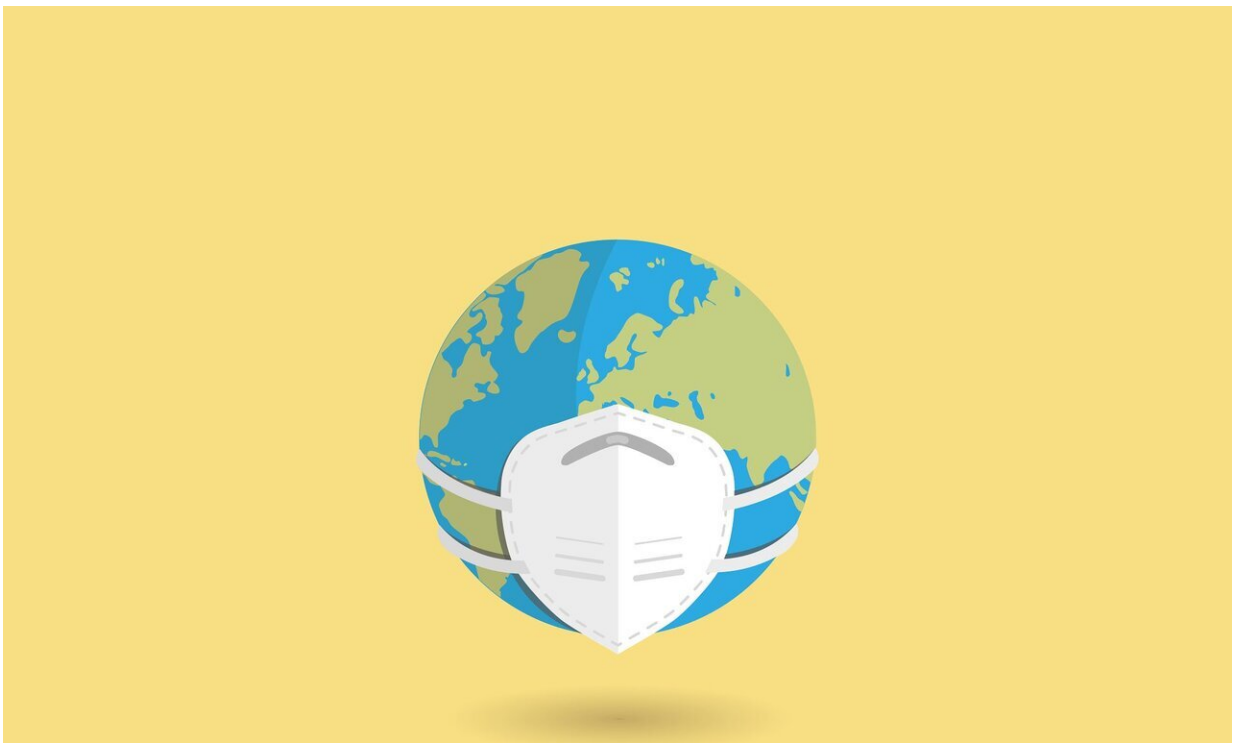


Harassment of public health officials widespread during the initial phase of the COVID-19 pandemic

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A new study led by researchers at the Johns Hopkins Bloomberg School of Public Health identified 1,499 unique reports of harassment across local health departments in the U.S. during the first 11 months of the

pandemic, from March 2020 to January 2021.

The study also found that more than half of surveyed local public [health departments](#)—57 percent—had been targets of [harassment](#). In addition, the study found that across state and local [health](#) departments, 222 public health officials left their positions during this time period. Over one-third of those departures—36 percent—involved officials who had experienced some form of harassment.

The study, to be published online March 17 in the *American Journal of Public Health*, provides scope and context to departures of public health officials during the first phase of the pandemic. The findings underscore the importance of prioritizing worker safety and well-being in health departments and in public health systems, especially in times of crisis and discord.

"This is a wakeup call for the field about the need to prioritize the long-term protection of our public health workforce," says Beth Resnick, DrPH, assistant dean for Practice and Training and senior scientist in the Department of Health Policy and Management at the Bloomberg School. "Taking care of the workforce needs to be a fundamental component of the public health infrastructure that doesn't end when the pandemic does."

The U.S. public health system is built on a network of local and [state officials](#) working to promote and protect health. According to estimates, there are over 2,500 local and state public health departments across the U.S. The pandemic—involving a new virus about which little was known and for which there were initially no treatments or vaccines—brought considerable challenges for public health departments. Documented incidents of threats and harassment have led to reduced job satisfaction and burnout among public health workers. The harassment and departures, which have continued beyond the study period, are

happening at a time when sound public health guidance and leadership is needed most.

For their study, the researchers drew from two main sources, a survey and [media reports](#). A survey of local public health departments conducted October 2020 to February 2021 by the National Association of County and City Health Officials (NACCHO) identified the 1,499 harassment cases. The researchers reviewed media reports about departures to get additional details. In addition to media reports, the researchers reviewed supplemental materials, including public health department news releases, [social media accounts](#), local boards of health meeting minutes, and personal communications with journalists and health department representatives.

The researchers analyzed responses from 583 local U.S. departments to a NACCHO Forces of Change survey module on harassment. More than half of the local health departments responding (57 percent, 335 departments) identified unique reports of harassment targeting leadership or staff, for a total of 1,499 incidents. The most reported form of harassment among the surveyed 583 local health departments was on social media, with 296 local health departments reporting social media harassment. Of these, 194 incidents specifically targeted local health department leaders.

The researchers also analyzed media reports of 256 actual or threatened departures of both state and local health officials, which included 120 resignations. The departures spanned 42 states in the U.S. and involved 48 state health department officials and 174 local health department officials.

To get a sense of the impact of the harassment and departures on the public health workforce, the researchers conducted content analysis of media reports, supplemental materials, and input from public health

practitioners. The research team identified five common themes of health officials' experience: a sense of being underappreciated, undersupported, villainized, caught up in politics, and disillusioned.

The authors suggest that training public health officials on how to respond to political and societal conflict, improving professional support systems, providing employee support, making investments in long-term public health staffing and infrastructure, and establishing sound reporting systems for incidents are key to reducing acts of harassment against public health officials and supporting officials when incidents do occur.

"No public health professional should feel undervalued, unsafe, or be questioning the fundamental mission and purpose of their work," says Resnick. "We need to do better and prioritize worker well-being and safety by implementing policies that reduce undermining, ostracizing, and intimidating behaviors to support these key workers and leaders."

"Pandemic-related workplace violence and its impact on [public health officials](#), March 2020-January 2021" was written by Julie Ward, Elizabeth Stone, Paulani Mui, and Beth Resnick.

More information: "Pandemic-related workplace violence and its impact on public health officials, March 2020-January 2021" *American Journal of Public Health* (2022).

Provided by Johns Hopkins University Bloomberg School of Public Health

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