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Employment and Income Insecurity Experienced by Low-to-Moderate-Income Latinas During the COVID-19 Pandemic

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Abstract

Purpose: Research has established interconnections between financial strain and health outcomes. The COVID-19 pandemic disproportionately affected low-to-moderate-income (LMI) Latinas. The added stress may have strained the mental and physical health of LMI Latinas. Understanding the impact of the pandemic on financial and health status among Latinas offers important insights into ongoing pandemic recovery efforts to reduce health and financial disparities.

Methods: This study employed community-based participatory qualitative and quantitative research methods to examine the experiences of Latinas residing in Los Angeles (LA) County in relation to their health and financial challenges. Focus groups were conducted among LMI Spanish-speaking Latinas, who are residing or employed on the west side of LA County. Study participants were members of Building Skills Partnership, which is a trade association training union workers.

Results: Participants identified concerns that pandemic closures, reduction in work hours, unemployment, insurance loss, and childcare loss are attributed to financial hardship. Consequently, participants expressed that their ability to manage stress was compromised. Dealing with uncertain employment status exacerbated the economic challenges Latinas already faced prepandemic and resulted in the prioritization of living expenses and delaying health care. Participants were supportive of the idea of being offered more financial and stress management classes and support group discussions to help them navigate the challenges they face due to financial hardships.

Conclusion: The study provides evidence from qualitative data analysis supporting the development of educational and coaching programs aimed at enhancing the mental health and financial well-being of LMI

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Latinas. Group or communal activities with peer support may prove effective alternatives and augment traditional mental health counseling.

Keywords: finances; stress; mental health; Latinas; health; pandemic

Introduction

The COVID-19 pandemic greatly affected the financial and mental well-being of California's essential workers as 1.6 million residents abruptly faced unemployment and/or income instability between February and September 2020.¹ Employees most affected were food service, hospitality, and personal care workers.² These industries employ the highest percentage of women and African American/Black, Latinx, and Native American employees.³

In LA County, the Latinx/Hispanic population is the largest ethnic minority group (49%), followed by 25% White, 16% Asian, 9% Black, and 2% American Indian and Alaska Native.⁴ Latinas in LA County are nearly three times more likely to report household incomes less than 200% of the Federal Poverty Level compared to White women (72% versus 24%), and are less likely than White women to access mental health care, and report more psychological distress.⁵

The mental health impact of COVID-19 on Latinas was compounded by existing structural vulnerabilities of race, socioeconomic status, and gender identity.⁶ Latinas in LA County experienced greater pandemic-related challenges of overlapping health and social inequalities, amplifying the impact on vulnerable populations.⁶

There is growing evidence of the health impacts of economic distress.⁷ In 2020, 53% of women sought employment and accounted for 57% of the total U.S. workforce.⁸ Of these women, 50% identified as Latina, 45% were between the ages of 35 and 54, and 97% were without a college degree.⁹ Latinas in California with less than a bachelor's degree were three times more likely to lose employment than the average worker since the beginning of the COVID-19 unemployment surge.⁹ Many Latinx families depleted savings, delayed education, and health expenses, and resorted to high-interest loans, reflecting economic strain.¹⁰ Hispanic adults were more likely than non-Hispanic, White adults to report more stressful decision-making following the pandemic.¹¹ The impact of COVID-19 on the mental health of Latinas in LA County exacerbated existing structural vulnerabilities and syndemic interactions involving financial stressors,

compounded by factors such as race, ethnicity, socioeconomic status, and gender identity.⁶ Precarious immigration status, in particular, is a risk factor for financial instability and depression among low-income Latinas.¹² Our research examines the impact of the pandemic on the mental health and financial stability of low-to-moderate-income (LMI) Latinas and assesses the perceived utility of financial well-being programs to reduce stress and strategies for developing culturally sensitive and targeted interventions.

One industry significantly impacted was property workers, especially female janitors. The UCLA Women's Health Education and Research Center (WHERC) has collaborated with Building Skills Partnership (BSP) for over 10 years in providing members with financial and health education. This partnership led to studying the implications of the COVID-19 pandemic on the financial well-being of working Latinas. BSP is the training and education arm of the Service Employees International Union United Service Workers West, empowering property service workers through workforce development, immigrant inclusion, and community advancement programs.¹³ Study participants included BSP's Latina janitors whose job security was significantly impacted by the COVID-19 pandemic.

Methods

This community-based partnered participatory research used qualitative and quantitative methods to explore the implications of the COVID-19 pandemic on the financial well-being of Latina property workers. A mixed-method approach was employed with surveys and focus groups. This study was approved by the UCLA IRB #19-000464.

Recruitment

Two BSP staff members recruited 21 participants via email, phone calls, and word of mouth. This sample size was limited due to minimal funding for BSP's staff time and gift card incentives. Funding required participants to be BSP members, Spanish-speaking, identify as Hispanic/Latina, with incomes less than



80% of the local area incomes, and work or live in the west side of LA County.

Focus Groups

Four 90-min focus groups, conducted in Spanish, were facilitated in August 2022 over Zoom by a BSP financial capacity coach and health educator. A guided interview explored participants' pandemic-related financial and health hardships. Participants received a \$50 Target gift card for focus group attendance and a \$25 gift card for survey completion.

Survey

The focus group survey included 30 multiple-choice and close-ended questions, asking for self-reported assessments of financial, physical, and mental health status and demographic data. Questions were adapted from validated financial assessment questionnaires produced by the U.S. federal government and organizations for consumer financial well-being (e.g., Federal Deposit Insurance Corporation, Survey of Household Economics and Decision Making, and the Consumer Financial Protection Bureau). Questions about participants' mental and physical health were adapted from the Self-Reported General Health Status, Access to Health Services, and Health Questionnaire-9. Questions on the effects of the COVID-19 pandemic on mental health were adapted from the PhenX Toolkit Protocol.

Analysis

Qualitative thematic analysis was conducted by identifying, coding, and compounding participant responses into general themes using the Rapid and Rigorous Qualitative Data Analysis (RADaR) technique.¹⁴ All focus group recordings were translated and transcribed by three bilingual investigators from Spanish to English using a standardized transcript template. All responses were extracted, separated by quotes in response to interviewer questions, and organized into a transcript data table for thematic coding. Quotes that did not answer or relate to the research questions were removed from the interview guide. The investigators worked independently to identify themes and then elected to include subthemes in the coding template that overlapped among at least two of the three investigators. The frequency of coding was compared among investigators, and the most frequent and related subthemes were categorized into three major themes. Quotes that supported the curated subthemes were

shared with BSP staff who confirmed themes accurately reflected the focus group content.

Results

Sociodemographic Characteristics of Participants

The sociodemographic characteristics of the 21 participants (Table 1) show that approximately half (52%) of the participants identified as Mexican/Mexican American, and the second most common ethnicity (24%) as Salvadoran. Documentation status and data on mixed immigration family status were not asked. Most participants (81%) were between 40 and 60 years old. About half (52%) were without a high school diploma. Of the high school graduates, 14% reported attaining some college education. All participants reported an annual income of \$66,750 or less, which is 80% of the 2022 Area Median Income for one person in LA County.¹⁵ A third of participants were of lower income, with a reported income less than \$24,849, and half of the participants' income was \$41,400–\$66,249. More than half of the participants

Table 1. Demographic Characteristics of Latina Focus Group Participants

Full sample count N = 21	Percentage (%)
Ethnicity	
Mexican/Mexican American	11 (52)
Salvadoran	5 (24)
Guatemalan	2 (10)
Other	2 (10)
No response	1 (5)
Age	
25–39	3 (14)
40–60	15 (71)
60+	2 (10)
No response	1 (5)
Education level	
Primary school (1st–8th grade)	7 (33)
Some high school (9th–11th)	4 (19)
Graduated HS (12th grade/GED)	6 (29)
Some college	3 (14)
No response	1 (5)
Income	
\$0–\$24,849	7 (33)
\$24,850–\$41,399	10 (48)
\$41,400–\$66,249	1 (5)
Prefer not to answer	1 (5)
No response	2 (10)
Family composition/household	
Married, without children	2 (10)
Married, with children	12 (57)
Household of single mother	4 (19)
Other	2 (10)
No response	1 (5)

Please note that a question left unanswered was listed as no response. GED, General Educational Development; HS, High School.



were married with children, and about one-fifth reported being single mothers.

Participants Finances, Health, and COVID-19 Stressors

Approximately half of the participants (57%) had a checking and savings account (Table 2). In relation to home ownership, 57% were renters, and 19% were homeowners. A total of 67% of participants stated they were “very” involved in household financial decision-making. Only 24% reported having enough savings or an emergency fund to cover at least 3 months’ worth of living expenses.

The survey responses (Table 3) show that 48% self-reported feeling anxiety, and 57% felt depressed for at least 1 or more days within a 2-week period. There were 67% of participants self-reporting feelings of helplessness daily, or on various days within a 2-week period, and 71% also reported either always or frequently worrying about finances.

A total of 67% reported financial stress negatively impacted their mental health, 76% their physical health, and 67% reported that financial stress negatively impacted their work performance in the past month because employers required extra work without giving extra time and were reprimanded for incomplete work.

Table 2. Finance Characteristics of Latina Focus Group Participants

	Percentage (%)	
Full sample count N = 21		
Ownership of a checking or savings account		
Yes to having savings account	12	57
No to having savings account	4	19
No response	5	24
House ownership		
Owner	4	19
Rent	12	57
Living without rent with a partner/employer/friend	2	10
Other	1	5
Prefer not to answer	1	5
No response	1	5
Involvement in household financial decision making		
Very involved	14	67
Somewhat involved	5	24
No response	2	10
Ownership of a credit card		
Yes	15	71
No	4	19
No response	2	10
Savings equivalent to 3 months worth of living expenses		
Yes	5	24
No	13	62
Prefer not to answer	1	5
No response	2	10

Please note that a question left unanswered was listed as no response.

Table 3. Perceived Effects of Financial Strain on the Mental and Physical Health of Latina Focus Group Participants

	Percentage (%)	
Full sample count N = 21		
Frequency of feeling anxious/nervous in the past week		
None or less than 1 day	9	43
1–2 days	3	14
3–4 days	5	24
5–7 days	2	10
No response	2	10
Frequency of feeling depressed in the past week		
None or less than 1 day	6	29
1–2 days	6	29
3–4 days	3	14
5–7 days	3	14
Not sure	1	5
No response	2	10
Frequency of feeling depressed in the past week		
Always	9	43
Frequently	6	29
Sometimes	1	5
Rarely	1	5
Never	1	5
No response	3	14
Negative impact of financial stress on physical health		
No impact	3	14
Moderate impact	8	38
High impact	4	19
No response	2	10
Negative impact of financial stress on mental health		
No impact	4	19
Some impact	8	38
Moderate impact	3	14
High impact	3	14
Prefer not to answer	1	5
Negative impact of financial stress on work performance		
No impact	5	24
Some impact	4	19
Moderate impact	7	33
High impact	3	14

Note: A question left unanswered was listed as no response.

In relation to the impact of COVID-19 on household finances and financial stress (Table 4), 76% agreed or strongly agreed with the statement, “I’m worried about loss of income if I get sick from the Coronavirus,” and 62% agreed or strongly agreed with the statement, “I’m worried about having enough food because of the Coronavirus.”

Qualitative analysis results. Using the RADaR technique, themes identified across the four focus groups were grouped into three major categories (Fig. 1).

Category 1: How COVID-19 pandemic affected LMI Latinas’ finances. Theme 1: Loss of employment and reduction of hours during the pandemic. All groups felt that, to various extents, the COVID-19 pandemic impacted their finances, as most participants attributed



Table 4. Latina Focus Group Participant Worries Related to the COVID-19 Pandemic

Full sample count <i>N</i> = 21	Percentage (%)
"I become very anxious when I think about the Coronavirus."	
Neither disagree or agree	3 14
Agree	3 14
Extremely agree	4 19
Not sure	2 10
Prefer not to answer	2 10
No response	2 10
"I am very worried about contracting the Coronavirus."	
Extremely disagree	5 24
Neither disagree or agree	2 10
Agree	7 33
Extremely agree	3 14
Not sure	1 5
Prefer not to answer	1 5
"I am very worried about loss of income if I get sick from the Coronavirus."	
Extremely disagree	1 5
Neither disagree or agree	1 5
Agree	8 38
Extremely agree	8 38
Not sure	1 5
"I am worried about money because of the Coronavirus."	
Extremely disagree	5 14
Disagree	1 5
Neither disagree or agree	1 5
Agree	7 48
Extremely agree	5 14
No response	2 10
"I worry about losing my savings if I get sick from the Coronavirus."	
Extremely disagree	1 5
Neither disagree or agree	1 10
Agree	8 38
Extremely agree	8 38
Not sure	1 5
No response	2 10
Frequency of physical symptoms due to anxiety caused by the COVID-19 pandemic in the past week	
None or less than 1 day	9 43
1–2 days	2 10
3–4 days	5 24
5–7 days	3 14
No response	2 10

A question left unanswered was listed as no response.

this to loss of employment or reduction in work hours, due to personal or family illness from the coronavirus, hospitalizations, and work that required self-isolation. Employers cutting hours resulted in a dramatic reduction in household income. Participants reflected on struggling to pay for bare necessities as a result of financial insecurities:

"... I can no longer do what I had before in the same quantity. It's brought down the quality where I have to buy more economical things ..."

Theme 2: The long-term effect of the pandemic on household savings and debt. The majority of participants reflected on using savings to cover living expenses as

Focus Group Major Categories	Total Responses
Category 1: How COVID-19 pandemic affected LMI Latina finances	58
Category 2: How financial stress due to the COVID-19 pandemic impacted LMI Latina health	47
Category 3: Managing financial-related stress	28

Notes: All responses to focus group questions made by any individual participant that aligned with a major theme were counted in Total Responses. Therefore, individual participants contributed responses aligning with focus group themes multiple times.

FIG. 1. Participant responses per major focus group categories. This table reflects the total number of participant responses within each of the three focus group categories—"How COVID-19 pandemic affected low-to-moderate income (LMI) Latina finances" (Category 1), "How financial stress due to the COVID-19 pandemic affected LMI Latina Health" (Category 2), and "Managing financial-related stress" (Category 3). All responses to focus group questions made by any individual participant that aligned with a major theme were counted in total responses. Some individual participants contributed responses aligning with focus group themes multiple times.

a common practice, as stated by one participant who said:

"I was able to still work, but my husband was let go for a long time. So, to live on one salary was very complicated. Very complicated. Your savings are used up, everything is used up, and that is when you start to feel terrible. . ."

The cycle of loss of income leading to more debt and credit interest was another financial fallout. After exhausting available liquid assets, some participants used credit cards without means to cover interest and late payments, as expressed by one participant: "Because of the cutting of hours, it affected us a lot. I'm at the top of debts. Because of what happened to me this year, the debts just increased."

Category 2: How financial stress due to the COVID-19 pandemic impacted LMI Latinas' health. Theme 1: Financial stress experienced during the pandemic had an impact on health. Many participants reported that their mental health was affected by a constant concern over lower wages and rising costs of basic goods, summed up by one participant who said "...we don't have enough to pay for everything. Or we think that it will not be enough."



High levels of financial stress during the pandemic in turn affected physical health. Several participants recounted experiencing physical manifestations from stress by saying “. . . *When we are affected by stress, it throws off our whole system.*”

“. . . [the pandemic] decreased what we had saved, now it's gone. And well it has affected us a lot in our health because of stress. Right now, I get a lot of headaches from so much stress.”

Theme 2: Lack of access to health care services due to loss of employment or reduction of hours experienced during the pandemic had detrimental effects on health. The reduction in work hours resulted in a loss of health insurance for some participants. As a BSP benefit, full-time workers are eligible for Kaiser Permanente health insurance. Interruptions in health care access made navigating complex health care systems difficult, driving many to seek affordable care elsewhere, such as in Tijuana, Mexico, where medications and treatments are less expensive. This sentiment was expressed by a participant who said:

“That is why I have fought so they give me the one hundred-fifteen hours to have my insurance valid. But if I don't have my current insurance, I prefer to go to Tijuana. And the medical care is very good, and they don't charge much.”

Category 3: LMI Latinas' strategies for managing finance-related stress. Theme 1: Support groups as a means for managing financial stress. Many participants described continual stress due to price increases for basic goods and financial barriers to accessing mental health resources, as well as not being able to pay for leisure activities, such as taking an annual vacation. Another participant talked about not being able to afford little indulgences like spending time at the park, camping, or at the beach.

Participants reported barriers to accessing professional mental health services, including cost, time, and availability of convenient appointment times, which one participant explained by saying “. . . *We are closed off without knowing where to go, or what we need to do. . . we need to relax.*” Additionally, participants reported that due to increased inflation, they have less money available to pay off debt, let alone spend on self-care services: “I think if we could have a little more income, we could try to be focused on ourselves. Take care of our health, exercise, and go out a little. To have luxuries that we go without because we do not have money. . . Small luxuries for our health and our stress.”

Many participants discussed the need for support groups to share their feelings with others because

holding your feelings in can negatively affect your health, as explained by one participant. In describing her stress, a participant said: “*So it affects you a lot, emotionally, to retain things inside, that is harmful. And I think we women are very emotional and we always have emotions inside. So, a support group like this or something more profound would help us all a lot.*” Access to care was noted relative to the difficulty in adapting to modern telehealth practices. For instance, one participant mentioned, “our health insurance, that is Kaiser, is that the appointments are telehealth. And that is fine, right? You can do it at home. But for us, I think that we are not accustomed to it culturally. For me it is complicated. I want to be seen by a doctor, not through a screen.”

Theme 2: Physical activity as a means to mitigate financial stress. Some participants relieved their stress with physical activity, as described by one participant stating that:

“One type of consistent thing to make me feel happier at least is to dance and it's very expressive so I've felt and it's very important to me. It feels as if nothing is wrong. For me, I don't have professional help and I only do exercise and go on walks, and that is the way to combat it because right now with how the situation is, it has caused stress.”

Theme 3: Endorsement of financial support groups as a means to improve mental health. The focus group participants strongly endorsed BSP's financial literacy programs and individual coaching to significantly improve their mental health. Many participants highlighted the connection between financial stress and mental well-being, noting that their anxiety and stress levels often stemmed from financial uncertainty and lack of knowledge about managing their finances, although the majority reported participating in major household financial decisions.

Discussion

The study results can inform the design of educational and coaching programs with a therapeutic perspective aimed at improving the mental health and financial well-being of low-income Latinas. Themes demonstrated a need for a focused approach to financial, debt relief, and mental health education relevant to LMI residents. Low-income individuals from all races and ethnicities are disproportionately affected by medical debt. Facing any type of medical debt, whether small or large, can create a significant burden and stress for lower-income individuals.¹⁶ Participants want information about accessing mental health



services and activities that promote mental health. The participants discussed how the focus group was an effective way for them to express their feelings. This study validates prior research demonstrating the importance of developing programs and interventions focusing specifically on Latinas.¹⁷ Alternative activities, such as dance lessons, although not generally referred to as therapy, may provide stress relief and not carry the stigma of seeking counseling or therapy.

Amid the pandemic, Latino families faced significant financial and health challenges, often compounded by barriers to government assistance due to immigration status. Although our study did not inquire about immigration status to respect participants' privacy, many Latino families experience difficulties resulting from being denied benefits.¹² Pandemic hardships show that 31% of adults had trouble paying their rent, mortgage, or utility bills; experienced food insecurity; or postponed medical care because of financial constraints during the pandemic.¹⁸ Furthermore, 33% of adults were worried about paying off debt, with over 45% of Blacks and Hispanics feeling this way.¹⁸

Effective strategies include partnering with communities to assess racial, ethnic, and social factors, ensuring fair access to services, and crafting culturally and linguistically appropriate health messages.¹⁹ Utilizing engagement opportunities to share data and find common ground with community partners is critical for sharing data and impacting change.¹⁹ The data will be shared to narrow the health-wealth divide through platforms including BSP's newsletter, WHERC's 2025 "Women's Health and Economic Justice" Conference, and stakeholder convenings to promote public and private partnerships.

Limitations

This study was performed on a convenience sample from a single organization in one industry. Therefore, comparing the attitudes and experiences of Latinas from multiple industries or enrolled in health plans other than Kaiser Permanente was not possible.

Recruitment was conducted by BSP staff members, who were familiar to many participants. Participants may have edited their responses due to privacy concerns. Some may mistrust the confidentiality of the facilitators or other participants, or those who might hear the focus group recording. Although the survey was anonymous, participants may have thought that their responses, such as income, could be tracked to

them. While all researchers translating the transcripts of the focus groups were bilingual, their different dialects, human error, and interpreter bias could have impacted the coding of the focus groups' data.

Conclusion

The economic strain had been especially overwhelming for Latina essential workers, whose heightened financial pressures during the pandemic had significantly contributed to increased stress, depression, and anxiety as a result of their roles.²⁰ The study findings have informed BSP's financial coaching and health education programs to emphasize more on mental health and peer support. BSP has also expanded its mental health services and directed members to seek counseling through their Kaiser health plan. WHERC has also revised its health education and financial coaching programs to address mindfulness, resiliency, and mental health pandemic recovery.

To help improve physical and mental health among Latinas', integrating financial and health education and coaching needs to integrate peer support. More research on Latinas can inform tailored interventions targeting the challenges they face in managing household finances and financial stress.

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S.B.-Y.: Methodology (lead), conceptualization (lead), writing—original draft (lead), formal analysis (lead), writing—review and editing (equal), and formal analysis (equal). G.V.: Writing—original draft (lead), formal analysis (lead), and writing—review and editing (equal). J.S.: Writing—original draft (lead), formal analysis (lead), and writing—review and editing (equal). J.F.: Conceptualization (lead), writing—review and editing (equal), and funding acquisition (lead). A.R.: Conceptualization (supporting), methodology (supporting), and investigation (equal). H.R.: Conceptualization (supporting), methodology (supporting), and investigation (equal). C.T.: Methodology (supporting) and



writing—review and editing (supporting). G.A.P.: Writing—review and editing (supporting). L.B.: Supervision (lead), conceptualization (lead), writing—reviewing and editing (supporting), methodology (lead), and formal analysis (equal). R.M.: (C)-Revisions editing, additional literature review, and responses to reviewer requests. S.V.: Revisions editing, fact-checking, and responding to reviewer requests. J.P.: Supervision (lead) and writing—review and editing (supporting).

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Abbreviations Used

BSP = Building Skills Partnership
LA County = Los Angeles County
LMI = Low-to-moderate-income
RADaR = Rapid and Rigorous Qualitative Data Analysis
WHERC = Iris Cantor-UCLA Women's Health Education & Research Center

