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The Fast-Food Industry and COVID-19 in Los Angeles

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Authors

Huang, Kuochih
Jacobs, Ken
Koonse, Tia
[et al.](#)

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The Fast-Food Industry and COVID-19 in Los Angeles



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About the Organizations



UC Berkeley Labor Center

The UC Berkeley Labor Center is a public service project of the UC Berkeley Institute for Research on Labor and Employment that links academic resources with working people. Since 1964, the Labor Center has produced research, trainings, and curricula that deepen understanding of employment conditions and develop diverse new generations of leaders.

UCLA Labor Center

For more than 50 years, the UCLA Labor Center has created innovative programs that offer a range of educational, research, and public service activities within the university and in the broader community, especially among low-wage and immigrant workers. The Labor Center is a vital resource for research, education, and policy development to help create jobs that are good for workers and their communities, to improve the quality of existing jobs in the low-wage economy, and to strengthen the process of immigrant integration, especially among students and youth.

UCLA Labor Occupational Health and Safety Program (LOSH)

LOSH promotes safe and healthy workplaces through worker training and education, research, technical assistance, and policy analysis. LOSH initiatives focus on workers in high-hazard industries and low-wage jobs and those who are vulnerable by virtue of immigration status, language, or employment status. LOSH strives to reduce occupational health disparities and environmental injustice through direct worker engagement, leadership development, and capacity building. LOSH is part of the UCLA Center for Occupational and Environmental Health and the UCLA Institute for Research on Labor and Employment.

UC Berkeley Labor Occupational Health Program (LOHP)

LOHP's mission is to promote safe, healthy, and just workplaces and to build the capacity of workers and worker organizations to take action for improved working conditions. LOHP looks broadly at the impact of work on health, and we advance the principle that healthy jobs—that pay a living wage, provide job security and benefits, protect against hazards and harassment, have reasonable workloads, and engage workers in the decisions that affect them—are a basic human right. As a university-based public health program, LOHP accomplishes its mission by providing training to effectively engage workers and worker organizations in advocating for better working conditions; conducting research to evaluate the effectiveness of interventions, document the impact of health and safety hazards, and identify policy solutions; and supporting development of protective policies that integrate public health research and expertise. LOHP is part of the Center for Occupational and Environmental Health at UC Berkeley.

Executive Summary



Over the last decade, fast-food restaurants have proliferated in the United States, with the largest increase in Los Angeles County. Fast food is an integral part of the food sector in Los Angeles, comprising nearly 150,000 restaurant workers. This report investigates working conditions in fast food prior to the pandemic, profiles the industry's demographics and cost to the public, and examines the impact of COVID-19 on the sector.

Even before COVID-19, the fast-food sector was characterized by difficult working conditions and high public costs.

1. Fast-food workers faced labor issues related to safety and injury, workplace violence, harassment, retaliation, and wage theft.
2. The franchise model, which predominates in fast food, incentivized labor violations.
3. Fast food's low wages have made it difficult for workers to meet their basic needs. More than two-thirds of the families of fast-food workers in Los Angeles County were enrolled in a safety net program at a public cost of \$1.2 billion a year.

Because workplaces are a common vector of COVID-19 transmission, fast-food worksites are particularly vulnerable.

1. One-third of fast-food worksites had 20 or more employees, suggesting shared equipment, work spaces, bathrooms, and break areas. Other research found that food workers work in moderately close to close proximity; cooks in particular have had the highest increase in mortality of any occupation during the pandemic.
2. Worker testimony and complaints show COVID-19 outbreaks and employer failures to communicate these outbreaks to workers.

Fast-food workers and their communities face a disproportionate risk of COVID-19 transmission and its negative impacts.

1. Black, Latinx, and Asian populations had disproportionately higher rates of infection, hospitalizations, and deaths. Nine in ten fast-food workers in Los Angeles were workers of color, and nearly three-quarters were Latinx.
2. Women in fast food were already vulnerable to sexual harassment, and that has been exacerbated by COVID-19. Nearly seven in ten fast-food workers were women.
3. Though fast-food workers skewed young, over two-thirds lived in households with four or more people, and a third included household members over age 55.
4. The majority of fast-food workers earn low wages, often at or near the minimum wage, but research indicates those wages constituted 40% of their family's total income.
5. Fast-food workers were twice as likely as other workers to fall below the federal poverty line, and over half of those who rent their housing were rent-burdened, spending over 30% of their household income on rent and utilities.
6. Fast-food workers were one and half times more likely to be uninsured and two and a half times more likely to be enrolled in Medi-Cal than Los Angeles workers as a whole. Only a third of fast food workers received some type of employer-sponsored insurance.

Introduction

An economic juggernaut in the United States, the number of fast-food restaurants—defined as establishments that provide food service where patrons generally order or select items and pay before eating¹—increased 9% nationwide and more than 50% in 163 counties between 2009 and 2014. Forty of California’s 58 counties increased their number of fast-food restaurants, with the highest increase in the nation in Los Angeles County. While the county’s population rose by only 3%, the number of fast-food restaurants increased by 10%.²

The restaurant sector is an integral part of the Los Angeles landscape. In 2019, fast food employed 4.5 million people nationwide,³ including nearly 550,000 Californians and 150,000 Angelenos.⁴ The restaurant sector made up a tenth of the overall county workforce, and over a third of Los Angeles’s restaurant workers were employed in fast food.

Figure 1. Number of Los Angeles workers in food and all sectors, 2019



Source: *Quarterly Census of Employment and Wages, 2019.*

Research has shown that fast-food workers face injury, workplace violence, harassment, and wage theft. The media covered more than 700 incidents of workplace violence at McDonald’s alone between 2017 and 2019.⁵ One survey reported that 87% of fast-food workers were injured on the job at least once in the previous year, while 12% were assaulted.⁶ Another report showed above average occurrences of sexual harassment,⁷ and class action, sexual harassment lawsuits against fast-food companies abound.⁸

COVID-19 exacerbates the risks already faced by fast-food workers. In Los Angeles, several high-profile failures to comply with COVID-19 workplace regulations point to the severity of violations and paucity of protection for speaking out. Workers at a McDonald’s in Boyle Heights filed seven complaints after six coworkers contracted the virus, alleging failure to enforce face coverings and social distancing or provide personal protective equipment (PPE). Workers have since claimed retaliation for reporting these violations.⁹

The fast-food industry is characterized by franchise models that create a layer of separation, or “fissure,” between workers and the companies responsible for their working conditions. Franchisors exercise “vertical restraints”—key elements in how chains operate such as prices, customer rules, and suppliers—but franchisors are not liable for what happens at individual sites.¹⁰ As in other fissured workplaces characterized by contracting, franchising, or staffing agencies, labor violations are common. Franchising, in particular, frustrates enforcement. One study of the top 20 fast-food franchises showed that franchisee-owned restaurants had higher levels of noncompliance

with minimum wage and overtime rates than their counterparts that are owned and managed by the franchisor. The study attributed this to the incentives built in to the franchise model that promote noncompliance, including a profit squeeze due to franchise royalties, the relative unlikelihood of discovery because the average franchisee owns just a single establishment, less commitment to upholding brand reputation, and a corporate management structure that rewards productivity over labor standards compliance.¹¹ Historically, the top 20 franchised fast-food restaurants have an outsized effect on the industry as a whole, accounting for nearly 68% of annual sales in limited-service restaurants, so we can safely infer that the franchise model in fast food contributes to poor working conditions and higher rates of noncompliance with labor standards.



About this Study

The first of two reports on working conditions in the fast-food industry, conducted on behalf of the Los Angeles County Board of Supervisors, this report provides a profile of fast-food workers in Los Angeles County and conditions for workers during the COVID-19 pandemic. We provide relevant demographic and government data, a literature review, and a review of existing surveys and data. The first section, based on past research and government data, outlines labor issues in the sector as well as data on the public costs of low wages. The second section provides an overview of fast-food worksites, inspections, and outbreaks. The third section uses census data to demonstrate how select individual and household characteristics coincide with the disproportionate impact of COVID-19 on particular communities. The second report, to be released in summer 2021, will provide the results of surveys and interviews on the working conditions and experiences of fast-food workers.

The Precariousness of Fast Food

This section explores existing research on labor issues and the public costs associated with low wages in the sector. Though large-scale studies on fast food are limited, the available research has documented various difficult and dangerous working conditions prior to the COVID-19 pandemic.

Labor Issues in Fast Food

The following presents key research findings from studies that highlight the issues workers face in the sector, such as wage theft, retaliation, and harassment.

Wage Theft

In a 2014 survey of 1,088 fast-food employees nationwide, 90% of respondents reported that they had been forced to work off the clock, denied breaks, or refused overtime pay. In Los Angeles, that study found that 81% of respondents experienced wage theft, and 59% were forced to work off the clock.¹² These findings reflect a 2010 representative survey of low-wage workers in Los Angeles. In a broader category of restaurants and hotels, 67% were not paid overtime, 79% worked off the clock, and 82% were denied meal breaks.¹³ In 1,768 investigations at 20 fast food franchises between 2001 and 2005, 40% had confirmed minimum wage or overtime violations.¹⁴



Safety

Fast-food workers face hazards such as burns, slips and falls, and exposure to harmful chemicals, leading to exceptionally high rates of workplace injury. One report showed that 87% of workers were injured at least once on the job in the previous year.¹⁸ In a 1999 study, the National Institute for Occupational Safety and Health estimated that, over a two-year period, 28,224 teenage fast-food workers went to the emergency room for a workplace injury over a two-year period.¹⁹

Violence

Fast-food workers experience physical assault, harassment, intimidation, threats, and verbal abuse, especially in restaurants that are open all night. One study that analyzed 721 instances of violence at McDonald's nationwide found that the shift from 10 p.m. to 4 a.m. accounted for 40% of those episodes.²⁰ Another study estimated that 12% of all fast-food workers have been assaulted on the job.²¹

Sexual Harassment

Restaurant workers have the highest rates of sexual harassment of any industry. They filed over a third of the 170,000 sexual harassment complaints with the US Equal Employment Opportunity Commission between 1995 and 2016, and that total is almost certainly an undercount. Further, there is a correlation between racial discrimination and sexual harassment for women in the restaurant industry.¹⁵ High-profile sexual harassment lawsuits against fast-food companies abound.¹⁶ A 2016 survey of 1,217 women in the industry found that 40% of women experienced unwanted sexual behaviors on the job, including 28% who suffered multiple forms of harassment.¹⁷ The most common forms of harassment were sexual teasing, jokes, remarks, or questions; hugging or touching; and questions about sexual interests or unwanted information about others' sexual interests.

Retaliation

In the 2016 survey of women who experienced sexual harassment, only 40% filed complaints. Of those, one in five experienced retaliation, including reduced hours, schedule changes, and termination. Women of color were especially likely to experience negative consequences in response to reporting sexual harassment; 34% of Black women and 26% of Latinas reported at least one instance of retaliation in response to their complaints, compared with 17% of White women.²² In one high-profile case, 5,000 McDonald's employees in 100 establishments in Florida faced assaults, groping, and sexually charged comments. Managers repeatedly failed to act, and one employee was eventually terminated after reporting the behavior.²³ A 2019 survey of 539 fast-food workers in New York City found that half had been fired, laid off, or compelled to quit, and 65% of those terminated were not given a reason. In a subsample of that study, 58% reported drastic, unexpected scheduling cuts.²⁴

The majority of fast-food workers live in households experiencing economic precarity. Just one in three fast-food workers in Los Angeles received health benefits through an employer.²⁵ When employers did not pay high enough wages to meet basic needs, workers turned to public safety net programs to make ends meet.

We analyzed fast-food worker family enrollment in one or more major public safety net programs: Medi-Cal, Children’s Health Insurance Program (CHIP), the federal Earned Income Tax Credit (EITC), Supplemental Nutrition Assistance Program (SNAP), and Temporary Aid For Needy Families (TANF) Cash Assistance.²⁶ Two-thirds of fast-food workers in both Los Angeles County and the state of California as a whole were themselves or had a family member who was enrolled in one of the five safety net programs, at an average public cost of \$1.2 billion in Los Angeles County and \$4 billion statewide.²⁷ Half or more of the families of Los Angeles fast-food workers participated in EITC and adult Medicaid, and close to 3 in 10 were in the food stamp program, now known as SNAP.

A recent national study of public safety net use by low-wage workers found little difference between those working only 10 hours a week and full-time workers.²⁸ We can infer from this that while the right to receive a minimum number of work hours is an important issue for many fast-food workers, the primary driver of low earnings is the hourly wage. Improving wages for fast-food workers would assist families in moving toward greater self-sufficiency.

Table 1. Fast-food workers with family members participating in health care and public assistance programs, Los Angeles, 2015–2019

	Number of workers with a participating family member	% of workers with a participating family member	Average annual total spending on fast-food workers’ families (\$ million)
Any program	110,000	68	1,150
EITC	80,000	51	190
SNAP	50,000	29	120
Adult Medicaid	80,000	50	700
Children’s Medicaid and CHIP	30,000	22	120
TANF	10,000	5	30

Source: Authors’ calculations based on the 2015–2019 American Community Survey, 2016–2020 March Current Population Survey, 2019 Occupational Employment Statistics, and administrative data from Medicaid, CHIP, EITC, SNAP, and TANF programs.

Note: The analysis is restricted to fast-food workers who work at least 27 weeks in a year and 10 or more hours per week. The cost figures are in 2019 dollars.

Table 2. Fast-food workers with family members participating in health care and public assistance programs, California, 2015–2019

	Number of workers with a participating family member	% of workers with a participating family member	Average annual total spending on fast-food workers' families (\$ million)
Any program	370,000	66	3,950
EITC	270,000	48	660
SNAP	150,000	27	390
Adult Medicaid	270,000	48	2,440
Children's Medicaid and CHIP	110,000	20	380
TANF	20,000	4	90

Source: Authors' calculations based on the 2015–2019 American Community Survey, 2016–2020 March Current Population Survey, 2019 Occupational Employment Statistics, and administrative data from Medicaid, CHIP, EITC, SNAP, and TANF programs.

Note: The analysis is restricted to fast-food workers who work at least 27 weeks in a year and 10 or more hours per week. The cost figures are in 2019 dollars.



COVID-19 Risks and the Worksite

Between their sheer number and high customer volume, fast-food restaurants pose a particular risk of widespread COVID-19 transmission. In 2018, there were nearly 9,000 fast-food establishments in Los Angeles, making up 39% of all restaurants and 3% of all establishments in the county. As restaurants that rely on indoor seating and dine-in service have shuttered or been temporarily closed under stay-home orders, fast food has likely increased its share of the market, making its compliance with COVID-19 orders critical to preventing community transmission.

Figure 2. Number of establishments in Los Angeles County, select sectors, 2018



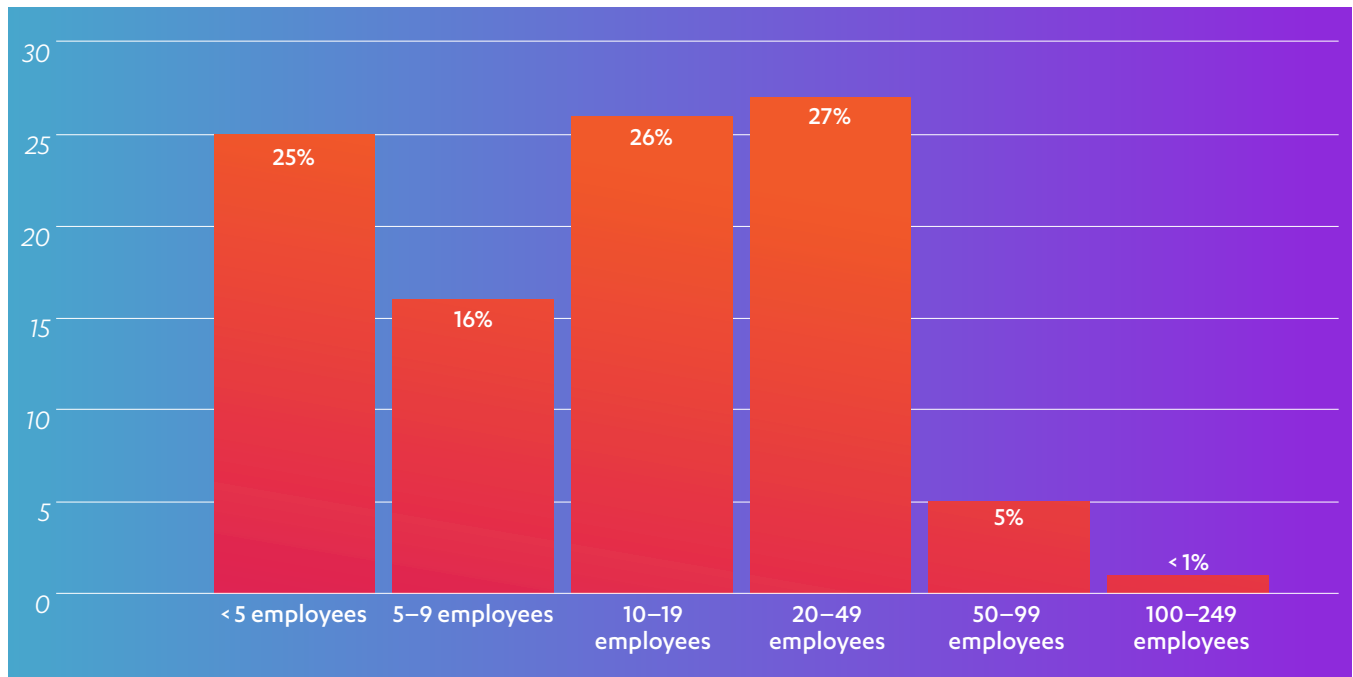
Source: US Census Bureau's County Business Patterns, 2018.

Fast-Food Worksites and Risk of Transmission

Workplaces are a common vector of COVID-19 community transmission, and service jobs such as fast food are especially vulnerable.²⁹ Cooks have the highest increased mortality rate of any occupation during the pandemic, and mortality among Latinx workers in food and agriculture is 59% higher than prepandemic rates.³⁰ In one recent survey, 44% of food service workers reported that one or more of their coworkers had contracted the virus, 84% worked within six feet of at least one person not wearing a mask, and 54% interacted with ten or more unmasked people in one shift. Disturbingly, 37% reported no mandatory training on COVID-19 safety protocols, and only 28% of employers provided paid tests and time off to quarantine for employees with possible COVID-19 exposure. Fifty-eight percent of workers surveyed felt reluctant to enforce COVID-19 safety protocols.³¹ In another COVID-19 survey from March–April 2020, fast-food workers reported limited protective measures in their workplaces: new workplace cleaning procedures (58%), gloves available (55%), gloves required (30%), masks available (4%), and masks required (4%).³²

A recent report from the UC Berkeley Labor Center showed that half of those working in food preparation and serving occupations work in “very close proximity” and the other half in “moderately close proximity” to other workers.³³ It found that one-third of Los Angeles’s fast-food establishments had more than 20 employees at an individual worksite, suggesting shared equipment, work spaces, bathrooms, and break areas. Such close quarters necessitate strict adherence to social distancing, sanitation, and the PPE protocols outlined by the Los Angeles County Department of Public Health (LACDPH).³⁴

Figure 3. Establishment size for limited-service restaurants



Source: US Census Bureau’s County Business Patterns, 2018.

COVID-19 Inspections and Outbreaks

A *Los Angeles Times* reporter, who recently reviewed more than 1,600 complaints in fast food filed with the federal Occupational Safety and Health Administration along with 200 records and accounts, reported a pattern of pressure to work at all costs, insufficient PPE and training, and a lack of interpretation and translation of COVID-19 protocols. As of January 15, 2021, inspectors had visited only 56 fast-food restaurants nationwide, opened 600 cases, and closed 1,000 others. Complaints from 37 other states found recurring allegations, including failure to provide PPE or enforce social distancing in crowded restaurants and little or no provision of sick time.³⁵

An LACDPH inspection in the summer of 2020 of more than 2,000 restaurants found widespread noncompliance with protocols requiring physical distancing (33%) and face coverings (44%).³⁶ Data on worksite outbreaks that the County has made available on its website have shown at least 59 COVID-19 outbreaks in fast-food restaurants affecting as many as 338 workers from July through December 2020. (LACDPH defines and reports outbreaks as 3 or more COVID-19 cases among employees within a 14-day period.) The median outbreak size among these establishments was 5 employees. The largest outbreaks occurred at 3 McDonald’s locations in East Los Angeles (14 cases), Baldwin Park (12 cases), and Pico Rivera (12 cases), as well as a Chipotle in Baldwin Park (13 cases) and a Poquito Mas in Studio City (12 cases). During the same period, LACDPH issued citations to 4 fast-food establishments for failure to comply with county health officer orders.³⁷



Often workers are unable to ascertain the actual number of COVID-19 infections because employers do not disclose when employees test positive. At a McDonald's in Littlerock, California, for example, a total of 32 cases of COVID-19 have been linked to the restaurant, including instances of workers passing the virus to members of their households. In eight complaints filed with Cal/OSHA and LACDPH, workers detailed troubling conditions, including management attempts to hide infections and pressure workers to work while sick, a lack of social distancing, and failure to conduct adequate wellness checks of workers before they clock in. Workers have waged several strikes at this location to demand improved safety protocols, but strikers have faced retaliation and had their hours cut. In a January 8, 2021, filed by SEIU with both Cal/OSHA and LACDPH, a worker wrote, "Even though there have been many cases of COVID-19 among coworkers at this McDonald's, I have never been notified that I was in close contact with anyone. This does not make sense to me because I work in the kitchen, and the kitchen is small, so we cannot maintain physical distance. And [others] also work in the kitchen with me, and they all had COVID-19."

As the Cal/OSHA Standards Board was considering a temporary statewide emergency standard for COVID-19 protections in the workplace during the summer and fall of 2020, workers testified publicly before the agency about employers' failure to communicate and report outbreaks. According to one worker from a McDonald's in Los Angeles, "Over the past few weeks I have heard about two cases of COVID-19 from management, but I have also heard about another four cases from my coworkers. I am concerned that McDonald's is not being open about who is sick in our store and who might have been exposed."³⁸

A worker from another Los Angeles fast-food establishment raised similar concerns: "These rules are very important for the fast-food industry because the fast-food chains have not complied with the rules—not even with basic rules such as wearing masks, social distancing, or sick pay. At the place that I work, six people were sick with COVID-19, and the employer did not disclose this to us. We had a strike at the store, and instead of listening to our concerns, they terminated us."³⁹



COVID-19 Risks and Worker Characteristics

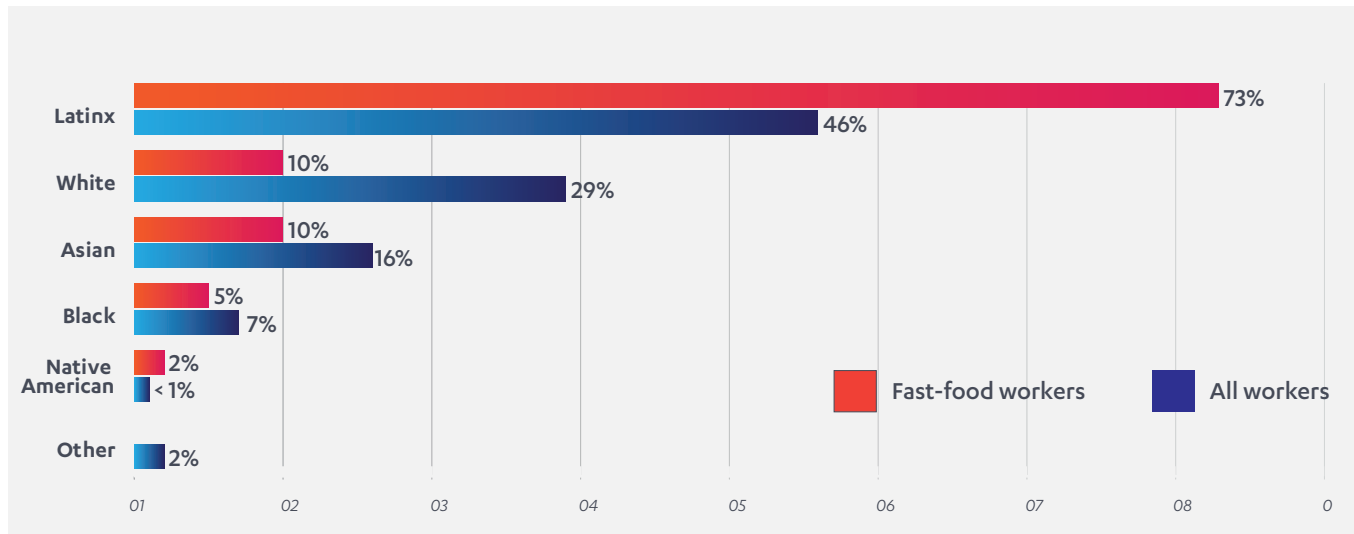
The results of the interplay between essential workers, household size, race, and income are nowhere more obvious or devastating than Los Angeles. Low incomes and limited paid time off require essential workers to continue working, while larger households make social distancing difficult or impossible. A growing body of data demonstrates the predictable effects, which include gross inequities in COVID-19 infection rates and delays between the implementation of social distancing measures and their effects, devastating communities with high concentrations of essential workers.⁴⁰ One in five Boyle Heights residents has contracted COVID-19, compared to only one in twenty-five residents of Brentwood.⁴¹

Our data shows that fast-food workers in California are more likely to be women, Latinx, and low-wage earners. They face a disproportionately greater risk of COVID-19 workplace transmission, a particularly grave concern given that fast-food workers are also more likely to live in crowded households, a third of which include people older than 55. In this section, we list select characteristics that put fast-food workers at greater risk for COVID-19, and appendix B provides a comprehensive profile of fast-food workers in Los Angeles and California.

Worker and Household Characteristics

A growing body of data shows that Black, Latinx, and Asian populations have disproportionately high rates of infection, hospitalizations, death, and economic devastation caused by COVID-19, compared to their White counterparts.⁴² In Los Angeles, deaths among Latinx residents increased by 1,000% between November 2020 and January 2021.⁴³ Nine in 10 fast-food workers in Los Angeles are workers of color, and nearly three-quarters are Latinx.

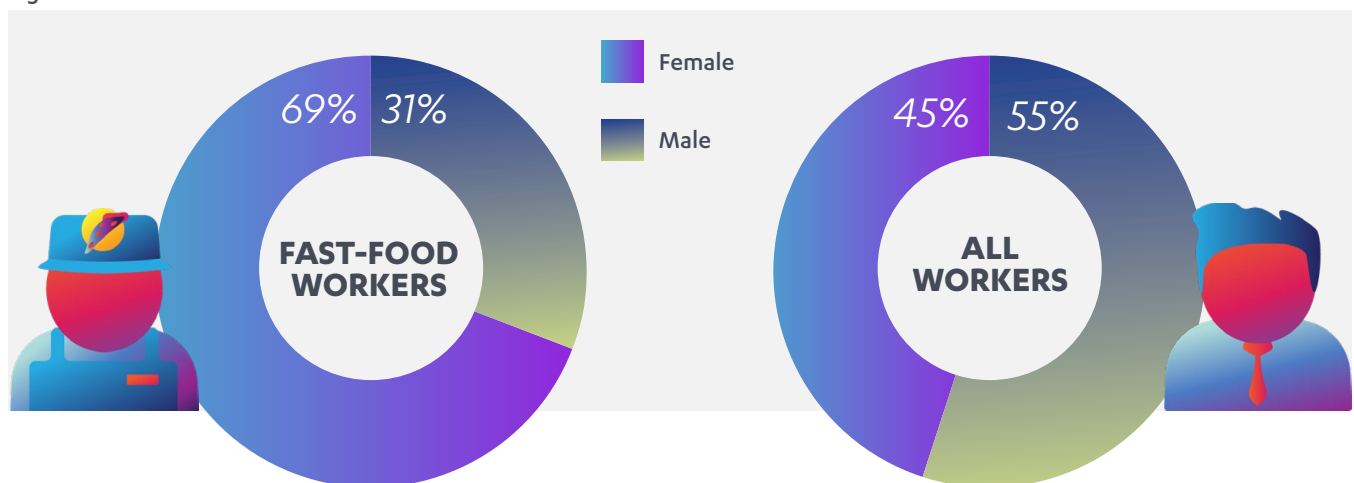
Figure 4. Race/ethnicity



Source: Authors' analysis of 2017–2019 IPUMS American Community Survey (ACS) data.

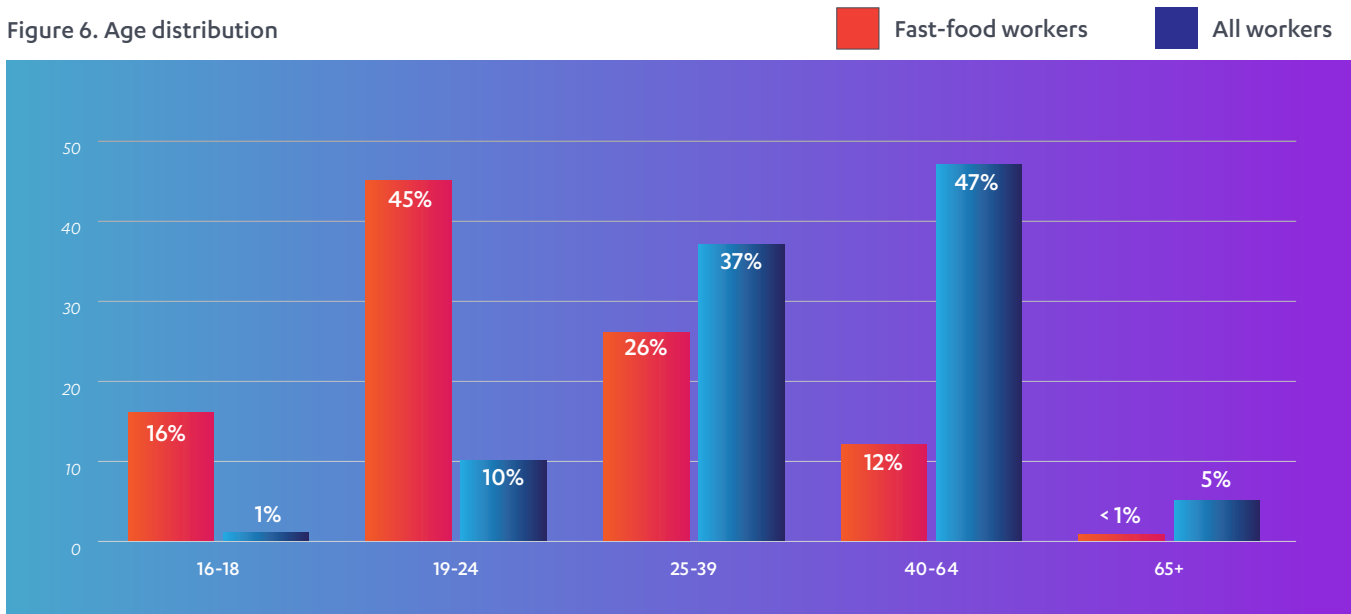
The majority of fast-food workers are women. Nearly seven in ten fast-food workers in Los Angeles are women, though they comprise only 45% of all workers in the county. Women were already vulnerable to workplace harassment, and this has been exacerbated by COVID-19. More than 40% of restaurant workers in a recent survey reported an increase in the frequency of unwanted sexualized comments from customers since the pandemic began. A substantial number of the sexually explicit comments shared were from male customers who asked female service workers to remove their masks to determine their tips.⁴⁴

Figure 5. Gender



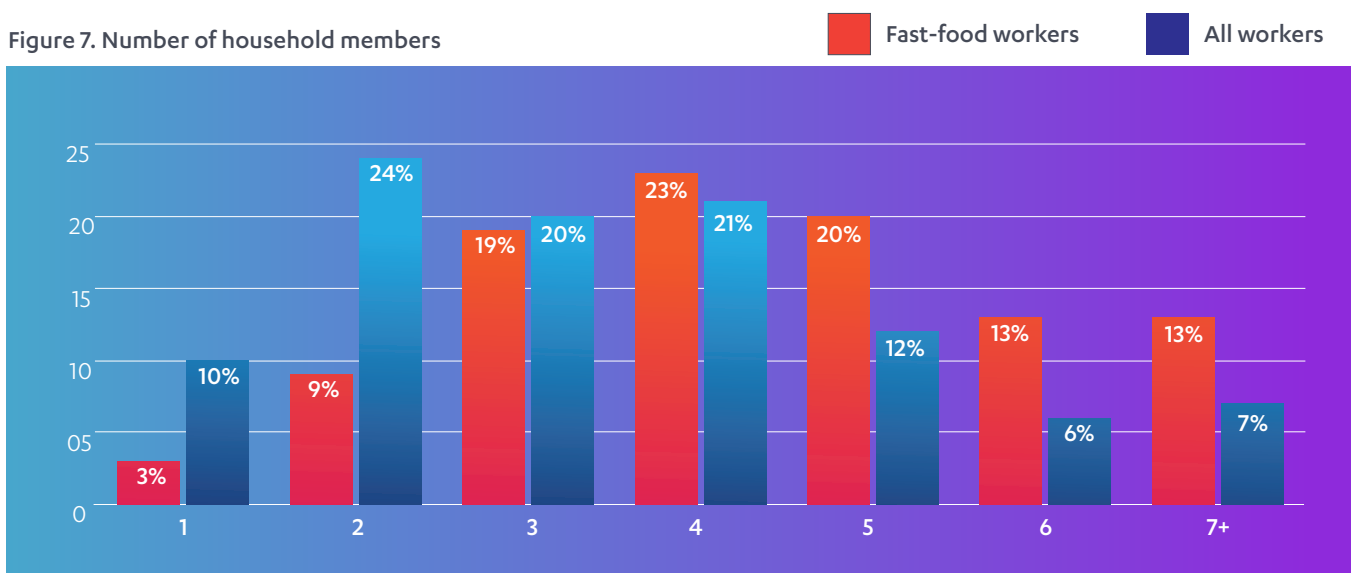
Source: Authors' analysis of 2017–2019 IPUMS American Community Survey (ACS) data.

The vast majority of fast-food workers in Los Angeles (83%) are adults over age 18. Fast-food workers are younger on average than workers as a whole in Los Angeles, with most between 19 and 39 and the largest group (45%) between 19 and 24.



Source: Authors' analysis of 2017–2019 IPUMS American Community Survey (ACS) data.

Though many fast-food workers in Los Angeles are young, they are much more likely than other workers to live in large, crowded, multigenerational households. The majority (69%) live in households with four or more people, and 45% are in households of five or more. Nearly one-quarter have children. The majority of all fast-food workers in Los Angeles live with their parents in the home (see Table 10 in appendix B).



Source: Authors' analysis of 2017–2019 IPUMS American Community Survey (ACS) data.

Further, over a third share households with at least one person who is 55 years of age or older, placing these households in an even more vulnerable group for severe COVID-19 infections or death.

Table 3. Number of people age 55+ in worker households

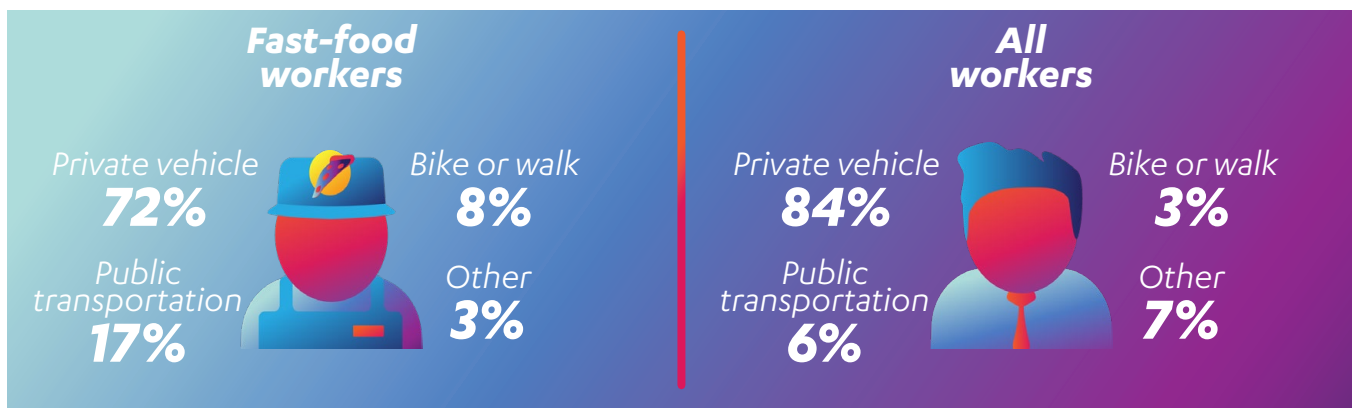
	Fast-food workers	All workers
0	65%	56%
1	22%	21%
2	11%	20%
3+	2%	3%

Source: Authors’ analysis of 2017–2019 IPUMS American Community Survey (ACS) data.

Our data suggests that fast-food workers face great risk of COVID-19 transmission from fast-food worksites to households and surrounding communities. Fast-food workers live considerably closer to their workplaces than the general population; in Los Angeles, 66% live less than 30 minutes from work, compared to 50% of all working Angelenos. Consequently, worksite outbreaks pose a greater threat of community spread in some of the poorest and densest neighborhoods in the city.⁴⁵

Use of public transportation is another potential risk for COVID-19 transmission. Fast-food workers in Los Angeles are much more likely than workers as a whole to rely on public transportation for their commutes to work.

Figure 9. Transportation mode to work



Source: Authors’ analysis of 2017–2018 IPUMS American Community Survey (ACS) data.

Wages and Income

A recent study found a strong relationship between low-wage work and COVID-19 positive test rates.⁴⁶ The majority of fast-food workers earn wages at or near minimum wage. Between 2017 and 2019, the median wage for fast-food workers in Los Angeles was \$12.40, compared with \$20.52 for all workers in the county. There is a very narrow wage distribution for fast-food workers; even the 90th percentile earned only \$15.22 an hour.

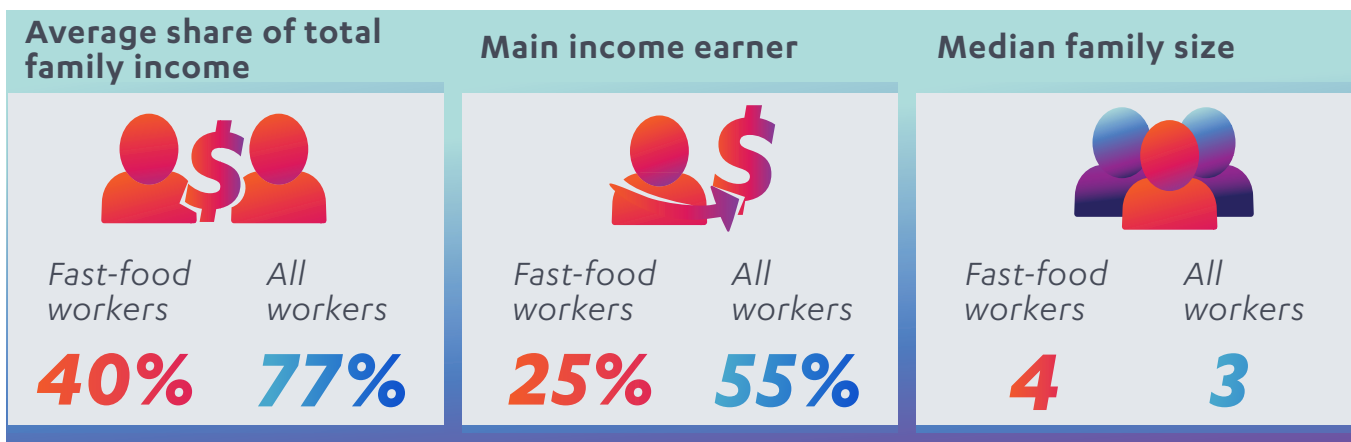
Table 4. Hourly wage percentile, weighted average

	Fast-food workers	All workers
10th	11.28	11.92
25th	11.70	13.92
50th (median wage)	12.40	20.52
75th	13.88	35.34
90th	15.22	56.74

Source: 2019 Occupational Employment Statistics (OES) data, which includes 2017–2019 samples.

Despite their young age and low pay, fast-food workers' wages in Los Angeles make up 40% of their families' incomes. One-quarter of fast-food workers in Los Angeles are the main earners in their families. Fast-food workers' share of family income is much lower than for the workforce as a whole, largely because that they are much more likely to live in multigenerational families with multiple family members contributing to the family income.

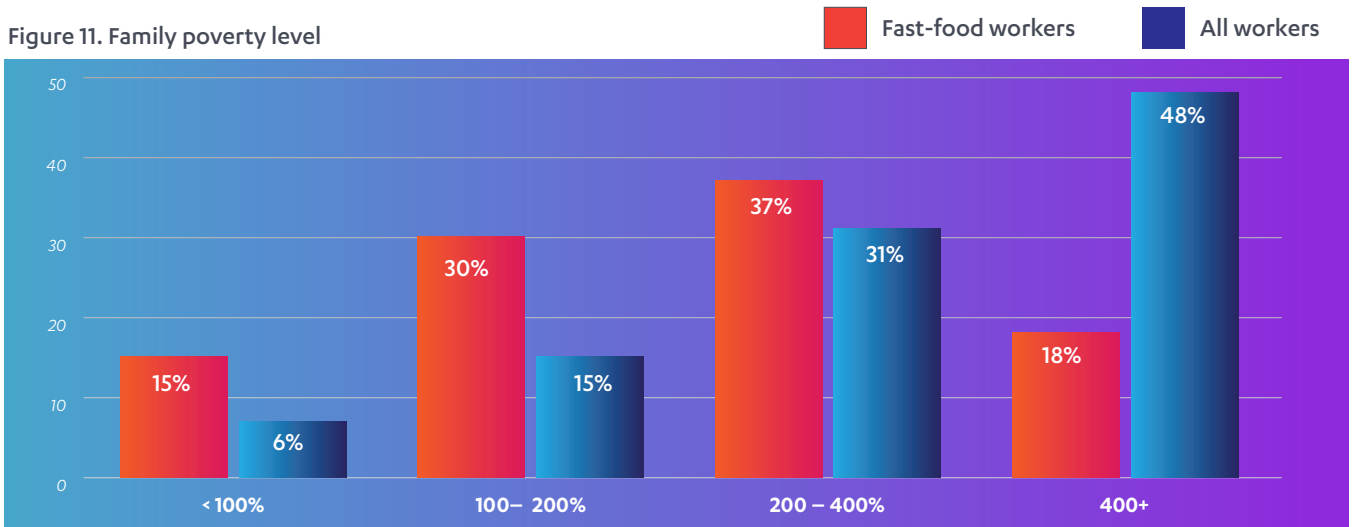
Figure 10: Income contribution and family size



Source: Authors' analysis of 2017–2019 IPUMS American Community Survey (ACS) data.



Fast-food workers are more than twice as likely to live in families with incomes below the federal poverty line (15%) compared to the overall workforce (7%). Angelenos are slightly poorer than their statewide counterparts; close to half (45%) of all fast-food workers in Los Angeles are in families earning less than 200% of the federal poverty level, slightly higher than fast-food workers in the state as a whole (41%).



Source: Authors' analysis of 2017–2019 IPUMS American Community Survey (ACS) data.

Fast-food workers are essential in more ways than one, providing crucial income for rent-burdened households that spend over 30% of their household income on rent and utilities and many of which are in or near poverty. Fast-food workers' households are more likely than all workers' households to be rent-burdened. Most (62%) fast-food workers are renters, compared to 56% of all workers. Of those fast-food workers who rent, 54% spend more than a third of their income on rent, compared to 44% of all working renters

Figure 12. Share of renters spending more than 30% of income on rent



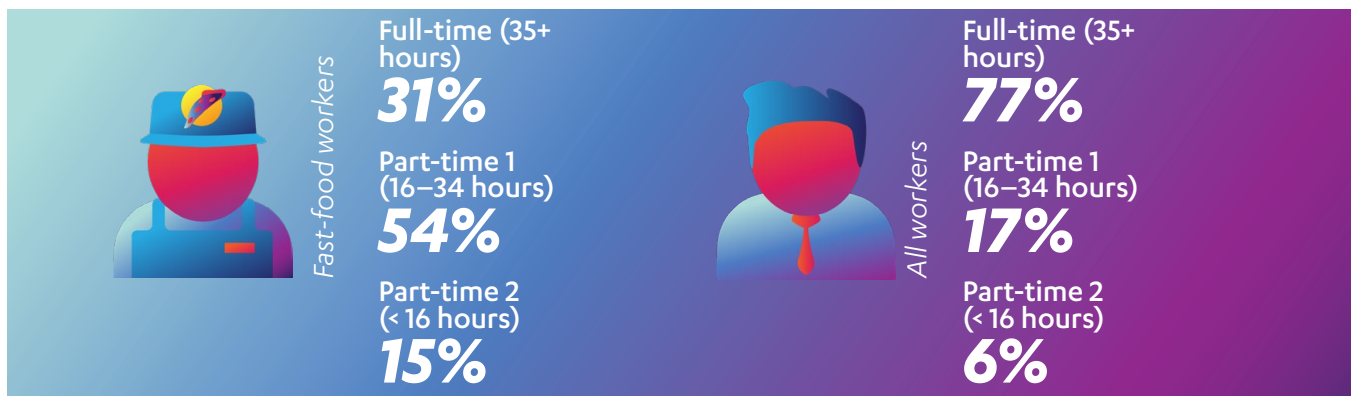
Source: Authors' analysis of 2017–2019 IPUMS American Community Survey (ACS) data.



Work Hours

The majority of fast-food workers work part-time, between 16 and 34 hours a week, with a third working full-time. They average 28 hours a week, though older workers typically work longer hours.

Figure 13. Full-time and part-time status



Source: Authors' analysis of 2017–2019 IPUMS American Community Survey (ACS) data.

Table 5. Average weekly work hours by age

	Fast-food workers	All workers
16–18	20	21
19–24	27	31
25–39	32	40
40–64	36	40
65+	26	35
All	28	39

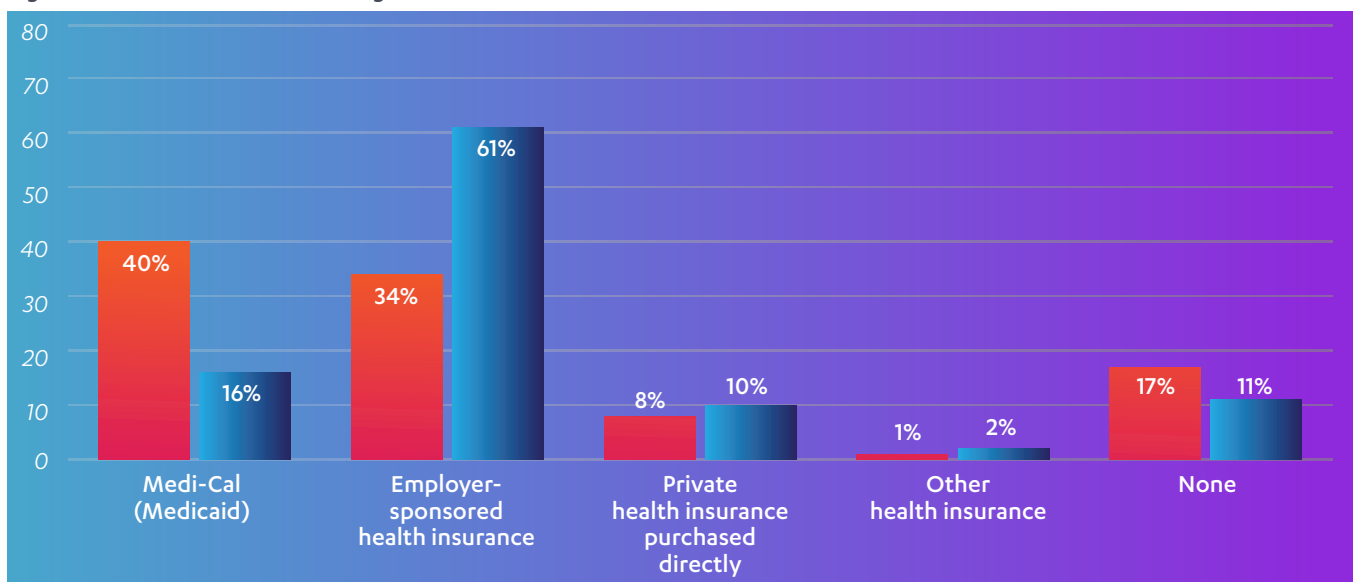
Source: Authors’ analysis of 2017–2019 IPUMS American Community Survey (ACS) data.



Health Insurance

Fast-food workers in Los Angeles are one and a half times more likely to be uninsured and two and a half times more likely to be enrolled in Medi-Cal than the workforce as a whole. Fast-food workers are half as likely to be enrolled in a job-based health plan through their own or a family member’s employer.

Figure 14. Health insurance coverage



Source: Authors’ analysis of 2017–2019 IPUMS American Community Survey (ACS) data.

Conclusion



A growing body of research shows that workplaces are a common vector of COVID-19 community transmission,⁴⁷ and food service workers face particularly acute risk. Essential workers who risk getting sick on the job are more likely to be Latinx and to live in overcrowded housing where social distancing is difficult or impossible. Nowhere is the racial and economic inequality of COVID-19 transmission among essential workers more pronounced than in Los Angeles, where deaths among Latinx residents increased by 1,000% between November 2020 and January 2021.⁴⁸ More than 72% of fast-food workers in Los Angeles are Latinx, nearly 70% are women, and 90% are workers of color. The average fast-food worker in Los Angeles County earns less than \$26,000 per year. Nearly half live in households with five or more people, over half of those who rent their housing are rent-burdened, and seven in ten live in households where someone relies on the public safety net to survive. Fast-food workers live in multi-generational housing; 68% live in households of four people and one in three with someone older than age 55. These workers are the most likely to contract and transmit COVID-19 to communities the least able to contain it. This report provides a portrait of fast-food workers, one of the groups most hard-hit by COVID-19 transmission and mortality. These findings call for policy intervention to stop the transmission of COVID-19 in fast food and the communities where fast-food workers live ■

Appendix A:

Detailed Methodology

Industry Data

For industry data, we used the NAICS code Food Services and Drinking Places (722) and code Limited-Service Restaurants (722513) and included data from the following government sources:

- Quarterly Census of Employment and Wages 2019
- US Census Bureau, 2018 County Business Patterns

Worker Earnings and Demographics

To calculate wages, we used the May 2019 Occupational Employment Statistics (OES), which provides a three-year sample for 2017–2019. We used occupation codes Cooks, Fast Food (35-2001) and Fast Food and Counter Workers (35-3023).

For demographic, family, and household data, we used the American Community Survey 2017–2019, NAICS code Restaurant and Other Food Services (8680). For 2017, we used occupation codes Combined Food Preparation and Serving Workers, Including Fast Food (4050), Counter Attendants, Cafeteria, Food Concession, and Coffee Shop (4060), and Cashiers (4720). For 2018 and 2019, we used occupation codes Fast Food and Counter Workers (4055) and Cashiers (4720).

Public Cost of Safety Net Utilization

To calculate the utilization of safety net programs by families of fast-food workers (defined as working 27 or more weeks per year and 10 or more hours per week), we mainly relied on four sources of data: the US Census Bureau’s American Community Survey (ACS), the March Supplement of the US Bureau of Labor Statistics Current Population Survey (CPS), the US Bureau of Labor Statistics Occupational Employment Statistics (OES), and administrative data from the Medicaid, CHIP, TANF, EITC, and SNAP programs. Medicaid figures exclude aged, blind, and disabled enrollees. The ACS surveys a large number of respondents and asks them about their work history, income, and family structure. The March Supplement, also known as the Annual Demographic Supplement, asks respondents about receipts of cash and noncash transfer payments during the past year and includes questions about the programs we examined in this analysis. The OES provides accurate employment counts by occupation at the substate level.

Survey databases like the ACS and CPS frequently have safety net program utilization counts that differ from program administrative data. We adjusted the CPS so that its program utilization estimates match the program administrative data. The CPS does not provide a large enough sample size to accurately estimate program utilization for fast-food workers at the state or county levels. The ACS does have sufficient sample size for this analysis but lacks specific questions about program utilization, and its occupational employment counts differ from more accurate data like the OES. We built a model using CPS data to predict program utilization based on income, demographics, and family structure. We then used that model to impute program utilization onto the ACS data and adjust the employment counts in the ACS to match the OES data. We used that imputed and adjusted ACS data to analyze safety net program utilization in families of fast-food workers.

Appendix B: Data Tables for Los Angeles and California, 2017–2019

Table 6. Hourly wage distribution and median wage (weighted average)

Hourly wage percentile	Fast-food workers, LA	All workers, LA	Fast-food workers, CA	All workers, CA
10th	11.28	11.92	11.29	11.93
25th	11.70	13.92	11.72	14.17
50th (median wage)	12.40	20.52	12.47	21.24
75th	13.88	35.34	14.28	36.44
90th	15.22	56.74	16.56	58.75
Annual median wage	25,791	42,680	25,945	44,180

Source: 2019 Occupational Employment Statistics (OES) data, which includes 2017–2019 samples.

Table 7. Economic characteristics: Percent full-time/part-time, full-year/part-year

Characteristic	Fast-food workers, LA	All workers, LA	Fast-food workers, CA	All workers, CA
<i>Full time/part time</i>				
Full-time (35+ hours)	31.0	77.3	27.2	77.0
Part-time 1 (16–34 hours)	53.7	17.3	54.0	17.3
Part-time 2 (< 16 hours)	15.3	5.4	18.8	5.7
<i>Full year/part year</i>				
Full-year (50+ weeks)	61.8	83.0	58.7	82.3
Part-year (< 50 weeks)	38.2	17.0	41.3	17.7

Source: Authors' analysis of 2017–2019 IPUMS American Community Survey (ACS) data.

Table 8. Average weekly hours by age group

Age group	Fast-food workers, LA	All workers, LA	Fast-food workers, CA	All workers, CA
16–18	19.8	21.4	19.7	21.0
19–24	26.5	31.2	25.8	32.0
25–39	32.1	39.5	32.1	39.8
40–64	36.0	40.1	34.7	40.3
65+	26.4	34.9	34.9	33.8
All	28.0	38.6	26.8	38.6

Source: Authors' analysis of 2017–2019 IPUMS American Community Survey (ACS) data.

Table 9. Worker characteristics (percentages)

Characteristic	Fast-food workers, LA	All workers, LA	Fast-food workers, CA	All workers, CA
<i>Gender</i>				
Male	31.0	54.5	32.3	54.4
Female	69.0	45.5	67.7	45.6
<i>Race/ethnicity</i>				
Latinx	72.6	46.1	60.3	37.5
Black	4.9	7.1	4.5	5.1
Asian	10.4	15.6	12.2	15.8
White	10.4	28.7	20.0	38.3
Native American	1.8	0.2	0.2	0.3
Other		2.4	2.8	2.9
<i>Foreign-born</i>				
No	68.1	58.9	73.3	65.8
Yes	31.9	41.1	26.7	34.2
<i>Age group</i>				
16–18	16.7	1.0	22.9	1.4

Characteristic	Fast-food workers, LA	All workers, LA	Fast-food workers, CA	All workers, CA
19–24	44.9	9.6	44.1	10.5
25–39	25.7	36.7	21.6	36.0
40–64	12.0	47.5	10.7	46.7
65+	0.6	5.1	0.8	5.3
<i>Education level</i>				
Less than high school	15.2	10.7	17.7	8.6
High school	41.9	27.6	44.3	28.6
Associate degree/ some college	36.7	25.1	32.3	25.7
Bachelor's degree	6.0	24.3	5.1	23.5
Advanced degree	0.3	12.4	0.7	13.6
<i>Health insurance</i>				
Medi-Cal (Medicaid)	39.7	15.5	36.4	13.9
Employer-sponsored health insurance	33.9	60.6	40.8	64.8
Private health insurance purchased directly	8.1	10.0	8.2	9.0
Other health insurance	1.0	2.4	1.9	3.2
None	17.3	11.5	12.7	9.1
<i>Transportation to work</i>				
Private vehicle	71.7	84.0	79.2	83.9
Public transportation	16.5	6.3	9.5	5.5
Bike or walk	8.2	3.1	7.6	3.4
Other	3.5	6.6	3.7	7.1

Source: Authors' analysis of 2017–2019 IPUMS American Community Survey (ACS) data.

Table 10. Household characteristics (percentages)

Characteristics	Fast-food workers, LA	All workers, LA	Fast-food workers, CA	All workers, CA
<i>Federal poverty level</i>				
< 100%	15.2	6.5	16.1	6.2
100–150%	13.4	6.5	12.2	5.7
150–200%	16.4	8.4	12.7	7.4
200–400%	36.9	31.0	34.4	28.4
400+%	18.0	47.7	24.7	52.4
<i>Other household income characteristics</i>				
Renters who spend more than 30% of income on rent	53.9	44.9	54.0	42.3
Average worker share of family total income	39.7	76.6	34.1	75.3
Main earner in family	25.2	54.8	24.5	54.6
<i>Family status</i>				
Married without children	6.3	16.9	5.4	18.9
Married with children	10.9	31.9	9.7	33.2
Not married without children	70.6	40.8	75.1	38.4
Not married with children	12.3	10.4	9.9	9.5
Median Family Size (number)	4	3	4	3
<i>No. of household members</i>				
1	3.5	10.3	3.6	9.5
2	9.3	23.4	10.3	24.7
3	18.6	20.2	18.2	20.5
4	23.2	20.8	24.9	21.0

Characteristics	Fast-food workers, LA	All workers, LA	Fast-food workers, CA	All workers, CA
5	19.8	12.2	18.8	12.1
6	13.1	6.3	11.3	6.1
7+	12.5	6.7	12.9	6.2
<i>No. of family members</i>				
1	10.3	18.2	12.0	17.6
2	8.9	21.6	9.7	23.3
3	16.2	18.3	16.7	18.5
4	22.6	19.5	23.1	19.4
5	18.9	11.2	17.4	10.9
6	12.5	5.7	10.1	5.4
7+	10.7	5.6	10.9	5.0
<i>No. of household members age 55+</i>				
0	65.2	56.3	65.6	58.0
1	22.4	21.4	20.5	20.1
2	11.0	19.7	12.3	19.6
3+	1.4	2.6	1.6	2.3
<i>Age group sharing household with a parent</i>				
16–18	92.5	83.9	90.1	85.0
19–24	82.1	66.5	75.2	60.9
25–39	39.2	28.5	37.6	24.4
40–64	7.5	8.5	9.3	7.5
65+	8.2	2.0	8.6	1.6

Source: Authors' analysis of 2017–2019 IPUMS American Community Survey (ACS) data.

Acknowledgments

Research Team

Kuochih Huang, *UC Berkeley Labor Center*

Ken Jacobs, *UC Berkeley Labor Center*

Tia Koonse, *UCLA Labor Center*

Ian Eve Perry, *Consultant*

Kevin Riley, *UCLA Labor Occupational Safety and Health Program*

Laura Stock, *UC Berkeley Labor Occupational Health Program*

Saba Waheed, *UCLA Labor Center*

UCLA Graduate Student Research Support

Gabino Abarca

Victoria Copeland

Lizbeth Diaz

Jennifer Ray

Additional Research Support

Jenifer MacGillvary

Editor

Julie Monroe

Design

Antonio Rodriguez

UCLA Administrative Support

Luz Hernandez

Claudia Saurez

Communications

Veena Hampapur, *UCLA Labor Center*

Van Nguyen, *UC Berkeley Labor Center*

Photo Credits:

Wil Prada

Unsplash

Envato Elements

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