EMPLOYMENT

Pre-read materials for Oct. 17 Social Determinants of Infant Mortality Advisory Group meeting
HPIO 10/12/17

Contents:
• Summary “pathway” diagram
• Employment “pathway” diagram
• Employment evidence inventory
• Employment policy goals and potential policy recommendations

For background on how these materials were developed, see the Agenda and overview of pre-read materials for October 17 Advisory Group meeting document posted on the project webpage.
Summary of relationships between housing, transportation, education, employment and infant mortality

Cross-cutting factors
- Poverty
- Racism* and discrimination
- Toxic and persistent stress, trauma and violence

Challenges and inequities in the social, economic and physical environment**
- Housing
- Transportation
- Education
- Employment

Negative effects on health and equity
- Inadequate pre-conception, prenatal and post-natal care
- Poor maternal health
- Inadequate access to healthy foods and opportunities for physical activity
- Limited education and employment opportunities
- Poverty
- Toxic and persistent stress
- Other topic-specific factors***

Leading causes of infant mortality
- Poor birth outcomes
- Sudden unexplained infant death
- Accidents, injuries and violence

* Structural, institutional, interpersonal and internalized racism
** Topics specified for study by SB 332
*** See figures 2-5 for details
Relationship between employment and infant mortality

**Employment challenges and inequities**

- **Income**
  - Low wages
  - Under employment
  - Unemployment
  - Inadequate savings
  - Limited economic mobility
  - Wage disparities
  - Work disincentives in public benefits programs

- **Working conditions**
  - Occupational hazards
  - Physically demanding work
  - High demand, low control
  - Discriminatory practices
  - Multiple part-time jobs
  - Irregular scheduling and intermittent employment

- **Leave policies and employment benefits**
  - Breastfeeding and leave policies (maternal, sick leave, etc.)
  - Health insurance coverage

**Negative effects on health and equity**

- **Poverty**
- Difficulty affording necessities such as healthy food, health insurance and healthcare services

- **Toxic and persistent stress**

- **Disrupted, uncoordinated and inadequate pre-conception, prenatal and post-natal care, including access to contraception**

- **Lack of breastfeeding**

**Leading causes of infant mortality**

- **Birth outcomes**: 
  - Preterm birth
  - Low birth weight
  - Birth defects
  - Maternal complications of pregnancy

- **Poorest maternal health**
  - Physical health
  - Mental health

- **Unhealthy behaviors such as alcohol, tobacco and other drugs**

- **Sudden unexplained infant death**
Effective strategies to address employment challenges and inequities relevant to infant mortality

Key
- **Green** = 2017-2019 State Health Improvement Plan strategy
- **Red** = Leading causes of infant mortality
- **Italic** = Outcomes also relevant to housing, education, transportation, poverty, racism, stress or violence

### Income

Relevant policy goals:
- Increase incomes for pregnant women and parents of young children
- Reduce unemployment and under employment
- Increase access to work supports and other public benefit programs

<table>
<thead>
<tr>
<th>Policy or program</th>
<th>Direct outcomes documented in evidence review</th>
<th>Indirect/other potential outcomes in evidence review</th>
<th>Effectiveness to reduce inequities</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>1. Earned Income Tax Credit</strong></td>
<td>WWFH: Scientifically supported:</td>
<td>WWFH: Other potential beneficial outcomes:</td>
<td>WWFH: likely to reduce disparities</td>
</tr>
<tr>
<td></td>
<td>• Increased employment</td>
<td>• Increased academic achievement</td>
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<tr>
<td></td>
<td>• Increased income</td>
<td>• Improved maternal health</td>
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<td></td>
<td><strong>See also Hi-5: Recommended</strong></td>
<td><strong>Improved birth outcomes</strong></td>
<td></td>
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<tr>
<td><strong>2. Matched dollar incentives for saving tax refunds</strong></td>
<td>WWFH: Some evidence:</td>
<td>WWFH: Other potential beneficial outcomes:</td>
<td>WWFH: likely to reduce disparities</td>
</tr>
<tr>
<td></td>
<td>• Increased asset accumulation</td>
<td>• Increased financial stability</td>
<td></td>
</tr>
<tr>
<td><strong>3. Child care subsidies</strong></td>
<td>WWFH: Scientifically supported:</td>
<td>WWFH: Other potential beneficial outcomes:</td>
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</tr>
<tr>
<td></td>
<td>• Increased employment</td>
<td>• Increased access to child care</td>
<td></td>
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<tr>
<td><strong>4. Adult vocational training</strong></td>
<td>WWFH: Scientifically supported:</td>
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</tr>
<tr>
<td></td>
<td>• Increased earnings</td>
<td>• Reduced recidivism</td>
<td></td>
</tr>
</tbody>
</table>
| 5. **Transitional jobs** | WWFH: Scientifically supported:  
- Increased employment  
- Increased earnings | WWFH: Other potential beneficial outcomes:  
- Reduced recidivism  
- Reduced poverty | WWFH: likely to reduce disparities |
|--------------------------|-------------------------------------------------|-------------------------------------------------|----------------------------------|
| 6. **New Hope Project**  | WWFH: Some evidence:  
- Increased employment  
- Increased income  
- Increased earnings  
- Increased academic achievement |  
| WWFH: Likely to reduce disparities | |
| 7. **Living wage laws**  | WWFH: Some evidence:  
- Increased earnings  
- Reduced poverty |  
| WWFH: Likely to reduce disparities | |
| 8. **Full child support pass-through and disregard** | WWFH: Scientifically supported:  
- Increased child support receipt  
- Increased paternity establishment | WWFH: Other potential beneficial outcomes:  
- Reduced child maltreatment | WWFH: Likely to reduce disparities |
| 9. **Summer work experience programs** | WWFH: Some evidence:  
- Increased employment  
- Increased earnings | WWFH: Other potential beneficial outcomes:  
- Improved student attendance  
- Decreased violence  
- Increased job skills | WWFH: Likely to reduce disparities |
| 10. **Health career recruitment for minority students** | WWFH: Scientifically supported:  
- Increased academic achievement | WWFH: Other potential beneficial outcomes:  
- Increased high school graduation  
- Increased college enrollment  
- Increased diversity of health care workforce | WWFH: Likely to reduce disparities |
| 11. **Career and technical education for high school graduation** | WWFH: Scientifically supported:  
- Increased high school graduation | WWFH: Other potential beneficial outcomes:  
- Increased employment  
- Increased earnings  
- Reduced arrests  
- Reduced incarceration | WWFH: Likely to reduce disparities |
| 12. **Career Academies** | WWFH: Scientifically supported:  
- Increased high school graduation  
- Increased academic achievement  
- Improved student attendance  
**Top Tier Evidence: Top Tier:**  
- Sustained increase in annual earnings for men | WWFH: Other potential beneficial outcomes:  
- Increased earnings | WWFH: likely to reduce disparities |
|------------------------|------------------------------------------------|----------------|---------------------------------|
| 13. **Unemployment insurance (UI)** | WWFH: Some evidence:  
- Increased financial stability  
- Improved well-being | WWFH: Other potential beneficial outcomes:  
- Increased food security  
- Reduced poverty | WWFH: likely to reduce disparities |
| 14. **Nevada’s Reemployment and Eligibility Assessment Program** | **Top Tier Evidence: Near Top Tier:**  
- Increase in earnings per claimant  
- Increase in employment rate  
- Net savings to the Unemployment Insurance system | | |
| 15. **GED certificate programs** | WWFH: Some evidence:  
- Increased earnings  
- Reduced recidivism | WWFH: Other potential beneficial outcomes:  
- Increased GED certificate completion | WWFH: likely to reduce disparities |
### Working conditions\(^1\)

**Relevant policy goal**:  
- Reduce exposure to toxic and persistent stress in the workplace

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</table>
| 16. **Flexible scheduling** | WWFH: Scientifically supported:  
  - Improved health outcomes  
  - Increased job satisfaction | WWFH: Other potential beneficial outcomes:  
  - Improved mental health  
  - Improved work-life balance  
  - Reduced absenteeism  
  - Increased productivity | |
| 17. **Smoke-free policies for indoor areas** | WWFH: Scientifically supported:  
  - Improved health outcomes  
  - Reduced exposure to secondhand smoke  
  - Reduced tobacco consumption  
  - Reduced mortality  
  - Reduced hospital utilization  
  **Hi-5: Recommended:**  
  - Reducing exposure to secondhand smoke  
  - Reducing the prevalence of tobacco use  
  - Increasing the number of tobacco users who quit  
  - Reducing the initiation of tobacco use among young | WWFH: Other potential beneficial outcomes:  
  - Increased quit rates  
  - Reduced youth smoking  
  - Reduced health care costs  
  - **Reduced preterm birth**  
  - **Reduced infant mortality** | |
### Leave policies and employment benefits

**Relevant policy goal:**
- Adopt more robust leave policies and employment benefits

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| 18. **Health insurance enrollment outreach and support** | WWFH: Some evidence:  
  - Increased health insurance coverage | WWFH: Other potential beneficial outcomes:  
  - Increased awareness of health insurance availability | WWFH: likely to reduce disparities |
| 19. **Paid family leave** | WWFH: Scientifically supported:  
  - Increased labor force participation | WWFH: Other potential beneficial outcomes:  
  - Increased use of parental leave  
  - Improved health outcomes  
  - Improved mental health  
  - Increased preventive care  
  - Increased breastfeeding rates  
  - **Improved birth outcomes**  
  - **Reduced infant mortality**  
  - Improved well-being  
  - Improved economic security | WWFH: likely to reduce disparities |
| 20. **Paid sick leave laws** | WWFH: Some evidence:  
  - Increased access to paid leave  
  - Increased access to health care | WWFH: Other potential beneficial outcomes:  
  - Improved health outcomes  
  - Increased job stability  
  - Increased use of parental leave | WWFH: likely to reduce disparities |
| 21. **Breastfeeding promotion programs SHIP** | WWFH: Scientifically supported:  
  - Increased breastfeeding rates | WWFH: Other potential beneficial outcomes:  
  - Improved health outcomes | WWFH: likely to reduce disparities |
**Sources and acronyms**

HPIO searched the following systematic reviews and evidence registries to develop this inventory. Search terms aligned with the pathway diagrams (dark blue boxes) and findings of the literature review.

<table>
<thead>
<tr>
<th>Systematic review or evidence registry*</th>
<th>Recommendation level(s)/Evidence rating included in this inventory</th>
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</table>
| **What Works for Health (WWFH):** Evidence registry from County Health Rankings and Roadmaps, a project of the University of Wisconsin Population Health Institute and the Robert Wood Johnson Foundation | • Scientifically supported  
• Some evidence |
| **Health Impact in 5 Years (Hi-5):** CDC (includes cost considerations) | Recommended |
| **Top Tier Evidence:** Evidence registry maintained by the Laura and John Arnold Foundation | • Top tier  
• Near top tier |

*Also consulted The Guide to Community Preventive Services and What Works Clearinghouse, although no relevant reviews were found for housing

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1. Aligns with dark blue box on transportation pathway diagram
2. Aligns with policy landscape and policy recommendations; relevant to infant mortality priority populations
EMPLOYMENT

Policy goals and potential policy recommendations
Draft 10/12/17

Policy goals
1. Increase incomes for pregnant women and parents of young children
2. Reduce unemployment and under employment
3. Increase access to work supports and other public benefit programs
4. Reduce exposure to toxic and persistent stress in the workplace
5. Adopt more robust leave policies and employment benefits

Policy recommendations

Policy Goal #1. Increase incomes for pregnant women and parents of young children
1. State policymakers can expand the state Earned Income Tax Credit (EITC), lift the existing cap on the credit, make it refundable and/or expand the credit to non-custodial parents. (HPIO Income and Health brief)
2. State policymakers can create a matched dollar incentive program for people with low incomes, incentivizing people to deposit some or all of their tax refund in a savings account. This program can either be administered by the state or by a contracted organization.
3. State policymakers can prioritize funds for career and technical training (vocational training), from the funds provided by the Carl D. Perkins Career and Technical Education Act of 2006, to:
   a. Jobs and/or employers that pay a living wage
   b. Jobs and/or employers that are offering a lower wage but in a job with an articulated and stepped career pathway to higher wages and benefits
   c. Employers that do not have a history of wage and hour violations
   d. Employers that have relatively low turnover
   These programs could also include job search assistance and comprehensive support services (including child care) during training.
4. Local policymakers, infant mortality collaboratives and other partners can encourage employers to voluntarily adopt living wage policies.
5. Local policymakers can implement wage theft ordinances that apply to the local government as an employer, as well as external contractors with the local government. Wage theft ordinances increase monitoring and enforcement of wage and hour laws to ensure that all local government employees and contractors are paid the legal or contractual wage for all hours worked (see Cincinnati’s wage theft ordinance passed in 2016).
6. Local policymakers can increase transparency related to wages paid in the jurisdiction by compiling a list of employers that pay a living wage and posting it on a public website.
7. State policymakers can increase investigation of state employment law violations by increasing designated funding to the wage and hour division of the Department of Commerce.
Policy Goal #2. Reduce unemployment and under employment
8. State policymakers can reform occupational licensing to reduce barriers to employment, such as through reductions in license requirements. (See SB 132 for an example of proposed legislation to reduce the required number of training hours for a cosmetology license in Ohio.)
9. State policymakers can reduce barriers to employment related to criminal convictions by increasing monitoring and enforcement of the Ohio Fair Hiring Act, which prohibits public employers from asking any questions about conviction history on a job application (“ban the box”).

Policy Goal #3. Increase access to work supports and other public benefit programs
10. State policymakers can increase funding for child care, so that eligibility limits can be expanded and more families can access public child care or private child care through a subsidy.
11. State policymakers can incentivize employers to provide child care subsidies to their employees in order to remove barriers to employment for parents, particularly those with part-time and/or low wage jobs.
12. The Ohio Department of Job and Family Services (ODJFS) can license day care centers that provide child care on a temporary, irregular basis to children with short-term illnesses (see HB 77, introduced in the 132 General Assembly).
13. The Ohio Department of Jobs and Family Services (ODJFS) can analyze and evaluate the Comprehensive Case Management and Employment Program (CCMEP). If the evaluation is favorable, policymakers can increase funding for CCMEP to connect more youth and young adults with low incomes to skilled employment in Ohio.
14. State policymakers can review eligibility levels for government programs that serve individuals with low incomes in order to remove disincentives for job attainment or wage increases (“benefit cliffs”). Eligibility levels for programs such as TANF, WIC, Medicaid, etc. should be aligned with the self-sufficiency of the program recipients.

Policy Goal #4. Reduce exposure to toxic and persistent stress in the workplace
15. The State of Ohio can increase work schedule predictability for state employees, particularly those who work part-time or are on-call, by adopting a policy to provide scheduling notice at least 7 days in advance.
16. State policymakers can increase enforcement efforts related to discriminatory workplace practices through the Ohio Civil Rights Commission (OCRC).
17. State policymakers can consider an employer’s record with the OCRC when determining tax abatements, and assess a fee on employers with regular complaints to the OCRC. Revenue gained from these fees can be dedicated to fund education programs on eliminating discrimination in the workplace.

Policy Goal #5. Adopt more robust leave policies and employment benefits
18. State policymakers can offer incentives to employers, primarily those offering part-time and/or low wage work, for offering employment benefits, such as paid parental and sick leave. For example, the Department of Insurance can create a social insurance program that would help small business provide wages for employees who are on leave.
19. State policymakers can require and subsidize more types of employers to offer employer sponsored health insurance to their employees, including those offering part-time or low wage work. This employer sponsored health insurance should cover services that will benefit the pregnant women and/or women of childbearing age, including prenatal services, contraception and postnatal care.

20. State policymakers could increase employer requirements related to breastfeeding, including providing adequate space and time for women to express milk at work, in addition to what is required by the federal Fair Labor Standards Act.

21. State policymakers may also prohibit employers from discriminating against employees who breastfeed.

22. State policymakers can require or incentivize employers to increase breastfeeding supports in the employment setting, including providing education for pregnant and lactating women on the benefits of breast feeding, as well as offering support from supervisors and coworkers.

23. The Ohio Department of Job and Family Services (ODJFS) can provide, on its website, information and links to other websites where employers can access information regarding methods to accommodate nursing mothers in the workplace.

24. The Ohio Department of Job and Family Services (ODJFS) can require employers who receive funding for supported work programs, training and other programs to offer employee benefits, such as paid parental leave, paid sick leave and nursing support. Additional funding may be required.