Immigrant Essential Workers During the COVID-19 Pandemic

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Executive Summary

The COVID-19 pandemic affected everyone in the United States, and essential workers across industries like health care, agriculture, retail, transportation and food supply were key to our survival. Immigrants, overrepresented in essential industries but largely invisible in the public eye, were critical to our ability to weather the pandemic and recover from it. But who are they? How did they do the riskiest of jobs in the riskiest of times? And how were both U.S.-born and foreign-born residents affected?

This report explores the crucial contributions of immigrant essential workers, their impact on the lives of those around them, and how they were affected by the pandemic, public sentiment and policies. It further explores the contradiction of immigrants being essential to all of our well-being yet denied benefits, protections and rights given to most others. The pandemic revealed the significant value of immigrant essential workers to the health of all Americans. This report places renewed emphasis on their importance to national well-being.

The report first provides a demographic picture of foreign-born workers in key industries during the pandemic using U.S. Census Bureau American Community Survey (ACS) data. Part I then gives a detailed narrative of immigrants’ experiences and contributions to the country’s perseverance during the pandemic based on interviews with immigrant essential workers in California, Minnesota and Texas, as well as with policy experts and community organizers from across the country. Interviewees include:

- A food packing worker from Mexico who saw posters thanking doctors and grocery workers but not those like her working in the fields.
- A retail worker from Argentina who refused the vaccine due to mistrust of the government.
- A worker in a check cashing store from Eritrea who felt a “responsibility to be able to take care of people” lining up to pay their bills.

Part II examines how federal and state policies, as well as increased public recognition of the value of essential workers, failed to address the needs and concerns of immigrants and their families. Both foreign-born and U.S.-born people felt the consequences. Policies kept foreign-trained health care workers out of hospitals when intensive care units were full. They created food and household supply shortages resulting in empty grocery shelves. They denied workplace protections to those doing the riskiest jobs during a crisis. While legislation and programs made some COVID-19 relief money available, much of it failed to reach the immigrant essential workers most in need. Part II also offers several examples of local and state initiatives that stepped in to remedy this.

By looking more deeply at the crucial role of immigrant essential workers and the policies that affect them, this report offers insight into how the nation can better respond to the next public health crisis.
Selected Findings:

1. Some interviewees felt an elevated sense of pride in being an essential worker and kept working as a form of social responsibility. Others felt an urgent need to keep working to support their families because of financial uncertainty.

2. While some of their neighbors and family members saw them as heroes, others avoided immigrant essential workers and worried they were too risky to interact with.

3. Immigrant essential workers are concentrated in households with other essential workers, or have family members who are also essential workers, leading to large-scale risk to mental and physical health.

4. Rampant misinformation and barriers to accurate information led to fear of repercussions from requesting sick pay, safe working environments, eligible benefits and the vaccine.

5. Some interviewees avoided accessing health care or benefits out of fear that they would face detainment and/or deportation.

6. Despite public and political recognition of the contributions of immigrant essential workers, the federal government largely neglected to provide protections and benefits to these workers.

7. Grassroots movements and community organizations pushed some local governments to implement policy changes serving immigrants during the pandemic.

8. Some states adjusted licensing and credentialing requirements in response to COVID-19, particularly to address acute shortages of health care workers.

Guide to Terms Used

This report uses the term “U.S.-born” to refer to anyone born to a U.S. citizen parent or parents in these places:
- The United States
- Puerto Rico
- A U.S. Island Area (Guam, the Commonwealth of the Northern Mariana Islands or the U.S. Virgin Islands)
- Abroad

“Foreign-born” includes:
- Naturalized U.S. citizens
- Non-citizen U.S. nationals
- Lawful permanent residents (immigrants)
- Temporary migrants (such as seasonal workers)
- Humanitarian migrants (such as refugees and asylees)
- Unauthorized migrants

“Foreign-born” and “immigrant” are used interchangeably.

“Undocumented” and “unauthorized,” both describing immigrants who lack legal immigration status in the U.S., are also used interchangeably.

This report uses pseudonyms to offer anonymity for the interviewees.