

Health Equity: Guidance Toolkit for Food Industry Essential Frontline Workers

A. Project Overview

Globally, more than 36,200,000 confirmed cases of coronavirus disease have been reported including over 1,060,000 deaths. In the United States, there have been more than 7,580,000 confirmed cases, with cases in all 50 states, District of Columbia, Puerto Rico, Guam, American Samoa, and US Virgin Islands. While many efforts will focus on health care essential workers, there is less emphasis on food industry essential workers who are at potential high risk for exposure to the disease. The essential workforce¹, which includes retail workers such as grocery workers, restaurant workers and other food service workers, public transit employees, and custodial staff is disproportionately comprised of low-wage earners who are Black or African Americans or Hispanic or Latino, or non-US born individuals from Asian/Pacific Islander communities.

It is important to highlight and address COVID-19 risk disparities among food industry essential workers due to the limited control they have over exposures to the public and COVID-19. There needs to be specific guidance and support provided directly to this category of workers - with special emphasis on racial and ethnic minority workers who are African Americans/Blacks, Hispanics/Latinos, and Pacific Islanders who bear a disproportionate burden of COVID-19 infection and severe illness. These workers face various challenges related to social determinants of health, pre-existing/underlying medical conditions, limited ability to isolate /quarantine due to their living conditions, little to no time off or paid time off to care for themselves and others, lack of employer offered health insurance, inability to telework or to maintain social distance at their workplaces, and other contributing factors, such as underemployment (i.e., part-time status push them to seek/have multiple jobs, increasing their exposure to others). Underemployment is associated with lack of insurance and other job-related benefits for which only full-time staff is entitled to. In addition, many may be undocumented and limited-English proficient or not fully literate in any language as well, or may not have access to culturally appropriate information/resources/services or may assume use of government services including free testing will negatively affect their citizen status. Additional factors such as racial discrimination and lack of access to medical care further compound COVID-19 disparities. Even when seeking medical care, Black patients may be treated differently which can result in adverse outcomes.

Thus, prevention strategies such as a *Health Equity Toolkit for Food Industry Essential Workers* aimed at protecting racial and ethnic minority workers in the following settings/industries: 1) grocery stores/retail; 2) restaurants; and, 3) other types of settings with food service operations (e.g. hotels, hospitality, food service and janitorial professionals) are needed to reduce inequities and COVID-19 disparities.

The CDC Foundation is seeking a partner to conduct formative research (environmental scans and needs assessments), develop a toolkit and evaluate the toolkit for African-Americans/Blacks, Hispanics/Latinos, and Pacific Islanders in Louisiana, Texas, Florida and California in the following settings/industries 1) grocery stores/retail; 2) restaurants; and, 3) other types of food services to inform the development of a Health Equity Toolkit for Food Industry Essential Workers and identify other needed public health strategies and interventions that 1) identify baseline knowledge, attitudes, and practices of employees as they relate to COVID-19 prevention; 2) describe Food Industry Essential Workers' social environment (i.e., cultural practices and living conditions) and social determinants of health (i.e., access to quality education, role models and opportunities for training and furthering their education); 3) assess Food Industry Essential Workers' testing status and access to testing; 4) document the availability and

¹ [Guidance on the Critical Essential Infrastructure Workforce. https://www.cisa.gov/publication/guidance-essential-critical-infrastructure-workforce](https://www.cisa.gov/publication/guidance-essential-critical-infrastructure-workforce)

adoption of recommended preventive practices (e.g., CDC's Considerations for Restaurants and Bars including use of alcohol-based hand sanitizer, face coverings/mask coverings, physical distancing (when appropriate); 5) assess Food Industry Essential Workers' access to and use of personal protective equipment; and 6) assess the impact of COVID-19 stressors on Food Industry Essential Workers' mental health.

Types of Toolkits, public health strategies, and resources may include:

1. Guidance and Planning Documents for a Health Equity Toolkit for Food Industry Essential Workers
2. FAQs of Food Industry Essential Workers
3. PSAs
4. Video
5. Handouts
6. Fact Sheets
7. Graphics and Social Media Messages

Partnerships

Partner	Roles & Responsibilities
CDC Foundation	<ul style="list-style-type: none"> • Leads the acquisition of subcontractor to support this project • Manages the Request for Proposal process and coordinates with CDC for partner selection • Actively engages in the management of selected subcontractor throughout the program • Provides support and management to ensure deliverables and milestones are met.
CDC	<ul style="list-style-type: none"> • Provides technical assistance to the selected organization for context.
Subcontractor	<ul style="list-style-type: none"> • Works with CDC Foundation and CDC to implement scope of work outlined below.

Timeframe: Funding support will conclude by October 31, 2021.

B. Scope of Work

Goal 1: Develop and implement a data collection plan to assess knowledge, attitudes and practices related to COVID-19 prevention among Asian/Pacific Islander, Hispanic/Latino, Black/African American including Spanish and nonpersons working in grocery stores, restaurants, and other food services industries.

- In the first three months of the project, determine the availability and reach of public health interventions, tools, or resources related to COVID-19 among persons working in grocery stores, restaurants, and other food services industries.
- Identify where most gaps exist and where CDC can help develop or reinforce public health interventions (i.e., reviews quality of life determinants and living conditions of the workers and provide solutions to these problems)
- Identify behavior change variables specific to these populations to reinforce interventions
- Develop or organize existing interventions for effective uptake and ensure a detailed plan for dissemination and evaluation in its place.

- Conduct a comprehensive environmental scan and needs assessments based on the environmental scan of public health interventions in the areas of concern for food industry essential workers.

Goal 2: Develop and implement a data collection plan to assess and increase understanding of factors/variables in the social environment associated with COVID-19 including testing status and management policies about testing, contact tracing, and isolation options for Asian/Pacific Islander, Hispanic/Latino, Black/African American including Spanish and non-English speaking persons working in grocery stores, restaurants, and other food services industries.

- Develop a report including detailed description of COVID-19 among non-healthcare essential worker concerns and needs during this pandemic. Compile existing resources and identify gaps where resources could be added or refined.

Goal 3: Develop and implement a data collection plan to understand PPE supply, use and misuse in companies and employees in grocery stores, restaurants and other food services industry,

- Conduct a comprehensive environmental scan and needs assessments based on the environmental scan of public health interventions in the areas of concern (including mental health) for Food Industry Essential Workers.
- Identify where most gaps exist and where CDC can help develop or reinforce public health interventions.
- Conduct in-depth interviews, focus groups, and structured and semi-structured surveys to understand the real social and economic needs of food industry essential workers. Other relevant information may be derived from media sources, websites, and messaging, key informant interviews, and others. Sources of information should include focus groups of the companies and employees, family and friends of these Food Industry Essential Workers, and community-based organizations that focus on the food industry essential workers.

Goal 4: Develop a health equity toolkit for Food Industry Essential Workers that is both community informed and evidence-based (including evidence related to mental health disparities) to serve as a guide/template for communities and Food Industry Essential Workers to help mitigate the spread of COVID-19 among Asian/Pacific Islander, Hispanic/Latino, Black/African American including Spanish and non-English speaking groups.

- Identify where most gaps and challenges exist to reduce the spread of infection and provide culturally competent information that relate to this population.
- Identify local, statewide, and nationwide resources and groups from the environmental scan and needs assessment to help identify areas and resources that will be suitable for this population.
- Capture current knowledge, practices, and awareness of COVID-19 among food industry essential workers which includes health disparities and ways that these health disparities interfere with mitigation practices (e.g. face coverings, social distancing, contract tracing, testing, etc.) information should include such measures as those related to social determinants of health, practices, and infrastructures, that can impact mitigation practices. This information will be used to capture immediate, short term, and intermediate term interventions.

Goal 5: Develop toolkit evaluation metrics to determine the effectiveness and strategies that help to educate and increase knowledge, practices and awareness of COVID-19 mitigation strategies and interventions among Asian/Pacific Islander, Hispanic/Latino, Black/African American including Spanish and non-English speaking Food Industry Essential Workers.

- Capture measures that include increased knowledge, practices, and awareness of COVID-19, mitigation strategies and interventions, mental health impact variables, and decreased incidence of disease in the targeted regions and population (i.e. via participatory evaluation from the community-based groups involved).
- Design of an evaluation plan for the implementation of the toolkit. A simple, formative evaluation would allow for continued improvement of the toolkit).

The findings associated with Goals 1 -5 will be used to inform a subsequent RFP for the development of the Health Equity Toolkit for Food Industry Essential Workers and other needed materials/intervention development.

C. Proposed Deliverables

- An environmental scan and needs assessment report, including recommendations for content for the *Health Equity Toolkit for Food Industry Essential Workers* (the Toolkit) given unique needs of previously described Food Industry Essential Workers in selected food services settings in each of four locations of interest (Louisiana, Texas, Florida, and California). Reports, with executive summaries, must include brief descriptions of findings from the environmental scans described above how information collected in the environmental scans inform the content of the Toolkit for implementation in real world food service settings, specific content for **food industry essential workers** (by location, race/ethnicity, disability status, rural and tribal communities, socioeconomic status, where applicable).
 - Report may also include a visual representation (such as a network analysis), showing how extensively the Toolkit can be disseminated to these workers to ensure widespread uptake and reach – the baseline representing the initial setting where the Toolkit was implemented (e.g., specific grocery store, restaurant or other food service industry in a particular locale).
 - Report should include a summary map of the geographic locations of the intervention [i.e., worker’s residence in regard to location of intervention (work locale); means of transportation, time-in-transit, and cost].
- An environmental scan and needs assessment report, including recommendations for additional collaborations, strategies (including policies), and/or resources to fill identified needs (including mental health needs) for food industry essential workers.
 - Report to also include a visual representation (such as a network analysis), showing how extensively an expanded strategy in addition to the Toolkit can be disseminated to these workers for widespread uptake and reach – starting from the initial setting of the intervention including the Toolkit for food industry essential workers.
 - Report should include a summary map of the geographic locations of the interventions.
- An environmental scan and needs assessment report describing existing interventions that could be included in a public, online storage center for information on the availability of public health interventions for food industry essential workers.
- Proposed evaluation plan to measure the use and effectiveness of the Toolkit created that includes a description of:
 - Stakeholders and their role in the evaluation.
 - Evaluation methods used (quantitative, qualitative, indicators).
 - Data collection instruments (such as surveys).
 - Analysis plan.
- Develop a summary landscape analysis report, recommendations, and presentation of formative research findings
- Develop a summary report on needs assessment and recommendations for resources to fill gaps

- Develop a tool kit to disseminate to key community groups working in specific industries or to national organizations
- Develop weekly report on metrics and impact to share back to CDC Foundation
- Develop final report on toolkit efforts

This initiative is dynamic, and more deliverables will be assigned as we dive deeper in the project.

D. Budget and Proposal Requirements

The CDC Foundation is requesting proposals from public health and national organizations that have the capacity to conduct identified activities, which can include the ability to establish subcontracts, and organizations and institutions that have experience with landscape analyses and formative evaluations for the development of COVID-19 prevention content and resources intended to support and protect food industry essential workers. The organization will be an experienced, culturally responsive organization with existing, national, state and local-level reach to food industry essential workers based on requirements of the intervention(s) chosen.

If your project proposal requires a subcontractor, please specify scope of services.

Budget: Complete Attachment A Budget Template for all anticipated costs, which represent the total project fees and may include management, administrative, travel, design, development, subcontractor, production, printing costs, and indirect costs. Bidders should strive to build operating costs into direct costs and minimize indirect costs to CDC Foundation's indirect rate for subcontractors at 8 percent. The CDC Foundation is requesting that the bidder submit up to \$900,000 for the formative work for this phase of the project.

Key Contact: Send email inquiries to Turquoise Sidibe (tsidibe@cdcfoundation.org) and Brittany Oladipupo (boladipupo@cdcfoundation.org). Answers will be shared with all participating agencies.

Proposal Requirement: Submit a proposal by email to the CDC Foundation. Proposals should be no more than 5 pages, single spaced, 11-point font, in English, and should address the following:

1. Description of previous experience in public health practice and evaluation.
2. Description of previous experience working with and on behalf of Food Industry Essential Workers in grocery store, restaurant, and other food service industry settings.
3. Description of team with biographies and availability for the project. Please also include by when the team would be able to start.
4. Share 2-3 examples of previous similar work.

Submit Proposal by Email by October 21, 2020, at 9:00AM EST to Turquoise Sidibe (tsidibe@cdcfoundation.org) and Brittany Oladipupo (boladipupo@cdcfoundation.org) at the CDC Foundation.

E. Timeline: *Preliminary*

October 9, 2020: RFP submitted for bids

October 21, 2020: Response to RFP due

October 27, 2020: Selection of awardee(s)

November 3, 2020: Start date of activities