



**MAINE PUBLIC HEALTH WORKFORCE SURVEY
REPORT
2022**

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THANK YOU

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EXECUTIVE SUMMARY

In 2021, the U.S. Centers for Disease Control and Prevention (U.S. CDC) published a *Morbidity and Mortality Weekly Report (MMWR)* that highlighted startlingly high rates of poor mental health conditions including stress, anxiety, post-traumatic stress disorder, and burn-out, among public health workers during the COVID-19 pandemic.¹ Spurred by these data and prior conversations, Maine Public Health Association (MPHA) and its partners sought to assess the mental health and well-being of Maine's public health workforce. Surveying the workforce also provided an opportunity to describe the workforce and infrastructure. The Maine Public Health Workforce Survey was generated with the aims of developing a better understanding of public health workers in Maine, how the current landscape, including the COVID-19 pandemic, has impacted public health staff and volunteers and their work, and the future of the state's public health workforce. This report provides a detailed summary of the data generated from this survey as well as a discussion of the findings' implications.

This survey was created by MPHA in collaboration with the Maine Area Health Education Centers (Maine AHEC), Maine Public Health Training Center, and Maine Resilience Building Network (MRBN). The survey instrument was adapted from the [Public Health Workforce Interests and Needs Survey \(PH WINS\)](#) from the de Beaumont Foundation, and the [Mental Health Needs Assessment for the Public Health Workforce](#) from the Institute for Public Health Practice at the University of Iowa College of Public Health and the Iowa Public Health Association. The survey was developed, administered, and analyzed by Mackenzie Amadei, for completion of her Master of Public Health degree at University of New England. Financial support for Ms. Amadei was provided by New England Public Health Training Center's Health Equity Fellowship.

The Maine Public Health Workforce Survey was administered using [SurveyMonkey](#) and disseminated via e-mail to MPHA subscribers and through requests to partner organizations to share with their internal and external stakeholders. To be eligible for participation, respondents must have been at least 18 years old, in Maine, and self-identified as a public health worker or volunteer. Data collection took place from May 24, 2022, to July 29, 2022, during which time 249 responses were collected.

KEY FINDINGS

PUBLIC HEALTH WORKFORCE AND INFRASTRUCTURE CHARACTERISTICS

- Most respondents identify as white (83.8%) and female (77.6%).
- State government employees made up the largest portion of respondents (50.0%).
- Many organizations fulfill public health services in more than one region (e.g., rural, suburban, urban, and/or statewide) (17.0%).
- Federal and state government grants account for most of the public health funding (70.0% and 59.9%, respectively). Funding was also reported to come from contracts (24.8%) and philanthropic grants (21.1%).

WORKPLACE ENVIRONMENTS

- The workforce is largely mission and values driven.
- The majority expressed positive sentiments about their workplace environments and jobs overall; 52.0% reporting being satisfied or very satisfied with their pay.

¹ Bryant-Genevieve J, Rao CY, Lopes-Cardozo B, et al. Symptoms of Depression, Anxiety, Post-Traumatic Stress Disorder, and Suicidal Ideation Among State, Tribal, Local, and Territorial Public Health Workers During the COVID-19 Pandemic – United States, March-April 2021. *MMWR Morb Mortal Wkly Rep* 2021; 70:1680-1685.

Gaps in workplace satisfaction included:

- Nearly 1/3 (31.7%) of respondents reported being unsatisfied or very unsatisfied with their pay.
- Organizations' policies inadequately addressing mental health and well-being.
- Organizations not providing opportunities for advancement.
- Employees having insufficient training to do their work.
- Organizations not providing opportunities for professional development.
- Organizations not recognizing employees for the work they do.

IMPACTS OF COVID-19

- Most respondents (64.5%) contributed to COVID-19 efforts in some capacity and most public health staff performed both their regular job duties and those related to COVID-19 (88.6%).
- Most respondents expressed positive experiences working from home. The predominant challenges faced while working from home were managing one's workload and balancing work and home-life, particularly for parents and those providing childcare.
- Despite the challenges presented by COVID-19, a majority of the workforce reported a positive overall mental health status (81.0%).

THE FUTURE OF MAINE'S PUBLIC HEALTH WORKFORCE

- Most public health employees intend to remain at their current organizations (59.9%).
- Few respondents (22.0%) expressed that COVID-19 played a role in their decision to stay at or leave their organization.
- Job satisfaction, flexibility (e.g., flexible hours/telework), and satisfaction with one's supervisor were the most important factors in employees' decisions to remain with their current organizations.
- Pay, lack of opportunities for advancement, and better opportunities outside one's organization were cited as the most influential factors in employees' decisions to leave their organizations.

CONCLUSIONS

While these data are only representative of the experiences of survey respondents, overall, they demonstrate that Maine's public health workforce and its infrastructure were resilient during the COVID-19 pandemic. Future efforts to strengthen the public health workforce could focus on increasing opportunities for professional development and training, advancement within organizations, providing flexible working conditions, and performing salary assessments to ensure employees receive fair wages.

METHODOLOGY

INSTRUMENT DEVELOPMENT

The Maine Public Health Workforce Survey instrument was developed by Mackenzie Amadei in collaboration with MPHA, Maine Area Health Education Centers, Maine Resilience Building Network, and the Maine Public Health Training Center. Survey questions were largely adapted from the Public Health Workforce Interests and Needs (PH WINS) Survey and the Mental Health & Well-Being Survey from the Institute for Public Health Practice at the University of Iowa College of Public Health and the Iowa Public Health Association, with select changes made as necessary based on Maine's public health infrastructure.

DATA COLLECTION

The Maine Public Health Workforce Survey was developed using SurveyMonkey, Inc. (San Mateo, California, USA) and disseminated via e-mail 4 times to MPHA's newsletter subscribers (approximate n=2,540) and through requests to partner organizations, universities, and Maine State offices (see below) to share with their internal and external stakeholders. Organizations for outreach included state government departments, health systems, community coalitions, and MPHA organizational members. This list is not exhaustive and is not indicative of survey participation; these are the organizations we contacted to request participation. We did not collect data on specific employers, and or snowball sampling efforts.

Survey Outreach Organizations

- Maine Public Health Training Center
- Maine Resilience Building Network
- Maine Department of Health and Human Services
- Maine Center for Disease Control and Prevention
- Governor's Office of Policy Innovation and the Future
- Maine Department of Agriculture, Conservation and Forestry
- Maine Department of Environmental Protection
- Maine's Statewide Coordinating Council
- MaineHealth
- Maine Medical Center's Center for Outcomes Research and Evaluation
- Cary Medical Center
- Northern Maine Medical Center
- Northern Light Health
- Central Maine Health Care
- Community Health Coalitions:
 - Healthy Acadia
 - The Opportunity Alliance
 - Healthy Oxford Hills
 - AccessHealth
 - Healthy Communities of the Capital Area
 - Choose to Be Healthy Coalition
 - Healthy Androscoggin
 - Maine Network of Healthy Communities
- University of Southern Maine
- University of New England

- University of Maine Presque Isle
- University of Maine Augusta
- Husson University
- SNAP-Ed
- MCD Public Health
- Portland Public Health
- Bangor Public Health & Community Services

Eligibility criteria was anyone in Maine, aged 18 years and older, who identified as a public health employee or volunteer. The survey was open from May 24, 2022, to July 29, 2022.

DATA ANALYSIS

QUANTITATIVE DATA

The complete survey response dataset collected via SurveyMonkey was downloaded as an Excel file for processing and analysis. Pre-processing of the dataset occurred in Excel to format data for import to Stata Statistical Software (StataBE, version 17.0.107) for further statistical analysis. Summary statistics were generated for each response question. All figures were generated using Excel.

QUALITATIVE DATA

There were 3 optional survey questions for which participants could provide open-ended responses. Open-ended responses were copied from the SurveyMonkey export to Excel into a Word document, with a separate Word document generated for each open-ended question. Each Word document was uploaded to Atlas.TI web-based software for qualitative analysis.

After an initial reading of each survey response, using an iterative process, codes were created to capture and summarize general attitudes, thoughts, or feelings reflected in survey responses. These codes were then grouped into Code Groups for broader thematic analysis. Reports were then generated summarizing the frequency of occurrence of codes and code groups, providing a quantitative method for analyzing open-ended responses.

SURVEY RESULTS

A total of 249 unique responses from Maine public health professionals were collected.

DEMOGRAPHICS

Survey respondents self-reported demographic characteristics, including gender identity, race/ethnicity, age, and highest level of education.

- Nearly half of respondents were between the ages of 35 and 54 years (47.4%)
 - Those aged 35-44 years were the largest portion of respondents (28.4%).
- Most respondents were female (77.6%).
- Most respondents were white (83.8%).
- More than half of respondents reported having an advanced degree (53.0%).
 - 47.0% of respondents had a Master’s degree.
 - 6.0% of respondents had a Doctoral degree.

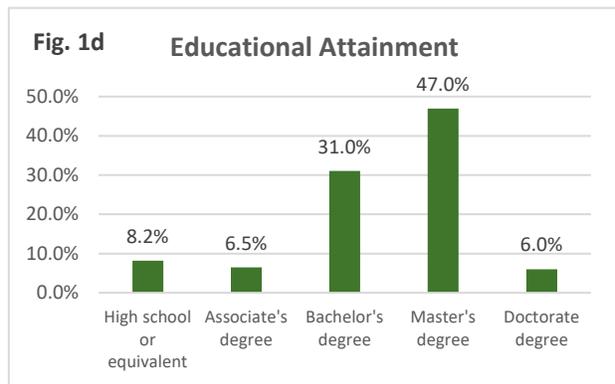
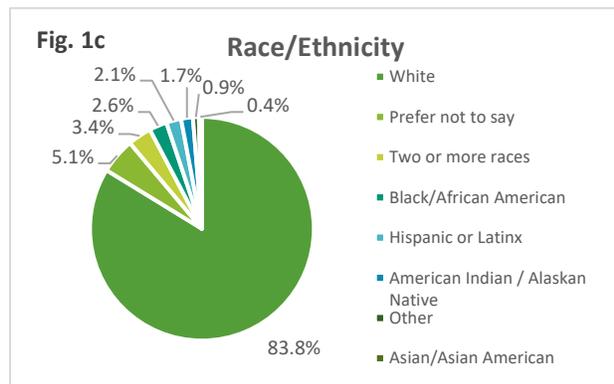
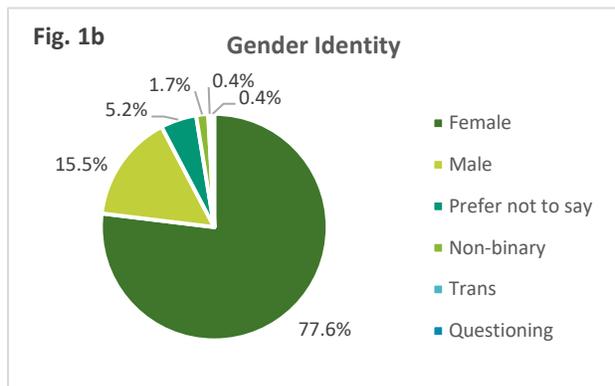
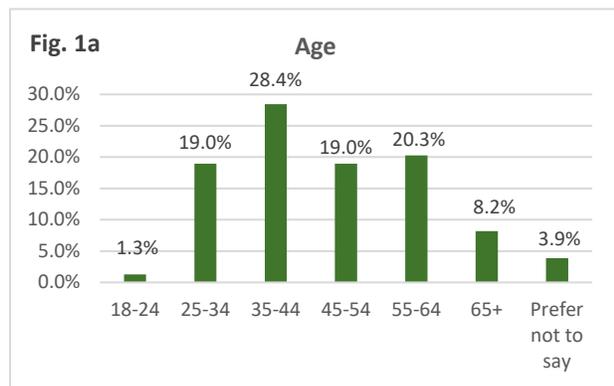


Figure 1(a-d): Maine public health workforce demographics. **1a**, Age (n=233); **1b**, Gender Identity (n=232); **1c**, Race/Ethnicity (n=234); **1d**, Educational Attainment (n=232).

WORKFORCE CHARACTERISTICS

WORK SETTING

Survey respondents were asked about their job status and job functions, including current work setting, localities served, funding, current employment status, role within their organization (i.e., supervisory status), and tenure in their current role, at their agency, and in public health overall.

- State government employees made up the largest portion of survey respondents (50.0%) followed by those from non-profit organizations (19.4%).

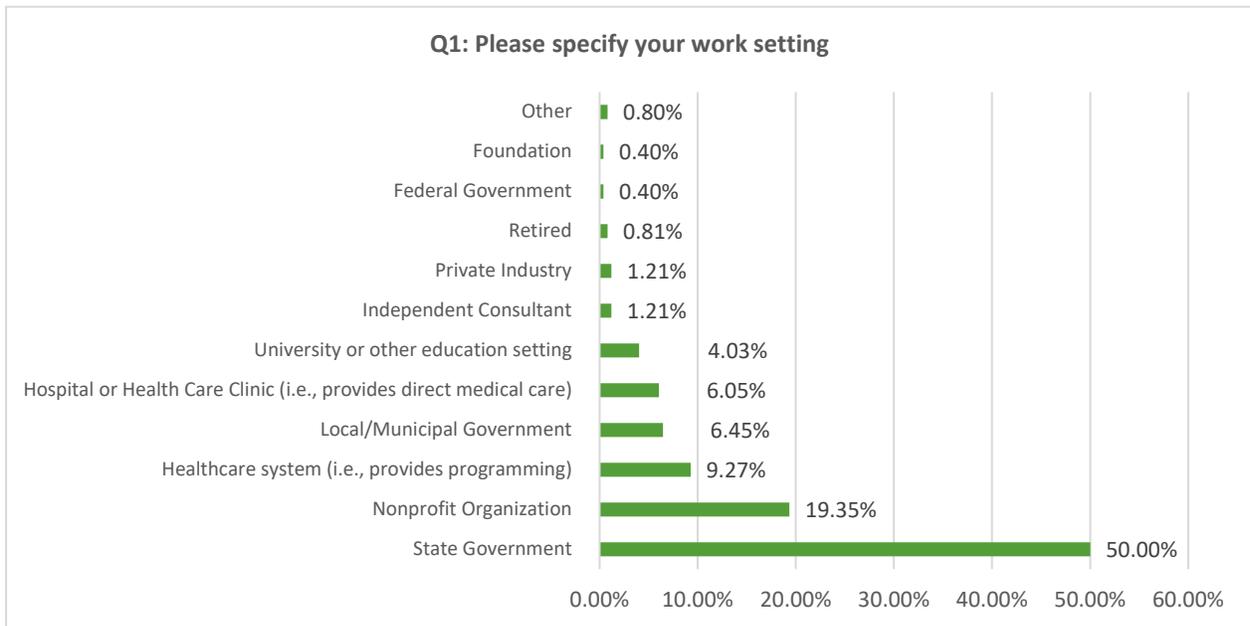


Figure 2: Work settings of Maine public health workforce survey respondents (n=248). Responses in the “other” category included volunteers. (n=2)

LOCALITIES SERVED

- More than half of the organizations represented by survey respondents fulfilled public health services at a statewide level (68.4%).
- 17.0% of respondents reported that their organizations serve 2 or more localities (rural, suburban, urban, statewide).

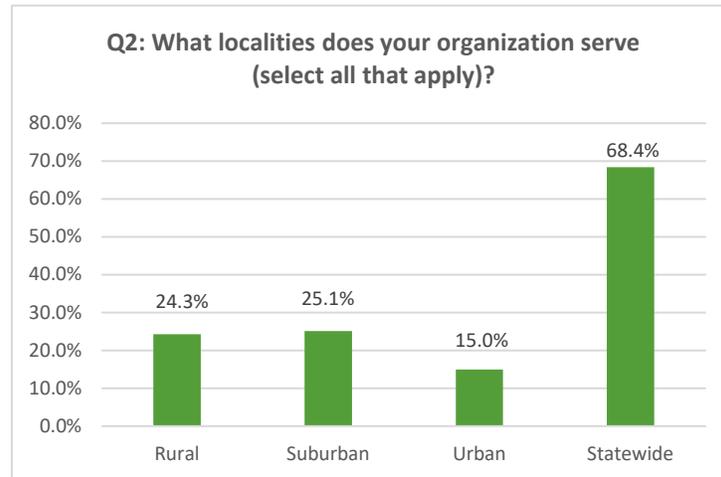


Figure 3: Localities served by Maine public health organizations. (n=247)

PUBLIC HEALTH FUNDING

- Most public health funding came from federal or state government grants.
 - 70.7% from federal government grants
 - 59.9% from state government grants
- Approximately one-fifth (21.1%) of public health funding came from philanthropic grants.
- “Other” funding sources included: non-profit operating dollars (n=1), municipal funds (n=4), taxpayer funding (n=5), special revenue accounts (n=1), licensing fees (n=3), general state funds (n=5), fees for services (n=1), tuition (n=3), funding through healthcare insurance reimbursements (n=3), and healthcare system operating budgets (n=3). Two (2) respondents were unsure of their organization’s funding and 2 respondents were volunteers.

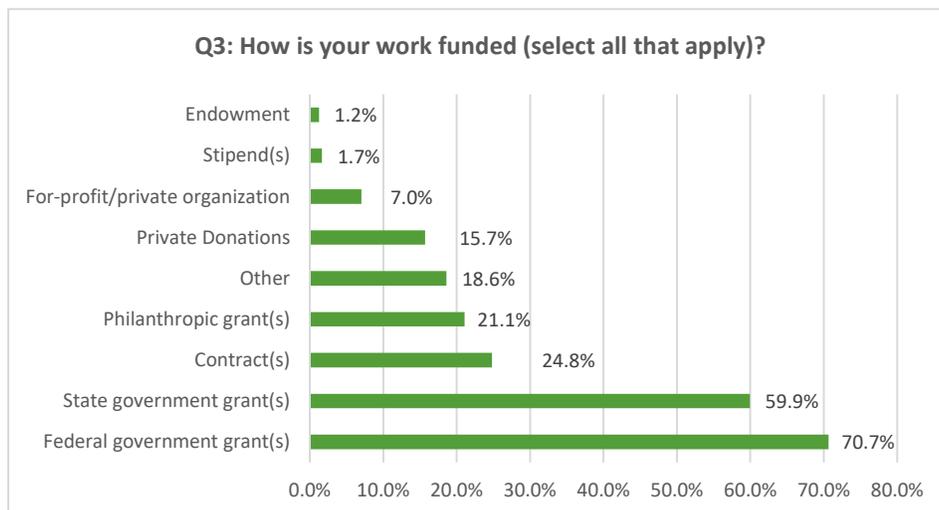


Figure 4: Funding sources for Maine public health organizations represented by survey respondents. (n=242)

CURRENT EMPLOYMENT

- Most respondents were full-time staff employed directly by their organizations (75.8%).
 - Additional employment statuses included: interns, compensated or not compensated (n=1), temporary staff employed directly by one's organization (n=3), temporary staff employed by an outside staffing agency (n=2), volunteers (n=2), and retirees (n=1).
- Slightly more than half of respondents worked in a non-supervisory role (54.4%).

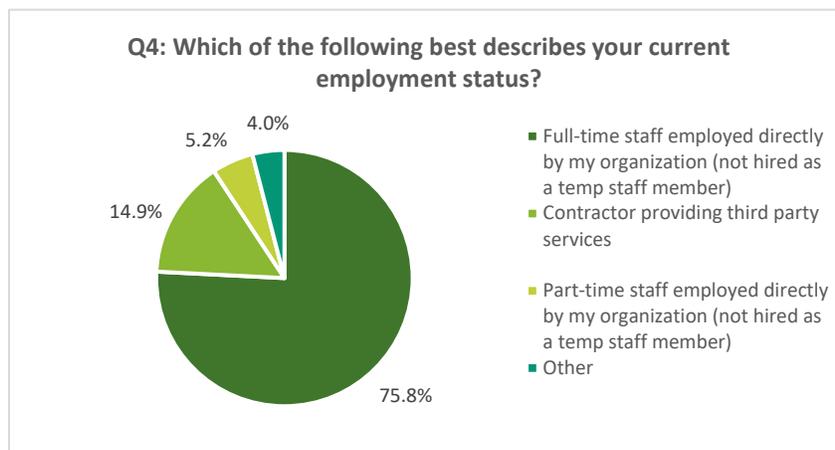


Figure 5: Current employment status of survey respondents at the time of survey completion (n=248). "Other" includes: Intern, compensated or not compensated; temporary staff employed directly by organization; and other (please specify). Of those who responded "other," 2 were volunteers and 1 was retired.



Figure 6: Organizational roles of survey respondents. (n=248)

- Most respondents had been in their current position and with their current organization for fewer than 5 years (in current position: 54.7%; with current organization: 68.8%).
- Approximately half of respondents had been in public health practice for fewer than 10 years (51.3%).

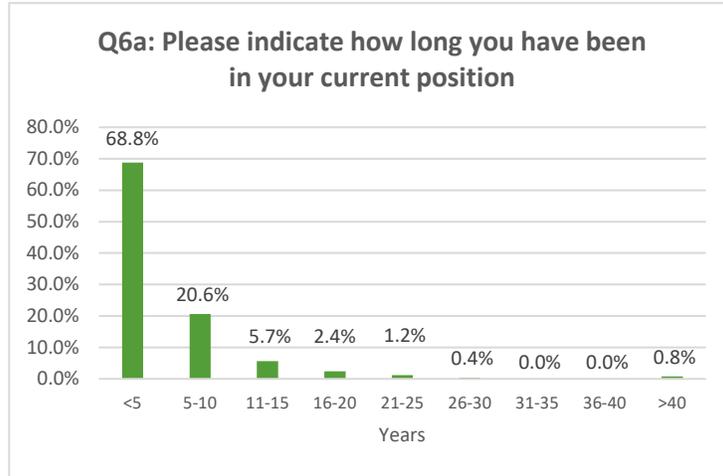


Figure 7: Time spent working in current position. (n=247)

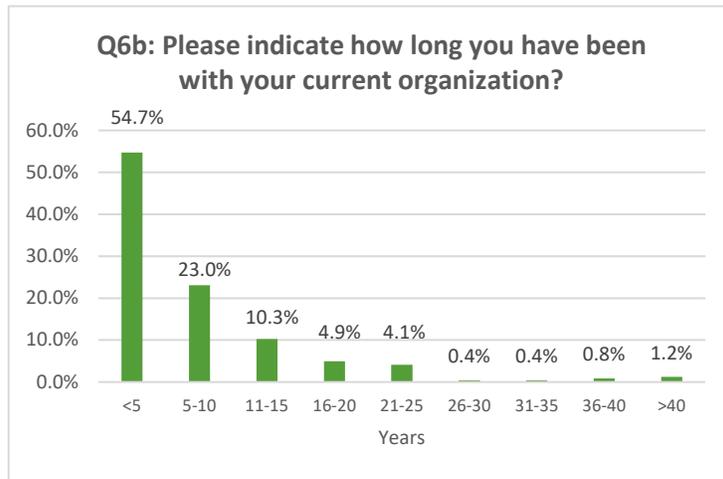


Figure 8: Time spent working with current organization. (n=243)

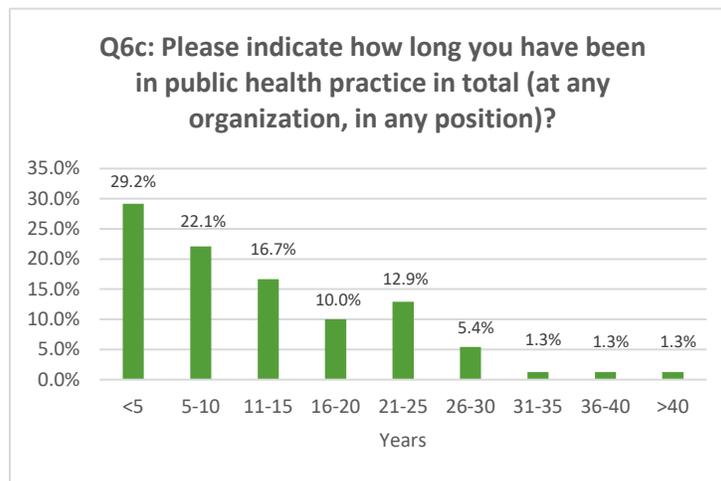


Figure 9: Time spent serving in public health practice in total. (n=240)

WORKPLACE ENVIRONMENT

Survey respondents were asked to rate their level of agreement on a 5-point Likert scale (1 to 5: Strongly Disagree, Disagree, Neither Agree nor Disagree, Agree, or Strongly Agree) with statements about their organizations, supervisors, and workplace overall. Statements captured information about the importance of the organization’s mission, efforts to support staff mental health and well-being; diversity, equity, and inclusion; professional development; and overall workplace culture. Responses are reported within these categories. In addition, respondents were asked to rate their overall satisfaction with their job, organization, pay, and job security on a 5-point Likert scale (1 to 5: Strongly Disagree, Disagree, Neither Agree nor Disagree, Agree, or Strongly Agree).

ORGANIZATIONAL MISSION

- Most survey respondents agreed or strongly agreed that:
 - Their organization’s missions and values were important to them (95.2%)
 - Their organization fulfills its missions and values (81.2%)
 - Their work contributes to the fulfillment of their organization’s missions and values (91.9%)

Table 1: Likert scale responses regarding perceptions of organization’s mission and values

	Strongly Disagree	Disagree	Neither Agree nor Disagree	Agree	Strongly Agree	N/A
My organization’s mission and values are important to me. (n=248)	0.8%	0.0%	4.0%	24.6%	70.6%	0.0%
My organization fulfills its mission and values. (n=248)	1.2%	4.0%	13.3%	42.7%	38.7%	0.0%
My work contributes to the fulfillment of my organization’s mission and values. (n=247)	0.8%	0.4%	6.5%	35.2%	57.1%	0.0%

DIVERSITY, EQUITY, & INCLUSION

- Most survey respondents agreed or strongly agreed that:
 - Their organization prioritizes diversity, equity, and inclusion (78.6%)
 - Their organization respects and supports cultural diversity (83.1%)
 - Their organization has policies in place for addressing harassment, bullying, and/or discrimination in the workplace (86.3%)
 - Their organization’s policies adequately address harassment, bullying, and/or discrimination in the workplace (71.1%)
 - Supervisors work well with employees of different backgrounds at their organization (78.7%)

Table 2: Likert scale responses regarding perceptions of diversity, equity, and inclusion efforts at organizational and supervisory levels

	Strongly Disagree	Disagree	Neither Agree nor Disagree	Agree	Strongly Agree	N/A
My organization prioritizes diversity, equity, and inclusion. (n=247)	1.2%	4.9%	15.0%	42.1%	36.8%	0.0%
My organization respects and supports cultural diversity. (n=245)	0.8%	1.6%	13.5%	44.5%	39.6%	0.0%
My organization has policies in place for addressing harassment, bullying, and/or discrimination in the workplace. (n=246)	1.2%	2.0%	7.7%	43.9%	43.1%	2.0%
My organization’s policies adequately address harassment, bullying, and/or discrimination in the workplace. (n=246)	2.0%	6.5%	14.2%	36.6%	35.0%	5.7%
Supervisors work well with employees of different backgrounds. (n=246)	0.8%	4.5%	11.4%	37.0%	42.3%	4.1%

MENTAL HEALTH

- Most survey respondents agreed or strongly agreed that:
 - Their organization supports mental health and wellbeing in the workplace (68.2%)
 - Their organization has policies in place for addressing mental health and well-being (71.8%)
 - Their supervisor encourages or models wellness behaviors (76.2%)
- While slightly more than half of respondents (56.1%) agreed or strongly agreed that their organization’s policies adequately address mental health and well-being, 22.6% of respondents disagreed with this statement.
- More than 10% of respondents disagreed or strongly disagreed that:
 - Their organization supports mental health and well-being in the workplace (10.1%)
 - Their organization has policies in place for addressing mental health and well-being (11.7%)

Table 3: Likert scale responses regarding perceptions of mental health efforts at organizational and supervisory levels

	Strongly Disagree	Disagree	Neither Agree nor Disagree	Agree	Strongly Agree	N/A
My organization supports mental health and wellbeing in the workplace. (n=246)	1.6%	8.5%	21.1%	32.9%	35.7%	0.0%
My organization has policies in place for addressing mental health and well-being (e.g., paid time off, nutrition/physical activity programs/reimbursements, mental health days). (n=246)	2.4%	9.4%	13.8%	42.3%	30.1%	2.0%
My organization's policies adequately address mental health and well-being (e.g., paid time off, nutrition/physical activity programs/reimbursements, mental health days). (n=246)	5.3%	17.5%	17.5%	33.7%	22.8%	3.3%
My supervisor encourages/models wellness behaviors (e.g., time off, following wellness activities and policies). (n=246)	3.3%	6.1%	10.2%	35.8%	41.1%	3.7%

PROFESSIONAL DEVELOPMENT

- Most respondents agreed or strongly agreed that:
 - Their organization provides opportunities for professional development (63.7%)
 - Their organization provides opportunities for advancement (51.2%)
 - Their organization provides opportunities to recognize employees for the work they do (63.3%)
 - Their supervisor recognizes employees for the work they do (77.0%)
 - Their supervisor provides them with opportunities to demonstrate leadership skills (74.2%)
 - They are satisfied with the opportunities they have to apply their talents and expertise (71.0%)
 - Employees have sufficient training to do their work (64.1%)
 - Employees learn from one another as they do their work (91.1%)
- More than one-fourth of respondents (26.6%) disagreed or strongly disagreed that their organizations provide opportunities for advancement.
- More than 10% of respondents disagreed or strongly disagreed that:
 - Employees have sufficient training to do their work (19.0%)
 - Their organization provides opportunities for professional development (17.3%)
 - Their organization provides opportunities to recognize employees for the work they do (16.5%)
 - They are satisfied with the opportunities they have to apply their talents and expertise (14.1%)

Table 4: Likert scale responses regarding perceptions of professional development efforts at organizational, supervisory, and employee levels

	Strongly Disagree	Disagree	Neither Agree nor Disagree	Agree	Strongly Agree	N/A
My organization provides opportunities for professional development. (n=247)	3.2%	14.2%	18.2%	39.7%	24.3%	0.4%
My organization provides opportunities for advancement. (n=248)	4.8%	21.8%	21.0%	35.9%	15.3%	1.2%
My organization provides opportunities to recognize employees for the work they do. (n=248)	4.4%	12.1%	20.2%	37.1%	26.2%	0.0%
My supervisor recognizes employees for the work they do. (n=247)	2.0%	6.9%	9.7%	27.9%	49.4%	4.1%
My supervisor provides me with opportunities to demonstrate my leadership skills. (n=246)	2.4%	6.9%	11.0%	26.4%	48.4%	4.9%
I am satisfied with the opportunities I have to apply my talents and expertise. (n=246)	3.3%	11.0%	14.2%	45.5%	26.0%	0.0%
Employees have sufficient training to do their work. (n=247)	2.8%	16.2%	15.8%	44.5%	19.8%	0.8%
Employees learn from one another as they do their work. (n=247)	0.4%	0.4%	6.9%	51.0%	40.5%	0.8%

WORKPLACE CULTURE

- Most respondents agreed or strongly agreed that:
 - Their strengths are valued at their workplace (79.4%)
 - Creativity and innovation are encouraged (67.7%)
 - They give their best effort at work most days (94.7%)
- Nearly 13% of respondents disagreed or strongly disagreed that creativity and innovation are encouraged.

Table 5: Likert scale responses regarding perceptions of workplace culture

	Strongly Disagree	Disagree	Neither Agree nor Disagree	Agree	Strongly Agree	N/A
My strengths are valued at my workplace. (n=246)	3.3%	5.7%	11.0%	43.5%	36.6%	0.0%
Creativity and innovation are encouraged. (n=246)	2.9%	10.2%	17.9%	38.2%	30.1%	0.8%
Communication between senior leadership and employees is good in my organization. (n=246)	4.5%	17.9%	19.5%	33.7%	24.0%	0.4%
My feedback will be taken seriously when given. (n=247)	2.8%	6.5%	15.0%	45.8%	29.6%	0.4%
I give my best effort at work most days. (n=247)	0.0%	0.0%	4.5%	40.5%	54.3%	0.8%

OVERALL SATISFACTION

Respondents were asked to rate their overall satisfaction with their job, organization, job security, and pay using a 5-point Likert scale (1 to 5: Very Unsatisfied, Unsatisfied, Neither Satisfied nor Unsatisfied, Satisfied, or Very Satisfied).

- Most respondents were satisfied or very satisfied with their:
 - Job (77.6%)
 - Organization (69.5%)
 - Job security (66.3%)
 - Pay (52.0%)
- Nearly one-third (31.7%) of respondents reported being unsatisfied or very unsatisfied with their pay.
- More than 10% of respondents were unsatisfied or very unsatisfied with their:
 - Organization (12.6%)
 - Job security (12.2%)
 - Job (11.4%)

Table 6: Likert scale responses regarding overall satisfaction with one’s job, organization, pay, and job security

	Very Unsatisfied	Unsatisfied	Neither Satisfied nor Unsatisfied	Satisfied	Very Satisfied	N/A
Job (n=246)	1.2%	10.2%	10.6%	43.5%	34.2%	0.4%
Organization (n=246)	3.3%	9.4%	17.9%	37.4%	32.1%	0.0%
Pay (n=246)	12.6%	19.1%	15.5%	39.0%	13.0%	0.8%
Job security (n=246)	4.5%	7.7%	20.3%	46.3%	19.9%	1.2%

Nearly three-quarters of respondents (73.3%) agreed or strongly agreed that they recommend their organization as a good place to work.

Table 7: Likert scale responses regarding overall perceptions of respondents’ workplace (from Q7)

	Very Unsatisfied	Unsatisfied	Neither Satisfied nor Unsatisfied	Satisfied	Very Satisfied	N/A
I recommend my organization as a good place to work. (n=247)	2.0%	4.5%	19.4%	38.9%	34.4%	0.8%

When asked to provide additional feedback about their work environment overall, respondents (n=50) most frequently described:

- Dissatisfaction with their organization (n=10)
 - Comments reflected insufficient opportunities for advancement (n=3), and inadequate organizational policies to address bullying, harassment and mental health in the workplace (n=4).
- Dissatisfaction with pay and/or benefits (n=9)
- Dissatisfaction with senior leadership (n=6)
 - Most responses (n=5) described feelings that leadership does not listen to employees.

- Increased workload (n=5)
- Negative impacts of COVID-19 (n=6)
 - Respondents noted decreased focus on non-COVID-19-related public health issues (n=3), COVID-19 “highlighting additional flaws” in the workplace (n=1), being disconnected from colleagues (n=1), and increased workloads due to COVID-19 (n=1).

Many respondents also provided positive feedback about their work environments and job satisfaction. Specifically, respondents described:

- Satisfaction with their workplace overall (n=5)
- Being happy with their team at work (n=2)
- Having good relationships with their supervisors (n=2)
- Having adequate paid time off (n=2)
- Positive workplace attitudes (n=1)
- Their organization values diversity (n=1)

IMPACTS OF COVID-19

COVID-19 RESPONSE

- Approximately 20% of respondents were not employed at their current organization prior to the beginning of the COVID-19 pandemic in March 2020.
- 64.5% of respondents served in a COVID-19 response role at any point from March 2020 until when they completed the survey.
 - Of those respondents, 11.0% were hired specifically to perform COVID-19 response.
 - 88.6% performed both their regular job responsibilities and those related to COVID-19.
 - Among those who performed both their regular job responsibilities and COVID-19-related responsibilities, 63.0% reported spending half their time or more on COVID-19 response.
 - At the time of survey completion, 42.6% were still performing both COVID-19-related tasks in addition to their regular job functions.

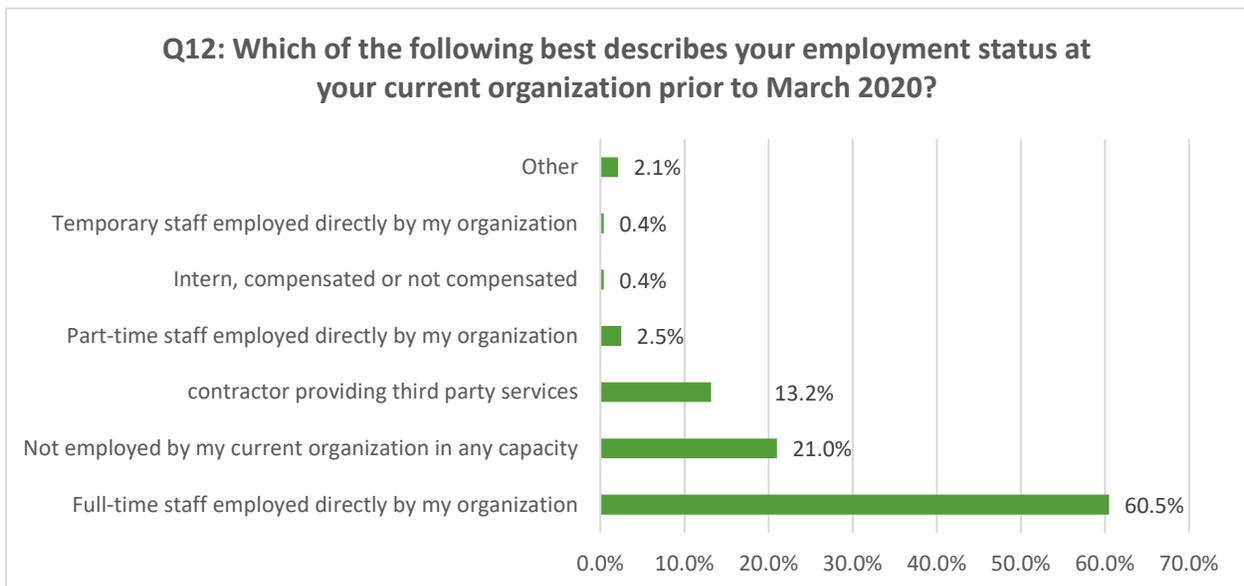


Figure 10: Current employment status of survey respondents at the time of survey completion (n=243). “Other” includes students (n=3) and volunteers (n=2).

Fig. 11 Q13: At any time from March 2020 to now, did you serve in a COVID-19 response role, either fully or partially?

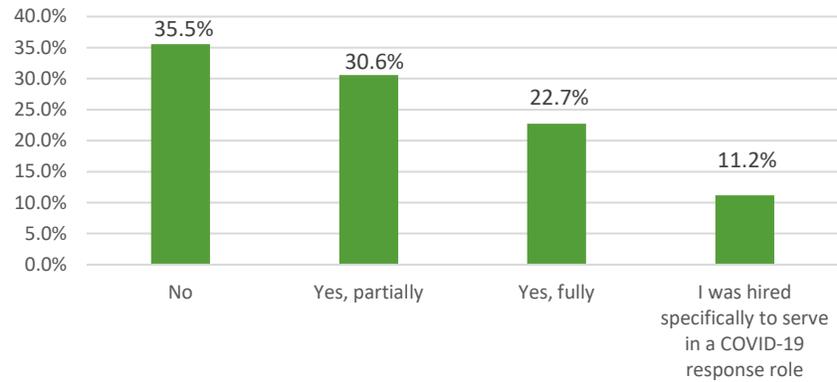


Fig. 12 Q14: Were you asked to perform both your regular job duties/responsibilities and tasks related to COVID-19 response?

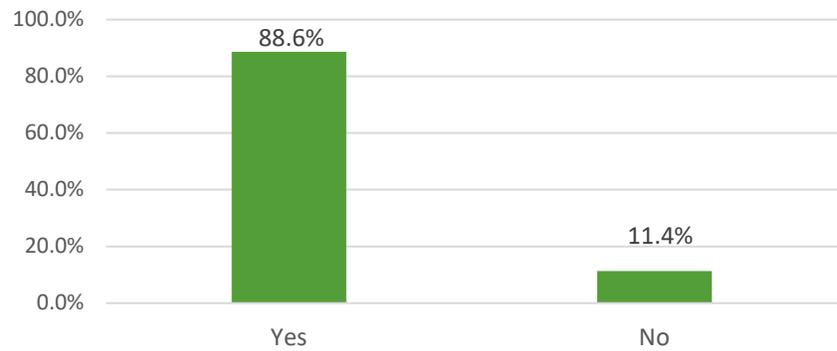
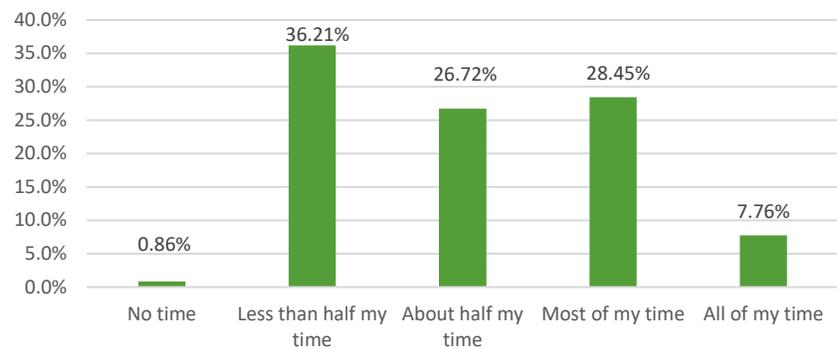
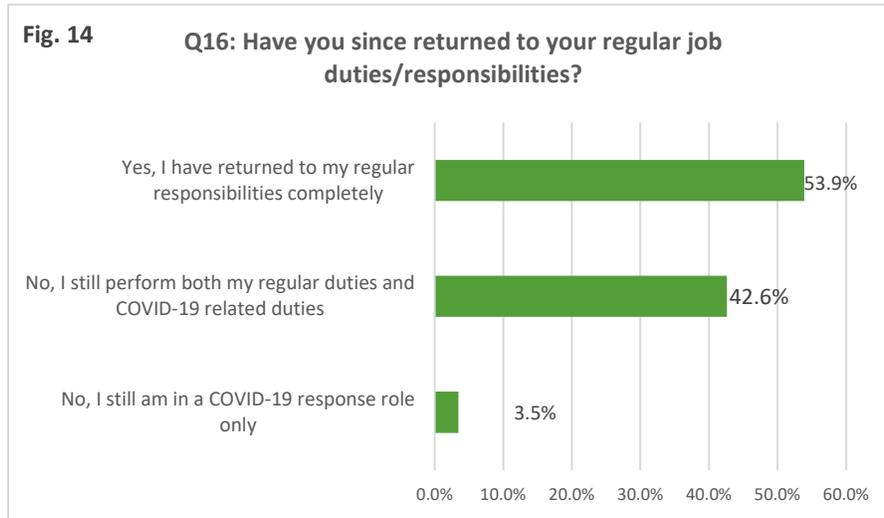


Fig. 13 Q15: Approximately how much time did you spend on COVID-19 responsibilities versus your regular job duties/responsibilities?





Figures 11-14: COVID-19 Response Efforts of Survey Respondents. **11**, COVID-19 response yes/no (n=242); **12**, Performing regular job tasks in addition to COVID-19- related tasks (n=132); **13**, Allocation of time to COVID-19 response (n=116); **14**, Return to regular job responsibilities (n=115).

Among those working from home during COVID-19, most respondents agreed or strongly agreed they:

- Received organizational support to transition to remote work (63.4%)
- Were able to transition quickly to remote work (71.8%)
- Were just as effective at their jobs working from home (75.5%)
- Were able to separate work and home when working from home (68.0%)
- Were able to feel connected to their co-workers (63.0%)

Table 8: Likert scale responses regarding perceptions of remote work during COVID-19

	Strongly Disagree	Disagree	Neither Agree nor Disagree	Agree	Strongly Agree	N/A
My organization provided support to help me transition to working from home. (n=238)	1.7%	5.9%	10.1%	34.0%	29.4%	18.9%
I was able to transition quickly to working from home. (n=238)	2.5%	2.1%	4.6%	32.4%	39.5%	18.9%
I can do my job just as effectively working at home. (n=237)	3.4%	5.1%	5.1%	21.5%	54.0%	11.0%
I am able to separate work and home (when working from home). (n=238)	1.7%	10.1%	9.7%	28.6%	39.5%	10.5%
When working from home I am able to feel connected to my coworkers. (n=238)	2.9%	10.1%	13.9%	36.6%	26.5%	10.1%
I felt safe returning to the worksite. (n=238)	6.3%	6.7%	15.6%	28.6%	21.4%	21.4%

COVID-19 AND MENTAL AND EMOTIONAL WELL-BEING

Survey respondents were asked a series of questions about their overall mental health and well-being at the time of survey completion, based on their experiences working during COVID-19. For questions about working during COVID-19, respondents were asked to rate their experiences on a 5-point Likert Scale (1 to 5: Strongly Disagree, Disagree, Neither Agree nor Disagree, Agree, Strongly Agree).

Approximately 4 out of 5 respondents rated their overall mental health as “good,” “very good,” or “excellent.”

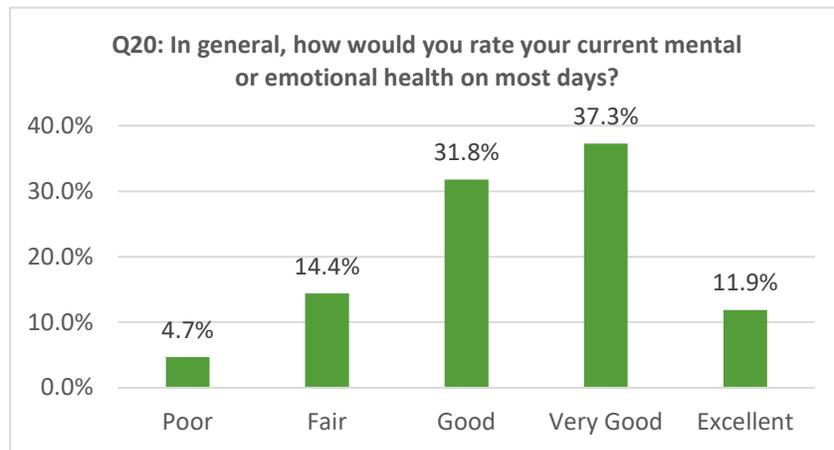


Figure 15: Overall mental health status of survey respondents. (n=236)

Regarding working during the COVID-19 pandemic:

- 42.4% of respondents agreed or strongly agreed that their work environment and/or workload felt less manageable during the pandemic.
- 45.1% disagreed or strongly disagreed that it became difficult to balance work and family/home obligations, while 34.6% agreed or strongly agreed.
- 21.1% reported the pandemic negatively impacted their economic status.
- Approximately 42.0% of respondents agreed or strongly agreed that the pandemic negatively impacted their mental health.
- 80.1% of respondents indicated they had not experienced discrimination.

Table 9: Likert scale responses regarding mental health and well-being during the COVID-19 pandemic

	Strongly Disagree	Disagree	Neither Agree nor Disagree	Agree	Strongly Agree	N/A
My work environment and/or workload felt less manageable. (n=236)	8.1%	25.0%	22.5%	26.7%	15.7%	2.1%
It became difficult to balance work and family/home obligations. (n=237)	10.6%	34.6%	17.7%	21.1%	13.5%	2.5%
I have experienced discrimination. (n=236)	42.4%	37.7%	11.4%	3.0%	4.7%	0.9%
It has negatively impacted my economic status. (n=237)	26.6%	34.6%	15.2%	11.8%	9.3%	2.5%
My overall mental health has been negatively impacted. (n=236)	13.6%	22.0%	21.6%	30.5%	11.4%	0.9%

Respondents were given the opportunity to provide additional comments about their overall work experiences throughout the pandemic. Among respondents that provided comments (n=94), they described their work experiences as:

- Challenging (n=11)
- Stressful (n=6)
- Tiring (n=5)
- Feeling under-valued (n=5)
- Rewarding (n=5)
- Lonely (n=4)
- Leading to burn-out (n=3)
- Exciting (n=3)
- Overwhelming (n=3)
- Productive (n=2)

In addition, comments frequently described challenges associated with working through COVID-19. These included: increased workloads (n=11), balancing parenting and working (n=10), difficulties connecting to colleagues (n=10), and negative mental health effects (n=5).

Regarding remote work, the most common theme among open-ended respondents was an overall positive experience working from home (n=26). Respondents specifically mentioned feeling more productive, efficient, or having more focus (n=12), improved work/life balance (n=6) feeling grateful to work from home (n=5), and feeling safer working from home (n=3).

THE FUTURE OF MAINE'S PUBLIC HEALTH WORKFORCE

Respondents were asked a series of questions about their future career intentions and the factors which influence their career decisions.

- When asked about intentions to leave their current organization within the next year, 20% of respondents intended to leave and 20% were unsure of their intentions. Of those who did intend to leave:
 - 39.1% planned to take a different public health job
 - 34.8% planned to retire or leave the workforce
 - 17.4% planned to take a job not in public health
 - 8.7% planned to pursue further education²
- Overall, approximately 71.5% of respondents intended to remain in the public health workforce.

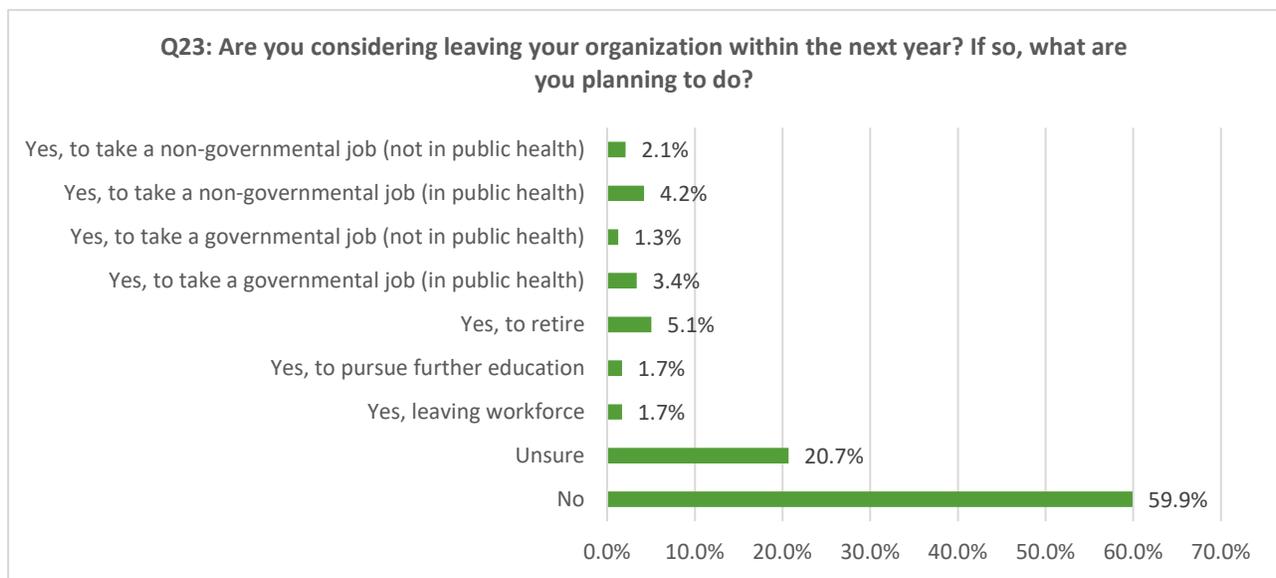


Figure 16: Next-year career intentions of survey respondents. (n=237)

² Follow-up questions for those intending to pursue further education were omitted due to low sample size (n=5).

More than three-quarters (78%) of respondents stated that the COVID-19 pandemic was not an influencing factor in their decision to stay or leave their current organization.

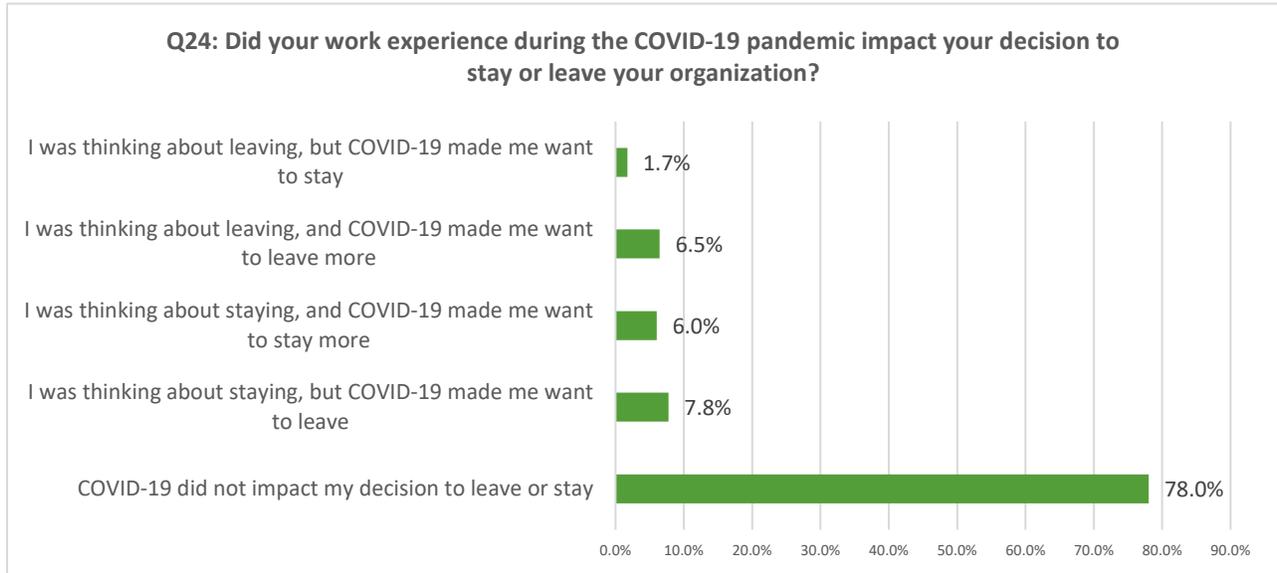


Figure 16: Impact of COVID-19 to next year career intentions of survey respondents. (n=232)

Of those who intended to leave their organizations, 41.4% had been considering leaving for 6-18 months, 41.4% for 3-6 months, and 17.2% for less than 3 months.



Figure 17: Time spent considering leaving one's organization for respondents with intentions to leave their organizations within the next year. (n=29)

Of those who intended to leave their organization due to retirement, 33.3% planned to retire in 2022, 33.3% in 2023, 16.7% in 2024, 8.3% in 2025, and 8.3% after 2027.

Respondents were asked to rate on a scale of 1 to 10 (with 1 being not important at all and 10 being very important), how important certain factors were to their decision to stay at their organization. Respondents who intended to leave their organization within the next year (n=29) were asked to rate on a scale of 1 to 10 (with 1 being not important at all and 10 being very important), how important these factors were to their decisions to leave.

- The factors that were rated as the most important reasons to stay at their organization were: job satisfaction, flexibility (e.g., flex hours/telework), and satisfaction with their supervisor.
- The factors that most influenced their decision to leave their organization were: pay, lack of opportunities for advancement, and better opportunities outside one’s organization.

Table 10: Average rating on a scale of 1 (not important at all) to 10 (very important) of factors most important to respondents’ decisions to stay at their current organizations

Q29: Reasons for Staying	Avg. Rating
Job satisfaction	8.55 (n=194)
Flexibility (e.g., flex hours/telework)	8.34 (n=193)
Satisfaction with your supervisor	8.14 (n=191)
Pride in the organization and its mission	7.78 (n=190)
Exciting and challenging work	7.71 (n=192)
Satisfaction with your organization's leadership	7.61 (n=195)
Job stability	7.55 (n=193)
Benefits (e.g., retirement contributions/pensions, health insurance)	7.53 (n=194)
Organizational climate/culture	7.42 (n=192)
Manageable stress	7.24 (n=192)
Support	7.05 (n=192)
Acknowledgment/recognition for your work (n=193)	7.00 (n=193)
Pay	6.85 (n=191)
Opportunities for advancement	6.21 (n=192)
Training opportunities	6.10 (n=192)
Mentorship opportunities	4.70 (n=182)
Unsatisfactory opportunities outside your organization	4.34 (n=164)

Table 11: Average rating on a scale of 1 (not important at all) to 10 (very important) of factors most important to respondents' decisions to leave their current organization

Q30: Reasons for Leaving	Avg. Rating
Pay	8.08 (n=26)
Lack of opportunities for advancement	7.78 (n=27)
Better opportunities outside your organization	7.64 (n=28)
Job satisfaction	7.41 (n=27)
Stress	6.63 (n=27)
Organizational climate/culture	6.44 (n=27)
Work overload/burnout	6.12 (n=26)
Lack of acknowledgement/recognition	5.41 (n=27)
Job instability (e.g., loss of funding reduction in force, layoffs)	5.27 (n=22)
Lack of support	5.17 (n=24)
Satisfaction with your supervisor	5.14 (n=22)
Reasons unrelated to my job (e.g., family obligations, health reasons, lack of affordable child-care options, moving, etc.)	4.79 (n=19)
Weak or weakening of benefits (e.g., retirement contributions/pensions, health insurance)	4.45 (n=20)
Lack of flexibility (e.g., flex hours/telework)	4.21 (n=24)
Lack of training	4.04 (n=26)
Leadership changeover	3.48 (n=23)
Retirement	2.74 (n=19)

CONCLUSIONS AND RECOMMENDATIONS

Data from other states' and national assessments show that, across the U.S., the COVID-19 pandemic presented substantial challenges to the country's public health workforce, many of whom contributed to the COVID-19 response, and maintained their regular job functions.^{1,3,4} Increased workloads, challenges to time demands – particularly for parents, and feelings of isolation resulting from the transition to remote work all had the potential to cause substantial detrimental effects to the workforce's overall mental health and well-being, job satisfaction, job performance, and job retention.^{1,3,4}

These Maine survey data suggest that for many in our state's public health workforce, the experience and impact of working during the COVID-19 pandemic was different than what happened in other places. Maine's public health workforce transitioned quickly to remote work and reported overall positive remote work experiences, including increased productivity, improved focus, and greater balance between work and personal demands. While some respondents reported negative experiences during COVID-19, and despite other indications that the pandemic had negative impacts to mental health, most of the respondents reported positive mental health status. Our findings suggest that job retention and the future workforce may not have been negatively impacted by the pandemic. Most respondents intended to remain in the public health field, and most in their current positions. Of those who did intend to leave their organizations, most stated the pandemic did not impact their intentions.

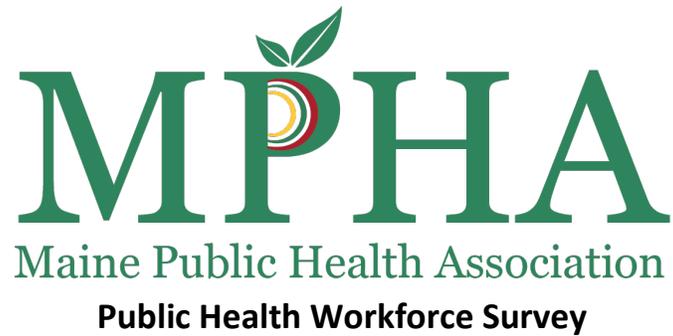
The factors that were cited as the most influential in employees' decisions to leave their organizations, including pay, lack of opportunities for advancement, and better opportunities elsewhere, were not indicative of pandemic-specific effects, but rather, general challenges in public health work settings. These factors also highlight opportunities for systems change and workforce development. The current survey findings suggest that focus areas for continued support at the organizational level may include: improvements to diversity, equity, and inclusion; support for mental health and wellness, including providing flexible working conditions and support for parents; opportunities for professional growth; and performing regular salary assessments to ensure employees are receiving fair pay. At the supervisory level, training opportunities for effective management skills may improve employee-supervisor relationships. Continued and improved support in these areas may address the needs identified through this survey and encourage even greater resilience in Maine's public health workforce.

Existing opportunities to help respond to some of these issues include trainings offered by Maine Public Association, New England Public Health Training Center, Maine Public Health Training Center, and other organizations, which also offer continuing education credits, and even a Certificate in Public Health. Every two years, the Maine Association of Nonprofits publishes a Nonprofit Compensation Report, which could be a helpful resource for employers in their salary assessments.

³ de Beaumont Foundation and Association of State and Territorial Health Officials. *Public Health Workforce Interests and Needs Survey: 2021 Dashboard*. August 3, 2022.

⁴ J Platt. *Iowa Mental Health Needs Assessment for the Public Health Workforce*. University of Iowa. April 14, 2022.

APPENDIX A: MAINE PUBLIC HEALTH WORKFORCE SURVEY INSTRUMENT



MPHA Instrument 2022

SURVEY SECTIONS

Section I: Workplace Environment

Section II: Impact of COVID-19

Section II.A: COVID-19 and Work Responsibilities

Section II.B: COVID-19 and Work Environment

Section II.C: COVID-19 and Mental Health

Section III: The Future of Public Health

Section IV: Workforce Demographics

MAINE PUBLIC HEALTH WORKFORCE SURVEY

About the Survey

The purpose of this survey is to develop a better understanding of the public health workforce in Maine, how the current landscape is impacting public health staff and volunteers, and their work, and what the future of the public health workforce looks like. The survey should take approximately 20 to 25 minutes to complete. Information collected from this survey will be used to inform efforts to support the public health workforce in Maine.

This survey is being conducted by Maine Public Health Association (MPHA) in collaboration with Maine Area Health Education Centers (Maine AHEC), Maine Public Health Training Center, and the Maine Resilience Building Network (MRBN).

This survey has been adapted from the Public Health Workforce Interests and Needs Survey (PH WINS) from the de Beaumont Foundation, and the Mental Health & Well-Being Assessment from the Institute for Public Health Practice at the University of Iowa College of Public Health and the Iowa Public Health Association.

Your participation is voluntary, and your responses will be confidential. If you have any questions about the survey or how the results may be used, please contact Heather Drake, Membership and Engagement Director, with Maine Public Health Association, at heather.drake@mainepublichealth.org.

Thank you for taking time to participate in the survey and inform this work. Respondents may choose to enter into a raffle drawing for free and discounted MPHA memberships, MPHA-branded water bottles, or MPHA-branded solar lights in appreciation of your participation.

SECTION I: WORKPLACE ENVIRONMENT

The following questions are about your overall workplace environment.

1. Please specify your work setting
 - Federal Government
 - State Government
 - Local/Municipal Government
 - Hospital or Health Care Clinic (i.e., provides direct medical care)
 - Healthcare System (i.e., provides programming)
 - Nonprofit Organization
 - Foundation
 - Independent Consultant
 - Private Industry
 - University or other education setting
 - Retired
 - Other (please specify): _____

2. What locality does your organization serve (Please select all that apply)?
 - Rural (a geographical area of less than 2,500 people)
 - Suburban (2,500 to 50,000 people)
 - Urban (50,000 or more people)
 - Statewide

3. How is your work funded? (Please select all that apply.)
 - Federal government grant(s)
 - State government grant(s)
 - Philanthropic grant(s)
 - Endowment
 - For-profit/private organization
 - Contract(s)
 - Stipend(s)
 - Private Donations
 - Other (please specify): _____

4. Which of the following best describes your current employment status?
 - Contractor providing third party services
 - Full-time staff employed directly by my organization (not hired as a temp staff member)
 - Part-time staff employed directly by my organization (not hired as a temp staff member)
 - Intern, compensated or not compensated

- Temporary staff employed directly by my organization
- Other (please specify): _____

5. What is your role within your organization?

- Non-supervisor
- Supervisor
- Manager
- Executive
- Other (please specify): _____

6. Please indicate how long you have been in each of the following (in years). Please round to the nearest year.

- In your current position _____
- With your current organization (in any position) _____
- In public health practice in total (at any organization, in any position) _____

7. Regarding your organization overall, please rate your level of agreement with the following statements.

	Strongly disagree 	Disagree 	Neither agree nor disagree 	Agree 	Strongly Agree 	Not Applicable
My organization's mission and values are important to me.						
My organization fulfills its mission and values.						
My work contributes to the fulfillment of my organization's mission and values.						
My organization prioritizes diversity, equity, and inclusion.						
My organization respects and supports cultural diversity.						
My organization supports mental health and wellbeing in the workplace.						

Communication between senior leadership and employees is good in my organization.						
My organization provides opportunities for professional development.						
My organization provides opportunities to recognize employees for the work they do.						
My organization provides opportunities for advancement.						
My organization has policies in place for addressing harassment, bullying, and/or discrimination in the workplace.						
My organization's policies adequately address harassment, bullying, and/or discrimination in the workplace						
My organization has policies in place for addressing mental health and well-being (e.g., paid time off, nutrition/physical activity programs/reimbursements, mental health days)?						
My organization's policies adequately address mental health and well-being (e.g., paid time off, nutrition/physical activity programs/reimbursements, mental health days).						
I recommend my organization as a good place to work.						

8. Regarding your supervisor, please rate your level of agreement with the following statements.

	Strongly disagree 	Disagree 	Neither agree nor disagree 	Agree 	Strongly Agree 	Not Applicable
My supervisor encourages/models wellness behaviors (e.g., time off, following wellness activities and policies).						
Supervisors work well with employees of different backgrounds.						
My supervisor and I have a good working relationship.						
My supervisor recognizes employees for the work they do.						
My supervisor provides me with opportunities to demonstrate my leadership skills.						

9. Regarding your general workplace environment and attitudes, please rate your level of agreement with the following statements.

	Strongly disagree 	Disagree 	Neither agree nor disagree 	Agree 	Strongly Agree 	Not Applicable
My feedback will be taken seriously when given.						
Employees have sufficient training to do their work.						
Employees learn from one another as they do their work.						

I am satisfied with the opportunities I have to apply my talents and expertise.						
My strengths are valued at my workplace.						
Creativity and innovation are encouraged.						
I give my best effort at work most days.						

10. Considering everything, how satisfied are you currently with:

	Very unsatisfied 	Unsatisfied 	Neither satisfied or unsatisfied 	Satisfied 	Very satisfied 
Your job?					
Your organization?					
Your pay?					
Your job security?					

11. Optional: Please provide additional comments about your workplace environment and/or level of job satisfaction.

SECTION II: IMPACTS OF COVID-19

Section II.A: COVID-19 and Work Responsibilities

The following questions ask about how COVID-19 has impacted your work responsibilities.

12. Which of the following best describes your employment status at your current organization **prior to March 2020**?

- Contractor providing third party services
- Full-time staff employed directly by my organization (not hired as a temp staff member)
- Part-time staff employed directly by my organization (not hired as a temp staff member)
- Intern, compensated or not compensated
- Temporary staff employed directly by my organization
- Not employed by my current organization in any capacity
- Other (please specify): _____

13. At any time from March 2020 to now, did you fully or partially serve in a COVID-19 response role?

- No
- Yes, partially
- Yes, fully
- I was hired specifically to serve in a COVID-19 response role

Skip Pattern: For those who answered any "yes" to Q15

14. Were you asked to perform both your regular job duties/responsibilities and tasks related to COVID-19 response?

- Yes
- No, I only performed COVID-19-related duties

Skip Pattern: For those who answered "yes" to Q16

15. Approximately how much time did you spend on COVID-19 responsibilities versus your regular job duties/responsibilities?

- I spent all my time on COVID-19 response
- I spent most of my time on COVID-19 response
- I spent about half of my time on COVID-19 response
- I spent less than half of my time on COVID-19 response
- I spent no time on COVID-19 response

16. Have you since returned to your regular job duties/responsibilities?

- No, I am still in a COVID-19 response role only
- No, I still perform both my regular duties and COVID-19 related duties
- Yes, I have returned to my regular responsibilities completely, and am no longer supporting the COVID-19 response

17. If you were hired for COVID, how many hours more than those you were hired for did you work, and if you weren't hired for COVID, but got pulled in, how many additional hours did you work than what you were hired for?

- _____ (# of hours to the nearest hour)

Section II.B: COVID-19 and Work Environment

The following questions ask about how COVID-19 has impacted your work environment.

18. In the context of COVID-19, please rate your agreement with the following:

	Strongly disagree 	Disagree 	Neither agree nor disagree 	Agree 	Strongly Agree 	Not Applicable
My organization provided support to help me transition to working from home.						
I was able to transition quickly to working from home.						
I can do my job just as effectively working at home.						
I am able to separate work and home (when working from home)						
When working from home, I am able to feel connected to my coworkers						
I felt safe returning to the worksite.						

19. Optional: Please provide additional comments about your work experience or working from home during the pandemic.

Section II.C: COVID-19 and Mental Health

The following questions ask about how COVID-19 has impacted your mental health.

20. In general, how would you rate your current mental or emotional health on most days?

- Excellent
- Very Good
- Good
- Fair
- Poor

21. Please rate your level of agreement with the following statements regarding how the COVID-19 pandemic has impacted your mental health and well-being:

	Strongly disagree 	Disagree 	Neither agree nor disagree 	Agree 	Strongly Agree 	Strongly disagree 
My work environment and/or workload felt less manageable.						
It became difficult to balance work and family/home obligations.						
I have experienced discrimination.						
It has negatively impacted my economic status.						
My overall mental health has been negatively impacted						

22. Overall, how would you describe your working experience during the COVID-19 pandemic?

SECTION III: THE FUTURE OF PUBLIC HEALTH

This section will ask you about your future public health career plans.

23. Are you considering leaving your organization within the next year? If so, what are you planning to do?

- No, I am not planning to leave
- Yes, to retire

- Yes, to pursue further education
- Yes, to take a governmental job (in public health)
- Yes, to take a governmental job (not in public health)
- Yes, to take a non-governmental job (in public health)
- Yes, to take a non-governmental job (not in public health)
- Yes, leaving the workforce
- Unsure

24. Did your work experience during the COVID-19 pandemic impact your decision to stay or leave your organization?

- I was thinking about staying, but COVID made me want to leave
- I was thinking about staying, and COVID made me want to stay more
- I was thinking about leaving, but COVID made me want to stay
- I was thinking about leaving, and COVID made me want to leave more
- COVID did not impact my decision to leave or stay

Skip Pattern: For those who answered any "yes" to Q27

25. For approximately how long have you been considering leaving your organization?

- Less than 3 months
- 3-6 months
- 6-18 months

Skip Pattern: For those who answered "Yes, to pursue further education" to Q27

26. What degree(s) are you planning to pursue?

- Associate's degree
- Bachelor's degree
- Master's degree
- Doctorate degree
- Certification
- I will be a non-degree seeking student

27. What are you planning to do after you finish your education?

- Return to my current organization
- Work in a governmental public health job
- Work in a non-governmental public health job
- I am not pursuing a career in public health
- I do not know

28. If a job is available, do you plan to stay in or return to Maine after you finish your education?

- Yes

- No
- I don't know

Skip Pattern: For those who answered "No, I am not planning to leave" to Q27

29. Please rate on a scale of 1 to 10 (with 1 being not important at all and 10 being very important) how important each of these reason(s) are to your decision to stay at your organization.

- _____ Acknowledgment/recognition for your work
- _____ Job satisfaction
- _____ Opportunities for advancement
- _____ Training opportunities
- _____ Satisfaction with your organization's leadership
- _____ Unsatisfactory opportunities outside your organization
- _____ Pay
- _____ Satisfaction with your supervisor
- _____ Manageable stress
- _____ Flexibility (e.g., flex hours/telework)
- _____ Benefits (e.g., retirement contributions/pensions, health insurance)
- _____ Pride in the organization and its mission
- _____ Exciting and challenging work
- _____ Organizational climate/culture
- _____ Mentorship opportunities
- _____ Support
- _____ Job stability
- _____ Other (please specify): _____

Skip Pattern: For those who answered any "yes" to Q27

30. Please rate on a scale of 1 to 10 (with 1 being not important at all and 10 being very important) how important each of these reason(s) are to your decision to leave your organization.

- _____ Lack of acknowledgment/recognition
- _____ Job satisfaction
- _____ Lack of opportunities for advancement
- _____ Lack of training
- _____ Leadership changeover
- _____ Better opportunities outside your organization
- _____ Pay
- _____ Retirement
- _____ Satisfaction with your supervisor
- _____ Stress
- _____ Lack of flexibility (e.g., flex hours/telework)

- _____ Weak or weakening of benefits (e.g., retirement contributions/pensions, health insurance)
- _____ Work overload/burnout
- _____ Organizational climate/culture
- _____ Lack of support
- _____ Job instability (e.g., loss of funding, reduction in force, layoffs)
- _____ Reasons unrelated to my job (e.g., family obligations, health reasons, lack of affordable child-care options, moving, etc.)
- _____ Other (please specify): _____

31. I am planning to retire in:

- 2022
- 2023
- 2024
- 2025
- 2026
- I am not planning to retire before 2027

SECTION IV: WORKFORCE DEMOGRAPHICS

This section will ask you about your general demographics. These questions will help us to describe the makeup of the current public health workforce in Maine. All questions are optional. All responses will be kept confidential and will only be used for the purpose of this survey.

32. What is your gender identity?

- Male
- Female
- Non-binary
- I would describe myself as: _____
- Prefer not to say

33. Please select how you most identify.

- Black or African American
- Hispanic or Latino
- Asian or Asian American
- American Indian or Alaska Native
- Native Hawaiian or other Pacific Islander
- White or Caucasian
- Two or more races
- I would describe myself as: _____
- Prefer not to say

34. What is your age in years?

- 18-24
- 25-34
- 45-44
- 45-54
- 55-64
- 65+
- Prefer not to say

35. Please indicate the highest degree/certificate you have attained.

- High school or equivalent
- Associate's degree
- Bachelor's degree
- Master's degree
- Doctorate degree

Thank you for your participation.

If you have any questions about the survey or how the results may be used, please contact Heather Drake, Membership & Engagement Director with Maine Public Health Association, at heather.drake@mainepublichealth.org.