Implications of COVID-19 for privacy at work

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In addition to the challenges highlighted by Rudolph and colleagues (2021) in their focal article, the COVID-19 pandemic has the potential to open the door to violations of worker rights in the name of protecting public health. In this commentary, we focus on violations of privacy as worthy of special consideration. Privacy, or the extent to which an individual has or perceives having control over personal information and the sensory stimuli within their work environment (Bhave et al., 2020), is a topic spanning many domains. Federal law in the United States gives employers extremely wide latitude to collect and store information about employees (United States Department of Labor, n.d.), and advances in microtechnologies and data processing make it possible for employers to do so in an increasingly invasive fashion (Collier, 2018). We know privacy violations are associated with a variety of undesirable work-related attitudes and behaviors (e.g., negative emotions and cognitions, counterproductive work behaviors; Yost et al., 2019); therefore, accounting for the effects of the pandemic on work privacy dynamics is necessary. Below we discuss five work contexts influenced by the COVID-19 pandemic for which privacy concerns are salient, with a particular focus on their implications for research and practice.

Electronic performance monitoring

One implication of the pandemic emergency and the consequent mass transition to telework is that many supervisors can no longer observe their employees throughout the workday via traditional "management by walking around." Much attention from the popular press has focused on organizations turning to electronic performance monitoring (EPM) software to track individuals as they work remotely (e.g., Allyn, 2020; Satariano, 2020) in an attempt to satisfy the need to see exactly what their employees are doing. At the anecdotal level, the subjects of these press pieces express discomfort with their organizations tracking their behaviors in their own home, particularly when the monitoring is secretive or may capture non-work-related information. There is some evidence that the relationship between EPM use and perceptions of privacy invasion may vary based on whether non-work-related information is captured (e.g., McNall & Roch, 2007), but the pandemic presents opportunities to better understand the monitoring characteristics that individuals perceive as unacceptable, particularly when monitoring occurs in their home, and how they may respond to such intrusions.

Existing work on EPM offers some guidance on how organizations should implement monitoring during these times. Research generally suggests that well-understood best practices in human resource management such as honesty and procedural transparency should continue to guide how organizations monitor workers, regardless of the temptation of electronic surveillance devices (e.g., Oswald et al., 2020; Yost et al., 2019). Individuals tend to feel their

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privacy is most intruded upon when monitoring is secretive (e.g., Zweig & Webster, 2003) or is used for surveillance purposes (i.e., monitoring with no clear purpose beyond a desire to collect information or assert control; Ravid et al., 2020). As such, organizations deciding to start using monitoring systems strictly out of fear that their employees will abuse affordances associated with remote work are likely to be perceived as privacy intrusive and may be met with decreased perceptions of procedural justice (McNall & Roch, 2007) and job satisfaction (Thompson et al., 2009) while also creating a more stressful work environment (Mallo et al., 2007) during an already highly stressful time. Moreover, there is scant evidence to suggest that EPM for surveillance purposes improves performance and some evidence for moderate negative performance effects (Becker & Marique, 2014). Thus, organizations that turn to EPM during the pandemic should do so with a clear and transparent rationale for how the monitoring will specifically assist individuals in meeting personal and organizational goals.

Health monitoring

The pandemic crisis provides new opportunities to investigate the extent of privacy that individuals are willing to sacrifice to ensure their own and others' health and safety at work, and how individuals respond to such trade-offs. The CDC guidelines for employers recommend organizations conduct "daily in-person or virtual health checks (e.g., symptom and/or temperature screening) of employees before they enter work" as individuals return to workplaces (Centers for Disease Control and Prevention, 2020). Beyond formal health monitoring, less formal peer monitoring may also take place as individuals remain sensitized to symptoms of COVID-19 in others. Individuals are generally resistant to the idea of physiological monitoring in workplaces (e.g., Tomczak et al., 2020), but research on this subject is not specific to monitoring for health or safety, and it is certainly outside the context of a pandemic emergency. There is a clear need for research exploring how individuals respond to formal and less formal means of health monitoring in workplaces, the individual and contextual factors influencing such responses, and the evolution of responses over time and with various environmental shifts (e.g., pandemic prevalence, policy changes, media coverage). Of note, individuals tend to report greater privacy concerns when monitoring has the potential to cost them financially (Bolderdijk et al., 2013). Health monitoring is thus likely to be received more favorably in organizations providing leave compensation to those that screen positive for symptoms than in organizations choosing not to provide such benefits.

Health disclosures

Another implication of the pandemic emergency is that a large number of individuals will need to decide whether to reveal private health information to employers in order to obtain safety accommodations (e.g., personal protective equipment, temporary adjustments to job responsibilities). Recent estimates suggest 41.4 million adults in the United States ages 18 to 64 are at risk for severe COVID-19 symptoms due to an underlying medical condition such as heart disease, lung disease, diabetes, or autoimmune disorders (Koma et al., 2020). The U.S. Equal Employment Opportunity Commission (2020) recently clarified that those with conditions that put them at high risk for severe COVID-19 are protected under the Americans with Disabilities Act and as such may request and discuss reasonable accommodations that help protect them from the virus. In effect, the risk for severe illness from COVID-19 represents a current workplace disability for many. Individuals who may have preferred to keep their health information private instead will need to have a dialogue about their condition with their employer and receive accommodations that may reveal their health status to colleagues.

The large number of workers who will need to seek work accommodations during the pandemic presents research opportunities to better understand the nature of health privacy and disclosure experiences. We know that the process of revealing a concealable attribute such as a health condition at work is often accompanied by fear of stigmatization and differential treatment (Jones & King, 2014) and that individuals who are young or have recently acquired a disability may be least likely to disclose their condition to request work accommodations (Baldridge & Swift, 2013). Scholars are encouraged to take this opportunity to conduct research to better understand the decision processes and experiences of those who do and do not decide to disclose private health information, ideally with longitudinal research to capture the experiences prior to and following disclosure. An interesting question is to what degree the extreme salience of a pandemic will impart legitimacy to requests for accommodations that has not always been afforded to those who seek accommodations for concealable disabilities (Santuzzi et al., 2014). From a practice standpoint, organizations where supervisors and policies are viewed as more employee supportive can expect individuals to feel more comfortable disclosing private information (Ragins et al., 2007). Organizations should additionally anticipate that a portion of their employees may have undisclosed health conditions and consider proactively implementing reasonable accommodations where possible to mitigate the need for disclosures.

Information security

The transition to telecommuting during the pandemic has introduced other threats to privacy that warrant research scrutiny. Organizations with little experience in long-term remote work may lack the security infrastructure to protect employee and client privacy. Recent news stories about telecommuter targeted cyberattacks (Sanger & Perlroth, 2020) highlight the potential for malicious privacy intrusions and the need for organizations to incorporate security awareness programs into training curricula. Less malicious, but also concerning, is the risk of incidental exposure of private information from one's living space or personal life as individuals telecommute from home, particularly for the many who do not have a home office or a partitioned workspace. Evidence suggests online workers often express concern about informational security and privacy (Kang et al., 2014), and research efforts are needed to understand the degree to which similar privacy concerns characterize and affect work during and following the pandemic.

Privacy norms

An important question for researchers and practitioners alike is to what degree privacy expectations formed during the pandemic will persist as individuals return to workplaces? Many individuals working from home may perceive greater privacy with the increased control over their work processes, work environment, and work interactions. Perceptions of privacy intrusion are anchored to contextual norms (Bhave et al., 2020), and workplace practices that may have once been routine (e.g., close monitoring) may be perceived as invasive upon return to workplaces. Organizations will need to adapt their human resource policies and practices to align with new privacy norms that emerge from the pandemic. Researchers can aid in these adjustments by conducting intervention research to best inform organizations on how to effectively reintegrate individuals back into workplaces.

Conclusion

Above we discussed ways in which the COVID-19 pandemic is likely to result in greater organizational access to employee data, including sensitive information such as physiological and health data. We have observed many instances of misuse of such information by organizations in the past (e.g., Zarya, 2016). A clear outcome of the pandemic is that the privacy of working individuals may be more vulnerable than ever. We hope that industrial and organizational psychologists will continue to advocate for worker privacy protections and continue to conduct research that demonstrates the potential harms that result from ignoring privacy concerns.

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