.9)	32.4 (19.7)	48.87 (8) <i>P</i> < 0.001
Well informed	152 (31.7)	63.6 (43.1)	58.4 (34.9)	30 (18.3)	
Not very well informed	151 (31.5)	32 (21.7)	48 (28.7)	71 (43.2)	
Not at all informed	39 (8.1)	3 (2.0)	13.4 (8.0)	22.6 (13.8)	
Missing	18 (3.8)	2.2 (1.5)	7.6 (4.5)	8.2 (5.0)	
Unfairness at work					
Discrimination based on identity was a problem/barrier when looking for work					
Never	169 (35.3)	61.2 (41.5)	60.8 (36.3)	47 (28.6)	34.50 (14) <i>P</i> = 0.006
Seldom	67 (14.0)	29.2 (19.8)	15.8 (9.4)	22 (13.4)	
Sometimes	114 (23.8)	28.6 (19.4)	38.6 (23.1)	46.8 (28.5)	
Often	43 (9.0)	5 (3.4)	16 (9.6)	22 (13.4)	
Always	19 (4.0)	1 (0.7)	7.2 (4.3)	10.8 (6.6)	
I don't know	29 (6.1)	11 (7.5)	13 (7.8)	5 (3.0)	
Does not apply	32 (6.7)	10.2 (6.9)	12.4 (7.4)	9.4 (5.7)	
Missing	6 (1.3)	1.2 (0.8)	3.6 (2.2)	1.2 (0.7)	
Frequency of discrimination or unfair treatment at work in past 12 months					
Never	261 (54.5)	91.6 (62.1)	94 (56.2)	75.4 (45.9)	27.72 (12) <i>P</i> = 0.010
Once	56 (11.7)	19.2 (13.0)	22 (13.1)	14.8 (9.0)	
2–3 times	74 (15.4)	20.2 (13.7)	21.2 (12.7)	32.6 (19.9)	
4 or more times	41 (8.6)	8 (5.4)	9.6 (5.7)	23.4 (14.3)	
Don't know	15 (3.1)	2 (1.4)	6 (3.6)	7 (4.3)	
I refuse to answer	16 (3.3)	3.4 (2.3)	4.6 (2.7)	8 (4.9)	
Missing	16 (3.3)	3 (2.0)	10 (6.0)	3 (1.8)	
In the last 12 months, ever not paid or received less than expected (i.e., wage theft)					
Yes	113 (23.6)	12.2 (8.3)	37 (22.1)	63.8 (38.9)	57.05 (8) <i>P</i> < 0.001
No	333 (69.5)	130.8 (88.7)	112.4 (67.1)	89.8 (54.7)	
Don't know	17 (3.5)	2.2 (1.5)	11.8 (7.0)	3 (1.8)	
I refuse to answer	8 (1.7)	2 (1.4)	3 (1.8)	3 (1.8)	
Missing	8 (1.7)	0.2 (0.1)	3.2 (1.9)	4.6 (2.8)	
On-the-job opportunity afforded by work situation					
Job provides opportunity to feel supported by coworkers					
Strongly disagree	37 (7.7)	11.2 (7.6)	8.8 (5.3)	17 (10.4)	40.13 (10) <i>P</i> < 0.001
Disagree	77 (16.1)	10 (6.8)	28.8 (17.2)	38.2 (23.3)	
Neither disagree nor agree	122 (25.5)	27.4 (18.6)	45.6 (27.2)	49 (29.8)	
Agree	169 (35.3)	67.6 (45.9)	59.2 (35.4)	42.2 (25.7)	
Strongly agree	61 (12.7)	29 (19.7)	19.8 (11.8)	12.2 (7.4)	
Missing	13 (2.7)	2.2 (1.5)	5.2 (3.1)	5.6 (3.4)	

Continued next page

TABLE 4. (Continued)

Perception of Work Situation	n (%)	Precarity Level (EPI Tertile)			Pooled χ^2 Value (df)
		Lowest n (col%)	Middle n (col%)	Highest n (col%)	
Job provides opportunity to socialize					
Strongly disagree	42 (8.8)	11.2 (7.6)	9.2 (5.5)	21.6 (13.2)	38.69 (10) $P < 0.001$
Disagree	76 (15.9)	8 (5.4)	31 (18.5)	37 (22.5)	
Neither disagree nor agree	85 (17.7)	23.8 (16.1)	33 (19.7)	28.2 (17.2)	
Agree	175 (36.5)	62.2 (42.2)	60.8 (36.3)	52 (31.7)	
Strongly agree	92 (19.2)	42 (28.5)	28.2 (16.8)	21.8 (13.3)	
Missing	9 (1.9)	0.2 (0.1)	5.2 (3.1)	3.6 (2.2)	
Job provides opportunity to feel proud of work					
Strongly disagree	45 (9.4)	9 (6.1)	13 (7.8)	23 (14.0)	36.94 (10) $P < 0.001$
Disagree	64 (13.4)	9 (6.1)	20.6 (12.3)	34.4 (21.0)	
Neither disagree nor agree	116 (24.2)	31.2 (21.2)	41.8 (25.0)	43 (26.2)	
Agree	161 (33.6)	56.2 (38.1)	62.8 (37.5)	42 (25.6)	
Strongly agree	84 (17.5)	39.8 (27.0)	25 (14.9)	19.2 (11.7)	
Missing	9 (1.9)	2.2 (1.5)	4.2 (2.5)	2.6 (1.6)	
Job provides opportunity for advancement at work					
Strongly disagree	105 (21.9)	15 (10.2)	26.8 (16.0)	63.2 (38.5)	77.84 (10) $P < 0.001$
Disagree	87 (18.2)	17.2 (11.7)	35.4 (21.1)	34.4 (21.0)	
Neither disagree nor agree	126 (26.3)	40.8 (27.7)	49.6 (29.6)	35.6 (21.7)	
Agree	105 (21.9)	49.2 (33.4)	36.6 (21.9)	19.2 (11.7)	
Strongly agree	44 (9.2)	25 (17.0)	11 (6.6)	8 (4.9)	
Missing	12 (2.5)	0.2 (0.1)	8 (4.8)	3.8 (2.3)	
Job provides opportunity to live tobacco free					
Strongly disagree	59 (12.3)	9 (6.1)	15 (9.0)	35 (21.3)	39.20 (10) $P < 0.001$
Disagree	74 (15.4)	13 (8.8)	26.2 (15.7)	34.8 (21.2)	
Neither disagree nor agree	118 (24.6)	40.6 (27.5)	49.4 (29.5)	28 (17.1)	
Agree	111 (23.2)	41.6 (28.2)	37 (22.1)	32.4 (19.7)	
Strongly agree	111 (23.2)	43 (29.2)	37 (22.1)	31 (18.9)	
Missing	6 (1.3)	0.2 (0.1)	2.8 (1.7)	3 (1.8)	
Job provides opportunity to eat a healthy diet					
Strongly disagree	87 (18.2)	19.4 (13.2)	22.8 (13.6)	44.8 (27.3)	41.66 (10) $P < 0.001$
Disagree	108 (22.5)	23.2 (15.7)	34.6 (20.7)	50.2 (30.6)	
Neither disagree nor agree	134 (28.0)	41 (27.8)	55 (32.9)	38 (23.1)	
Agree	85 (17.7)	40.6 (27.5)	27.2 (16.2)	17.2 (10.5)	
Strongly agree	58 (12.1)	22 (14.9)	24 (14.3)	12 (7.3)	
Missing	7 (1.5)	1.2 (0.8)	3.8 (2.3)	2 (1.2)	
Job provides opportunity to manage stress					
Strongly disagree	92 (19.2)	19.6 (13.3)	27.4 (16.4)	45 (27.4)	23.87 (10) $P = 0.012$
Disagree	128 (26.7)	33 (22.4)	44 (26.3)	51 (31.1)	
Neither disagree nor agree	125 (26.1)	49.2 (33.4)	46.2 (27.6)	29.6 (18.0)	
Agree	86 (18.0)	28.4 (19.3)	34.4 (20.5)	23.2 (14.1)	
Strongly agree	36 (7.5)	15 (10.2)	10.6 (6.3)	10.4 (6.3)	
Missing	12 (2.5)	2.2 (1.5)	4.8 (2.9)	5 (3.0)	
Job provides opportunity to work safely					
Strongly disagree	51 (10.6)	7 (4.7)	16.4 (9.8)	27.6 (16.8)	59.52 (10) $P < 0.001$
Disagree	67 (14.0)	6 (4.1)	23.8 (14.2)	37.2 (22.7)	
Neither disagree nor agree	95 (19.8)	28 (19.0)	28.2 (16.8)	38.8 (23.6)	
Agree	182 (38.0)	64.4 (43.7)	72.8 (43.5)	44.8 (27.3)	
Strongly agree	78 (16.3)	40.8 (27.7)	22.8 (13.6)	14.4 (8.8)	
Missing	6 (1.3)	1.2 (0.8)	3.4 (2.0)	1.4 (0.9)	
Material deprivation					
Job provides opportunity to pay bills					
Strongly disagree	60 (12.5)	8 (5.4)	17.6 (10.5)	34.4 (21.0)	67.15 (10) $P < 0.001$
Disagree	74 (15.4)	10.2 (6.9)	32.4 (19.4)	31.4 (19.1)	
Neither disagree nor agree	96 (20.0)	22 (14.9)	33.2 (19.8)	40.8 (24.8)	
Agree	174 (36.3)	65.6 (44.5)	63.8 (38.1)	44.6 (27.2)	
Strongly agree	67 (14.0)	40.4 (27.4)	15.6 (9.3)	11 (6.7)	
Missing	8 (1.7)	1.2 (0.8)	4.8 (2.9)	2 (1.2)	
Job provides opportunity to meet basic needs (i.e., food, clothing, gas, travel costs, school supplies)					
Strongly disagree	57 (11.9)	7.2 (4.9)	17.4 (10.4)	32.4 (19.7)	63.84 (10) $P < 0.001$
Disagree	77 (16.1)	14.4 (9.8)	33.2 (19.8)	29.4 (17.9)	
Neither disagree nor agree	87 (18.2)	16 (10.9)	29.8 (17.8)	41.2 (25.1)	
Agree	187 (39.0)	74.6 (50.6)	63.4 (37.9)	49 (29.8)	
Strongly agree	63 (13.2)	35 (23.7)	17.6 (10.5)	10.4 (6.3)	
Missing	8 (1.7)	0.2 (0.1)	6 (3.6)	1.8 (1.1)	

Notes: Counts are based on crosstabs between categorized imputed EPI scores and nonimputed precarity items, averaged over five imputations, and so may include nonwhole numbers. Percentages may not sum to 100% due to rounding. χ^2 Tests include missing values.

Survey respondents with the highest precarity scores disproportionately noted that their jobs do not give them opportunities to manage their stress, live tobacco free, or eat a healthy diet—critical risk factors for chronic diseases. Disadvantages related to health promotion combined with limited health protections amplify health disparities in precarious working populations. Focusing our survey at the community level provides insights on how to integrate workplace and neighborhood characteristics—suggesting an approach to include “where people WORK” in considerations of human health. This holistic view of precariously employed workers’ work situations and experiences contributes to a broader view of the interplay between working arrangements, conditions, and experiences that contribute to a worker’s health, which we believe is consistent with the goals of NIOSH’s conceptualization of Total Worker Health® and is integral to inform the policies, programs, and practices that will best protect and promote health for the most precariously employed workers.

Finally, our findings also contribute to a more nuanced contextualization of work as it relates to our understanding of high economic hardship and its predictors at the neighborhood level. For example, the proportion of respondents who reported experiencing wage theft and infrequent payments for their work have direct consequences for economic stability in this community, and those respondents were most likely to be classified as the most precariously employed in our analyses. Similarly, nearly 30% of the overall sample reported not being able to pay bills nor meet basic needs (purchasing food, clothing, gas, travel costs, school supplies, etc) via their main jobs, and this was even more pronounced among respondents classified in the highest precarity tertile (approximately 40% for both indicators). These findings may have implications beyond the individual worker: for example, studies show that children who experience material deprivation are disproportionately likely to have low psychological well-being,⁵⁵ and material deprivation is correlated with poor health status and premature morbidity and mortality at the population level.⁵⁶ Prioritizing interventions that target the causes of employment precarity and that mitigate its downstream consequences thus have the potential for wide ranging impacts, especially in high hardship communities where precarious work is commonplace and its impacts are concentrated.

Strengths and Limitations

This study is subject to several limitations, including small sample size and selection, restriction of our measures to capture only data focused on a single “main” job, lack of consistent industry and occupation data, and a cross-sectional study design. The small sample size was a limiting factor in that we were unable to explore the contribution of certain demographic characteristics that were infrequently reported in our sample (eg, respondents who identified as gender queer, nonconforming, or who prefer to self-describe) with our survey measures, despite the fact that these groups may disproportionately experience adverse employment and working conditions due to factors such as discrimination and violence. A grid for sampling evenly across the community area and the use of CRs (from these communities) optimized the possibility of recruiting a representative sample; however, it is impossible to know how representative the sample actually is and therefore limits the ability to draw generalizable conclusions. Eligibility was limited to those who self-identified as being precariously employed. This may have limited variability in the items included in our survey, which may have affected the power to detect associations in our data. As such, our findings should be viewed as preliminary and subject to replication in larger samples encompassing the full range of employment precarity. We restricted our instrument to focus in-depth questions to a single job. Workers in precarious employment may need to hold multiple jobs in order to make ends meet; this, in and of itself, may contribute to increased exposure profiles and hazards to health. Because responses to elicit “industry” and “occupation” were unclear, we were unable to look at specific sectors or job titles.

Such imprecision is limiting for many studies of “work and health.” Finally, our cross-sectional study design limits our ability to draw conclusions about ways in which precarity may change over time, especially in times of economic and population health disruption such as during the COVID-19 pandemic.

Despite these limitations, this study has many notable strengths, including the robust engagement of the CRs who lived and/or worked in the Greater Lawndale and who facilitated the tailoring of the survey instrument for deployment in the community, oversaw the translation of each item from English to Spanish, determined the sampling frame based on expertise in their neighborhood, conducted prolonged outreach to the community and recruited individuals to complete this survey, administered the survey, and helped to interpret the study's findings in the community context. Additionally, the development and piloting of the comprehensive instrument to capture employment characteristics at the community level is a strength of this study, and our findings have implications for future studies aimed at further elucidating nuance employment characteristics and impacts of those characteristics among non-White working populations in the United States. Finally, our findings enable us to identify the conditions and experiences that might contribute to residents' sense of the precariousness of their own job: whereas we anticipated that a high proportion of respondents would report experiencing characteristics of employment precarity given our inclusion criteria, this study allowed us to more fully understand the ways individual experiences might shape a person's perception of their work. Ultimately, this study furthers our understanding of employment at a hyperlocal level, specifically among residents in the most precarious employment situations.

CONCLUSIONS

Given systematic racial segregation of neighborhoods and evidence that work opportunities cluster by place, precarious employment may be a key driver of health inequities observed at the neighborhood level in the United States. Research at the national, state, or even municipal levels may obfuscate data on key determinants of health, including characteristics of employment, among groups who experience high socioeconomic hardship. Our research suggests that efforts to comprehensively characterize the employment characteristics and experiences of these workers can provide nuanced insights into these important determinants of health at a hyperlocal level.

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