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12/1/2021

COVID-19: Shining a Light on the Mental Health of Entertainment Workers

How the Stagehands of the
Entertainment World Handled the
Pandemic and What it says About the
Entertainment Industry

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For MBT and those who've left us too soon.

"Pray for the Dead.

Fight like hell for the living!"

-Mother Jones (1837-1930)

Table of Contents

Introduction:.....	3
Literature Review:.....	6
Mental Health and Work:	6
The Arts/Entertainment Industry and Mental Health:	9
COVID-19-19:.....	12
Entertainment Background:.....	15
Methods:	23
Findings:	28
Physical Wellbeing:.....	28
Mental Well-being:.....	31
Demographics:.....	36
Union/Labor Involvement:.....	39
Analysis:.....	40
Conclusion:	45
Sources Cited:	48
Appendix:.....	54

Introduction:

When imagining entertainment workers, many think of actors, directors and the producers behind the shows. But the stagehands and technicians are just as integral to the creation of entertainment as any other individual, yet commonly go unnoticed. By nature of their jobs, they are used to working in the shadows, the fruits of their labor seen without them actually ever being physically seen working. This invisibility has contributed to stagehands – and their needs – often being forgotten. It is estimated that 95% of the entertainment industry was shut down by the end of March 2020, with nearly one million workers facing unemployment because of COVID-19 (Maddaus et al., 2020). Coming from a typically turbulent industry, how were stagehands able to handle the pandemic? How has the well-being of entertainment workers changed in light of COVID-19? This paper seeks to understand how stagehand well-being has been impacted by COVID-19 and what this says about their mental health in non-pandemic times. Based on the below-discussed findings, this paper argues for the creation of new initiatives and programs to better address the needs of these unseen workers.

With stagehands, literally and figuratively, frequenting the behind-the-scenes areas of entertainment, their needs and concerns are frequently left unaddressed by the industry at large. What is unknown to many, both in and out of the industry, is that entertainment workers have one of the highest rates of suicide and suicidal ideation (*CDC Study*, 2020). Eynde et al. found that stagehands reported the highest levels of suicidal thoughts, ideations or actions, amongst the entire entertainment community, with nearly 50% of participants reporting having had experienced these issues (Eynde et al., 2015). To put this statistic in perspective, in 2018 the rates of suicidal ideation amongst adults in the United States was 4.3% (Yockey et al., 2021). This alone

shows that entertainment workers are currently experiencing something that is disproportionately affecting them when it comes to mental health. To best understand what that variable(s) could be I will ask workers to compare their current mental health with their mental health prior to COVID-19. This comparison allows stagehands to report how they assess their own levels of wellness while also highlighting if or how they have changed considering the pandemic.

In order to collect relevant data, an industry-based survey was disbursed, digitally, with 271 responses submitted and 6 secondary interviews completed from voluntary respondents. These results were then compared to a 2019 study conducted by Behind the Scenes Mental Health and Suicide Prevention initiative (hereinafter referred to as BTS). The BTS data serves as an industry specific national baseline, with my survey responses creating a localized baseline to compare the mental health changes to. These changes were then compared to variables the respondents reported enduring during COVID-19 and those normally dealt with in non-COVID-19 times.

Findings showed that while the post COVID-19 feelings of stress, anxiety and depression were still well above the national average, a significant number of workers found some form of physical or mental betterment during the pandemic. Most workers reported at least an initial spike in anxiety and stress at the beginning of the pandemic, but for some workers, with the mandatory time off, they were able to make positive changes in their personal lives. They had time available for family, bettering their physical and/or mental health as well as time to readdress their previous work life balance. When asked to compare their levels of wellbeing pre-COVID-19 to during COVID-19, many reported that not dealing with the inherent stress of their normal jobs dramatically lowered their stress levels during COVID-19. While money, benefits and

insurance were common sources of concern, many respondents reported being able to take better care of themselves with the mandatory time off. Some were able to develop new, healthier habits; from eating better, exercising, to seeing a therapist or beginning new medication. These findings led to the conclusion that the demanding requirements of working in the entertainment industry can be detrimental in maintaining mental and physical health.

Working in the entertainment industry impacts every aspect of a workers' life. While workers' lives need to adapt to fit the chaotic nature of the industry, the industry itself is much less adapting. In many ways, a worker's life must revolve around work in order for them to succeed. With regards to the survey, it was commonly reported that individual's self-worth was directly tied to their internalized identities as stagehands, creating a void for many when the industry shut down. This inherent connection of their career to their identity shows that much of their life revolves around the requirements of the industry. With the high levels of time commitment and highly chaotic hiring structure, workers constantly need to make work the priority, creating this, at times, dangerous connection between work and self-worth. The pride and associated passion for the work led to a concussive fallout during the pandemic where many workers' entire identities were thrown into question without the ability to work.

It is my hope that using these findings, new and better designed programs can be put into play to better help workers with their mental health and general wellness. Many current assistance programs are designed externally and then applied to entertainment workers. With my findings, I hope to begin to create custom programs from the worker's perspective; to have programs designed for our members by what they themselves say they need. The industry's

workers need to have more time to cultivate their own personal self-worth and improve their quality of life.

Literature Review:

Navigating research about this topic presented a challenge. Mental health, organized labor, the entertainment industry, COVID-19; these issues represent specific variables that impact and compound upon each other. This creates a niche research area, largely unexplored. To have the best lens and background knowledge going forward, many of these topics needed to be explored separately to then be fit together appropriately.

Mental Health and Work:

For this research it is important to understand the relationship between mental health and work. Working provides the resources and the means to sustain other aspects of a person's life. Just as one's personal life affects them at work, one's work life also affects their personal life (Schnall et al., 2018). Economic insecurity in various forms has been found to be a direct variable in relation to the health of workers. Kopasker et al. reviewed economic data from the UK and found direct correlations between higher levels of economic insecurity and a rise in negative effects on mental health (Kopasker et al., 2018). More specifically, job insecurity and job loss during the Covid-19 pandemic has been directly tied to an increase in mental health issues. Ganson et al. shows that young adults who experienced job loss or job insecurity due to the pandemic are at a much higher risk of poor mental health than those not affected with the same insecurities (Ganson et al., 2021). Because job insecurity is inherent in the entertainment

industry, even under normal circumstances, so too are the mental health risks that go along with it.

Along with Economic insecurity, stress has frequently presented itself as a lead component affecting workers, on and off the job (Eynde et al., 2015; Jacobs, 2004; van den Eynde et al., 2016). More studies are being done to examine the relationship between job stressors and its effect on mental health. It was found that:

When stress becomes a prolonged or chronic experience, it can result in psychological *distress*, including generalized anxiety, burnout and depressive symptoms. Work-related stress can also be a factor in exacerbating pre-existing mental illnesses and may even precipitate clinically diagnosable symptoms of depression (Dobson and Schnall, 113).

When workers begin to internalize work or occupational stress there becomes an interconnection between their work and their personal lives. It has also been shown that the stigma that comes with mental health issues directly plays into one's occupational health, forming a cyclical relationship where the job factors into the mental health struggles just as the mental health struggles factor into the job (Griep et al., 2021). With the demanding nature of the entertainment industry, the chances of this reciprocal relationship coming into play across the industry are very high.

As workers look for better conditions, they frequently look to unions and organized labor. Organized labor and unions, as a whole, have not always had the best relationship with mental health professionals, and for decades, had no relationship at all (Wiggins et al., 1984). For years, unions frequently saw psychologists as representatives of management (Lott, 2014). This, however, began to change in the 1980's and continues to improve today. Union health coverage

soon became some of the first to include mental health coverage in their insurance policies (Gross et al., 2018). This progress, while steadily moving forward, has been a slow process as culture, as a whole, has been resistant to embracing mental health as a true medical issue, coupled with the country's resistance to discuss class and labor issues (Woodall et al., 2010). The International Alliance of Theatrical Stage Employees, Theatrical Protectorate Union (I.A.T.S.E, T.P.U.), Local One, currently has a certified therapist on staff with their Welfare Fund office. Here, they aid with not only mental health resources but general support with any medical insurance needs; finding specialists, changing doctors, claims issues, etc. Outside of this, mental health has been slow to garner open negotiation support as it can be seen as more of a private issue and less a labor issue.¹

Mohseni-Cheraghloo shows that suicide rates drop in better labor market situations while Wels shows that even partial employment at a Union connected employer shows to lead to better health than non-union related employment (Mohseni-Cheraghloo, 2013; Wels, 2018). With many entertainment workers being unionized or at least having worked under union contracts, this needs to be considered when addressing the respondents access to resources and support. Any initiatives that come out of this research will need to be aware of resource discrepancies between union and non-union workers.

Additionally, certain job attributes that are frequently experienced by stagehands, such as longer working hours, have also been found to have a direct negative effect on workers' health. Bannai and Tamakoshi analyzed a series of studies, across multiple fields, looking into the

¹ Paraphrased from an anonymous interview

cumulative physical and mental health affects long hours have on workers. It was found conclusively across all involved studies that long working hours (defined as longer than 8 hours in a day or more than 40 hours in a week) were tied to increased risk of anxiety, depression, cognitive impairment, as well as metabolic issues, circulatory disease, and more (Bannai & Tamakoshi, 2014). It is exceedingly common for stagehands, for example, to work anywhere from 60-80+ hours in a work week depending on their position, thus putting them at incredibly higher risks for these health issues.

The Arts/Entertainment Industry and Mental Health:

Examining the arts and its relationship with mental health also plays a vital role in best understanding current research. The arts and entertainment fields are often looked at for their impact on the mental health of the larger population. Studies have shown that watching entertainment and “consumption of culture” can lead to positive mental health effects (Tubadji, 2021). What is less well-researched, is the effect that the production of entertainment has on it’s workers. These studies were few and far between outside of Eynde et al.’s work.

While academic, peer reviewed sources are limited, more informal studies are being done around the world looking into mental health and entertainment. Behind the Scenes is a mental health and suicide prevention initiative that strives to better the mental wellbeing of all entertainment workers. In 2019 they conducted an industry wide survey looking into the self-reported mental health of entertainment workers. The study found high levels of anxiety and depression (91% and 82%, respectively) as well as staggeringly high levels of suicidal thoughts. (10% being the national United States average and 44% of the BTS survey respondents (Huneycutt, 2019). These statistics provide a vital comparison for a pre-COVID-19 data source as

compared to my current data which was collected during the summer of 2021, during the pandemic.

Other informal studies have showed the mental health issues entertainment workers in other countries are facing. Entertainment workers in the UK reported similar issues as reported in the Eynde et al.'s Australian study; however general physical health was reportedly higher with lower rates of drug and alcohol abuse and a greatly reduced percentage of participants being smokers (Hemley, 2015). This highlights cultural differences and availability of support resources, while also showing that the industry across borders can cause similar mental health issues regardless of physical health.

Actors and performers are often in the spotlight and when talking about mental health research, this is no exception. When a celebrity becomes more open about their struggles or falls victim to poor mental health, discussion and resources circulate briefly before again becoming taboo. When Spalding Gray went missing in 2004, the struggles of actors and their chaotic schedules was highlighted in Backstage magazine (Jacobs, 2004). In recent years, the suicides of Chris Cornell, Chester Bennington, Avicii, Anthony Bourdain, Kate Spade, and dozens more have all brought the struggles of mental illness to the forefront of the public eye but with limited lasting effects. Zexin calls for the media to keep mental health in its purview full time, and not just when tragedy strikes. The highlighting when “relevant” creates a romanticization of suicide which is counter-productive to actually helping those struggling (Zexin, 2013).

In the United States, we have an organization known as the Actors’ Fund which shares resources and support services for all workers in the entertainment field. It has created

entertainment based affordable housing programs, later in life care facilities for retired entertainment workers, economic and financial support resources, workshops as well as mental health services (The Actors Fund, 2021). Over the past 20 years, other countries have created or expanded similar organizations including Entertainment Assist in Australia, Film & TV Charity in the UK (formerly the CTBF, specifically for filmed entertainment workers as opposed to live entertainment workers), the Mental Health Arts Festival and the Time4Change Mental health Charter in Scotland, amongst others (Mitchell, 2019). These resources are now joining Behind the Scenes in conducting their own research in hopes of bettering mental health conditions for entertainment workers.

More locally, Local One has begun to work toward better mental health resources for our members. Five years ago, I wrote a petition asking my union to investigate increasing the number of psychiatrists in-network that also participated in talk therapy as many members, including myself had been struggling with finding one. Within the year a full investigation was done through our insurer at the time, AETNA, and more psychiatrists were going to be contacted by AETNA in the coming months. 2 years after this our local hired a full-time certified therapist to the staff of the Local One Wellness Fund.

While the entertainment industry is still very much a white, male dominated industry, it is growing more diverse every day (IATSE D.E.I. Committee, 2021). This creates the need to be aware of how the workers in the minority populations (women, members of the LGBTQIA+ community, people of color, etc.) might be dealing with these issues differently. Multiple studies looking at mental health and labor relationships, however, seem to concentrate on male workers and their relationship to their jobs while discrediting women workers in similar fields. Wang et

al. goes as far as to propose that female workers are more likely to stress about their roles at home even if working in similar or worse environments as their male counterparts (Wang et al., 2008). While the putative findings are supported by their data, I find this study and others (Roche et al., 2016; Wang et al., 2008; Wels, 2018, 2020) somewhat problematic as it feels their methods and analysis are flawed with regards to these gendered separations. Gender and sex seem to be used interchangeably, with no reporting on the breakdown of primary care, income or home demographics being considered. This leads me to question the intersectionality of the current research. To the extent that women are more likely to be stressed about homelife, does that tell us anything about women and how they relate to work, or does it merely tell us that domestic burdens are disproportionately placed on women on top of their vocational load? Given that personal demographics and history play a direct role in all forms of wellness, the conflating of these specifics shows an even broader research gap than had been found up until these points. All this considered, it was clear that it was important to look for representation from across different demographic groups to best understand the situation different entertainment workers might be facing.

COVID-19:

In addition to the entertainment-specific variables, there are the variables brought on by COVID-19. Disasters and pandemics have long been contributors to declines in physical and mental health. It is estimated that 13-19% of the US population will experience a disaster in their lifetime (Kessler et al., 1995). COVID-19 and other pandemics only add to these numbers. When addressing COVID-19's impact on mental health, there is a decent amount of overlap with previously discussed findings. COVID-19 caused a massive rise in unemployment and job

insecurity across numerous industries and thus directly caused the rise in reported mental health issues (Aguiar-Quintana et al., 2021; Kawohl & Nordt, 2020; Kumar & Nayar, 2021). In addition to job insecurity, shortfalls in social and cultural support services also add to the decline in mental health (Chen, 2020). Even just the fear of Covid and its associated consequences has been found to increase anxiety, stress and contribute to a decline in mental health (Han et al., 2021). The secondary health effects of COVID-19 and pandemics in general have been routinely downplayed. These secondary stressors can still cause massive health effects that, being underestimated, are causing a lag in treatment and appropriate coping methods (Ornell et al., 2020). This delayed treatment compounds the already difficult path of seeking treatment from mental health professionals.

Some studies have started to look at what about COVID-19 has made it as impactful on our mental health as it is (Rajkumar, 2020). Some studies suggest that it is the relationship between stress and social interactions. “Social touch” and social interactions are one of the leading ways to cope with cultural stressors. However, given the isolating nature of COVID-19, these beneficial effects were out of reach for many, leading to a compounding effect on our stress levels (Dagnino-Subiabre, 2022). Other studies have shown that physical activity is a strong coping mechanism for stress, but the availability to be physically active in the time of COVID-19 seems to vary greatly depending on personal circumstance. Pre-COVID-19 activity levels and economic stability seem to play directly into maintaining activity levels during COVID-19 (Grocke-Dewey et al., 2021). In many of these studies, addressing how symptoms of mental health issues are categorized is also important. For example, some workers would attribute being tired and lethargic to being over worked, while others might put it under a symptom of their stress or

depression levels (Han et al., 2021; Kumar & Nayar, 2021; Ornell et al., 2020). For entertainment workers this becomes a compounding issue where much of our physical activity comes from work, so losing that over the pandemic, plus the lack of income compounds upon each other. Given these studies, I expect to find reduced levels of activity, increased social isolation and decreased mental health for entertainment workers during COVID-19.

Current research shows that the interplay between work stability, economic insecurity and cultural stressors can compound upon each other to lead to massive declines in mental health. COVID-19 has compounded multiple known variables that contribute to poor mental health into one larger event, bringing a lot of these issues to the forefront of today. Going forward studies should look at whether having these issues in the public eye for a prolonged period of time actually has any lasting effects, or like with other smaller media-based initiatives, the messaging falls into the background until another newsworthy event happens.

There is a large lack of knowledge about the entertainment industry as a whole, for all workers, actors, creatives and the technical staff especially. The entertainment industry, as highly specialized as it is, also involves a massively ranged spectrum of workers, all of which face different stressors and struggles. Some common themes however are the long hours, job instability and toxic aspects of the industry subculture (van den Eynde et al., 2016). Expanding upon these known struggles and digging deeper into the subculture of the industry would be ultimately eye opening for a better understanding of entertainment workers and their wellbeing.

Given the strong relationship between work and mental health, I hope to explore the interplay between the entertainment-specific conditions and their impact on their workers.

While many of these studies addressed one or two variables in the workplace and its effect on mental health, entertainment workers are subject to the vast majority of variables addressed. This all then raises the question, how do these all apply to entertainment workers? Using Eynde et al.'s work as a baseline, I hope to expand the understanding of mental health and the variables that come into play for entertainment workers.

Entertainment Industry Background:

The entertainment industry is vastly different from many other fields, which makes it problematic for non-industry professionals to accurately examine. Below is an introductory breakdown of basic entertainment industry standards as they apply to this research. The information is specifically from a live entertainment/theatrical perspective. Film, TV, and new media all have their eccentricities as compared to live entertainment, but some commonalities still apply.

The entertainment industry is hyper-interdisciplinary and no one worker knows most, if any, aspects of another's craft. On one production, there can be upwards of 12-15 different departments working backstage concurrently. Many of these positions cannot be covered by someone in another area of expertise. Simultaneously, all these departments depend on the others to continue progressing in the production process. If just one job cannot be done at the appropriate time, an entire production can grind to a halt. This leads to gratuitous amounts of stress on workers to never miss work, nor take time off; an outside commitment of one individual

can put a halt to 50 other people's work. This leads to gratuitous amounts of stress on workers to never miss a cue, never miss a call², nor take time off.

Along these lines, few entertainment workers have conventional sick or personal time. Conversely, if they do, they cannot take that time freely. Many union contracts have what is called, "vacation checks" where, instead of cumulating paid time off you can take as you need, once or twice a year, you are given a check worth a certain percentage of your general wages. This percentage varies by contract and is not guaranteed in a collective bargaining agreement. While this is an economic benefit, it does not offer the same relief as paid time off would. It still puts selfcare/life behind that of the paying job; forcing the worker to pick their priorities very carefully. If a doctor's appointment is needed, or childcare falls through, the future vacation check does not alleviate the time or pressure put on the worker.

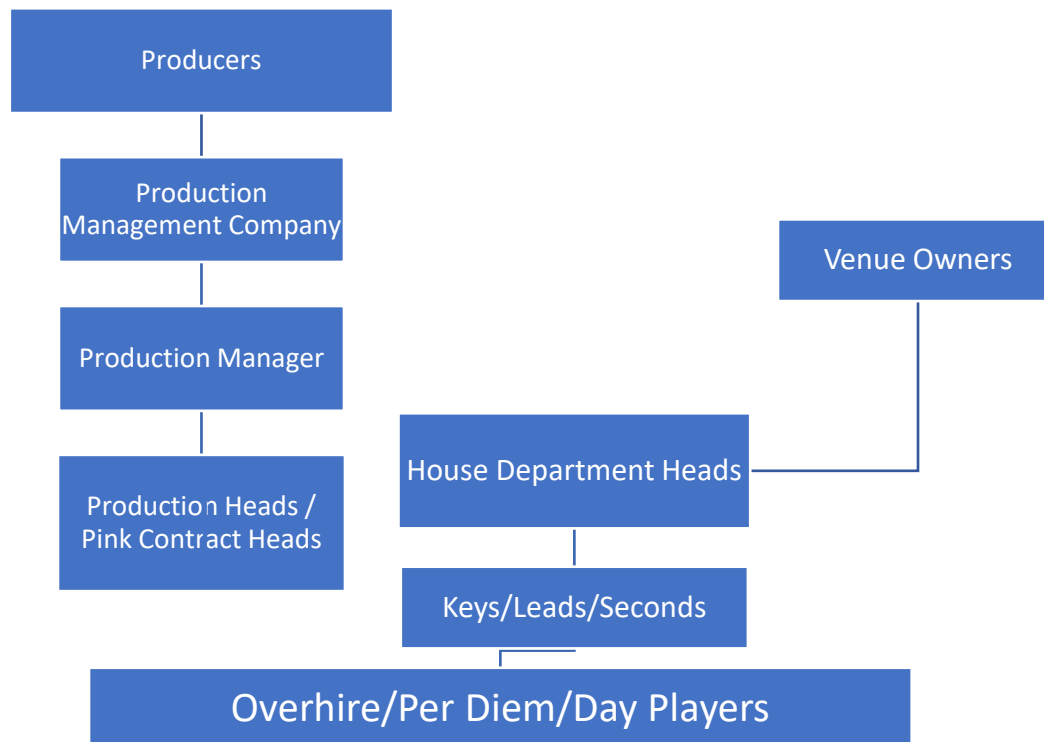
Beyond just the scheduling, the basic personnel structure of a theater is something that needs to be understood to fully grasp more of the industry's eccentricities. The hierarchy of entertainment productions can be confusing, specifically to outside or new workers. While some vary, most follow the same basic pattern, with specialized positions as needed. Table 1, page 16, shows the basic structure of a Broadway or live event hierarchy.

At the top of most productions, no matter the kind, is the producer. They are the ones paying for most of the production, or at least representing those paying. They make a lot of the final calls when it comes to expenses and creative choices. They then hire a production company to oversee the logistics of getting the production going. This production company supplies

² The term "call" is used as the term "shift" is commonly used. It means a designated time which you are called to work for "X" period of time.

production managers, production assistants and at times, some of the other bureaucratic support like HR, payroll, etc. Or those items can fall to the owners of the space the show/production is going into. It is fairly common that there is no HR department or worker relations representative to go to for issues. If problems arise, the worker has to go through the powers that be to find the correct avenue to pursue a solution.

Table 1: Live Entertainment Hierarchy



The production company / production manager then hires outside department heads (for example Carpentry Head, or Master Electrician) who represent the production first and for most. The production department heads commonly have assistants with them that stay with the show full time. These production department heads are not inherently local to the locale of the venue, meaning if they are working in a union house, some sort of accommodation needs to be made

contractually. This led to the creation of what is called a “Pink Contract.” This is a contract that allows an outside union member permission to work within a local’s jurisdiction, but likely not under that locals contract. At the same time, specifically in New York City, Pink Contract workers are frequently also members of the greater NYC Locals, Local One or Local 4 in Brooklyn and Queens. This convolutes an already confusing dynamic where the same worker can be considered management in one building, but not in another.

It is common that producers do not own their own space, or if they do, they can (and frequently) rent it out to other productions when not in use. This means that whatever the production company does not support or take on, falls to the venue. The venue supplies what are called the “house department heads.” These are workers in a supervisory role that look out first and for most, for the protection of the venue. It is their job to make sure the production can happen while maintaining the space through the production process. They do assist in the process of the rental production, but their main goal is to keep the venue maintainable. They are also card holders for whatever the resident local is for the union. Most other workers that are needed on the show are considered local crew, or per diem workers. Any worker below a “Head” position will be hired by the venue department head.³ The production may have a say, but at the end of the day, the hiring or not of additional bodies falls to the local house head.

This structure is rarely ever explicitly explained to a worker. As with other fast-paced positions, much of the information workers gather over time comes on a “need to know” basis.

³ This assumes that the theater is departmentalized, meaning different crafts have different heads and labor numbers. Other smaller venues are not departmentalized and have one total number of workers allotted to it. In these venues there is generally one crew chief or “Master technician” who is responsible for the hiring. They are typically also card holders from the resident local, as normal department heads.

This means workers are not told that something is important until it is. Simultaneously, asking too many questions about this or other “need to know” pieces of information, can be seen as problematic. For many day players, coming into a new venue, they can be expected to work “neck down.” This is a term normally used to mean that a worker is there to be a body, a source of labor, and not to think too hard or make decisions. There are also positions called “pushers,” who are workers who help ferry the equipment from the trucks to their needed location. They literally push the equipment cases from position A to position B. While incredibly important to the work, pushers can be looked down upon and judged as they are “just pushing” and are commonly thought to be not as skilled as others. These are just some of the circumstances that can cause anxiety and stress for workers. Not only are they frequently going into new environments without much background information, they are also commonly lumped into a box that can be seen as less than other workers. These dynamics are hard to navigate even when a worker knows about them, let alone when they are new to the environment.

Hiring is another aspect of the entertainment industry that can negatively impact the health of entertainment workers. The venue department heads are allowed to hire or not anyone they see fit. In the entertainment industry, and especially in larger, older areas of the entertainment industry like New York, nepotism is fairly common. While taboo to talk about, it leads to further complicating an already hyper-political hiring structure. It is not unheard-of for union members to be ousted from a position because of the house head’s choice to hire family over others. “Good or bad, it’s just the business.”⁴ While seemingly extreme, it is just one

⁴ Paraphrased from an interview.

example of the complications that come with multigenerational stagehand families. House heads have the ability to use this hiring power to give newcomers a chance, or “to keep hiring their friends’ children and old poker buddies.”⁵

This leads to hiring issues when heads are accused of misogyny, homophobia, racism, etc. When problems like this occur, victims are encouraged to keep it within the union and not involve management. But depending on who the transgressor is in these situations, if they are another card holder for example, both the victim and the transgressor are due the same protection from the union. It is the union’s responsibility to represent all members to the best of its ability, guilty or not. Thus putting them against themselves at times. It also creates a massive power imbalance as those trying to get hired, frequently do not have the power to bring up these issues without repercussions. If they do, it can easily lead to them being blacklisted with both that venue and production company.

The complex dynamics of hiring serve as examples as to how the entertainment industry impacts worker’s mental health. New workers coming into the industry must jump over a multitude of hurdles just to get in the door, let alone get enough work to earn a union card. The current limitations in time off and hiring are some of the leading hindrances preventing women and lower economic groups from joining the union as many are unable to make the necessary financial and personal sacrifices required (IATSE D.E.I. Committee, n.d.).

Lengths of employment and number of employers are also common industry standards. For many live entertainment workers, they are hired and fired multiple times a week, sometimes

⁵ Paraphrased from an interview.

multiple times a day. They can have upwards of 30 employers in a year and still not be considered full time. This comes from the compartmentalized, commercial nature of a lot of the industry. Every show, production, theater, sometimes each department, can be on a different payroll, with a different contract, rate structure, etc. This constant ebb and flow of ever-changing employment makes it extremely difficult for workers to always know the benefits and conditions they are entitled to at any given workplace. Having workers who are less knowledgeable as to their contractual benefits puts the employers at an advantage, while the workers can be looked down upon for asking too many questions. Whether conscious or not this leads to workers being unable to effectively protect themselves against possibly predatory conditions.

A worker can get offered a week of work, but if one 4-hour call overlaps with a previous obligation, it could cost them that entire week. It creates constant tension between those hiring and those seeking to be hired. It is very much a first come, first booked situation. This creates additional tension between a worker's personal life and their career. If having fewer personal commitments makes you more desirable, the industry is reinforcing and rewarding those who prioritize work above all else.

This industry is also much more word-of-mouth and socially based when it comes to hiring. While there are some certifications that help with specialized work positions, like OSHA 30 certification, Rigging Certification, etc., for many positions it's more who you know and where physically you have worked that will make you more hireable. Resumes and cover letters are rarely used for many over hire/day worker positions; many places still hire people off of what is called "shaping." Shaping is when a worker arrives at a possible place of employment and seeks out a supervisor in their desired department and literally asks for a job. This can either be before a call

starts in hopes of someone already on the call not showing up, or that they have found themselves shorthanded. If not for a same day position, it can be in the hopes of “showing initiative” and making a good first impression toward future employment. These meetings can make or break your hiring potential in a new theater or venue. Again, practices such as this compound the already present tension for the worker. Whether trying to expand their network of venues or just break into the field, these workers are constantly having to navigate unknown waters as some sort of trial by fire.

In summary, with their work schedule being so uncontrollable and chaotic, it is incredibly difficult for workers to find the time for any sort of doctors’ appointments, therapy sessions, or even going to the bank or DMV. Many times, those working on location are unable to leave during meal breaks to get anything non-work related done. There is then the added pressure of being rewarded for having as few personal obligations as possible, which creates a worker who thrives only at the workplace. When other basic needs arise, this puts self-care at odds with their career. It creates a paradox where people need to work to have the financial means and insurance to take care of themselves, but their jobs prevent them from being able to have the time to do so.

One final aspect of the industry that is relevant to this research is the structure of benefit qualification. While qualifications vary local to local, many unions were forced to adjust their benefits in the face of COVID-19. During COVID-19, IATSE Local One, faced massive financial short falls as union dues plummeted. Local One was fortunate enough to have a 12-month emergency reserve which they managed to stretch to 20 months before they began to be in the black again. During this time, cuts were made wherever possible to preserve the longevity of the union. Many Unions were forced to cut medical benefits, many entirely (Fronstin & Woodbury, n.d.; Kaiser

Health News, 2020; Tsioulcas, 2020). Local One transitioned from a tier based medical system⁶ to a “recovery tier.” The requirements to qualify for the recovery tier, changed throughout the pandemic, adding to the confusion and stress on the workers. Initially the recovery tier was set at an income level of \$37,500 in 2020, but then to save the union money, it was changed to \$37,500 in 2020 with an additional minimum income of \$9,375 in the first quarter of 2021. This change meant that workers who had thought they qualified suddenly did not, leaving numerous workers suddenly without health coverage.

This recovery tier is the equivalent of the lowest normal tier in their coverage but is given to all members who qualified, regardless of previous type of coverage. This means that those who would have qualified for better insurance are now supplementing the welfare fund by paying more for less coverage. This then helps make up some of the difference for the lower dues being paid across the board. This was not well received and has been highly criticized by the rank and file. Other benefits were also cut including medical reimbursement, optical, and dental coverage. Officers also volunteered to take a percentage wage cut, with others taking secondary cuts as the pandemic progressed.

Methods:

With a base understanding of the live entertainment work environment and its chaotic nature, the need for mental health research is apparent. In developing my methodology, I constantly referred to Eynde et al. as a base. Firstly, they kept their research as anonymous as

⁶ Tier based medical benefits change based on the income of the worker. The higher the income, the better the benefits for the member.

possible. As the industry is very much “Who you know and how you know them,” keeping the personal identities of participants hidden was key, as well as their tiered based participation structure. They began their research with a survey, and then progressed to interviews as possible. These two phases were used directly in my research.

My anonymous research survey was sent out via social media and predominantly through email from IATSE Local One. Local One’s jurisdiction covers New York, Westchester, and Putnam Counties, as well as Nassau and Suffolk counties of Long Island. Workers generally reside in the tristate area (New York, New Jersey and Connecticut). I also posted and shared the survey through entertainment worker based facebook groups and attempted to involve multiple IATSE Locals in forwarding the information. IATSE Local One, being my home local, sent out the research survey directly to all its active and retired members.

The content of the survey was loosely based on Eynde et al. and adapted as needed for COVID-19. While many of their questions were about career trajectory and current working conditions, I shifted the survey design to relate more to the pre-COVID-19 industry and now. The questions I kept were based around work stressors, anxiety at work, coping techniques and wanted resources (Eynde et al., 2015). In terms of distribution, Local One was more than willing to participate in survey distribution (with a few requests, spoken of below.) All of the other locals either declined or failed to respond to my request to share the survey. This created a high concentration of New York City based participants, but not exclusively so. Other participants heard of it through word of mouth and seeing it posted elsewhere across social media.

The survey was hosted on Google Forms as it has settings which allow for completely anonymous participation. The survey was around 20 questions, including demographics. The questions ranged from asking about physical and mental health, both now, and pre-COVID-19, as well as what resources they felt were needed that they did not have, if they were concerned about friends or family members and how they agreed with several different statements. The survey concluded with a few basic optional demographic questions, as well as an opportunity for those interested to participate farther with an interview. This was the only time personal contact information was asked for. (Appendix table A, pages 54-61, shows the research survey.)

Those willing to participate farther were given the option to either take a more in depth, second survey or participate in a 30-minute interview. The interview was structured to let the participants talk about their lives and concerns currently, while trying to frame that in how it compared to their lives pre-COVID-19. Audio recording was taken for accuracy and transcription purposes, but the identities and contact information of the individuals was not kept beyond completing the interview. Within this report no individual participant will be referred to, and no names will be used. All participants will either be referred to as such or called a “responder/respondent.”

While the survey design was predominantly inspired by Eynde et al. and personalized for the industry, the survey was edited at the request of IATSE Local One. If they were to send out the survey, they wanted to make sure it would be well received and presented in such a way to garner more participation. Many of their edits were a “toning down” of academically heavy language as not to be off putting to our members as well as removing all explicit mention of diagnosable illnesses. This was out of concern that if some information did

get out, it could lead back to the members who completed the survey. The last request made was that all questions allow for a “write in” response, to allow members to all speak freely if they did not agree with the pre-written answers. Eventually, all requests were able to be accommodated without sacrificing of the survey content. In total, 271 responses were submitted with the survey with 82 respondents being willing to continue participation with a secondary survey or interview. Of those 82, 34 were contacted for follow up interviews and 6 were completed.

The planned analytical methods are qualitatively based to create descriptive statistics. Here, answers were coded and isolated into categories which could then be compared to other statistics found across the survey. Such categories include, symptoms of anxiety/stress or depression, aimlessness, isolation, etc. These codifying terms are assigned based on the verbiage and write-in answers of the participants. Some survey questions were structured to use predominantly a 5-option scale response (ex: very well, well, neutral, somewhat struggling, struggling), while others were predominantly write-in response based. This created the necessity to mix both qualitative and quantitative methods for analysis. The questions that were mostly answered with scale responses allowed for more numerical, quantitative analysis. The other write-in responses, as well as the interviews required more qualitative methods, looking for common themes. All trends and themes found were compared alongside the generated percentages to the 2019 survey data from BTS. Cross tabulations were used to compare answers across pre and post COVID-19.

Because physical and mental wellbeing directly influence each other, it is important to ask about both when conducting mental health research (Kessler et al., 1995). Many mental struggles such as depression, anxiety, and stress come with physical factors that can commonly

be over-looked. While those connections can be made by medical professionals, they are outside of the scope of this paper. For this reason, both physical and mental health questions were asked in the survey to try and isolate how the individuals attributed their current experiences. For example, some may attribute sleeplessness as a physical condition while others might attribute it to a mental one.

When researching mental health, one needs to be aware of the common cultural taboo that surrounds it. While this is slowly beginning to change, it is still common enough that many individuals may be reticent to participate in a mental health study. The predominant limitation in this research is that the participants are a convenience sample. I was unable to cast my survey far enough out beyond those that know me or know of me personally. The survey data, while informative, is less descriptive and less three-dimensional than the interviews. The interviews allowed for more open-ended responses, which highlight many of the findings from the survey data.

The data and descriptive analysis was then compared to the BTS mental health data survey from 2019. This data set was compiled prior to COVID-19 when the entertainment industry was functioning “normally.” This gives the ability to directly compare the prior findings to now. There are some aspects that limit the comparison, however. The 2019 data set had over 3,000 participants, with over 1,700 identifying as stagehands. Comparing studies in different participant classes is not ideal. However, as research in this area is as limited as it is, it is the best that could be done. The content of the BTS survey was not accessible prior to my research survey being distributed, so I was unable to use identical questions for direct comparison. Analytical comparisons would be done based on theme and rough statistics, as direct comparisons would

not be appropriate. In future research, a broader scope of survey distribution would be ideal with a much higher participation rate being the goal. Conducting the survey more broadly and could also help disperse some of the concerns as to “who knows who.”

Findings:

When addressing the mental health of entertainment workers in these pandemic times, it is important to understand the core themes, how they relate to each other and what relation they have to the workers’ health in non-COVID-19 times. The data showed a predictable spike in anxiety and depression symptoms early on. However, a surprising number of workers reported being able to better their mental and physical wellbeing due to the lack of work. These workers reporting being able to use the time to seek continued or being new medical treatment for both physical and mental needs. Numerous workers reported an inability to do these things while working typically due to the commitment needed to stay employed.

Physical Wellbeing:

As Kessler et al. stated, one’s physical health influences one’s mental health and vice versa (Kessler et al., 1995). The physical deterioration or improvement of one’s health can heighten or lessen one’s stress in other areas. With this in mind, the respondent’s physical health was addressed as well as their mental health. Most of the responses when talking about their physical health, revolved around being less active and having gained weight in COVID. Many responders stated in pre-COVID-19 times their normal work hours provided much of their physical activity, and without it, it was challenging for many of them to find other ways to be active. Many were also struggling to eat healthily. One responder stated that they were, “Not getting enough

exercise and eating poorly to feel good.” It was also reported that many have seen a direct loss in muscle strength from the lack of work, e.g., “Atrophied muscles usually used for load-ins...” One participant even commented that they have had to start physical therapy due to having lost so much muscle mass so quickly. Sleep issues and chronic fatigue were also commonly reported with the adverse physical changes.

Others showed a generalized worry about how they will physically be able to get back to work as things open back up: “Having gone from working 54-60 hr. work weeks, then to zero I'm a bit concerned about my health and ramping back up.” For some the negative physical changes has caused them to question if they can even go back to their previous jobs if they are offered: “Increase in weight and question if I physically can do the work in my job class.”

As stagehands often do, many of the responses were honest but toned with humor. Humor can be seen as a coping mechanism when under duress (Martin, 2001; Nezu et al., 1988). “As the Tin Man said, where’s my oil can.” “Morbidly Obese, way out of shape. But remembering that round is a shape.” Quotes like this reinforce the decline or poor health conditions many workers are currently facing during the pandemic.

Through all of this, 50.8% of responders classified their physical state as “well” or “very well” with 32% of responses stating they are “somewhat struggling” or “struggling.” In contrast in 2017 the New York City Department of Health and Mental Hygiene reported that 77% of New Yorkers assessed their physical health as being good or better while only 23% reported it being fair or poor (New York Department of Health and Mental Hygiene, 2017). When asked how this compared to pre-COVID-19, 76.5% said it is the same or worse than it was prior to COVID-19.

Regardless of their starting health status, this displays a staggering decline in physical health amongst entertainment workers during the pandemic.

Table 3 and 4: Physical Well-Being Statistics

How do you feel you are doing physically during the pandemic?		
Very Well	37	13.91%
Well	98	36.84%
Neutral	46	17.29%
Somewhat struggling	68	25.56%
Struggling	17	6.39%
Total	266	

How does this compare to how you were before the pandemic?		
Much Better Now	16	5.97%
Somewhat Better Now	47	17.54%
Same	79	29.48%
Somewhat Worse Now	87	32.46%
Much worse Now	39	14.55%
Total	268	

Nearly a quarter of participants, however, did report their physical well-being as being better than it was previously. When asked to write a few words as to how they were doing, 26 responders reported that COVID-19 gave them time to develop new, healthier habits. “Better lost weight and started to exercise with the free time;” “doing fine, COVID gave me the chance to rest up;” “managed healthy diet, sleep much more, have a regular hour for activities, have time to exercise, etc.” Others stated that the time off work was what has led them to be able to address previous injuries that are normally exacerbated by working. This highlights that physical self-care can be difficult to manage affectively in normal industry times.

Mental Well-being:

The overwhelming majority of the responses to mental well-being-oriented questions reported high levels of anxiety and or stress with feelings of depression being reported nearly as much. Many of the respondents' answers circled around the lack of work and lack of economic stability. The economic questioning also led many to express concerns over insurance, bills, and other basic expenses. Some reported even having lost their homes in the pandemic due to finances. Even for those who had not "lost" their homes to bills, several reported that the fear surrounding their financial situations were similarly debilitating. One respondent wrote, "Grateful for what I have and what I've kept, fearful for all that can still be lost." Besides losing physical items or assets, the fear of losing their career was mentioned by many. Some feel they have lost their entire careers and are at a point of needing to completely start elsewhere in a different industry. These and other workers mentioned how debilitating the loss of their industry was, as many of them stated they have only ever worked in entertainment.

Respondents reported feelings of "being lost" and even "terrified, adrift, worthless, aimless, sad numb [sic]." One interviewee stated he realized during COVID-19 he just sat around at home waiting for someone to tell him what he should do. He realized he needed the structure of a workday to fill his time; without it, he was drifting. Some luckily reported they had been able to find professional mental help during the pandemic and attribute that as a major factor in their betterment. "Broken but hanging on. If I hadn't found a therapist a few weeks ago, I'd be lost." For those who have not found help, they stated they question if continuing in this industry is even possible. For some that have not started working again, they questioned the likelihood of physically or mentally being able to do the job after COVID-19. While others who have returned

are still asking themselves the same questions. “Very depressed. Work is returning, but it is hard to dig out of the hole I have been in for months. Faking it well, but it is just so hard.” The premise of “faking” functionality or presenting “normal” was noted by several respondents.

Loneliness was also a common emotion amongst many respondents, though for different reasons. Some felt that their primary source of socialization was with fellow entertainment workers, so the lack of ability to work led them to be socially isolated. This being in addition to the forced isolation of the pandemic itself. But others felt differently. “Depressed, lonely. Realizing the lack of community or real friendships that I don’t have being in an industry that takes so much time away from home.” The realization of isolation even before the pandemic came as somewhat of a shock to some, some of whom also responded with being unsure how to fix that going forward without leaving the industry.

65.8% of responses stated that they are feeling “neutral” or struggling during the pandemic, with a third of responders saying they are doing well or better. 84.4% of responders stated this is the same or worse than how they were before the pandemic. For the write-in responses to how they were doing, 70.6% of responses stated a current feeling of anxiety, stress, or depression.⁷ The BTS data shows that out of 1679 responses, 90% of them have felt anxious with 83.8 percent of responses also indicating a feeling of depression at some point in their lives.

⁷ Current being at the time the response was given, summer 2021.

Tables 5 and 6: Mental Health Well-Being Statistics

How do you feel you are doing mentally during the pandemic?			How does this compare to how you were before the pandemic?		
Very Well	28	10.4%	Much Better Now	14	5.2%
Well	64	23.8%	Somewhat Better Now	28	10.4%
Neutral	48	17.8%	Same	78	28.9%
Somewhat struggling	80	29.7%	Somewhat Worse Now	104	38.5%
Struggling	49	18.2%	Much worse Now	46	17.0%
Grand Total	269	100%	Grand Total	270	100%

Another trend in the write in responses were sharing about struggles with drinking during the pandemic. Some told of their own struggles, while others shared stories they have heard:

One of my IA brothers posted a thing today (paraphrased) ‘I have to stay sober because if I fall off the wagon, I don’t have the strength to get back on.’ and I reached out to him immediately. I’ve lost several friends to suicide in addition to COVID, and I don’t want to lose more kin to something that’s preventable.

The forced isolation, lack of distractions and social life led some respondents to turn to substances and alcohol to fill those gaps. Some are aware of those consequences: “Alcoholism has really taken its toll,” while others try to make light of it: “Still talking to the voices in my head;” “A little nut before, a little less nuts now.” Humor seemed to be a common way for some individuals to talk about their struggles. Some reported having been able to maintain their sobriety through the pandemic or at least stay with their preferred program: “I have stayed close to my 12-step program and tried to use the time to focus on honest self-reflection.” The self-reflection and self-care were highlighted by some as having been a rare thing prior to COVID-19, but something they were able to do more consistently since.

The struggles of the pandemic have hit some harder than others, specifically those who may have been struggling before the pandemic as well: “[I] had major depression, anxiety & PTSD before pandemic. Much worse now.” While other individuals spoke plainly about their treatment, or desire for mental health treatment during this time. Some stated they had been in therapy beforehand and were thankful to continue it. Others stated they began treatment for the first time during COVID-19.

...I went to see a counselor for the first time in several years and that’s helped a lot. Knowing that I’m not alone in how I’m feeling that I’m doing better than most in many ways and nowhere near as good as others in some. But mostly knowing that there are people to help if I do need to talk.

Others have still been struggling to find something that works for them: “Absolutely spiraled. I have severe anxiety and depression. I suffered from loneliness and feeling worthless. And now I’m worried I physically can’t do this job anymore.”

The loss or potential loss of insurance was also mentioned as being preventative to some seeking help: “Suffered a severe break with reality after not sleeping at all for 5 days after learning that I was losing health care after having made the previously posted amount.” This respondent and others expressed levels of despair and fear associated with the loss or potential loss of health benefits. Health benefits were reportedly changing constantly as the pandemic developed, causing several respondents to report never feeling they had the current information, which made planning for future coverage increasingly difficult.

Fortunately, some respondents reporting having been able to make improvements to their mental health through the pandemic. Many referenced that they were finally able to

have/make the time for normal therapy sessions, while others took the time for more self-care and self-managed some of their issues: “I am fortunate enough to have been in therapy prior to the pandemic and have kept it up, it has helped and feel I have some [sic] to make a effort to work on myself.” The ability to take control of what little they could was highlighted as having played an important role for some in the pandemic.

Even an individual who had been on the cusp of crisis before the pandemic, was able to use the time to come out better on the other side:

I was a wreck for quite some time before the pandemic. I was on pain killers for ten years and my mental and physical health had deteriorated to the point I know [sic] longer cared if I lived or died. I went into rehab in December of 2019 and kicked the pain meds. I was just about to return to work when the pandemic hit. Since that time, I have brought numerous health issues to task. my physical and mental well-being have been dealt with and I am 1000 percent better than before the pandemic.

Including this individual, there were 4 total reports of direct crisis situations and numerous allusions to them. Many of the self-reported crisis situations circulated directly around depression and anxiety with one being directly associated with alcohol abuse.

Tables 7 and 8: “Concern of others” Statistics

Do you have friends, family or coworkers in the industry you are concerned about?			If yes, were you concerned about them before the pandemic as well?		
No	14	5.2%	Yes, more concerned prior	6	2.4%
Unsure	31	11.4%	Yes, but not as much	80	31.5%
Yes, one or two	88	32.5%	Unsure	24	9.4%
Yes, several	138	50.9%	No, a bit more concerned now	77	30.3%
Grand Total	271		No, much more concerned now	67	26.7%
			Grand Total	254	

When asked about being concerned for friends, family, or coworker, 83.4% of respondents reported being concerned for at least one individual, with 50.9% being concerned with 3 or more. This was supported with both write-in answers as well as from the interviews. Several respondents stated they have lost friends and family during the pandemic. Some to COVID-19, some to suicide, and others from unspecified means. Many stated being concerned for all of those returning to the entertainment industry, physically, mentally, and financially. Those who mentioned being fortunate enough to stay employed and/or keep their insurance, there were mentions of guilt and concern for those less fortunate. When asked if they had been concerned for the same individuals before the pandemic, 88.1% of responses indicated that they were more concerned now than prior.

Demographics:

As I tried to address the mental health status and needs of live entertainment workers, I needed to be aware of all the variables that could possibly be affecting them. This included taking into account their demographics and considering how they might impact the workers' situations and access to resources. For demographics, I concentrated on age, ethnicity and gender identity. Of the 271 respondents to the survey, 260 gave their demographic information.⁸ While my research demographics loosely aligned with the BTS survey data, there is no larger national demographic data available for entertainment workers; meaning that these statistics are not comparable to any other data and only represent this present sample.

⁸ Local One, nor the International Alliance (IA) organization have done official demographic data. The IA has a study slated for 2022. Any information on Local One Demographics is based on interview responses and statistics stated by Local One Officers

Table 9: Age Demographics

Age Brackets	
30-39	64
40-49	55
50-59	72
60+	68
Less than or equal to 29	9
Prefer not to answer	2
Grand Total	270

Table 10: Gender Demographics

Gender Identities of participants	
Male	201
Female	59
Prefer not to answer	4
Non-Cis	5
Grand Total	269

Table 11: Ethnicity Demographics

Ethnicities	
European decent/Caucasian	225
Prefer not to answer	19
Hispanic/Latino	7
Mixed Ethnicity	6
Asian Decent	2
First Nation/Native American	2
African decent	1
Middle Eastern	1
Pacific Islander	1
Grand Total	266

Amongst the demographic categories, ethnicity seemed to be the most influential factor when it came to the improvement or decline of health during the pandemic. There was no statistically significant variation amongst those of different genders or ages being able to improve their conditions, but a large discrepancy when it came to race. Of the 260 that completed the demographic information, 40 of which were of color or mixed ethnicity, i.e. 15.4% of the sample size were people of color.

Table 12: Improved Physical Condition as Compared to Pre-COVID-19

Improved Physical Condition as Compared to Pre-COVID-19		
Condition by Ethnicity	Number of Respondents	% of those Improved
Much Better Now	15	25%
European Descent	15	25%
Somewhat Better Now	45	75%
European Descent	41	68.3%
People of Color	4	6.7%
Grand Total	60	

Table 13: Improvement of Mental Conditions as Compared to Pre-COVID-19

Improvement of Mental Condition as compared to Pre-COVID-19		
Condition by Ethnicity	Number of Respondents	% of those Improved
Much Better Now	13	32.5%
European Descent	13	32.5%
Somewhat Better Now	27	67.5%
European Descent	25	62.5%
People of Color	2	5%
Grand Total	40	

Of the 69 people who stated their mental or physical health has improved over the pandemic only 4 were people of color. (31 individuals reported both their mental and physical health having improved, with the remaining 38 respondents reporting one or the other.) This means that only 5.8% of those who improved were people of color, while people of color represented 15.4% of the total respondents. This shows a large discrepancy in the likelihood of improvement for workers of color verses their non-BIPOC counterparts.

Union/Labor Involvement:

One topic that found itself generally missing from the data was mentioning of IATSE and the worker's unions. Sporadic mentioning of it came up, mostly from respondents who were critical of their unions "endorsement" of COVID-19 restrictions. One respondent commented frequently on their disappointment in the union "endorsing medical fascism" with impending vaccine mandates.⁹ Other members in contrast supported what their locals have been doing during this time. "I believe our union(s)...have been fighting extremely hard for their members and other workers. I'm grateful for and proud of that." These comments show the extremes of both sides of support different members gave in their answers. The gradient of positions shared on respondent unions' actions was widespread and offered no general consensus in one position over another.

Others mentioned how the time off allowed them to become more involved with their local's business and were grateful for the chance to become a more active rank-and-file member. Some respondents reported being grateful to attend their union's membership meetings digitally. "Got to take classes and be more politically active within my union. Reevaluated how we...can do better with diversity and inclusion; less bullying and harassment issues to be address which I'm tremendously happy about." While comments such as this were rare in my collected data, it does show that, like the members, the unions had the chance to work on betterment as well and not just their own survival.

⁹ While the member stated they believed the union is the one imposing the vaccine mandates, this is actually illegal. The employers, however, are able to legally impose the vaccine requirements for employment, as well as hosting venues requiring vaccinations for attendance.

Analysis:

My research found that most of the respondents reported as having had too much time without work, thus causing or exacerbating many of their COVID-19-era problems. Those who managed to improve their conditions, however, thanked this to the same thing, time. Free, uninterrupted time. The usage of this time is what separated those who were able to make the most of it, verses those just trying to survive. While resource access certainly played a key role as to how people were able to use their time, no direct indications were given as to what resources made that difference. One could speculate that the additional federal benefits played a key role, but respondents did not report that as being a notable factor. Generally, stable healthcare and consistent employment was the most commented on resource people felt was lacking.

In a pandemic, just surviving is a reason enough to celebrate so this is not meant as a critique or judgment on those who were not able to better their situation. It is more a comment on how the cause, was also, for some, the cure. More specifically, how individuals were able to utilize their time dictated their changing conditions going forward. If resources were stable enough that “survival” was assured, members were then able to use their excess energy for improvement and not just perseverance.

Besides personal agency, access to resources presented itself as a major factor in how individuals were able to best use their time. For those who were able to maintain their insurance coverage/stay financially stable, that energy could then be redirected at self-care, helping family, or seeking medical treatment. However, for those, whose basic needs were not being met, those priorities came first, over secondary, or tertiary concerns like mental health. Time is, what we as

a population had plenty of during the pandemic, but the constraints we faced with how it could be used created new and impregnable walls for those seeking freedom.

This sudden onslaught of unstructured time highlights “time” as being an area of concern even pre-COVID-19. Across mental and physical health, numerous individuals talked about having to learn new habits considering the free time; either developing better eating habits or starting a new workout routine. This begs the question, why were these habits ones the individuals did not already have as functioning adults? The responses led me to the conclusion that the entertainment industry can be a hindrance when trying to create or maintain healthy habits, both mental and physical. Between the inconsistent schedule, changing conditions, necessary time commitment and necessity of work for benefits; outside of work, few things take priority. The industry seemingly causes the individuals to adapt to fit *its* needs, not the other way around.

This time, however, gave some the chance they needed to work on themselves, something they likely did not do enough of prior to the pandemic. When asked about their mental state, one person replied,

My stress and anxiety levels have become more manageable believe it or not. The best way I can describe it is the pandemic/quarantine gave me time to come to terms and learn to live with Who I Am, and therefore be a better person to myself. I learned to stop internalizing stressors because I was unable to do anything about them... But mentally I am much better prepared to self-regulate than I was pre-pandemic. The stress and anxiety are still there, but I learned to live with it via crash course lock-in during the pandemic.

This response and others showed that many workers felt, while working, they are not able to properly take care of themselves, mentally or physically. This directly supports Schnall et al.’s belief that the numerous requirements on workers create additional hazards to one’s

psychological and physical health (Schnall et al., 2018). The job takes priority as it is unstable, and, in many ways, unforgiving.

Some were able to take the time, get diagnosed and begin treatment for long standing health.

Well at first it was all over the place, but then I was able to take advantage of the time off and actually got a psychiatrist for the first time and have been able to get proper medication for my anxiety and discovered that I am manic/bipolar as well (for which I also need medication). I am sorry for long response [sic], but I find it important to note that I felt unable to get proper care for myself before the pandemic because with our unpredictable work schedule, I could never maintain appointments.

Numerous individuals reported similar sentiments that due to the constant fluctuation of entertainment workers' schedules, keeping regular appointments is difficult to near impossible. Some respondents even alluded to these appointments being "luxuries" previously not afforded.

Responses like these bring forth the question, what happens for these individuals when work does come back? Ideally, they would be able to find a new balance between work and self-care, but that is a far cry from a guarantee. Several respondents stated they have already started back to work, and the conditions are grueling. One stated, "...It is hard to dig out of the hole I have been in for months." As the work returns there are even more procedures, rules and protocols to follow which are complicating and already stressful return to an already stressful job. With testing and vaccination requirements, some respondents reported just hiring people has become one of the most stressful aspects of the job, let alone the actual work on the calls themselves. Griep et al.'s reciprocal relationship between work and personal stress was directly

represented in respondent's answers (Griep et al., 2021). Workers are returning to an even higher stress, crunch time industry where the pressure to create content (either live or digitally) will greatly surpass what they had experienced before. The pressure to fill the entertainment void many people have felt during the pandemic is driving up the stress levels of workers across the industry.

One would not work in this type of industry without some sort of deep-seated connection to it. Either through family, passion or skill set. For many of the respondents, their passion for the industry was obvious. Through the data, the passion and drive to be successful in the entertainment industry was edging on unanimous. This passion, however, has led all of these individuals to develop lives that, in many ways, revolve around the industry, adjusting for whatever the job requires; lack of sleep, hourly commitment, limited outside obligations. In short, the job became intrinsic to who these workers are. The entertainment industry is not just their career, it is their identity. Once the industry was shut down, it created a dangerous void in these peoples' lives. Unable to do the work that functions both as a source of economic security (wages, benefits, insurance, etc.) but also for many, their primary source of socialization, this exacerbated many of the worker's sense of isolation and futility during COVID-19.

The passion for the industry was clear as numerous responses talked about the length of their careers and how it is "The only thing they've ever wanted to do." But this passion becomes a double-edged sword when it gets twisted directly into ones' identity. The career these workers have chosen encompasses so much of their lives, it is no surprise it has become a huge part of "who they are." When COVID-19 shut down the industry, suddenly that portion of their identity was seemingly ripped out of their hands. Without the ability to work, respondents felt a "lack of

identity,” a feeling of “uselessness” and even led some to “question life choices and [their] value to others.” Without the ability to put their skills to use, many felt aimless and adrift.

Like with the issues of time, COVID-19 again highlights some of the other issues inherent in the entertainment industry; entertainment workers have become defined by their careers and their skills. The lives of entertainment workers outside of the job are so limited, many lost their sense of self when taken outside of their industry comfort zone. The workers’ identity should not be solely dependent on their employment. Each of these workers is an individual, with worth and value even when not on a call. These workers’ self-worth should not be based on their productivity in a career.

As stated in the findings, there was not a clear consensus as to how the respondents felt their respective unions had done during COVID-19. There appears to be a slight leaning towards more approval than disapproval, but those that did express their concern were vehement and exceedingly outspoken about their displeasure with their union. Many explained their displeasure stemmed from the frequent and often lastminute changes to member benefits. Numerous members explained that they lost their health benefits with the Union being the one to receive the blame, as opposed to the pandemic. Others stated they felt their union has been “a god send” during this time. Some respondents acknowledged the up-hill struggle their unions had to go through to keep as many members insured and working as possible.

Like with the individuals, the resources available to the union dictated how the union was able to respond to the sudden decimation of the industry. Some, unfortunately, had wellness funds go bankrupt, while others were fortunate enough to stay solvent. Many that were able to

stay afloat had to make dramatic cuts to coverage and secondary benefits to keep as many members as possible covered. These adaptations and cuts to benefits obviously came at a cost, but several respondents mentioned being grateful for some of them. Digital membership meetings and digital committee meetings were highlighted as being a positive during this time. Not only allowing home bound members to stay involved in union affairs, but also allowed for progress that would have otherwise been likely prohibited. One respondent stated them having been grateful to be able to be involved with their union's newly formed apprenticeship committee, something that was publicly conceived and initiated during a meeting of the union's Social Justice Committee. Again, this resource accessibility and management became directly influential on how the time was afforded by member and union alike.

Conclusion:

Unsurprisingly COVID-19 was absolutely decimating for the entertainment industry. 100's of thousands of workers across the country became unemployed overnight, completely upheaving their entire lives. For many, this became 18+ months of loss, uncertainty, fear and stress. While some still find themselves dealing with these feelings of being overwhelmed and lost, some managed to find solace in these times. While a staggering number of members found themselves worse off during COVID-19, a surprising 26.5% of respondents attested they were able to improve their physical and or mental health. While this much time off was unprecedented for the workers. under other circumstances, time is exactly what these workers needed. Time presents itself as being one of the primary things workers lacked before COVID-19. In an industry that capitalizes on all aspects of a worker's life, time is what many need to take care of themselves

and loved ones. This time however should not be at the detriment of their basic needs. As the industry comes back and workers begin to recoup lost wages and benefits, the balance of work and personal life must be addressed.

COVID-19 highlighted that the level of commitment this job takes causes other basic needs to fall by the wayside for many workers; adequate social life, time for medical needs, personal development; all of these components suffer while working in the entertainment industry, and while living through COVID-19. These extremes need to be balanced as life goes forward, for all entertainment workers.

Going forward employers and productions should consider readdressing their work schedules and necessary hours of employment for workers. Coming back not only brings in all of the previous issues in the industry but workers will be “out of practice” and out of “fighting shape” when it comes to the demands of the job. Mentally and physically the workers are now unaccustomed to the rigorous requirements the job calls for and greater damage can occur from those struggling to reach those lofty standards.

New initiatives should be developed to better support those needing to continue, or those wishing to start mental health treatment moving forward. Those who had been fortunate enough to find a therapist or psychiatrist during COVID-19 should be able to maintain those positive relationships with their treatment team. Accommodations and allowances for doctors’ appointments and such need to be made to best allow the workers to maintain their health moving forward. Unions should begin to make selfcare and health betterment more of a negotiation priority for its members. More stable working hours with flexible scheduling, would

drastically improve the health of a huge percentage of stagehands. Stagehands and entertainment workers are the backbone of the performance arts.

We are the “Firefighters and Magicians” of the entertainment world, and deserve to live life, and not just survive it.

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Appendix:

Appendix A: Entertainment Worker Check in Survey

Entertainment Workers Check In

My name is Kayleigh Truman. I am a second-generation Local One stagehand, as well as a Graduate Student with the CUNY School of Labor and Urban Studies. As a member of Local One, I know how the entertainment industry has been decimated over the past 18 months. With theaters and other live events preparing to reopen, I must ask; how are you doing? How has a year of insufficient employment affected you? What do you feel can be done to better support you and your families' in these trying times?

To better understand the impact of the pandemic and uncertainty of the future, this survey is meant to gather anonymous data about how stagehands are doing, physically and mentally, during this stage of the pandemic.

The survey, its questions and corresponding research are not affiliated with any employer, I.A.T.S.E Local, or officers there in. The research is being done without any coordination or sponsorship from any employer, union or organization. Any questions or concerns regarding this matter can be sent to Kayleigh Truman at [REDACTED]. All answers are completely anonymous and will only be used for academic research purposes.



[REDACTED] (not shared) [Switch account](#)



* Required

How do you feel you are doing physically during the pandemic? *

- ☐ Very Well
- ☐ Well
- ☐ Neutral
- ☐ Somewhat struggling
- ☐ Struggling
- ☐ Other:

How does this compare to how you were before the pandemic? *

- ☐ Much Better Now
- ☐ Somewhat Better Now
- ☐ Same
- ☐ Somewhat Worse Now
- ☐ Much worse Now
- ☐ Other:

How do you feel you are doing mentally during the pandemic? *

- ☐ Very Well
- ☐ Well
- ☐ Neutral
- ☐ Somewhat struggling
- ☐ Struggling
- ☐ Other:

How does this compare to how you were before the pandemic? *

- ☐ Much Better Now
- ☐ Somewhat Better Now
- ☐ Same
- ☐ Somewhat Worse Now
- ☐ Much worse Now
- ☐ Other:

Do you have friends or coworkers in the industry you are concerned about? *

- ☐ Yes, several
- ☐ Yes, one or two
- ☐ Unsure
- ☐ No

If yes, were you concerned about them before the pandemic as well?

- ☐ Yes, more concerned prior
- ☐ Yes, but not as much
- ☐ No, a bit more concerned now
- ☐ No, much more concerned now
- ☐ Unsure

Please give a few words that describe your current physical state in the pandemic: *

Your answer

Please give a few words that describe your current mental state in the pandemic: *

Your answer

What do you feel could be done to help your and your family's current situation? *

Your answer

Would you say these are the same needs you would have said before the pandemic started? *

- ☐ Yes
- ☐ No
- ☐ Unsure
- ☐ Other:

Please express your level of agreement with the following statement: "I feel the Entertainment industry is taking my current needs fully into account." *

- ☐ Strongly disagree
- ☐ Disagree
- ☐ Neutral
- ☐ Agree
- ☐ Strongly agree
- ☐ Other:

Please express your level of agreement with the following statement: "I feel the government and country at large are aware of my needs as a stagehand." *

- ☐ Strongly disagree
- ☐ Disagree
- ☐ Neutral
- ☐ Agree
- ☐ Strongly agree
- ☐ Other:

Please express your level of agreement with the following statement: "I feel I currently have all the resources I need to succeed going forward." *

- ☐ Strongly disagree
- ☐ Disagree
- ☐ Neutral
- ☐ Agree
- ☐ Strongly agree
- ☐ Other:

Please express your level of agreement with the following statement: "I hope as the industry bounces back, the needs of stagehands are better addressed." *

- ☐ Strongly disagree
- ☐ Disagree
- ☐ Neutral
- ☐ Agree
- ☐ Strongly agree
- ☐ Other:

Would you say there have been any positives during this time?

Your answer

How have you coped with the increased levels of stress over the past 18 months?

Your answer

If comfortable, please select your age bracket

- ☐ Less than or equal to 29
- ☐ 30-39
- ☐ 40-49
- ☐ 50-59
- ☐ 60+
- ☐ Prefer not to answer

If comfortable, please select your gender identity

- ☐ Male
- ☐ Female
- ☐ Non-binary
- ☐ Trans
- ☐ Gender Fluid
- ☐ Prefer not to answer
- ☐ Other:

If comfortable, please share your ethnicity

- ☐ African Descent
- ☐ European Descent
- ☐ Asian Descent
- ☐ Middle Eastern descent
- ☐ Native American/Indigenous/Aboriginal/First Nation
- ☐ Hispanic or Latino
- ☐ Prefer not to answer
- ☐ Other:

Would you consider participating further? Either with follow up Questions or a short interview? If Yes please give the best form of contact below:

Your answer

Appendix Table B: Are your Current needs the same as before the pandemic.

Would you say these are the same needs you would have said before the pandemic started?	
No	166
Unsure	17
Yes	73
Grand Total	256

Appendix Table C: Level of Agreement question 1

Please express your level of agreement with the following statement: "I hope as the industry bounces back, the needs of stagehands are better addressed."	
Strongly agree	156
Agree	90
Neutral	16
Disagree	1
Strongly disagree	4
Grand Total	267

Appendix Table D: Level of Agreement question 2

Please express your level of agreement with the following statement: "I feel the government and country at large are aware of my needs as a stagehand."	
Strongly agree	4
Agree	17
Neutral	29
Disagree	91
Strongly disagree	123
Grand Total	264

Appendix Table E: Level of Agreement question 3

Please express your level of agreement with the following statement: "I feel I currently have all the resources I need to succeed going forward."

Strongly agree	15
Agree	61
Neutral	84
Disagree	68
Strongly disagree	36
Grand Total	264

Appendix Table F: Level of Agreement question 4

Please express your level of agreement with the following statement: "I hope as the industry bounces back, the needs of stagehands are better addressed."

Strongly agree	156
Agree	90
Neutral	16
Disagree	1
Strongly disagree	4
Grand Total	267