

NEWS

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Employers Took Many Measures to Protect Employees and Avoid Business Impact of H1N1 Flu Outbreak

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Boston, MA – In response to the H1N1 flu, most employees at U.S. businesses say their company took measures to protect them from illness, such as encouraging sick employees to stay home, according to a national poll of employees by researchers from the Harvard Opinion Research Program at Harvard School of Public Health (HSPH). Smaller, but notable, percentages of employees reported that their company took other actions such as creating back-up systems for employees to cover each others' work and expanding leave policies.

The poll was conducted April 21 to May 13, 2010 among a nationally representative sample of 1,491 employees from private sector businesses outside of education and health who employ 20 or more persons.

For the complete poll and charts associated with this press release, go to:

<http://www.hsph.harvard.edu/research/horp/project-on-the-public-response-to-h1n1/>

“These results suggest that in a future contagious disease outbreak, many businesses will try to adapt their policies to mitigate the impact on employees, with most adopting protective precautions, such as encouraging sick workers to stay home, and a minority taking other important measures, such as expanding sick leave policies,” said Robert J. Blendon, Professor of Health Policy and Political Analysis at HSPH and director of the Harvard Opinion Research Program (HORP).

Concerning responses recommended by public health officials, most employees (81%) reported that their companies provided hand sanitizer, alcohol-based hand rub or hand-washing stations to reduce the spread of H1N1 at the workplace. A similar percentage (80%) said their companies encouraged employees to stay home from work if they were sick with flu-like symptoms.

Some 60% of employees reported that their company encouraged them to get the H1N1 vaccine. According to employees' reports, large companies, those with 500 or more employees, were more likely than medium (100 to 499 employees) or smaller (20 to 99 employees) companies to do this (66% v. 54% and 48%, respectively).

“Businesses can be a vital public health partner with health authorities during an outbreak,” said Gillian K. Steelfisher, Research Scientist in the HSPH Department of Health Policy and Management and a member of the polling team. “Public health officials at federal, state and local levels should develop plans that specifically bring educational materials and preventive measures into the workplace.”

A majority of employees, 77%, said their company provided them with information about how to keep H1N1 flu from spreading between employees at the workplace. Again, large companies were more likely than medium-sized companies (100 to 499 employees) or smaller companies (20 to 99 employees) to have provided this information (83% v. 72% and 65%, respectively).

More than a third of employees reported that their company provided them with information about changes to leave policies that would make it easier for them to stay home from work because they were sick (42%), because a family member was sick (38%), or because their children’s school closed (36%). Similar percentages of employees reported that their company created a back-up system for someone to cover their work if they got sick (42%) or trained them to cover for someone else if they got sick or had to be absent due to H1N1 (36%).

Most employees (81%) reported that their company was prepared for the H1N1 outbreak (44% “very prepared”, 37% “somewhat prepared”). Employees at large companies, with 500 or more employees, were more likely than employees at small companies, those with 20 to 99 employees, to say this (85% v. 73%).

Half of all employees (50%) say that this outbreak of H1N1 has made their company more prepared for a possible future outbreak of a serious, contagious illness.

About one in five (21%) employees got the H1N1 vaccine, mirroring rates in the general population. But vaccination rates were significantly higher among employees whose companies encouraged them to get the vaccine than among employees whose companies did not do this (29% v. 9%).

A prior survey from HORP looked at business preparedness for H1N1:

“Four-Fifths of Businesses Foresee Severe Problems Maintaining Operations If Significant H1N1 Flu Outbreak,” September 9, 2009.

Others polls of the public concerning the H1N1 flu outbreak undertaken by the Harvard Opinion Research Program (HORP) at HSPH are listed below:

“Nearly Half of Americans Believe H1N1 Outbreak is Over, Poll Finds,” February 5, 2010.

“Poll Finds Three Quarters of Parents Who Tried to Get H1N1 Vaccine for Their Children Have Gotten It,” December 22, 2009.

“Poll: Travelers Taking Significantly More Precautions Against H1N1 and Seasonal Flu on Trips This Year,” December 10, 2009.

“Poll Finds Two-thirds of Parents and High-priority Adults Who Tried to Get H1N1 Vaccine Were Unable to Get It,” November 6, 2009.

“Survey Finds Just 40% of Adults Absolutely Certain They Will Get H1N1 Vaccine,” October 2, 2009.

“National Survey Finds Six in Ten Americans Believe Serious Outbreak of Influenza A (H1N1) Likely in Fall/Winter,” July 15, 2009.

“Survey Finds Many Americans Have Taken Steps to Protect Themselves Against H1N1,” May 8, 2009.

“Survey Finds Nearly Half of Americans Concerned They Or Their Family May Get Sick from Swine Flu,” May 1, 2009.

Methodology

This poll is part of a series of surveys focused on the public’s response to public health emergencies by the Harvard Opinion Research Program (HORP) at Harvard School of Public Health. The study was designed and analyzed by researchers at the Harvard School of Public Health (HSPH). The project director is Robert J. Blendon of the Harvard School of Public Health. The research team also includes Gillian K. SteelFisher, John M. Benson, Kathleen J. Weldon, Mark M. Bekheit and Robin C. Herman of the Harvard School of Public Health, as well as Melissa J. Herrmann of SSRS/ICR, an independent research company. Interviews were conducted via telephone (including both landline and cell phone) for HORP by SSRS/ICR of Media (PA) April 21 through May 13, 2010 among a nationally representative sample of 1,491 respondents age 18 and older, who work at least 35 hours a week at a single primary workplace, excluding those who are self-employed, those working at companies with less than 20 employees, and those working in the fields of education, health, emergency care or first responder services, and government. The margin of error for total respondents is +/-3.30% at the 95% confidence level.

Possible sources of non-sampling error include non-response bias, as well as question wording and ordering effects. Non-response in telephone surveys produces some known biases in survey-derived estimates because participation tends to vary for different subgroups of the population. To compensate for these known biases, sample data are weighted to the most recent Census data available from the Current Population Survey for gender, age, race, education, region, and company size. Other techniques, including random-digit dialing, replicate subsamples, and systematic respondent selection within households, are used to ensure that the sample is representative.

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to support two critical goals: (1) to better understand the general public's response to public health emergencies, including biological threats and natural disasters, as they unfold and (2) to provide critical feedback to policy makers in a short time frame, enabling its integration into related public health policies and messaging.

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