



**Promoting Equity,
Restoring Confidence in the
Unemployment Insurance System**

Voices of Washington's Unemployed

Highlights and analysis from 100 interviews with recent unemployment benefits claimants in Washington state

*Conducted by the Unemployment Law Project
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**Unemployment
Law Project**



Executive Summary

Unemployed workers' experiences when applying for benefits offer insight into how well Washington's administration of its unemployment insurance system (UI) is serving workers and the state economy. To remedy significant inequities in unemployed workers' access to benefits, concrete steps are required.

In extended interviews about their experiences with applications, claims-filing, denials, and appeals, Washington claimants highlighted some of the UI system's most significant weaknesses: its sheer complexity, the severe shortage of assistance for claimants; employers' outsized and detrimental influence over delivery of benefits; a structural hostility to paying benefits; high denial rates and low reciprocity rates; and ineffective communications about agency policy. Aggravated by the COVID-19 pandemic but continuing post-pandemic, these factors together create a crisis of confidence in our state's UI benefit system.

Of special concern is the accessibility of benefits to Black, Indigenous, and people of color; women, and transgender claimants; and claimants with disabilities, limited literacy, limited English proficiency, limited access to technology, or other barriers.

To help restore confidence in Washington's unemployment insurance system, we call for significantly lowering the claim denial rate and aiming for the goal of a 50% reciprocity rate (proportion of the unemployed receiving benefits) for all demographic groups together with tracking and transparency of equity indicators that will incentivize strong measures to remedy inequities.

An Equity Data Dashboard should be created to track and publish claimants' experience with denials, timely payment, and other metrics, together with employer accountability measures such as timely reporting of information to the state and frequency of appealing claimant benefits. These metrics should then be

analyzed in relationship to claimants' race, gender, disability status, limited English proficiency, and other characteristics. We also call for a claimant service model emulating that provided to employers: reliable two-way communication with ESD and assigned account managers who are available by phone or in-person. Equitable accessibility of benefits should be the touchstone for evaluating proposed rules, legislation, policies, or programs of the UI system.

Other recommendations call for increased availability of accommodations to claimants with barriers; candid and consistent communication to claimants about the availability of services like phone assistance; updating of obsolete language in Title 50 RCW through agency-requested legislation; and convenient availability of a printed Handbook for applicants for benefits.

Two new publications provide guidance for following these recommendations: the Equitable Access Toolkit of the U.S. Department of Labor and the National Employment Law Project's "Proposed Performance Standards for Equitable Access to Unemployment Insurance."





The Claimant Experience Project

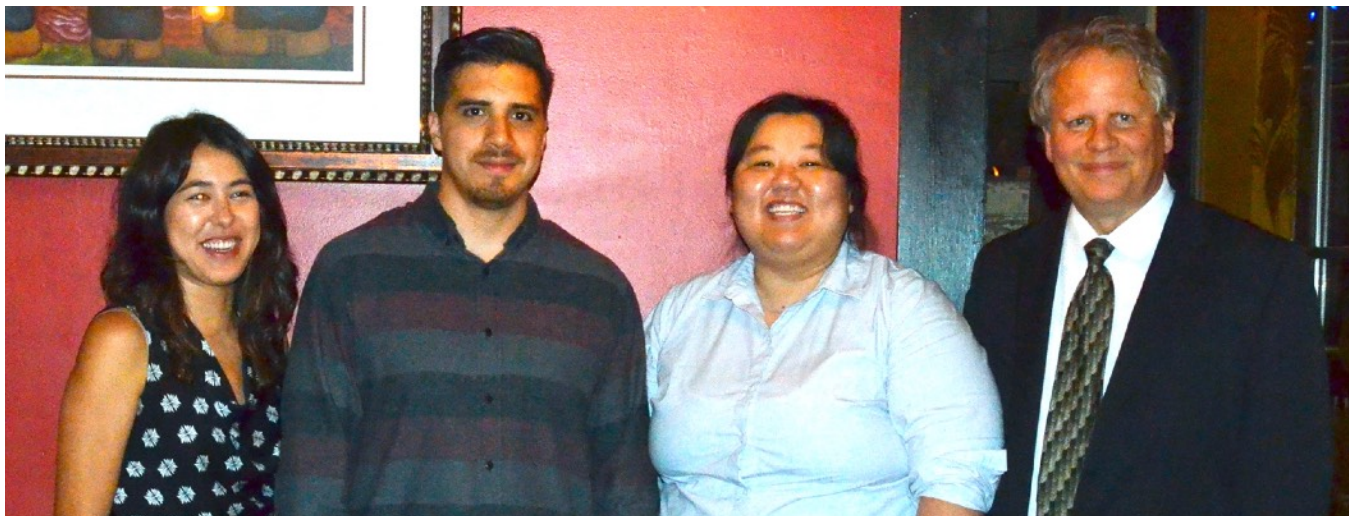
The Claimant Experience Project is a qualitative research project based on personal interviews of 100 recently unemployed Washington workers, conducted by the Unemployment Law Project in 2022 and 2023. The overarching goal was to uncover inequities in how unemployment benefits are administered, to understand more about the causes, and to use our qualitative research to suggest ways to reduce or eliminate inequities. We also asked claimants for their thoughts on improving the system.

The interviews probed workers' experience claiming unemployment benefits, how that experience varied depending on race, gender, education, nationality, limited English proficiency, disability status, and other differences and the messages about system change their stories convey. We were especially interested in system change that will ensure greater diversity, equity, and inclusion. Interviewers used a standardized survey combining demographic and open-ended questions.

We sought to record both the factual and subjective experience of these Washingtonians when they

applied for unemployment benefits; were approved or rejected; obtained answers to their questions or not; won or lost appeals of denied benefits; and sometimes found they would have to return the payments they received to the state.

We tried to ensure there was strong demographic diversity among the 100 interview subjects, especially of race, gender, disability status, literacy/education, English proficiency, computer access, and age. The interviews reflect typical claimant experiences. We selected interview subjects primarily from a list of claimants who delivered public comment at meetings of the state-appointed Unemployment Insurance Advisory Committee; claimants who had contacted the Unemployment Law Project for assistance or advice; and referrals from the worker advocacy groups Working Washington and Northwest Justice Project. As a result, the interviewees were predominantly claimants who had experienced problems with claiming benefits; 68% said they had received at least one negative determination about their claim.



ULP board members and senior attorneys

While the makeup of the group of interviewees is not strictly proportionate to that of the worker population in Washington, we believe that the participants reflect important experiences of a broad range of claimants who encountered difficulty as they sought unemployment compensation. (See Appendix B for demographic charts.) Where we believed anonymity would still be protected, we have provided some demographic information for most claimants quoted.

Collectively, their experiences illustrate how the Washington UI system faltered in fulfilling its mandate to ease the burden of unemployment upon workers. Because of the disproportionate number of problems encountered by non-White, transgender, disabled, or limited English proficiency claimants, the failure to meet their needs during the pandemic worsened many existing inequities.

The Unemployment Law Project gratefully acknowledges support from the Families and Workers Fund for the Claimant Experience Project. Special thanks, as well, to ULP legal interns Victoria Krueger, Jessica Cable, and Archana Prabhakar for their

research and insights into the inequities of Washington's UI system.

The leadership and staff of the Washington Employment Security Department and the Office of Administrative Hearings have enormous and complex missions and in recent years they have adopted many policy and operational improvements and innovations that other states can emulate. Over the course of our project, we have had the opportunity to work with ESD leadership and they have been responsive as we briefed them on our findings. The eServices chatbot has already been decommissioned and ESD's sweeping overpayment waiver initiative aims to finish this year. As of publication of this report, 47,847 claimants with overpayments have received waivers.

The Commissioner and the ESD team are committed to bringing more equity to delivery of unemployment insurance compensation. We thank them for their dedicated work, their ready assistance with resources, and their openness to comments and suggestions.

The Unemployment Law Project

The Unemployment Project (ULP), founded in 1984, is a non-profit organization providing free legal assistance to Washington state residents who are trying to obtain or retain their benefits. We are funded principally by the Legal Foundation of Washington, other foundation grant programs, and donations.

We maintain a small staff of attorneys and legal assistants at our two offices, located in Seattle and Spokane; in addition, we have an active team of pro bono attorneys and students from externship programs at area law schools who volunteer to provide representation to unemployment benefit claimants.

Staff and volunteers combined represent about 1,000 claimants in their appeals in a typical year—although with special funding during the pandemic, we temporarily more than doubled our annual number of clients.

ULP also conducts research and policy analysis to improve the unemployment benefits system in

Washington, advocates for policy reform, and conducts outreach to raise public awareness of concerns and solutions.



ULP staff member assisting callers



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Highlights and Themes of Claimant Interviews

After they lose their jobs and think about applying for benefits to cover basic needs, most workers will find they are entering uncharted territory with numerous hazards and pitfalls and limited guideposts to help. Our interviews revealed several of the obstacles that—if they don't dissuade workers from applying at all—pose significant challenges for anyone who is experiencing what the unemployment statute itself terms “this greatest hazard of our economic life.”

Accessing an Application

VERIFYING IDENTITY

“For whatever reason, they flagged me and said, ‘We can't verify you're you.’”

Almost all claimants of unemployment benefits must perform two initial tasks: opening a Secure Access Washington (SAW) account for online access to state agencies and proving their identity on the eServices platform. For many interviewed by ULP, proving identity was the biggest challenge and sometimes an insurmountable obstacle to a successful claim.

Questions over identity typically did not arise from anything actually wrong with claimants' identifications or documents. Rather, the problem was often a feature of the documents or identifiers that appeared to be non-standard and stalled approval of claimants' benefits, or demands for types of documents that were difficult to obtain. In other cases, claimants felt

they had been arbitrarily targeted for double- and triple-checks.

As several claimants noted, the clampdown imposed in mid-2020 after pandemic fraud attacks on a massive scale were disclosed and covered by the news media for several weeks, along with system breakdowns due to the overload, made the security environment worse.

I had school ID cards from the time I was in junior high on up and I submitted a bunch of those to them. I gave them what they asked for. But it took four months and lots of back and forth and resubmissions of those ID cards before they accepted them.

—Mixed-race claimant in his 50s

It all boiled down to they didn't like the way my license looked.

—Black service worker in his 40s

They'd always say it was a blurry picture or they didn't get it or something crazy every time.

—Construction worker who applied by phone

If their background didn't seem to fit a standard mold, some found the process became a “nightmare set on repeat,” as one expressed it, aggravated by chronic

breakdowns of the eServices portal information technology (IT) system.

I had to resubmit documents probably four or five different times because their computer systems were down. One issue was that my driver's license was from another state. I didn't know how long I'd be in Washington, so I didn't get a Washington driver's license because I might be going back to that previous state. They eventually took it, but it was a pain.

—Mixed-race business manager

The application process could not accommodate very common variations on forms of identity. One interviewee felt that the system couldn't adjust for differences among claimants, and that the review process was only perfunctory or sporadically functional.

There's nothing out of the ordinary whatsoever about me and my documents. For whatever reason, they flagged me and said, 'We can't verify you're you.' We submitted documents to prove that I was me but no



one reviewed them. The deadline lapsed. Then I didn't get approved due to the deadline's being missed. That meant that when I ran into the next week of unemployment, they again had the same issue. It took months and hours and hours and hours of phone waits to get resolved.

—Asian-born transgender office worker

For another claimant who had a California license carrying a Washington address, the system could not adapt and human reviewers did not prove helpful.

The driver's license was perfectly legal. But the payments stopped after two weeks. When it was my turn to be looked at by ESD's Office of Special Investigations, the investigator said, "Well, you're a fraud. I've been an investigator for 18 years and I've never seen this. This is a phony, phony license." I actually pulled up the California Penal Code and Washington state statutes which both explicitly say under what circumstances this is allowed. But that wasn't good enough for him. It took a year and a half to get my identity established.

—White non-binary professional

A very common experience with security measures that eroded claimants' confidence in the system and soaked up their time was empty offers by the eServices system to recognize the claimant's device to avoid repeat identification processes; that option appeared to have actually been disabled.

I would click the box every time that said "Remember this phone," but it always asked me for two-factor identification.

—Customer service manager

I did not have a computer when I first applied because my home computer was my work computer and it was frozen. And so I tried signing up on my phone or my friend's computer. But I'd always have to do the email authentication over and over again.

—Sales manager in her 30s

A transgender claimant who had changed their name since the last time they applied for unemployment reported one of the lengthiest identity verification struggles. This claimant had updated their Social Security information and driver's license during the pandemic, but the system repeatedly refused to

accept it, blocking them from reaching the human help that was the only recourse.

I wouldn't be able to get to the screen where I would actually get the code to the video call with a human, because you need all of these pieces of ID in order to get to talk to the person. My old passport is still valid, but it's in my dead name, and all my other documents are in my legal name, and they didn't want to use them. I was screaming. Because I just want to get away from this dead name. That was the only part that was just frustrating. And it's a trans-specific frustration.

For this claimant, the frustration subsided when the options included interacting with an ESD employee:

The person asked me just a few questions, wanted me to physically show them over the webcam that I had all of the information on me—the actual physical documents. Then the next time I logged in, everything was normal.

—Transgender customer-service agent

“Timing out” of the system while the claimant is trying to establish identity on the eServices platform, getting only a message displayed saying “File not found,” or being indefinitely locked out of the system occurred with frequency. Some claimants, perhaps mistakenly, blamed their unfamiliarity with computers for the problems. But a construction worker in his 40s and an office worker in his 30s both related similar experiences, which the first described this way.

I'm kind of computer-illiterate. I have to get help with login issues. You know when you log in and they say your time's lapsed or whatever and you'd only been on there for 30 seconds and they shut you right back off? It did that to me a lot.

—Construction worker in his 40s

However, there didn't seem to be an effective way to avoid repetitious ID verification, reported several claimants who applied using a mobile phone:

I would try to log in several times and it wouldn't let me through. I'd have to wait until the next day or sometimes a couple of days until it would cooperate.

—Communications manager in his 20s

One claimant, a small business owner who does not own a smartphone, had his identification rejected by

ESD for 18 months. Some others had perverse results if they tried too often. One of the few interviewees using a mobile phone explained how he made repeated attempts to respond to verification prompts without success—so many that it triggered the eServices portal to shut him out.

I didn't know how to copy and paste on my mobile, that I could just hold down on a security code number and copy and then paste it. And so I'm sitting there having them resend the code, resend the code, and I'd type it in. But I couldn't get back to the page I had been on. It would go back to the very beginning. And so then I would have to get it sent to the email again. I had such a hard time doing it. And then it finally said: "This account is being locked for suspicion of fraud."

—Production worker in his 40s

Another claimant, despite spending hours on the phone each day, encountered a seemingly unending string of problems with the portal, excluding him from benefits for almost a year.

I called unemployment all the time, every day, virtually for months. And this one time I had to verify my identity and so I sent a copy of my license to a fax number they gave me and I waited. Then I reached somebody else and gave them my identification number and they said, "I don't know what number you faxed that to." So I had just faxed my ID to some random place that could have been literally anywhere. I asked them what should I do? And they said they didn't know. They gave me a different number to call. And it never accomplished anything. It was a hot mess and the identification problem was a big part of it.

—Black gig worker

I had to go back and forth between their fraud department and the regular office. For at least three or four months, I wasn't able to gain benefits. Eventually, I saw where the mistake was and I was able to prove my identity through a number of ways, submitting my ID and some other paperwork: my birth certificate, Social Security card, and handwriting proof.

—Mixed-race mid-30s gig worker

A skilled trade worker was paid benefits, didn't see the new ID requirement, and then months later was

told he had a five-figure overpayment. Like many others, he was surprised at the lopsided faith in a Social Security card as proof of identity —and he found the eventual approval of his identity just as arbitrary:

I didn't even have a copy of my Social Security card. I think my mom texted me a picture of a photocopy and that was enough proof that I was a real person. Although it seemed like the easiest thing in the entire world to forge if I wanted to.

—Carpenter in his 30s

NAVIGATING eSERVICES

Accessing the eServices claimant portal in order to file a claim is not quite mandatory, and it's relatively easy for most claimants. Of the 100 claimants interviewed, 83 applied using a computer or tablet, 13 did so via smartphone, 3 did it by calling ESD, and one applied in person. But many computer or tablet users said they were confused about how to find the portal or unhappy with the steps required to access eServices.

You can't get directly to your eServices. You have to go and authenticate yourself on the main state server to even get back to the eServices. And I struggled with that a lot.

—Black self-employed worker

An office worker felt that the website was non-transparent enough that several times, in order to find

“With a cell phone, it becomes a six-step process to send someone a picture of a document.”

some of the most basic instructions for navigating the site, he had to rely on outside searches on Google.

I'm older. So I'm not tech-savvy. That part confused me because I would click it and it kept sending me to where it tells you about “Eligibility.” But then you have to find where it says “Applying.”

—Mixed-race sales rep in his 40s

Others agreed:

I'd have to Google how to find my current file and what button do I push to go there.

—Design professional in her 40s

Often-heard descriptors attached to eServices included “dated,” “disjointed,” “not intuitive” to navigate.

I got to the point where I couldn't find my way back once I navigated away to something else and it was such a headache, I just ended up leaving the tab permanently open on my phone.

—Black transgender gig worker

Finding messages, appeals, and notices was more difficult than claimants expected. Tech workers tended to be especially critical of the user interface. Blind allies as claimants navigated eServices were another problem, a computer programmer said.

It just doesn't seem to be organized like most websites are. It's not so easy to find information. If you want to send a message, it suggests a couple of links. But that feature should be on the first page. Every time I log in, it says I have something I need to attend to. But you click on it and there's nothing there.

—Tech worker in his 50s



I thought navigating eServices was almost intentionally difficult. You get notifications so you have to log in just to see them. It's not pushed to you in any way such as a text or something saying "Hey, you've got an important message you really need to look at right now."

—Program coordinator in his 30s

Smartphones are considered to have virtually replaced computers in many contexts, and making benefit applications accessible by cell phone is viewed as a model modernization step. But surprisingly, a large majority of claimants interviewed reported using a computer to apply, including almost all the non-White interviewees. Only 13% of interviewees used a cell phone, and only two cell phone users were non-White. Accessing eServices was especially difficult for claimants viewing the website on their smartphones, with some saying that the buttons to navigate the form would be out of reach of their scrolling.

I wouldn't see the little bottom buttons in the corner on my phone, though they were visible on a computer. Constantly, on my phone, I would be thinking "Why can't I go past this way? What is going on?" And I would zoom in, zoom out. I couldn't see anything unless I was on a computer, not a cell phone.

—Latinx restaurant manager

I'm relatively computer-savvy, but I don't have access to decent equipment. And their website is definitely not optimized for mobile phones. It's better than a lot of websites. But there were still many communications that I would miss because I couldn't see apps or because emails would try to link me to

things that, a lot of the time, would not generate.

—A transgender claimant

When most people are doing all of their internet over a phone, you don't necessarily have the ability to download a PDF or something so that you can then save and send to somebody else. So that can be very frustrating. The other option is to sit and try and take screenshots of something that's on your phone. And then it becomes a six-step process to send someone a picture of a document.

—A teacher in her 30s

Applying for Benefits

PROFILE INFORMATION

All but three of the interviewees applied for benefits online using eServices. And starting with some of the questions on the profile eForm in ESD's online application, most realized that applying for benefits was going to be a much more complex process than they expected. In addition, a large number felt that they themselves were not the "standard-issue" claimants that the questions appeared to be developed for.

In answering profile questions, interviewees often found themselves tripped up by the limited lists of options supplied in the many drop-down menus. For example, an anomaly of the profile information page was lack of an option for claimants to say that they lived in a house instead of an apartment or building, as one claimant pointed out:

I live in a house. What am I supposed to pick? I ended up going with "Building," but I thought if they had "Hangar" they would have "House."

This claimant found, through trial and error, that there were also other questions on the profile e-form that were either non-working or difficult to interpret.

The upper-right checkbox seems like it should be clickable and the website seems to indicate that it should be clicked, but it is not a button; instead, the instructions to the left of the checkbox are what the website wants you to click.

—Mixed-race office worker

Unit Types allowed in drop-down menu for claimant address

Apartment	Hangar	Penthouse	Space
Basement	Lobby	Pier	Stop
Building	Lot	Rear	Suite
Department	Lower	Room	Trailer
Floor	Number	Side	Unit
Front	Office	Split	Upper

They definitely don't try to make it accessible for anyone who's not really on top of their numbers and letters and writing. During the whole process I just was thinking: Why would someone who can do all this stuff need unemployment benefits?

—Transgender worker with anxiety disorder

MONETARY ELIGIBILITY: WORK AND WAGE HISTORY

“If you’re different, there's no way of explaining it to the system.”

The basic eligibility rules for receiving benefits were not clear to many claimants. They may have considered applying for benefits but ended up not doing so, waited to apply because they were not sure they would be eligible, or applied but ultimately were found not eligible. If any aspects of their work and wage history varied from the norm, they were generally in doubt about the rules and how to answer the questions on the applications.

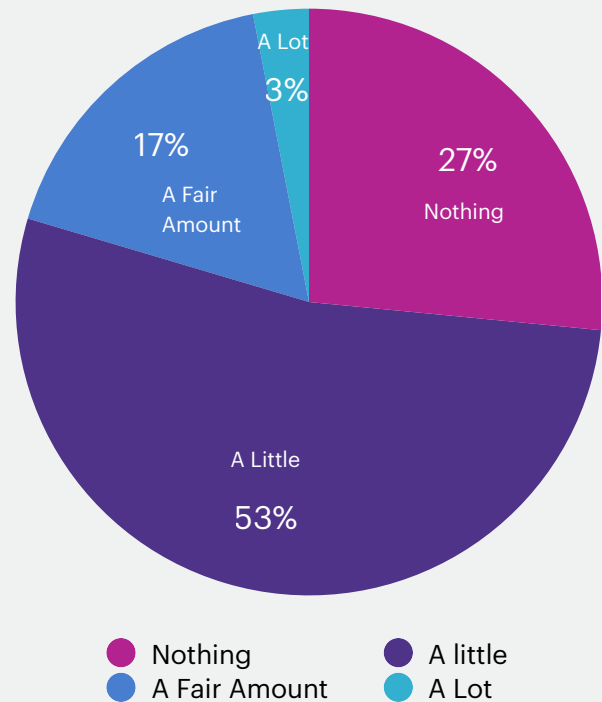
There were various acronyms that were confusing. It was unclear to me what I was signed up for, what I was unable to sign up for, what I had signed up for but wasn't yet in effect. I tried to ask the website, ask friends, or just threw my hands up in the air.

—Service worker in his 30s

Employer Details Requested

- Employer Name
- Employer Address
- When did you start working for this employer?
- When did you last physically work for this employer?
- Why did you separate from this employer?
- Have you applied for or are you receiving retirement pay from this employer?
- Please provide your gross income before any deductions, including taxes.
- How many hours a week did you work, on average?

WHEN YOU LOST YOUR JOB, HOW MUCH DID YOU KNOW ABOUT THE AVAILABILITY OF UNEMPLOYMENT BENEFITS?



Others were surprised but some were also discouraged to learn that a detailed 39-page printed Handbook was available that covered all the rules. Most had never seen it, but one claimant was angry at the necessity of a lengthy guide and what that said about the system.

There could have been more easily digestible information. You need some kind of clear, bullet-pointed table of the essentials. I feel like you can tell me really succinctly in one page, here's what's important; this is what you need to know. I was able to Google online web forums to find that information and it was quickly answered.

—Program coordinator in his 30s

Claimants must meet certain criteria and thresholds to receive benefits, such as 680 hours worked over a certain set of quarters. And claimants’ statements about their work history and wage history must coordinate with records submitted to the Employment Security Department (ESD) by employers. But a

number of possible variations in work history are not recognized or are inadequately covered by the eServices application.

A lot of the questions were really open for interpretations and the system is not user-friendly at all if you're confused.

—Asian-born office worker

The application process fails to accommodate claimant situations that differ from those expected and “normal,” some claimants said. This claimant’s benefit denial was based on the confusion the application created for them and the lack of assistance by ESD.

It was confusing for me because I had had traditional work and I was also a self-employed person and I thought, Oh, I can't give them the traditional one because I didn't get fired; I quit. But I was still self-employed.

—Transgender Latinx worker

For other claimants, mysterious but stubborn complications stood in the way of establishing their monetary eligibility for benefits.

In the beginning one of the things I had to keep calling about was when I put in my hours it said I qualified, but in one of the phone calls I did they said you don't qualify because of hours and I didn't know what to do about it. And then I kept calling and calling and they saw the issue was on their end and they fixed it. And then after submitting it they needed to verify my ID again. And then I waited and waited and they again said I didn't have enough hours. I had to move back home with my mom and my brother. My mom has a job that was essential, so she's had job security for two years now. But the process was infuriating. It felt like it would never end.

—Black transgender service worker

Claimants experienced uncertainty about whether they were eligible for unemployment benefits for a range of reasons. Most often mentioned: the sheer complexity of the overall system and its rules and the inability to obtain assistance to understand the process.

In the interviews, people said the use of terms like “retirement benefits,” “severance,” “part-time work,” and “notice period” often left claimants perplexed.

“During the whole application process I just was thinking: Why would someone who can do all this stuff need unemployment benefits?”

I think most people generally want to be honest. If it's convoluted, it's really hard to give an honest answer if you don't actually understand what they're asking. With questions about severance packages or part-time work, it looks like they're asking what color is the sky but they're really asking what color is the dirt.

—Small business owner in his 30s

I had random questions. Being an actor, sometimes I get residuals which is like a whole weird, other payment type. And I couldn't find a clear answer online about whether residuals should be reported to the unemployment office.

—Actor in his 40s

I felt it was all pretty clear except that when it was asking how many hours I worked with the first claim, there was no option for me to put “on call.” And I tried to explain to people there that as an on-call employee, I could work zero hours a week, I could work 5, I could work 10 or 20. And it's very week-to-week, month-to-month. That's the nature of it. When I called in about that they said, well, we need to put a number and they asked for an average and I

Which of these possible problems, if any, did you encounter when filing an application for benefits?

Unsure of how to answer questions	38%
Couldn't get through to apply over the phone or online	31%
Did not understand vocabulary or terms	23%
Made a mistake on a question and could not correct it	10%
Claim or appeal appeared to have stalled and wanted a status report	32%

remember I just made something up. It was definitely frustrating.

—Mixed-race communications worker in her 40s

The boxes don't fit me. A perfect example is "What is your wage?" My wage varies from day to day, from job to job. If the department only knew how much time was spent going through paychecks. I was figuring my wages every way I could so that I could come up with an average.

—Indigenous teacher in her 60s

COVID-19 multiplied the questions and issues involved in interpreting eligibility. One pointed to the question "Why did you separate from this employer?" to which her answer was complicated.

The reason that I ended up having to involuntarily resign one job after a week was because I couldn't reach an accommodation agreement, due to COVID



concerns, with my employer and I couldn't come back into the office in person because my doctor advised me not to be in an office environment.

—Customer-service worker in her 40s

Little-known references and rules could present major obstacles to establishing eligibility. A few interviewees lost out on benefits because they did not know—until they tried to apply—that the unemployment program's ban on backdating a claim a few weeks after losing a job might defeat their entire claim.

I was denied unemployment insurance because I didn't apply for it the minute I became unemployed. And I said, what? There are no rules anywhere stating that to be eligible for unemployment insurance you have to apply immediately. Maybe it's hidden somewhere.

—Transgender audio engineer in her 30s

I imagine that there are a large number of artists who don't even bother claiming because they know they're going to run into this thing where they're partway employed by something else and they're unemployed in this other way and there's no way of explaining it to the system and we're just told that we're not eligible.

—Artist and caregiver in her 60s

Some claimants were stumped by questions about receiving a certain type of payment or funding.

"Is your employer paying you through a notice period?" and "Have you made changes to your retirement or 401(k)?" I didn't know what those questions meant. They sent me a letter saying you have to respond to this and clarify it. I sent them messages. They didn't answer and they denied me benefits.

—A Latinx office worker over 30

Claimants who have less traditional jobs, are not salaried, have multiple employers, work in both W-2 jobs and self-employment, or do not work 9-to-5 jobs were likely to have a much harder time finding an answer to these questions that fits their situation. Responses also suggested that higher-income claimants may find it easier framing answers because they are less likely to fear "getting in trouble" if they do not express their situations correctly.

How to report two different income streams was another common dilemma.

As somebody who was both having freelance income and lost a full-time wage job that they depended on for their sustenance, I ended up shooting myself in the foot. I misinterpreted what was meant and I said that I was employed more than I actually was. Is there a standard for figuring this?

—Retired musician in her 60s

Frustrated that the application required that claimants report a single wage, one claimant who worked three part-time jobs, with total hours ranging between 20 and 40 per week, could find no available menu options for his situation and felt forced to only report the hours from one of the jobs.

There wasn't really a way in the IT system for you to show that you had three employers. I was only able to represent the unemployment benefits as one main job that had variable hours. So it hurt me a lot.

—Restaurant server in his 30s

NONMONETARY ELIGIBILITY: JOB SEPARATION, AVAILABILITY TO WORK, JOB SEARCH

“The language really threw me off”

The eServices form’s questions on nonmonetary eligibility related primarily to the claimant’s job separation, their ability and availability to work, and their job search. All of these issues were complicated by the many variations in claimants’ circumstances. Multiple claimants couldn’t see how to answer the question of whether they are able and available for work, especially since the requirement includes being “immediately available to accept suitable work.”

First-time applicants can get particularly confused by the suitable work question. Although the question carried different implications during the pandemic when job search requirements were often suspended, one claimant explained how they missed out on a week of benefits by incorrectly answering.

It was asking if I was available to work, and I put ‘No’ because I thought that’s the whole reason why there’s unemployment. But I was supposed to put ‘yes.’ So I had to wait and then apply again.

—Black gig worker

When I first started applying for unemployment, it was because my hours had gotten cut, so I was under the impression that since I have a job, I’m not available for other work or something. I didn’t know. I was confused by the question.

—Production worker in his 40s

Compounding that confusion were aspects of the e-form questions that are obsolete or inaccurate in the first place. For example, as recently as April 2023, claimants reported, applicants were still being asked “Were you available for work each day of the week?” The question wrongly implies that this is a requirement.¹

Questions about their job separation also baffled many claimants.

I didn’t really understand what “fired” meant in the context of unemployment. On my initial application I said that I was fired which was not what my employer wrote in the severance agreement. So that delayed my application and I think subjected it to an extra layer of review.

—Mixed-race female social worker

But even experienced office workers could find themselves suddenly without any income and with uncertain status vis-a-vis unemployment benefits if they gave their employer the customary courtesy of two weeks’ notice before quitting a job but were

¹ This has never been an across-the board requirement: the rule has long been that claimants are required to be available for the hours customary for their occupation and a significant number of jobs are considered to have customary hours from Monday through Friday, not 7 days a week. Until recently, about 40% of occupations would be required to be available to work 24/7, anytime day or night. But changes in WAC 192-170-010, effective January 2, 2022, narrowed the availability requirement to be 40 hours per week of the customary hours of the occupation. However, this changed requirement was not promptly reflected in the eServices portal.

discharged immediately. It is not obvious—and not explained on the ESD's website—that this is considered an “accelerated quit,” equivalent to being fired.

I handed in a letter of resignation, and then the next day my boss was basically like, all right, so you can pack up your stuff and just leave, even though I'd given two weeks' notice. I didn't realize at the time that this counted as technically being fired. That wasn't made clear on the website at all. And so when I was filling out the paperwork I put down that I had quit and the process ended up taking a long time.

—Black office worker in her 30s

Interviewees sometimes were blindsided by the little-known rule that any single quit not considered for good cause during a claimant's base year (usually the first four of the last five completed calendar quarters) could doom the entire claim (as could any discharge for misconduct during that same period). This was



one of several reasons why claimants could find themselves whipsawed by receiving benefits, then much later being told they had to return the money.

I showed up at a job and it was an unsafe work site and it was hard manual labor that didn't work with my skill set. So I worked three hours, didn't return to the job site and stated that I quit because of health concerns; it was outside in wildfire smoke. My claim went into adjudication for six months, then I finally got paid six months of back-benefits. Then almost a year later they notified me that I had been overpaid. Because I quit a job I worked three hours at, I owe them more than \$12,000.

—Middle Eastern female caregiver

Other claimants noted that there had been no room in their arrangement with their employer to be away from the job to handle ordinary but essential tasks that had to be done during the day, during working hours—but the eligibility criteria did not seem to recognize that. In a typical case, even a worker who was required to use his car for company tasks ran into such firm resistance to a car repair that it forced him to quit his job and lose his eligibility for benefits:

I said I can't accept an assignment for tomorrow because I need to get the car repaired and take care of childcare arrangements. My employer said, "You are going to have to figure out a way in and do your other stuff after work."

—Black service worker

OBTAINING ACCOMMODATIONS

Federal and state law require that workers receive accommodations to access public services like unemployment benefits if they have a disability. But the range of conditions or traits that can be barriers to people applying for benefits is vast, and the unemployment benefits system shows varying levels of responsiveness to those claimants' needs.

Disabilities

The U.S. Bureau of Labor Statistics' most recent count of employed persons with disabilities was conducted in 2022. Nationally, people with a disability

Q: When you applied for benefits, did you have any disabilities or other circumstances that could make applying for benefits difficult for you?

are twice as likely as people without a disability to be unemployed and available to work.²

Asked whether they had a disability, 35% of the 100 claimants interviewed by ULP cited one or more physical disabilities or mental health conditions. Another 26% cited other barriers including their limited English proficiency, computer skills, or lack of access to technology.

I have ADHD and I'm not good at filling out forms. I read everything really literally. And that makes it impossible to fill out forms because a lot of times they ask you things and you somehow have to guess more information than you actually know, in order to know how to answer the question. And I actually was requesting assistance both times and just couldn't get any assistance filling out the forms.

—Transgender audio engineer in her 30s

Whenever I called the ESD office, I had to fax them a letter that my mom would have to have signed to say that it was okay for me to speak to them on her behalf. Maybe four times while we were setting up the benefits and then two additional times when we had to speak with the person who was trying to help her get a job. With learning disabilities, I was okay reading the website but sometimes I had to have my mother help me understand.

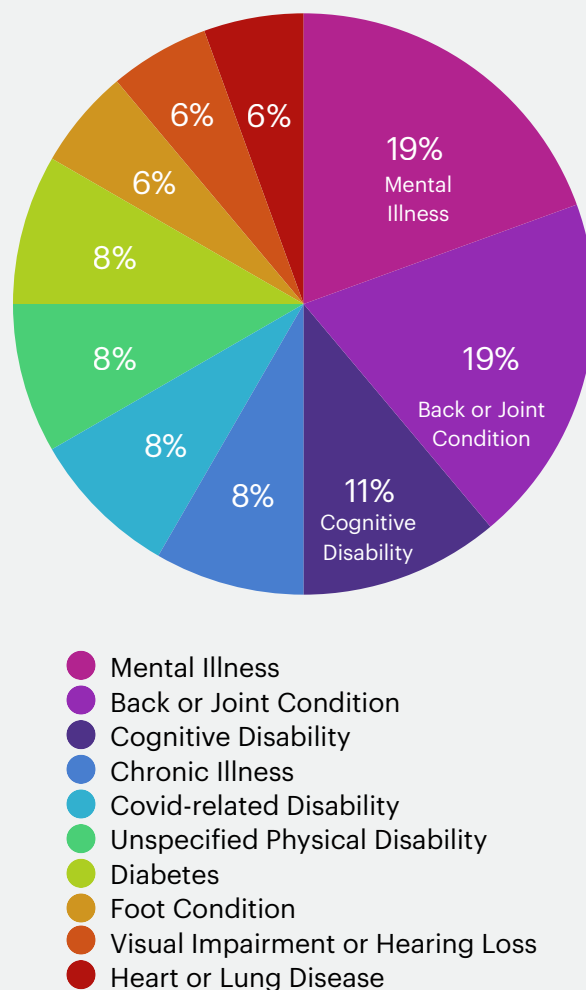
—Mixed-race salesperson who applied using a cell phone

Interviewees cited a number of inflexible rules when they were trying to help someone else in extreme

need of assistance. For example, three-way calling was not allowed.

A friend was caught up in identity fraud and was too distraught and emotionally drained and depressed from the threat of eviction because they couldn't pay their rent. So I tried. I think I was on hold for seven and a half hours and then I finally got through to someone and asked, "Can you please just call my friend or can you give me enough time to three-way

CLAIMANT REPORTED DISABILITIES



² With an unemployment rate of 7.6% nationally, about 572,000 people with a disability in 2022 were unemployed and available to work; 6,056,000 people with a disability were employed. U.S. Department of Labor, February 2023 press release, "Persons with a Disability: Labor Force Characteristics Summary," <https://www.bls.gov/news.release/disabl.nr0.htm>.

call with them and bring them into the line?" And they said "We can't do that." And I said, "My friend is on the verge of suicide—literal suicide—because he can't get through to people." And they were like, "Well, we're not allowed to do three-way calls."

—Black transgender Uber/Lyft driver

A lot of times you might—through the luck of the draw—get somebody very experienced. They could help you but you might also hit a massive amount of new people that really didn't know and they would have to try to connect you to another person who had more experience and, of course, you'd have to wait on hold a little longer to reach somebody else.

—Parent assisting claimant with disability

The frequency of disability status significantly varies when race and ethnicity are taken into account. According to the Centers for Disease Control, nationally, approximately 3 in 10 American Indian/Alaska Native adults, 1 in 4 Black adults, 1 in 5 White adults, 1 in 6 Hispanic adults, and 1 in 10 Asians adults have a disability.³

Computer skills

It feels like a lot of things are switching to digital only and it makes this huge demographic of people who either don't have access because of income barriers or don't have access because of age and ability.

—Black transgender gig worker

Many claimants found the application process on the eServices platform unnecessarily cumbersome. "It's one of the most complex I've ever tried to navigate in terms of finding information and then finding it again," commented one interviewee. A male service worker said, "I find navigating these systems to be incredibly taxing and convoluted and unpleasant." For some, being unable to view more than one screen at a time made the e-forms impossible to work with. An absence of understanding of various disabling problems made the barriers worse.

I'm really grateful that I have the amount of literacy that I do in computers and also in government systems. But this is still so stressful for me and so hard for me to understand. For somebody who had far less literacy, it would just be impossible, especially with all the extremely vague notices, because it felt at times just nigh on impossible for me, especially with all the different things related to COVID that were coming out and the notices that were extremely vague. The main thing that sticks out to me about my experience is just how nerve-racking it was. It very much felt like if you get this wrong, you're gonna be in big trouble.

—Transgender community services worker

I'm not a real computer whiz in the first place, so it was very difficult for me to navigate. But I know part of that's just my age and I'm just not used to stuff like that. Even my phone flummoxes me sometimes.

—A retiree who works part time



³ <https://www.cdc.gov/ncbddd/disabilityandhealth/materials/infographic-disabilities-ethnicity-race.html>.

Homelessness

Housing issues abounded among claimants during the pandemic, and access problems that are routine for the homeless became widely shared experiences. Unemployment is the second largest cause of homelessness, and more than 25,000 residents of Washington experienced homelessness in 2022, according to Statista.⁴

I am homeless, so it was difficult to get my mail and be able to access the internet. The ESD phone system is always congested, so a lot of the time it took me having to be at my mother's home where I can sit for hours. Normally I'd have to move around a lot. It's hard to charge my phone. I'll be on the phone for hours and it will kill my battery. Uploading a file and faxing files was difficult.

—Mixed-race cashier in his 40s

One homeless claimant who had filed an appeal of his benefits denial asked the Office of Administrative Hearings (OAH), because of his destitute state, for an expedited hearing, which is available in some circumstances. However, OAH was not set up to process a request submitted informally, even though the claimant had no resources to use regular communication processes like mail or email to make his request, so no action was taken to accommodate him.

Limited English Proficiency

Ninety percent of the claimants interviewed named English as their preferred language. Of the others, two preferred Amharic, two Korean, one Jamaican patois, one Spanish, one Arabic, one Mandarin, and two Somali. The lack of languages other than English and Spanish on the eServices application form forced some limited English proficiency claimants to improvise resources to interpret the language.

Without calling the number for interpretation, there are no other language options. So it's difficult for a person who only speaks Chinese like me to understand the questions. I was using cell phones to

do the translation and then just guessing some of the meanings to understand what it was saying.

—Asian sales clerk in her 50s

Communications often suffer even when language accommodations are available and computer literacy is regularly a hindrance, reported several claimants—often because of the specialized terminology used in unemployment insurance.

The good thing is that I have an interpreter for me in Amharic, which is my language. But because the requirements and questions are so technical...Tell them interpreting can be very, very hard.

—Black truck driver in his 40s

But some claimants reported getting needed help with translation after delays.

No one checked it for my information for three months. A lady—God bless her heart—she helped me and she looked at all my information and she said, "You know, they put some wrong information for you over the phone." I told them, "My second language is English. My first language is Somali." She prepared for a translator after that, then everything was clear.

—Somali rideshare driver in his 30s

Computer and phone access

An additional barrier for some claimants was that the lack of access to computer equipment—with free services at WorkSource and libraries unavailable during the pandemic—forced them to use their cell phone to apply. Cell phones' small screen size limited the display of eServices information—causing many to give up.

In answer to the question of whether there is anything that can make communicating with the Employment Security Department difficult for jobless claimants, one said:

Just cost, because you need a smartphone or internet.

—Former IT worker in his 40s

⁴ <https://www.statista.com/statistics/727847/homelessness-rate-in-the-us-by-state>.

About 85% of adults, as of 2021, own smartphones; 11% own a cell phone but not a smartphone, according to the Pew Research Center.⁵

A perhaps lesser-known side effect of reliance on cell phones, when the claimant only owns a non-smartphone, is that they may have to pay substantially for a 60-minute use of phone time, one interviewee pointed out. Using a TracFone, for example, 60 minutes can be a \$20 expense for a basic phone card, with added options at varying levels of outlay for talk, text, and internet and discounts of \$30 for 120 minutes and \$60 for 240 minutes.

This factor heightens the stress on claimants who may be faced with lengthy and often unproductive waits on the phone to contact an agent at the Claims Center for answers to questions required for their benefit applications.

Limited literacy

Limited literacy is an under-acknowledged problem that impedes some claimants even when they can communicate well verbally. A Black claimant who does not read English and was the sole source of support for his family explained in an interview that he had worked as a driver and parking attendant, and was now in school, mostly remotely, to receive a commercial license. His main issue was his trouble keeping track of dates to report his job searches. He could not understand how to do that. An interpreter was available but did not understand or translate all of the terms needed to understand the rules, this claimant said.

My computer skills were also limited. There are so many things on the website to differentiate. On the computer I couldn't save the information about job searches I made. It's very hard for me to save it and I'd retry and upload it. Then I would lose the connection. We don't have prior knowledge of the system. Then there is the clearness of the voice as

we're talking by phone, then sometimes it will be cut off.

—Administrative worker in her 20s

On appeal, a sympathetic judge reversed the overpayment because the claimant, not able to read English, could not understand the notices or respond with accurate information about his job search, or file an appeal on time. So this claimant was able to avoid financial devastation.

Although Washington's rate of limited literacy is 16.1%, which is below the national average, it is still a substantial number. That represents more than 64,000 members of the labor force in Washington. Nationwide, about 48 million people between 16 and 65 had low literacy in 2017 assessments.⁶ That population was about 35% White, 23% Black, and 34% Hispanic in 2024.⁷

OPTING OUT

"I didn't want to risk applying, based on what happened last time"

Claimants reported they often ended up not applying for benefits because of doubts about their eligibility, their predominant worry being that their job separation didn't seem to relate to the application questions. Lack of clarity about the rules leads some to delay applying so long that they decide against it by default.

There was sort of a gray area around losing my job. I took time off to have my child, then when it was time for me to come back to work, the pandemic was on. But there was an understanding that I was going to start teaching again. But then it didn't happen. So I

⁵ <https://www.pewresearch.org/internet/fact-sheet/mobile/>.

⁶ "U.S. Adults with Low Literacy and Numeracy Skills: 2012/14 to 2017," Data Point, NCES 2022-004, National Center for Education Statistics, U.S. Department of Education (May 2022), <https://nces.ed.gov/pubs2022/2022004.pdf>.

⁷ "Literacy Rate by Country, World Population Review (2024) <https://worldpopulationreview.com/state-rankings/us-literacy-rates-by-state>.

wasn't "let go of," per se. So that's why I was thinking maybe I couldn't qualify.

—Teacher in her 40s

I lost my job because the contract was ended early because I wasn't performing properly. Would that impede my getting unemployment if it means that I am avoiding work? I don't even know.

—Black transgender office worker

In some cases, they felt they could not report the real reason for the job separation.

I felt like I was fired for being transgender and wouldn't have wanted to talk about that because I wouldn't have been believed.

—Customer service worker in his 30s

Uncertainty surrounding their eligibility prevented other claimants from filing for benefits, they reported, specifically citing "bureaucratic intimidation" and lack of access to expert guidance.

It felt like an intimidating maze of language I didn't understand how to navigate. I can't even remember if that was an option to talk to a real person. Or just an option to say, this is the situation, am I eligible, rather than trying to type a question or an answer to a question.

—Teacher in her 40s

I couldn't log in. I couldn't file. There was nowhere for me to file. So I sent messages and they'd say it'll be six weeks before you get a response. Then I waited six weeks and heard nothing. And it was a year before I got through to a live person over the phone. And then they were super condescending. And they said why did it take you a year to file? I just gave up. But I have friends who are telling me I should still apply because it's not my fault I was locked out of my account.

—Legal assistant in her 30s

"I started to fill out an application and my employer said, 'Please don't'"

A problem for other claimants was that the money they received for outside work might be viewed as disqualifying them from benefits.

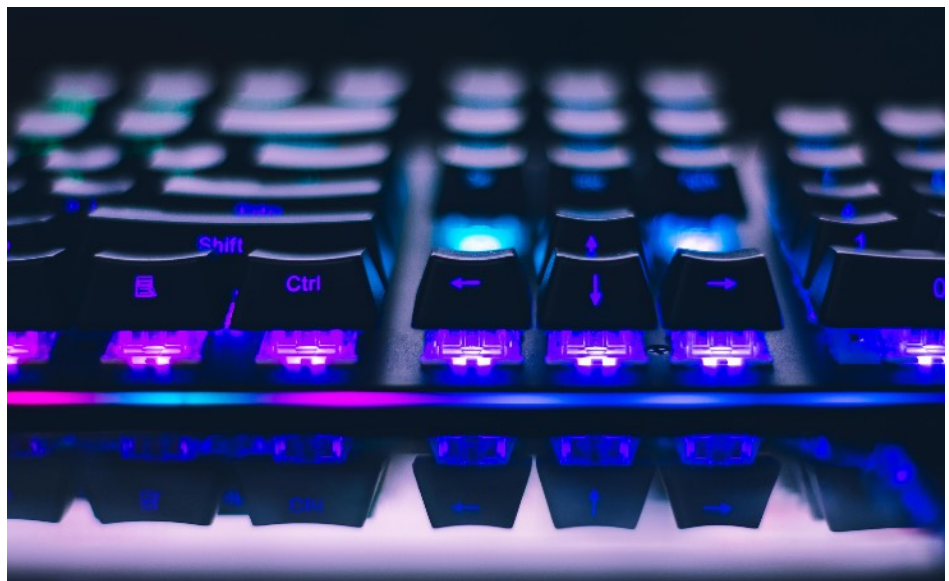
I was worried that the money coming in from freelance work, even though it wasn't anything consistent, would disqualify me. I wish I would have applied. I didn't know the system and I didn't know what would qualify me or disqualify me, and I knew that during certain months, I'd be making a lot from my freelance work. And so I was worried that they would see that and be like 'Well, you still have a job.' Even though that was a survival tactic and wasn't consistent.

—Administrative worker in her 20s

Unfamiliarity with the rules for eligibility led some potential applicants to think, mistakenly, that a quit or the completion of a contract automatically ruled out benefits.

I didn't have a lot of context. I didn't really understand what "fired" or "quit" meant in the context of unemployment.

—Mixed-race worker in her 30s





After receiving an overpayment during the pandemic, some non-filers said they were scared of reapplying for benefits in the future.

I think that that was kind of in the back of my head: Oh, my situation is more complicated now, and if I do it wrong, then there's more likelihood that they will take the money back, which just wasn't something that I wanted to risk.

—Transgender Latinx social services provider in their 20s

Intimidation by employers, including implied messages that filing for unemployment would hurt the employing unit and threats to fight the worker's benefits, sometimes persuaded claimants they shouldn't apply.

I started to fill out an application, and my former employer said, well, please don't and if you file for it, we will be forced to deny it. But also because it was a small school there was some guilt in there. Like, if you file for unemployment, and you have a claim, it's going to up our taxes.

—Teacher in her 40s

For another, unreasonable job search requirements combined with their employer's hostility to paying unemployment benefit taxes were strong disincentives to applying for benefits.

I was worried that maybe the executive director would hold it against me if I had them pay for unemployment benefits. I guess I don't exactly know where that money comes from, but I was worried

about it limiting my ability to get a job in the future. To me benefits were just behind a wall of having to constantly fill out paperwork and having to look for new jobs—which I wasn't willing to do since I was planning on going back to my old job once they acquired funding.

—Transgender Latinx social worker

A claimant who would have been a first-time applicant but decided against applying cited the unfamiliar vocabulary of the application.

The language really threw me off.

—Mixed-race female health professional

A former ESD employee didn't trust information being relayed about eligibility for benefits and opted against filing because part-time workers like her had never been eligible for benefits before. Other claimants who were not sure whether they were eligible lost motivation to file because of their apprehensions about what the process would be like.

I figured it would be too much bureaucracy.

—Transgender restaurant server

Questions and Answers

“I was just shooting darts in the dark, trying to figure out what was wrong”

Getting clarification or answers to their questions was essential for many claimants to complete their applications, but was challenging across the board.

I wanted to ask them questions about which type of benefits I was eligible for that I just couldn't figure out on their website or from their handbook. When you apply for something they have this little warning that comes up that if you answer dishonestly, you can get into all this trouble. And I didn't want to answer dishonestly, but I honestly didn't know which way to answer! And so, if I flip a coin and I choose one, am I going to get in trouble later? So that was a little stressful at times.

—Scientist in his 50s

The terminology that they're using was unclear to me. I think if you work in the unemployment office, you know that a certain word always means X. But, without really clear, definite definitions of some of the words, it's just hard to know if you're doing things correctly. Usually, my kind of questions didn't really have answers. So I would just try to Google things to figure stuff out, or try to read a news article about how things were supposed to work. And hope that it was correct.

—Small business owner in her 40s

Claimants said they had variable levels of comfort with using eServices to get information about what was going on with their claim. One problem often faced was not seeing notifications about a deadline until it was too late to meet the deadline. An interviewee whose mother was helping her file said:

My mom just sent me a picture of her opening a whole bunch of mail and I was like, what is this? It was weeks late already. And then I went on the website and I saw I got a notification. It never went to my email, but there was a little notification email box

within my account. And it had a big, big red Number One there.

—Asian casino worker in her 50s

Many interviewees found their own situation didn't seem to fit the questions, particularly as to their job separation and determining eligibility. One said she actually waited a couple of months before applying for benefits because “reading the language” on eServices about distinguishing one job separation from another, she wasn't sure if her job separation qualified her.

If I remember correctly, it was something like, “You didn't choose to leave; you were kind of forced to leave.” I wasn't completely sure if a contract ending qualified me for that. At one point when I was working there, there was a permanent position that had opened up and they said “Oh, if you apply for this, you know, you'd probably get it.” And I opted not to. So I was just a little bit confused as to whether I actually qualified or not.

—Teacher in her 30s

Chaos surrounding the pandemic compounded claimants' uncertainty about the nature of their job separation. One claimant needed to know if benefits could be available if a contract ended early because they weren't performing properly.

I had difficulty understanding the federal benefit rules and often found the various acronyms to be very confusing. And it was unclear to me what I was signed up for.

—Service industry worker in his 40s

I applied before they had any of the federal programs ready. I was trying to answer questions but none of them matched my situation because they hadn't updated the website or anything yet. That caused me a problem because then I got rejected because I had not been an employee.

—Small business owner in her 40s

Concepts of discharge, misconduct or non-misconduct, good cause to quit, or how a quit can turn into a discharge were often completely unclear to claimants.

It's kind of confusing because I got fired from my full-time job which was remote, but I was already working part time at a brewery. So now if I don't have any hours at the brewery for that week, they don't give me any unemployment because they think I wasn't available to work. So by having a part-time job, I kind of am hurting myself more than helping. If I'm out of town, even if I'm still looking for full-time work, doing remote interviews and stuff, it still doesn't count.

—Data analyst in her 20s

COVID made the entire application process far more difficult to navigate and agents on the phone sometimes misstated what benefits were available and how a claimant could qualify for them.

The difficult part about it is understanding what really applies to me. For example, I was furloughed for weeks. Did I really qualify? Was I up for PUA versus regular UI? I'm still not very clear on that. All these regulations that were coming out, they said, "Here's this new rule," but they never really explained it. In the end, they never really had anywhere where you could look up that information.

—Asian administrative worker in her 30s

Applicants with questions at times encountered a Catch-22 situation: There was no recourse unless they could supply a Social Security number acceptable to the system—and in some cases the SSN was actually the missing piece.

It did not recognize my Social Security number. And so I couldn't actually get through to a representative and I tried and I tried and I tried and I tried. That little glitch is odd because obviously I've only had one Social Security number my entire life.

—Design professional in her 30s

And this distrust is exacerbated by a lack of clarity about when a claimant is not eligible.

The forms are just so long. They're in another language. It's very complicated for someone who's only had a high school education to really understand, in my opinion.

—Asian entertainment industry worker in his 50s

THE CLAIMS CENTER

No single topic evoked so much despair among claimants as the unresponsiveness of the Claims Center when they had questions for which answers were essential to their claim. Only one claimant interviewed for this project did not try to reach the Claims Center: an Asian person who worked in IT sales.

Some claimants said that the system, no matter how backed up, should not be forcing callers to do something that is impossible for people with day jobs or caregiving responsibilities they might not have if they were working—that is, remain on hold for extended periods and often be cut off while waiting.



If I were an hourly employee working at a coffee shop or something, I couldn't have been on hold for a couple of hours in the middle of my work day.

—Transgender Asian office worker

To exist at all, lengthy hold times presume a reliable cell phone signal, recharger availability, and no limits on available minutes on a claimant's cell phone account—resources that can swiftly differentiate claimants with few resources from others.

The inequity of access that can be created by long hold times can be

***“I couldn’t get a straight answer
—or even two answers that were
the same”***

dramatic, some claimants pointed out. Others noted that referrals from agents would send them into a circuit of new numbers to call.

Wait times were horrific, Yeah, horrific. And then there were quite a few times where I would get hung up on because when I was calling, I was commuting from Portland, Oregon, up to Seattle for half the week. And so there are a fair amount of rural dead spots. So I would be on hold for 40 minutes, 50 minutes, an hour and 10 minutes, and then the call would drop. So yeah, frustration, I would say would be the word that would sum up my experience with Washington unemployment overall.

—Mixed-race social worker in her 40s

The call center didn't help. Everything I asked them, they said "We don't know." I stayed like that for two or three hours. Everyone, they'd keep pushing me to another one. Then when I called again, they said "we don't know if our computers crashed—this has happened to everyone." Then I reached someone who speaks Arabic and she helped me. She told me how to appeal.

—Middle Eastern caregiver in her 40s

I had to scratch and claw to get info and help. My employer had the information and I didn't have access to it anymore. It really got difficult because I was trying to apply for jobs, and oftentimes I'd have to pick up for a call and lose my place in line.

— Black project manager in his 40s

As many claimants pointed out, getting someone on the phone was both the only option for multiple reasons and very often impossible. There often seemed to be no acknowledgement that the website lacked answers on many claimants' individual circumstances.

The fact that you really have to get a human on the phone to get things done properly is a huge hindrance. I don't see how that is scalable. I'd have to commit to spending hours on the phone—most likely

—if I actually want to get help with anything. Then you go okay, well, I can't call now because I don't have that much time now. Who the hell has that kind of time?

—Small business owner in her 40s

I knew their website backwards and forwards. I could direct them to the paragraph of something and I was like, "No, that's not what it says on your website. This is what it says on the website," and then they would be like, "Oh, well that's changed."

And I was like, "Well, we need to change the website. This is what it says the benefit is, so this is what I am expecting."

—Indigenous Latinx gig worker in her 40s

***“I would just live my life with my
phone on speaker”***

What's weird is there's a lot of times where you would call their helpline and it would just say, "You know what, "We're not going to take your call." I understand they were busy; they were inundated. But they cut off communication with their customers and therefore, they were creating problems by doing this.

—Scientist in his 50s

An impression widely shared among claimants over the pandemic was that ESD instructions on accessing help should simply be ignored because they would be counterproductive or have no net results except preventing the claimant from effective job search.

I was always being told to call another number. It rarely felt like calling them and asking for help would lead to a resolution and help, it felt like it would just lead to more tasks.

—Transgender Latinx social services worker

I could have been working on job applications or interviewing or going to businesses to try to get a job, if I weren't on hold.

—Transgender Asian worker



“It’s all bots and no humans and no explanations that make sense.”

Sometimes claimants said that there were two or three tiers of Claims Center agents lacking answers.

The times that I was trying to get through I was calling to see when was I going to receive benefits and that sort of thing. And, basically, during the pandemic, they hired all these people, but these people were only allowed to answer two questions. They had tiers. And the people that they hired to answer the two questions were the first tier, and more likely, they can't help you, so you had to go to the second tier and I remember this because I went through it, I went all the way to the third tier.

—Black customer service worker in her 60s

Occasionally, claimants were able to get advice on a hack to get the line picked up.

One lovely Claims Center representative gave me the tip of calling five minutes prior to the Claims Center opening at 8 a.m. and told me to write down in my notes what numbers to push. So I didn't even have to listen to the full automated spiel and guidance. It took about two to five minutes to even get through.

So at that moment, my call would be one of the first ones to come in.

—Design professional in her 30s

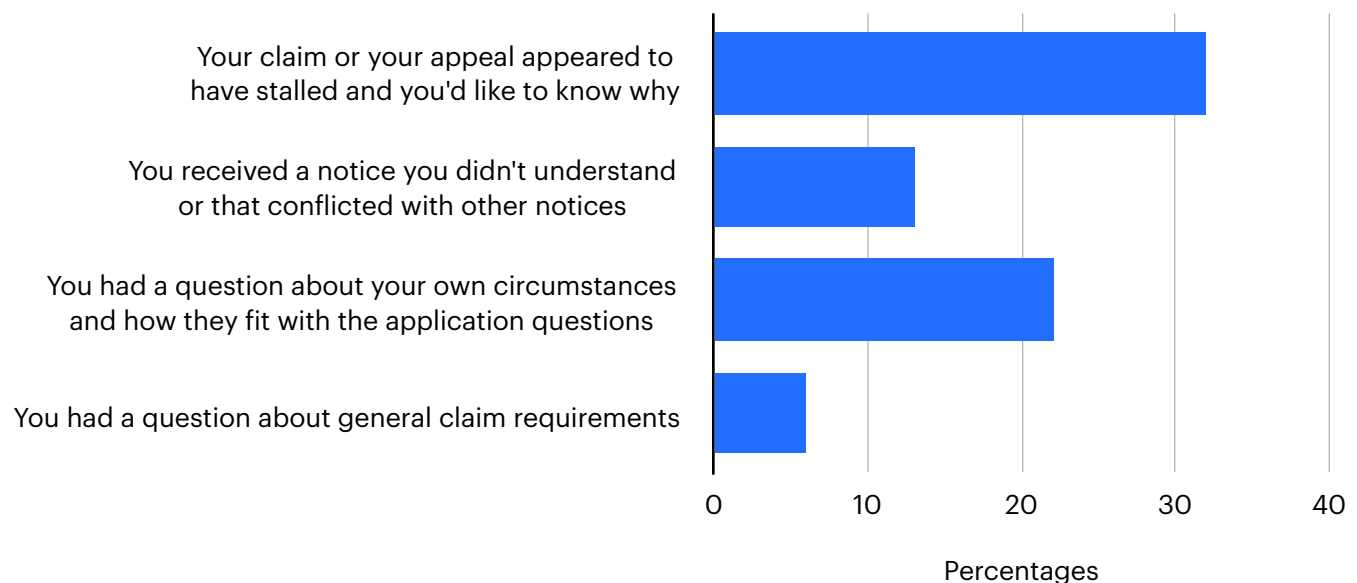
But one call agent, giving advice in one claimant's case, suggested that 50 calls weren't enough to say you couldn't get through and the caller needed to be "relentless" and call every 20 seconds.

Sometimes if you did need help, pity you, because you might have to call hundreds of times to get through to somebody. To one, I said, "Well, I called 50 times. I couldn't get through," and they'd say "You've got to be relentless and call constantly—every 20 seconds or so." There's one time I'd wait on hold for three and a half hours and then at the very end I got disconnected. That's the type of thing that you were often faced with if you did require any assistance. You would try to minimize any changes for that very reason. You didn't want to have to try to call somebody.

—Parent assisting worker with autism

Calling another state official's office was sometimes the only feasible option, some said.

IF YOU CALLED THE CLAIMS CENTER, WHICH OF THESE WERE SOME OF YOUR REASONS?





I tried calling and I could never get through. They'd just hang up on you. You can't leave a message or anything. They just say they don't have the capacity to answer your call. And then finally, I called the governor's office and a lady from ESD called me the next day.

—Accountant in her 50s

I applied and then I waited and waited and waited and waited. And they said "Don't call us. The phone lines are too busy. Use the portal—write us a message." And so that's what I was doing. I was told I would never get a reply. So finally, I found out how to contact a state district representative and then I did that. So they pressured ESD to respond to me. And in July, I got a call.

—Mid-level management worker in her 60s

There was gratitude as well as critique on the part of some people interviewed.

The government—when the pandemic happened they were trying to put out too many fires, I'm sure. If the situation were prepared for and they could say, "Okay, we're gonna need to hire this many more unemployed people because the majority of America is unemployed," it would have been a lot different. I think they just did the best they could which was wonderful and I'm grateful because I got help.

—Artist in her 30s

They have the call center in place but it doesn't seem like people are trained equally. When I got in contact

with someone who helped, someone who knew the job and could walk me through it, they really, really helped. But so many of the people I contacted had no idea what they were doing.

—Black Uber/Lyft driver in his 30s

Claimants with customer-service experience made a case for call agents to be at least understanding of claimants' plight, even if they could not offer any solutions relating to benefits.

The person that I spoke to was not very personable and not very helpful. And I get it. I'm assuming that she has a long queue and that she probably has to get through so many calls in a day. As someone who has done customer service for years now, sometimes it's not necessarily about the customer always being right, but you have the ability to set the tone as to how someone's day can go and you have to think about that.

—Sales supervisor in her 40s

On an interpersonal level, some claimants said the exchanges with phone agents were cordial and the agents tried to be helpful, although follow-through was a weak point.

Nobody was rude or dismissive. We were repeatedly getting customer service that I felt was acceptable in the interpersonal part of things but didn't solve the issues that we had. A lot of the time the person that I or my wife were talking on the phone with would say oh, yeah, I see that this looks all good on our end,

"I could have been working on job applications or interviewing or going to businesses to try to get a job—if I weren't on hold."

someone should review this in X amount of time. And then they wouldn't, so then we'd have to call again, wait on hold for two hours or whatever the case was, go through the first individual, get to tier 2, and explain our situation again. And then that person would say, I don't see why there's an issue here, let me escalate this to somebody else.

—Transgender Asian administrative worker

More often, claimants said they encountered dismissiveness.

He said, "Well, you have to repay it now. You owe it, so pay it," and that was it. And the gentleman was very rude. I'll never forget that. He transferred me to another lady who said I don't know why they would transfer you to me— you're in the wrong department. And that was it.

—Pacific Island caregiver in her 50s

Unfortunately, several people interviewed encountered phone agents who were abrupt or who implied the claimant was just sponging off the system.

It was just so frustrating because you would get people who were so rude, so disrespectful. One lady told me, referring to unemployment benefits, "There are easier ways to make money." And I was like "I'm not trying to make money here, I'm trying to not die."

—Pacific Island medical office worker in her 40s



Claims Center employees were often out of sync with what was stated on the website, leaving many claimants perplexed.

When I called them, they wouldn't give me any answer about the waiver application. They just told me they cannot give me a waiver application because they have to order it by the overpayment charge. Then I asked for the waiver application I saw on the website. They just told me, "Oh, we didn't know about that. Where did you find that information?" They didn't really know what they posted online.

—Asian worker in her 30s

Anytime I got through, I did not talk to the same person twice, which I understand. But to me, they're all looking at my file, and the whole information should be there, and why I couldn't get a straight answer or even two answers that were the same, I do not know. So it was frustrating. Even when I sent in emails, if I got a timely response, there would be a different answer.

—Administrative worker in her 60s

Much criticism focused on the one-way communication between ESD and claimants.

We've never really been able to get through to human beings to get those questions answered. All they do is send you a bill in the mail or via your account digitally and say pay it or else you're gonna accrue interest and we're gonna put a lien on your house. So it's all one-directional.

But you cannot get through to a human for any explanation. Whenever they've asked for information from my husband, "You need to provide proof of whatever employment activities you had during X time," he does that and follows it to the best of his ability and they'll respond, "You didn't provide this thing." For instance, he was doing some gig work and they said, "You didn't provide something from the employer's app," and that app didn't exist anymore. They're not listening. And they set you up with impossible tasks that are setting you up to fail. You don't have an opportunity to respond and get real information or understand how to appeal.

—Spouse helping production worker in his 40s

I just wanted confirmation that everything needed for my application was submitted properly. So that was a lot of phone calls in the beginning. Even just to get a positive "yes" on that, I feel like it took a month. Out of at least 20 emails asking for status updates or questions I maybe got two email responses back. They would always be very vague, just asking for patience. "We're processing your request." Never anything that actually explained or answered my questions.

—Black transgender gig worker

I had to call them from work, because it was during office hours, normal business hours and I needed to be on hold for like five hours. From work, this was unprofessional, and was a barrier because I need to use my phone for other things. And then their answers were pretty generic to what was already available in the FAQs.

—Transgender community services worker in her 30s

For many, avoidance of claimant questions seemed to be an agency mandate, though not necessarily a conscious goal of staff members.

When this was going on, it was quite a while before they acknowledged that they were not actually answering the phones, period, right now. And I and every other person who was told they couldn't go to work are just trying to call, trying to call, trying to call. Now they have a few messages on there and they tell people not to repetitiously call — just try again later. But you're never going to get through. You have to call over and over and like the fifth or eighth or tenth time you'll get through. It's a little bit weird that they're telling people not to do that when that's literally your only option.

My heart goes out to anybody that works in that call center. I felt like they're not trying to lie to you. I think that there's a lot of misdirection that's been handed down. You'll get one story from one person and then the next person you talk to says something entirely different.

—Small-business owner in his 30s

I made sure to wake up to be on hold. But I never had any success.

—Restaurant server in his 30s

MESSAGING, VIRTUAL ASSISTANCE, AND FAQs

Claimants filing via eServices almost uniformly said they consulted the website at esd.wa.gov frequently, and some commented positively (e.g., "Overall, I think it's a very well-done website").

Others' opinions of the website tended to range from neutral to critical ("not very clear," "not user-friendly"), with one saying "It felt like it was put together in the year 2000." A typical comment:

The website is all right. I think it could be more clear, because it seems a little outdated. I really had to dig through to find a lot of what I needed. I feel like there could have been more easily digestible information. It could just say: Here are the important things you really need to know.

—Program coordinator in his 30s

Many reported a mixed experience in locating the exact information they needed for their applications, claim-filing, or appeals.

I always got the impression that it was like paying lip-service. They kind of wanted to dissuade people from being able to use it by making it more complicated.

—Black project manager in his 40s

Messaging

Very few claimants reported receiving responses to questions submitted via email or through the eServices message feature. Typically, they felt the messaging feature was a dead end.

I was not really a fan. For one, you get notifications. So you have to log in just to see them. They're not pushed to you in any way. You know, a text or something like, "Hey, you got an important message you really need to look at right now." And so for me, I wasn't looking at eServices every day. I had to turn in my stuff once a week. And so by the time I would see "Oh, you have a notification," it would be four or five days too late.

—Youth program coordinator in his 30s



Well, the chat was just not a working piece of the website. During that whole time, I think everybody I had talked to tried to use it once but has gotten exactly nowhere with it and just never tried again. You know, you would send your message and then they'd send you an email or they said they would send you an email like, soon. They probably used that word "soon" or "shortly," and then they just never would.

—Mixed-race health care worker

While the assumption is that being unemployed doesn't mean a claimant has lost their fixed street address, many claimants scraping by without a regular salary have ad hoc living arrangements that can make their receipt of mail delayed or irregular—and some interviewees explained how this would often lead to untimely communication with ESD.

In one instance, when mail wasn't being received promptly due to a snowstorm and the claimant missed a hearing, a phone agent at OAH gave the claimant instructions on how to obtain help from legal aid organizations.

All the mail shut down, so I didn't get the mail until it truly was too late. They sent the mail and it was supposed to be there on a certain date and it was a week or two afterwards when I finally got it. And then when I called them and I told them, "Hey, I just got this thing but apparently my hearing was yesterday or the day before yesterday," they said "Well, you can do another appeal."

I told the guy my story and he was empathetic, fortunately, and gave me a referral to a legal aid organization.

—Black project manager in his 40

Virtual Assistance

At least a third of the claimants interviewed were not aware of a chat function or a Virtual Assistant, while those who tried it were underwhelmed or had few successes to report.

They don't really even have a chat function for somebody who has trouble navigating a website. All the government sites should take a page from corporate business. Some of them do it better than others, but whether it's Aetna, or AT&T, or Sears, they have a chat box right there on their website that says, "Are you confused by anything? Here. Somebody will be with you 24/7, and they will check back and they're not a bot."

—Musician in her 60s

I interacted with it a couple of times—mostly to ask for the ESD phone number. It did give me the phone number.

—Sales manager in her 30s

I tried that a number of times. It just provided you information you could already find on the website or referred you to information on the website, which you already knew that you had questions about.

—Asian mixed-race scientist in his 50s

The chat/Virtual Assistant functions left many people yearning for a live human to talk with.

The Virtual Assistant—nobody ever responded in it. It's automated, and it doesn't specify certain questions that you're asked, it's just weird and confusing. You can't answer that something doesn't apply and you get trapped.

—Mixed-race caregiver in her 50s

It was not specific or thorough enough, which is why I spent hours and hours waiting on the phone to talk with the ESD representative.

—Design professional in her 30s

There really should be a better way for people to be able to talk. Either regular email or just... have more people available to talk on the phone.

—Property manager in her 40s.

FAQs

The majority of claimants with opinions on the Frequently Asked Questions section of the website said that they were of limited use. Six who consulted them found them clear, understandable, and/or helpful, while 38 said they were of no help.

Yes, I used them—but they kind of only cover the basic, really basic questions that somebody could have for unemployment.

—Communications worker in her 20s

They were helpful when they were updated.

—Asian mixed-race scientist in his 50s

The FAQs did not enter into the complex kinds of situations in which many, if not most, claimants find themselves.

By the time you are looking at an FAQ, you're already confused and your question is probably very specific.

—Salesperson in her 30s

I referred to them a lot when I was on hold, but they didn't answer why I was not getting benefits for three months.

—Transgender worker in her 20s

They didn't answer any of the questions I had, such as why the eServices application was talking to me about not the most recent job.

—Cleaning services worker in his 40s

I've clicked all over the ESD website looking for specific information but I've been let down anytime I look for something specific, like how you find a

waiver. So I didn't use the FAQs for information-seeking.

—Testing specialist in her 40s

I think most of the FAQs were applicable to before the pandemic, not now. They would bring you to places and resources that either weren't available or were too overloaded to access.

—Mixed-race bartender in his 20s

HANDBOOK

Asked whether they had consulted the Handbook for Unemployed Workers (referred to by the older term "booklet" in WAC 192-120-010), many interviewees said they had found it helpful. Many more either didn't know about it or mentioned various access problems.



No, I didn't even know there was such a thing.

—Program manager in her 50s

Something at the end of the application referenced a handbook but I was never able to find it.

—Mixed-race caregiver in her 50s

They sent a PDF after I applied and it seemed easier to understand than the FAQs. I just skimmed it. The layout and infographics are clearer, I think.

—Customer service worker in her 30s

Getting a hard copy was not an option, claimants found—and printing it out wasn't practical for many.

In the past, they would just give the Handbook to you. Now you have to download it, print it, and read it on your phone, and that makes it way more difficult. Not everybody has a printer and if you just lost your job, it's actually not a really cheap thing, printing out a handbook at Kinko's. It's around 20 bucks.

—Small business owner in his 30s

I specifically asked the department if I could get a hard copy, because I'm a different kind of learner. I need to see it in writing. It's got to be tangible for me. They said no, you have to download it.

--Indigenous teacher in her 60s

I think that things that are hard copies can help with people's comprehension of systems operations because they just don't necessarily learn on the fly using the internet. They need to have something they can physically touch. It's like the difference between reading a book that you can open versus looking at something on your Kindle.

—Retail salesperson in her 40s

A paper manual would definitely have been helpful with their questions. I could have read it and researched it, rather than just calling and calling and hearing nothing back.

—Bartender in his 30s

I read it just because it said it was a handbook and it said "Please read." I thought maybe it would give me some insights as to what I should be doing and it wasn't really helpful for that at all.

—Retired parks worker in her 70s

A claimant who did download the Handbook and scoured it said it was helpful in confirming only that "I'm not really going to get a clear answer to my questions and I should just move on with my life."

WORKSOURCE

Although all libraries as well as Washington's approximately three dozen full-service Worksource offices were closed during the early part of the pandemic, most claimants interviewed had some contact with WorkSource during their application for benefits because by the time they actually resolved their claims, WorkSource offices had reopened. Some found WorkSource helpful when they needed a walk-through of how to fill out the forms to apply for benefits. Others felt that those resources could be more helpful.

It was good. I can tell they actually want to help. They gave me a couple things that I didn't know. I didn't know that unemployment would pay some

money toward additional training and schooling, so that was helpful.

—IT worker in her 20s

But in terms of their purpose to connect people with jobs, claimants largely felt WorkSource was just going through the motions.

I remember visiting with an older gentleman who just kind of went over my resume again and then handed me a list of things to do. It was almost like going to a workshop, but in high school. It didn't really provide me a lot in the way of job leads, which was what I was expecting the first time I went. And it just wasn't like that.

—Retail sales worker in her 40s

Another was grateful that WorkSource steered her to the LiveStories program to pay rent, but stunned that WorkSource provided no follow-up on available jobs at all.

WorkSource are the ones that told me about the LiveStories program to help pay my rent. They're the ones that have really helped me tremendously. However, I applied for a couple of jobs and people there said, "Oh yeah. We have jobs. We're really looking," and they never even called me for a job. They never even called me for an interview. I'd been working with them. And they didn't even call.

—Bank manager in her 50s

One respondent felt like they were unimportant to WorkSource—audience members there simply to be added to the count rather than people who needed help finding a job.

I would apply for those jobs that WorkSource supposedly had for people who are working through them. They would recommend these employers and I would apply, apply, apply, and never hear anything back from these employers. They have hiring events with certain employers. You go, you apply. You do—at that time —the drug test. We're doing the full pee test through these events at WorkSource or some of the private agencies. You're absolutely nothing. The next month they're doing another event and it's the same employer.

—Sales representative in his 40s

Another interviewee story seemed to sum up the sometimes grudging assistance that WorkSource provided workers who were seeking a job but needed unemployment benefits to meet basic needs.

Years ago, I was living in eastern Washington. And I had taken a job and my job wasn't renewed after the end of the year. And so I worked with WorkSource and they helped you—unlike now. WorkSource now is just this place where you can apply for jobs, and they'll help you with your resume checks and everything. But mostly, you just can go into WorkSource and you can use the computer. I think that's how most people use it. Or you can register for work. It's not a place where teachers go to get work.

In Colville, Washington, when there were complications because I was a teacher, I went in and I spoke to the same person every time and that person helped me. They were able to look at the unemployment files. And that—at least what they tell me here in Seattle—is not their job anymore. And they're supremely unhelpful.

So this time, when I was having the fraud impact unemployment claim, I actually went into the WorkSource office. I found a person who seemed to want to help me.

And she said, "Well, you can use our phone." And for some miraculous reason that phone—eventually somebody will pick it up quicker. So I sat there for almost an hour on hold waiting for someone to pick it up. Finally somebody picked it up and was trying to be helpful in the investigation department. But at that point they were going to close in ten minutes. WorkSource made me leave.

I pleaded with the person, "Can you please call me back because I will never reach you again?" I sat in the parking lot. And she called me like 20 minutes later. We talked and she was going to take care of this. And I believed her. A day or so later, I had another need to contact them. And somebody at WorkSource picked up the phone and said, "Yes, you



can come back and you can use our phone." And I had just been there the day before. This time when I came, the manager there refused me and I was so angry.

"I felt like I was being gaslit," this claimant continued.

I said somebody in your office ten minutes ago told me to drive back here so that you will help me the way somebody helped me the other day. And she just would not let me past the gate. "You cannot use that phone." No explanation, and she would not acknowledge that yes, somebody right here, fifteen minutes ago told me to come there. I don't know what she thought I was going to do but she had the security guard come where we were standing at the doorway. He was trying to get me to leave, and I said no, I want to talk to the manager, "I am the manager." I was just so mad. And now she's telling me that whoever let me do that the other day shouldn't have.

—Teacher in her 60s

By the time I got into them, I was already in a new job so I wasn't able to finish the series that I had signed up for. They were pretty basic—sort of like, What are your values? and How does that influence your job search? And what are you looking for? They were not super resume-oriented and not super job-oriented. More like overall life skills.

—Mixed-race social worker in her 30s

Some claimants made a point of praising WorkSource for continuing to make computers available and for providing useful advice.

WorkSource was good. I can tell they actually want to help. They gave me a couple things that I didn't know. I didn't know that unemployment would pay some money toward additional training and schooling, so that was helpful.

—IT worker in her 20s

But any claimants who said they had connected with WorkSource more than seven years ago found that it was a significantly more rewarding experience at that time. A 2016 claimant was grateful for help received from a WorkSource counselor before 2017:

Just locating the right forms, getting them properly filled out and properly submitted at that time was a help because that was when all our jobs went overseas. They provided us with a counselor directly so I was able to contact that counselor and they walked me through filling out the form.

—IT worker in his 50s

NOTICES AND INQUIRIES

During their application or claims-filing processes, interviewees said, they periodically received questions from ESD pertaining to their eligibility for benefits, sometimes including extended requests for details.



There were lots of hoops I had to jump through. I had to submit a lot of extra information. There would be clarification on the forms, a link that I would have to go in and fill in the blanks about why I quit, and then return calls asking for clarification.

—Salesman in his 50s

But many times, if the claimant didn't understand the questions or needed more explanation, there may have been nowhere to turn for explanation.

The Claims Center unavailability was one issue, but the phrasing of some of the questions required reference to other sources or was too puzzling to even begin to answer. An ESD questionnaire on an overpayment confused several by assuming they already knew where the overpayment came from, asking "Why do you feel you are not at fault for this overpayment?" Some claimants said the source of the overpayment wasn't explained to them, even when they asked, so it was impossible to answer as to why they were not at fault for creating it.

Not acknowledging the answers claimants did supply—another symptom of communication that tended to be strictly one-way—was also a source of distress.

They're famous for asking you to provide them with information and you never really knew what they did with the information you provided or if it was ever received. That would all generate phone calls and 300 times you'd be trying to call them in the same day.

—Parent assisting autistic son with application and weekly claims

Also problematic was the assumption wired into eServices that claimants receive and read every email or letter sent to them, when they may have stopped filing months ago and stopped checking eServices.

In my appeal, the judge asked me if I received documents in the mail from ESD. When I said I did, the judge asked me why I didn't see a certain letter. I didn't think that it was anything other than the need to update your

**“Was I approved for benefits?
That’s a good question”**

eServices account. I hadn't filed a claim in nine months at that point, so I saw no reason to check my eServices account until it was tax time.

—Bartender in his 20s

ESD requested additional information from me on self employment. I was not able to respond in the time they required because the only notice was through the online account which I could not access.

—Film industry worker in her 40s

I had to appeal once and they called for that and it was a pretty simple process. They asked a couple of questions and then it was fine. From there, I was approved but I was waiting for a hearing for five or six months. Then there was no update on the status of anything. I asked a person who works there why I've been waiting to get assigned the hearing and it connected. The hearing was very quick, just a few minutes. And it had to do with a question I was confused about—about receiving some type of money or funding. I had put yes instead of no and that's why they denied me.

—Transgender Latinx self-employed worker

It was over the holidays and I didn't even notice the missed call or message. And that's kind of when I stopped filing because they said, “Oh, if you don't respond to this message within two days, your benefits are going to be cut off.” And it was already more than two days. With the holidays, I had forgotten to turn it in for that week. We were out of town and so I was just like, well, I guess I'm gonna not be doing that anymore.”

—Program coordinator in his 30s

Entering the “questions raised” stage of having their application for benefits approved was often where claimants lost track of the status of the application and sometimes never found it again, some reported.

Other claimants could find no way to explain their job separation circumstances within the frameworks to which ESD limited questions.

It was terrible. That's what triggered the whole hearing. I think I'm as smart as the average bear, but this one set of questions—Did you voluntarily leave your employment? Were you laid off or furloughed? Were you asked to come back? Did you go back?—These triggered an event where someone from ESD contacted me and gave me 24 hours to answer a dozen questions. There was no official Washington logo. He didn't have his title. And he said, “If you don't answer, we're going to cut off your benefits.” Literally. So I answered him and I called and left a voicemail but he never got back to me. And they denied my benefits.

This same claimant explained why the experience at the job, leading to his separation, was more complex than what the questions allowed.

At work, they said you do not have to come back but you could. Two weeks after that, they called me again and said “Do you want to try?” I was immunized and masked and distanced. But then my hearing disability got involved because I couldn't understand them. People are hard to understand without masks. But I had to get closer to understand people and so risk COVID. I was there for four days and then asked for indefinite leave because of my job and the hearing. They didn't grant my leave.

—Hispanic legal professional in his 70s

Filing Weekly Claims

INTERPRETING THE QUESTIONS

Claimants described various struggles with understanding how to file weekly claims, because questions would arise that went beyond the basic requirements.

I had a lot of confusion with what is considered a job search, because obviously an application being sent in is an obvious one. But then there were other things like getting help or building a resume, but how to list that as a job search activity was pretty hard to track down. I really had to go into the different websites for the qualifications and read quite a bit to figure out what exactly I needed in the job search log.

—Program coordinator in his 30s

The application didn't allow for complex answers to questions like whether the claimant received any money from work during the prior week. A few times, said one: "I wasn't sure what answer to put—in particular, because I was given a week's worth of pay when I was laid off, and I wasn't sure. Should I have just included that in my last paycheck—or should I have added that into my actual week of unemployment which is what they were paying me for—or what?"



They were asking me questions I didn't know how to answer and that was a consistent problem for me throughout the process of filing my weekly claims. There were all kinds of questions I had, not being certain if I was doing it right, but knowing that, in order to get those questions answered, I was gonna have to spend hours on the phone. That's kind of scary because you could get in trouble if you do it wrong.

—Small business-owner in her 40s

Nor did the questions seem to be answerable, other claimants reported, when there were job conditions like those common in the hospitality industry where their shifts might be irregularly assigned. "Availability to work" and other terms could also be interpreted in different ways, some pointed out.

There were questions about looking for work that were very like "Pick A or B," but neither one felt like an answer. And availability to work. I think I answered that wrong. And it wasn't that it was wrong, I thought the answer was the opposite answer. It just wasn't clear to me, because the first time I answered it I answered no. But I should have put yes. Even though no felt more correct.

—Black transgender service worker

The waiting week was difficult to make sense of and at times resulted in nonsensical outcomes for people who had new short-term employers.

They don't make it exactly clear that the first week is a waiting week or whatever. I didn't really know that

the first week was a waiting week until I applied and was denied. And then also the next week I put that I got paid for a day and a half. I didn't know that the following week after that was going to be another waiting week.

—Customer service rep in his 30s

When I was filling out the weekly claim, it's a different page for every single question, which seems a little silly, instead of just having all the questions on one page. So then, if I answer a question and then go forward a page, and try to go back and change my answer, I can't.

On one of them, when I misunderstood, I misclicked, because I did a couple of job applications, but then I also did some resume help. I was trying to figure out where to put that and I couldn't quite figure out where that fit. So I only put two out of the three required and I skipped forward thinking it would ask me, "Okay, What else did you do?" or "It looks like you did a non-application job search activity," and I didn't see it on the next page. So I tried to go back and it froze me out, saying, "Oh, you didn't do your requirements this week. You need to send them in a much more detailed version now." And I was like, Are you kidding me? I literally just didn't understand the website and was trying to figure out where to put this information. It froze that week for a couple of weeks.

—Program coordinator in his 30s

Claimants who filed a benefit application or weekly claims with a cell phone rarely reported ease of use.

Periodically, I'd be submitting my information for applying for jobs and it would lock up on me and not save any of the information.

—Salesman in his 50s

Using a cell phone, in fact, could be costly enough to claimants that they ended up not even filing a weekly claim for benefits some weeks.

I'm somewhat internet-savvy and everything but I don't have a computer. I just had my cell phone. And every time I would try and file, it would time-out and I would have to restart. And so I would get agitated and everything and a lot of times I would just blow it off and not even file that week. I just was having so many problems with it.

At the time, normally, I would go into the public library and the ladies have been really helpful. But due to COVID going on, the library was closed during times when I was trying to apply. Four months into it, they started making me get a verification code. And I was having so much trouble doing that. Then I finally ended up getting locked out of my account for three months.

—Production worker in his 40s

I think they really need a graphic designer or a user experience person working on this website.

—Teacher in her 30s

Sometimes it's hard to read because it's all gray.

—Transgender customer service agent

I feel like it's very disjointed. I'd have to go to different things to see different stuff. And you could only have one page open at a time which was fairly annoying for my stupid ADHD brain. So I wasn't the biggest fan.

—Mixed race bartender in his 20s

The system works like a charm—but it did essentially crash at one point. So then I lost everything that I had already written, or answered. I don't have Microsoft Word on my computer, but I went into Apple Notes. And so I copy-pasted all the questions and then wrote it out on my own. Then when I went back on the website to do the appeal, I just copy-pasted, copy-pasted, copy-pasted. I can't even imagine if you don't have a computer or access to

one. I would understand someone just calling it quits because it is tough.

—Design professional in her 30s

The website format needs updating. A good example is I have a job search area. Well, you can't go to the regional WorkSource site in Spokane. You have to go to the state ESD site, and the state ESD site will link you to where you can get to the job search board, but that's not on the local website. So that's very frustrating.

—IT worker in his 50s

REPORTING JOB SEARCHES

Some claimants preferred the all-digital reporting of job search activity weekly, to prevent losing the log sheet of job search activities and having to reconstruct. But they also felt phone reporting and online reporting were not coordinated.

Difficulties and confusion with tracking their job search activities were common on eServices, especially where it came to approved job search activities other than employer contacts, interviewees said. This problem led at least one claimant to give up on his unemployment claim altogether, and to a delay of several weeks for another claimant.

Phone assistance, in some cases, could not help them understand requirements like job search when, post-pandemic, self-employment was no longer supported by the benefits system. This occurred either because of inaccessibility of phone help or Claims Center agents who perhaps did not understand why claimants could be confused. But many were.

At the time, I was not applying for jobs because I was looking to become self-employed. But in the interim between losing my job and when things started to happen, I thought I should be collecting unemployment. Nothing is coming in right now, and that's what it's for. So I called the unemployment department and I spoke to this woman who was pretty rude and pretty dismissive about my experience.

—Carpenter in his 30s

Job search activity language on eServices as of April 2023 did not accurately reflect the range of options.



The relevant page of the weekly claim says job search activities include contacting an employer or physically participating in activities at WorkSource, but it does not mention working on a resumé, writing a cover letter, or any other common, approved, individual activities that can be done online as job search activities. However, some claimants said they appreciated the agency's shift to electronic job search reporting, replacing keeping records by hand.

For the PUA claims, we had to electronically file our job search stuff, which I think was really great because a lot of people don't keep those written job search journals we're supposed to have. I don't think anybody does that. So I thought the electronic thing was really wonderful, because of the ease of having that digital record and then not putting the onus on us to have these physical copies that we hang on to forever.

—Black transgender gig worker

Interviewees often reported vexation because there were so many ways for claims to end up being denied without warning.

There was this one week where I thought I did it correctly. They had questions about it. I responded to those questions. And then they came back almost a year later with additional questions about it. And because I didn't open my mail in time, it was deemed an overpayment.

—Restaurant server in his 30s

Many claimants were surprised to find the rules prevented them from compensating for more of the sharp cut in their income by finding part-time work while collecting benefits. Partly because of that, some reported feeling worried that they would be trapped into taking a new job that would pay less than their former job.

I didn't know anything. It was a bit of a crash course. I have a one-year-old and I also have family caregiving responsibilities among the adults in my family. And actually, at first, my job was cut from full-time to half-time. And I was aware that, because of the pandemic, there was some possibility that I could get supplemental unemployment because the hours were cut due to COVID. So that's what I did first.

—Middle Eastern caregiver in her 40s

The supplement was nowhere near what my lost income was. And it also kind of made it difficult to go out and look for a new job, because it was just enough that if I were to go out and get a new job that had a decreased income from what I had before and then also lose supplemental income, then I would be up a creek with no paddle.

—Community organizer in her 30s

Another claimant viewed the incentives and penalties wired into the job search rules as creating a “negative feedback loop” that is salted with pitfalls and tricky to work around.

I don't understand every single detail of what goes on behind the scenes. But to me, the system is set up in kind of a negative feedback loop as far as trying to find another job and career. Because if you apply for a job you have to accept it if you get offered, or you lose your benefits. If you work part time or you find a cash gig, then you have to report that and it just gets taken out of your benefits. You basically have no incentive to go out and make side money to try and help make ends meet. So no matter what I do until I find a full-time job, I'm stuck at that \$500 a week. I quickly realized that I had to be careful because if I applied for a job that was slightly below my resume, and was offered a position, then I had to accept it, or I would lose my benefits.

—Social program coordinator in his 30s

At times, claimants felt the need to revise the description of their job experience to suit the kinds of

rules implied by the application and weekly claim filing questions. Because of that, their actual jobs might get “lost in translation,” said one.

I was in a situation with my employer where I was working way more than I was getting paid for. So I had to say, yep, I worked 20 hours this week, because they were going to check my employers, you know, and the amount I was being paid in benefits was based on 20 hours. And I was working maybe 30 hours. But previously I had been on salary. My income wasn't based on my hours. But all this is lost in translation just in general.

—Mixed-race social worker in her 30s

Job search reviews—requiring the claimant to make an appointment with WorkSource to go over their record of job search activities— can be ordered at any time and can put a claimant’s benefits on the line if there is any slip-up in making or meeting the appointment time (which, since the pandemic, is usually over the phone).

One claimant missed a job search review call at the appointed time because he was waiting on hold with ESD. “That’s impossible while you are looking for a job,” he noted. But when he failed to answer the call from WorkSource immediately, attempting to return the call 20 minutes later, he was told there were no redos, and all of his benefits were cancelled.

This worker did not have any sense that the job search review was to help him find a job.

At that time, I was working on a project for a client. And I remember exactly that day. I was at a park with my wife, and I was scheduled to have that phone call at that time, and I had just pulled an all-nighter. I'm so tired. And I spoke to a guy who said, “Oh, yeah, don't worry about it. We'll schedule it for this time. So just in case you miss it, you have time to reschedule.” So I missed the phone call and I called her right back as soon as I realized that I missed it. And she said it is too late. I couldn't do anything. It wasn't even an interview, it was like a conversation and she was just going to recommend some resources.

This claimant was mystified as to what the purpose of the job search review really was.

It was ridiculous. And it wasn't a job search review. That's what really bothered me. The call was just almost like a temperature check to see if I wanted more information. They said that they weren't doing job search for claimants anymore. Weird. And they kind of emphasized that it's not a review of your job search. It's just to let you know the different programs that are available or something

And because I missed this informational call, I lost my benefits—even though somebody else had already told me that it would be okay to reschedule it.

—Black project manager in his 40s



Confirming Claim Status

Frequently, claimants could not tell whether they were approved for benefits or not because of the non-intuitive vocabulary of denial, adjudication, “pending,” eligibility, “qualified,” “open,” and so on.

It seems like I was approved, but it says it's in adjudication. And I haven't received any money, but it says here's an amount that I would be getting, and my claim is open. But they haven't paid me anything yet because it's showing as pending.

—Customer service representative in her 40s

The minimal information on the generically worded notices of determination about the basis of a decision and the reasoning behind it frequently forced claimants into rounds of inquiries to figure out the source of the problem with their claim.

The frustrating thing was the second time I applied, they didn't tell me why my claim was denied. It just said there were problems with one of my job listings or something like that. And so I had to send multiple emails asking, “Is it this?” “Is it that?” Because they're so vague with their kind of generic letters of why the XYZ process was rejected. I was just shooting darts in the dark, trying to figure out what was wrong.

One thing that I had to keep calling about was when I put in my hours it said that I qualified. And then in one of the phone calls that I did maybe a month in, I said, I haven't heard anything about my benefits. Whoever looked it up said, “Oh, it says you don't qualify because of hours”. And I said that doesn't make any sense. And they said, “I don't know what to do about it either.”

So then I was calling and calling and calling to find out why. Finally, somebody walked through it with me basically online. And they saw whatever issue was on their end, so they fixed it and then she said, “Okay, it's going to be submitted.” And then they needed to verify my ID again and more and more time passed. And yet again, they would say “Oh...you don't qualify; you don't have enough hours.” And I felt like: This is out of control.

—Black transgender gig worker

Only finding outside help such as a friend who knew a worker at ESD, the governor’s office, a state legislator, an advocacy group that could get publicity,

or a legal aid attorney served to break the pattern in many instances.

When I applied, I didn't get a response for months and months. It was just stuck in limbo. So if I hadn't gotten in touch with a friend who connected me to one of the workers in the unemployment office, I probably wouldn't have accessed it. Or it would have taken a lot longer.

—Transgender Latinx self-employed worker

Denials and Appeals

RECEIVING A DENIAL

The claimants interviewed for this project had mostly experienced problems with obtaining benefits. Asked if they received a negative determination, 68 of the interviewees who answered said yes while 12 said no. The reasons that some claimants were found ineligible or were disqualified and then denied benefits also were not easy for many of them to understand—in part because of the myriad rules surrounding benefit claims, and in part because of the communication issues discussed above.

I was denied benefits because I was in school. So I would have had to drop out of college to get help with the income. I wasn't going to do that. It put me in a pretty tough spot. I was pretty vulnerable. I didn't have a safety net within my home. I've got to be honest, I was pretty unhappy about that and it felt so backwards —OK, here I am busting my ass working full time, going to school full time, and then essentially being told “You have to drop out of school if you want unemployment.” It seemed pretty counterproductive.

—Small-business owner in her 30s

I had applied for a medical accommodation before I went on leave from the job, to be able to continue to work from home and this was not due to the knee injury. This was due to COVID concerns. So literally on the Friday before I went on PFML and disability leave, my employer got back to me about my accommodation request and denied it. When I actually lost my job, I assumed that I would not qualify for benefits. When I started looking into it and applying just in case, there were options on the drop-down menu for things like “I resigned because I

or someone in my household is at high risk for illness from a pandemic.” And so I saw options that kind of fit my situation and felt like maybe I would qualify—but I didn’t.

—Customer service representative in her 40s

The tight timeframe for applying for benefits following each work week was hard for many claimants to understand. They thought that if you had the required job search data for each week and answered the questions, there shouldn’t be a problem with receiving benefits back to the day you became unemployed—just as employees can be owed back pay for work they’ve performed over weeks or months.

Several claimants were not aware that a single job separation could lead to denial of a claim for an entire year, if it wasn’t considered for good cause or a non-misconduct quit. In this case, an employer’s advice to quit the job, rather than be discharged, was bad advice for the claimant:

I quit that job because my supervisor told me that’s what she thinks is best. And unemployment didn’t consider that me being fired. But I said I wouldn’t have quit if my supervisor hadn’t told me that. So I went through the appeals that got denied. I had three or four jobs at the time, and at one I got involuntarily terminated, at the other the contract ended, at the third the program ended, and the fourth one was where my supervisor said, you should quit. So I never got unemployment benefits. It was that one job that screwed up that whole process.

—Mixed-race social worker in her 40s

A common theme for many claimants was the sense that ESD staff who were adjudicating or screening their appeal were operating in a fictional land where the *Handbook for Unemployed Workers* was still widely available in tangible form—although it can be inaccessible to people who aren’t near a WorkSource office or don’t have access to a printer to print the PDF.

You know, they reprimand you whenever you do anything against the rules that have been adjudicated, they always ask you that stupid question “Well, did you read the Handbook?” Uh, no—you don’t provide it anymore. I actually still have the Handbook that I got when I applied back when I

“They would always ask you ‘Well, did you read the Handbook?’”

was in a different industry. But I know that they don’t provide manuals anymore, period.

—Transgender Latinx retail worker in her 20s

Several claimants also expressed negative views on how much access to the process the employer has with time limits apparently non-existent or not enforced and without an opportunity for the claimant to respond.

I think it should be against the rules for the employers to badmouth the applicant and then have ESD kind of judge them and deny them the benefits without getting their point of view on why they’re even applying and why this company is being this way. Because most companies are just going to deny people unemployment benefits because they don’t want to pay them out.

—Retail salesperson in her 30s

Other claimants reported technical, clerical, or administrative issues with their appeals and were frustrated with the Office of Administrative Hearings’ indifference to situations beyond the claimants’ control. Most complaints concerned not receiving mailed notices in a timely manner, or not receiving them at all.

Part of why they were denying me is because they didn’t even get my appeal. It was like it never happened. Their system glitched and I know that I filed it because I went and talked to my neighbor after filling it out and submitting it to them the very same day.

—Student and artist in her 30s



Misdirection from ESD through notices with erroneous information—especially a notice that the claimant’s balance was zero—was blamed by some for causing them to miss a deadline.

My second appeal was a much lengthier process because I had gotten that denial of benefits. And then subsequently I had moved, pretty much right after I filed an appeal. It took several months for them to actually get me an appeal. And then I didn't end up receiving it. It came a couple days or a week or two after I had set up a mail stop or mail redirect. So it ended up showing up at my old place, and I didn't get it until it was past the date.

Before I had filed the appeal and I was waiting on the court appeal date, they had sent me several zero balances. So I didn't owe anything technically. Evidently it was an error in their system. But it made it kind of confusing for me, considering at one point I owed more than \$16,000. Then I owed nothing for two statements. And eventually, it was an error in their system. So they sent me a \$16,000 bill.

—Mixed-race restaurant server in his 20s

The inability to get a return call from the Claims Center or the Commissioner’s Review Office frequently caused claimants with denials to drop their efforts to appeal.

The Commissioner’s office denied my appeal, and cited all kinds of statutes that really had nothing to do with my case. But at the very end of that there was an option that said if you disagree with this, you can take it to your County Superior Court, or come in in person and do it. And I remember I called the Commissioner Review Office probably 16 times in the two weeks after I got that decision, saying, What do I do? Do I file where I'm living now? Or do I still have to go in person because there was something on the form? That was very confusing and unclear, and no one ever called me back. And needless to say, I filed both and I never heard anything back and I had to pay in the Superior Court and I never got a decision back. So that process was really frustrating.

—Mixed-race claimant in her 40s



In some cases, the struggles of interfacing with the OAH system were so triggering and mentally draining that the claimants eventually gave up trying to receive unemployment benefits at all.

They don't ask you when you're free, they just give you a time. And then you have to do all this work to undo the time they gave you. So if you're busy you're just screwed.

They told me a date for my phone hearing, they sent me a letter with a date that I couldn't make. I had to contact them and ask them to reschedule and then they sent me another date that kind of worked but I was going to be five minutes late or something. I called out of work to make that appointment and I remember sitting in my car trying to get on the phone for this appointment. But it didn't work for some reason. Then we had another callback day. That was when I would be on the East Coast and would be waiting at the airport because I didn't want to reschedule it. It was ridiculous at this point.

And I did have a job by then, but it was far into the process of trying to understand why I hadn't gotten benefits in the first place when they told me I would. So I tried calling them from the airport and it didn't work. I had miscalculated the time change. They definitely don't try to make it accessible for anyone that's not really on top of their numbers and letters and writing, so I gave up. It was already—I don't want to say traumatizing—but definitely every time I tried to interface with the system, I would think, Okay, well, this has been a nightmare... Why would I keep trying?

—Transgender food service worker in her 30s

Some claimants felt whipsawed after their benefits were approved after a long struggle, even deposited into their bank account, but then the employer appealed, and ESD redetermined the claim as a denial, imposing an overpayment—sometimes immediately after the employer appeal was filed.

I didn't hear anything for 11 months. And then when I did finally hear something, I was calling every day at 7 or 8 a.m. on the dot. If you called right when they opened, then you had a chance of maybe getting your call answered, and I was doing that every day. One day, it went through, and I talked to somebody and then a week later they called me back and they said, we're going to get you approved. The next day, I had money in my bank account for the first time in a really long time. And then, the very next day after that, I got a letter from ESD saying that I need to pay that all back plus \$1,000. Because my employer appealed.

—Minimum-wage laborer in her 20s

FACING THE HEARING PROCESS

Like many appellants, one claimant had technical problems trying to call into her appeal hearing. As she related, there is little latitude in the system for rescheduling a hearing promptly, so if this happens, it can mean another three- to six-month wait, or longer, for a hearing.

So I appealed the denial and this is where it gets really weird. Basically, it was the first actual time that an appeal was set up to happen and it did happen. I called and I was ready, on the dot, at 3 p.m. and it was going to be the judge and me and my old employer. And I had a fully charged phone. I was just waiting, ready. And so the judge calls me, I press "answer," and it just hangs up. And she calls me again, and I press "answer" and it hangs up over and over and over. And this has never happened to me ever once before or since. But she called me probably 15 times and I'm trying to figure out what's going on. I didn't have another phone around so I downloaded an app, TextNow, to really quickly call from another number. When I did, it was 20 minutes after 3 p.m., the hearing time, and so she said that my employer was gone.

—Finish carpenter in her 20s

"I'd never done anything court-related before and it freaked me out"

The claimant was found to have defaulted and lost her hearing but was told she could submit a Petition for Review to the Commissioner's office. However, the resources needed for that next level of appeal left her feeling hopeless. Several other claimants shared that despair.

If I wanted to appeal again, I would have to print out a letter and mail it. I didn't have a printer, the libraries were closed because of COVID, and I didn't know anybody near me who had a printer. And so that was just kind of the end of that case. And now I still owe all that money. I probably could have figured it out if I had tried a little bit harder, but I was mentally so drained from that whole experience at that point, I just wanted to wash my hands of it.

—Minimum-wage laborer in her 20s

It's a problem that they assign hearing times on the assumption people aren't working. They don't ask you when you're free, they just give you a time. And then you have to do all this work to undo the time they gave you. So if you're busy you're just screwed.

—Transgender food service worker in her 30s

Claimants frequently said that they had a misconception about what appealing a decision actually entailed. In some cases when they learned it involved being in a court, even by phone, they changed their mind about appealing.

ESD said if you don't agree with this, you can appeal. I was trying to appeal just to "see what happens." But the notice said if you appeal it, you're going to have to have a hearing date assigned to you. So because I'd never done anything court-related, I got kind of freaked out. I was like, I don't want to go to court over this. \$300 to me is not worth doing this.

—Asian gambling industry worker in her 50s

Numerous claimants who made it to the hearing stage said they had no idea of how they should have prepared—until the hearing started.

When they said it would be a phone hearing, I didn't think I needed a lawyer."

I thought it was just a simple "Explain yourself." I didn't really understand that it was the full court of law. If I had known back then how that first case was going to go, I would have requested assistance.

—Restaurant server in his 30s

To many claimants, it appeared that the appeals process was designed to make it difficult for people to receive benefits.

It was always very unclear—the way they were communicating. They would send mail sometimes to us that would arrive weeks after some action was required. I think the one that I did to appeal online, they wanted me to submit proof. But we received the letter two weeks after the request for proof so I could never submit it. That's when they set up the court date for us for our hearing.

—Asian entertainment industry worker

For a Commissioner Review Office appeal, they only accept service of your petition for review by mail. So that gives you very little time which seems like an unfair burden. I did service by fax to ESD, and they denied it. And so they said they were never served. That seems unreasonable to me. And they did the same thing at Superior Court, I served them and they

said it had to be by mail. We did an overnight, we did all kinds of service but they wouldn't accept it. They wouldn't let the delivery person come in. But the assistant attorney general would take service by fax. At Superior Court, the AAG decided to drop the case, they said you shouldn't have had a denial. They wrote an agreed order and ESD paid my benefits, then it took about a month to get paid after that. But by that time it had been over a year. It's frustrating that you're not getting paid when you need the money.

—Computer programmer in his 50s

Some claimants learned there could be blowback when they turned in too much information, especially when filing an appeal.

There wasn't clarity on the site about exactly where to turn things in and how much to turn in because I turned in everything and then later on when I talked to them on the phone, they kind of said, "Well, you turned in too much because now we have to do every single thing that you turned in and that's going to take us way longer."

—Artist in her 30s

The formal language of Notices of Hearing and exhibit files with their detailed instructions is another alienating factor that often causes people to drop out of the process, and possibly default, before their hearing.

When you are appealing something, unless you're a law student or you work in employment, those appeals do not make sense. And I am an educated person. I've been through those appeals. I try my best to understand them. But they're not really written for an English major or somebody who is not a law student. The way that they are written, it's hard for a regular person to understand what they're saying.

—Artist in her 40s

By contrast, the employers' ability to appeal, other claimants commented, seems interminable and may often be grounded in invented stories about the job separation.



I feel like there needs to be a cap. Why can my boss still appeal? When does it end? Also, whoever is in the system making these things saying, "Oh, well, we're denying you benefits because your boss said you were terminated due to misconduct." That's abuse. The system just takes the employer's word, and anyone can make up anything.

—Design professional in her 30s

When it came time to appeal, claimants were dissatisfied with the overall length of the process. They felt that they were not given enough time to reconsider; however, after they submitted their application and were assigned a hearing date, the process sometimes moved too fast for them to secure adequate legal representation.

It was going to be about six months. I didn't even get acknowledgement that I filed the appeal for a year. When I got that, he gave me a court date that was about six months out. It took 18 months to finally actually talk to the judge.

—Small business owner in his 30s

The requirement to file an appeal by mail was an abrupt switch from the online routine that caused several to drop out of the process.

You can ask for reconsideration of that decision. That was a big problem because you have to serve them within a week by mail. That really gives you very, very little time to do the reconsideration. There's no good reason why it has to be that quickly, and it's an unfair burden, I think.

—Computer programmer in his 50s

Appellants sometimes did not know that it is common to request and receive a postponement to obtain representation, so they missed that opportunity.

The appeal process was easy enough. I feel like it did take quite a while—a few months—in order to get a hearing with the OAH. And then, once I received that notice, the hearing came pretty quickly after that, and I found that kind of strange. They didn't give me much time to gain legal representation. And that's why I asked for a postponement at that very first hearing.

—Customer service representative in her 30s

Filing the appeal was a pretty simple process. I was approved but it was only after I got in contact with the ESD employee who I directly emailed that my friend connected me to. That was when I was waiting for a hearing for five or six months. The hearing was very quick—a few minutes' phone call.

—Transgender Latinx counselor

I was only notified about the appeal hearing right around Christmas of 2021. And I only had three days. I got something in the mail the Wednesday before I started calling law firms. I actually had been in communication with the free legal aid group, but because it was the holidays, it was too short of a turnaround. So I found a private attorney and paid \$500 for her to represent me on the call but she really didn't add much to it.

—Accountant in her 50s

In line with other aspects of the benefits appeal process, almost all claimants with appeals found that they misunderstood how their hearing would be conducted or what exactly it entailed.

Me being naive is the only word I could use. When they said that there's going to be a phone hearing, I thought, everything's in black and white, right? Everything I had sent in from Day One was in those dockets. I had my resignation letter on there and I had emails back and forth between me and them that they were just going to take my last day as the day that they got my resignation. So I'm thinking, with all of these hundreds of papers, I don't need a lawyer or anything. And I was mistaken because the employer had a lawyer and I looked completely stupid. Pretty much as soon as I hung up the phone, I could only think, why did you bring this up? Why didn't you read this? I really, truly, came to it completely unprepared.

—Health technician in her 30s

I don't think I understood. I thought the hearing would be just a simple "Explain yourself." I didn't really understand that it was the full court of law. If I had known back then how that first case was going to go, I would have requested assistance.

—Restaurant server in his 30s

Administrative processes at ESD were often inadequately staffed or excessively demanding,

interviewees reported. Sometimes defaults arose from a claimant's failure to inform the Office of Administrative Hearings that they had changed their address—which in most cases defeated any argument that they had good cause for missing a hearing.

However, few claimants understand—since all appeals are filed with ESD and only sent to OAH after ESD has looked into the possibility of redetermining the decision on the claimant's benefits—that changing their address with ESD does not cover OAH's records as well.

The problem is they say 'Gotcha' because you have to file an address change with OAH but a lot of people don't even know that. Because you filed your appeal with ESD so that's where you filed your address change. How would you even know to notify OAH?

—Black communications worker

Late-filed appeals are common, they must be decided at the hearing before any other issue, and they are very often due to one cause: failure to file an address change with OAH. But frequently the claimant will have had no idea of this requirement or what is considered a good reason to appeal late.

RECEIVING A DECISION ON AN APPEAL

Even during the pandemic, decisions (Initial Orders) on their appeals were generally received by claimants within a few days. Among claimants interviewed, 26% said they won, 22% said they lost, 7% said it was a mixed result, and 1% were not sure.

Nine said, even if they lost, that they felt the hearing process and the ruling were fair. Nine others said it was not fair. But there was a strong feeling among many, whether they won or not, that the outcome of their case was predetermined due to ESD and OAH judges' biases toward employers or particular occupations.

The judge was really biased towards the employer, not towards helping me. I didn't think that was a fair trial. If I'd known that, I never would have wasted six months trying to pursue a claim because I knew it was shaky, since I'd chosen to leave the company

anyway. But I thought I had a good enough case with personal health issues and all the COVID craziness and stuff that this particular company was doing or not doing. But instead, it was definitely six months wasted. A lot of time and energy on people's parts.

—Accountant in her 50s

Handling Overpayments

"Because I quit a job I worked three hours at, I owe them more than \$12,000."

Of the 100 claimants interviewed, when asked whether they received notice of an overpayment and an order to pay back their benefits, 49% said yes.

In fact, I got not one overpayment notice but several—with differing figures on each one. And that's part of what I couldn't get an answer to: what the figure was based on. I would get constant monthly statements from ESD saying "You owe this money and you have to pay it now or put it on a payment plan." And then they could garnish my income tax refund. And they actually ended up doing that and I've never heard back whether or not I'll get that back or anything.

During this time, I got two deposits in my account with no explanation of what they were for, and why. The \$500 one, I don't know what it was. But the \$50 one was after they had garnished my pay, the IRS had refigured my taxes, and I had a \$70 refund coming back that unemployment had garnished. Was the \$50 supposed to be my share of that or what? I never understood that. I don't know if I'll get any more back.

—Administrative worker in her 60s

Of the group of 49 interviewed claimants who reported an overpayment, when asked whether the notice was clear as to why they owed the money back, more than 68% (28 claimants) said it was not clear. Only 32% (21 claimants) said the notice was clear.

They basically just said, "We needed more information to determine that you were eligible to receive this money. We find that we've overpaid you and you need to pay this back."

—Sales agent in his 40s

In a few situations, overpayment issues were resolved on their own without any required action from claimants—and often with no explanation to claimants.

The overpayment was only for one or two weeks. They said it was an overpayment, but it was under review and then it was fine. I believe it just got resolved.

—Community organizer in her 20s

I did get an overpayment notice. And then I think it just went away. I don't know. I remember that I was stressed about it and avoided it and then I didn't have to deal with it anymore.

—Transgender Latinx social services worker

However, in line with a familiar pattern, claimants who received overpayment determination notices far more often said they never received a full accounting of their overpayment or any clarification or additional correspondence from ESD.

At no point in this entire process—from the original overpayment or the so-called reactivation—have they ever explained, "Here's where this amount came from. Here's how we arrived at this specific number. And here's why. Here's how this even happened in the first place." I still don't think there are any explanations that are suitable for that. ESD exists to support the unemployed. They laid off staff and they want to try and make that our problem. It was like, "We screwed up. So let's go soak the people of Washington who are recovering from an economic crisis and limping along through COVID."

—Production worker in her 40s

A month ago, I had called and gotten that recorded message that we're not taking your call. An attorney helped me win my case so I stopped having to pay the money back. But this was last April. And they still hadn't refunded me the money that I did pay them. I was trying to work that out with them, but I couldn't, and the weird thing about it is that they sent me a

message online saying to call them, but then they won't take my call.

—Mixed-race scientist in his 50s

Claimants frequently said it took unrelenting investigation on their part to find out why there was an overpayment, even when the reason was very simple.

My hearing went relatively smoothly. But months later, I got a notice from the unemployment department saying that I owed them over \$8,000, which really, really scared the shit out of me. So I freaked out and tried talking to a bunch of people. And finally I was able to kind of track down what happened. They just needed a photocopy of my Social Security card. That was the only thing. Because they thought I was trying to pull off some fraud or something like that. I do remember calling a law firm about it and somebody not affiliated with unemployment kind of walked me through what I needed to do. I was able to get a photocopy of my Social Security card and send that to them. And I haven't heard anything about that since.

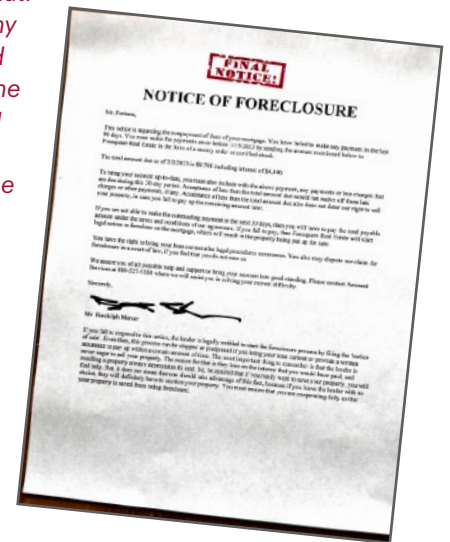
—Carpenter in his 30s

Some who appealed chose to make at least token payments whether or not they could afford them. But they were not consistently informed by ESD that they did not have to make payments while the appeal was pending.

I'm paying them \$5 a month because I said, "I can't give you guys money. I need to make sure I can eat, and keep a roof over my head." I only found out later that I didn't have to even be doing that. I didn't have to make payments, and they cannot apply interest when you're waiting for a court date. And they didn't even tell me that. They willingly took my money. The left hand doesn't know what the right hand is doing. I guess most of them aren't educated in the process.

—Legal technician in her 60s

While 21% of claimants with overpayments who



were interviewed said the notice of overpayment was clear, 28% had no understanding of how ESD determined their overpayment amount.

I did end up at one point paying some money back to ESD. Because they had determined that something was wrong about my claim or something was a little bit off. I just remember that on the 1099-G form they gave me for my tax year 2020, the amount was more than what I actually received, because I had to pay them some money back. And then I had to figure out how much money they actually paid, because it wasn't on the form.

—Actor in his 40s

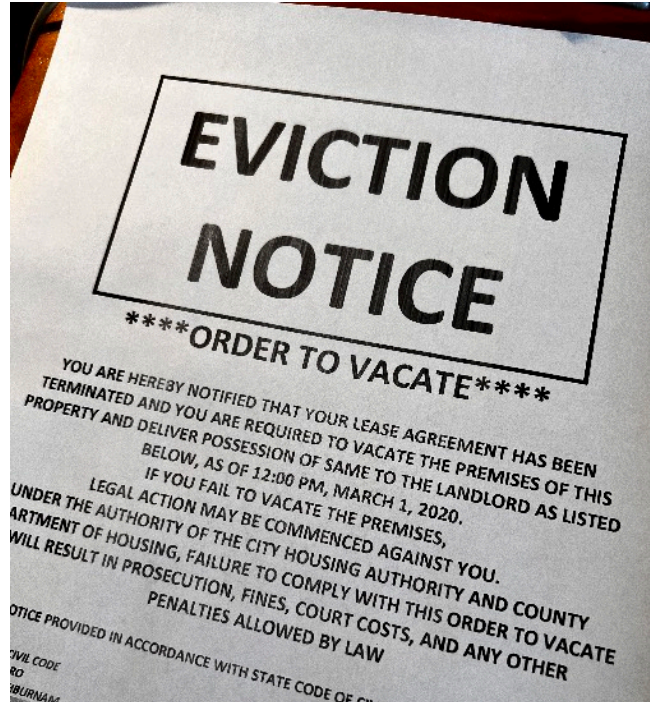
ESD needs to invest more resources into having some more customer service available to people so that they don't have to wait hours and hours out of their day to talk to somebody in hopes of getting some real answers other than, "Oh, well, my hands are tied. Nothing I can do. Pay up." I could have gotten that by looking at the website. I'm asking for an understanding and an explanation of what I'm looking at. If they don't know and nobody knows, then what are they really doing other than just, "We're just sending you a bill and telling you to pay it and if you don't like it, we're just going to come take it anyway."

—Spouse assisting production worker in his 40s

Several claimants said they were told willful non-disclosure of relevant facts or misrepresentation had caused their overpayment, but none received details of what they had allegedly misrepresented or failed to disclose.

They said the overpayment was a result of misrepresentation, and that's traumatic because any time you're told that you're misrepresenting something or you're getting something that you don't deserve, it's very difficult. It kind of hits you to the core. It caused me to lose some faith because I did act in good faith.

I applied for a program that I thought was a good situation for my disabled son. And we were approved for it. We followed all the rules as best we could. We got a notice in June 2021 that the PUA benefit from June 2020 through June 19, 2021, had been denied and that therefore there were overpayments of more than \$30,000. It was basically a year after the fact. And I'm thinking to myself, well, why if there was a



problem with it—he put his income in every week like he was supposed to—why wouldn't you let him know sooner than a year there was a problem? Why let it accumulate—the \$30,000—if that wasn't the right thing to do?

—Parent assisting claimant with autism

In other instances, claimants said ESD had been unaccommodating when claimants who owed overpayments needed to spend their savings on critical expenses rather than forward them to the state, and had been silent on recommendations to help claimants through the overpayment process.

I contacted somebody a while ago to try and set up an amount or something and they go, "Unfortunately, we can't do that. You have to pay one third of whatever your weekly benefit amount was." And I told them that I have other bills that I have to pay that trump even remotely trying to pay you guys back. It hurt us that I had to call family and ask them to help me just pay my rent and other bills.

—Retail sales worker in her 30s

I don't think we were aware that review by the Commissioner was an option. Everything after receiving the funds has just been like, you're in the dark, you're not going to get any help. And certainly

they're not going to help you figure out what your options are to pursue a waiver or take this and escalate it somehow.

—Production worker in his 40s

Claimants who had successful appeals of their overpayment said they have not felt a true sense of relief out of fear that ESD may again ask them to pay that money back. They described their interaction with ESD as “traumatic,” “misleading” and “intimidating.”

It seems so capricious when they decide that, "Oh, we've made an overpayment, it seems. So you can collect the benefit money but you better hold on to it because we may come to get it back."

—Salesman in his 40s

I was nervous, and my boyfriend said, "Don't spend this money yet. Things are kind of screwy, just save it in case you have to pay it back." So that was my school of thought at that point. I'm going to keep it in my savings, and just not spend it in case they screwed up and I have to pay it back. Because it's happened before, to my boyfriend at the time.

—Property manager in her 40s

I got an email and they started sending me bills in the mail. It was very intimidating—scary. And I'm already only able to barely pay my bills because I got cut off. It was very hard. It was mentally exhausting.

—Administrative worker in her 20s

Some claimants wondered if ESD had any sense for what they and their families were going through with sudden—and often unexplained—massive debt leaving them with dim prospects of financial resources for eventually buying a house or for day-to-day expenses.

I'm sure that this happened to a lot of people just like me. Now I'm sitting here having to pay all this extra money on stuff that I wouldn't have had to pay for before. I'm in a bad position and it was for something so simple. They knew that their website was crashing. They knew people couldn't get through to them. They should not have been sending out notices like that during a pandemic when they know that nobody has any money, and intimidating them with these thousands of dollars of debt. The

claimants are over here worried about their kids and their family members dying.

—QA worker in her 40s

The wife of a production worker, who was assisting him with his claim, explained how the lack of rationale or explanation for why the overpayment was occurring brought so much frustration to the claimant.

The first letter that we got was in December 2021. That was the first we'd heard of anything. As far as I knew at that point, we were fine. The payments were over months ago. He gets the overpayment balance letter that says he owes almost \$8,000 and this minimum amount each month and, if you don't pay, then we're going to put a lien on your property. You're going to accrue interest even if you do make timely payments. Kind of threatening language and there's no straightforward way to appeal or explanation of why the determination occurred in the first place. So he goes through this long and obnoxious appeal process and they reduce it in court to a lower amount. And they didn't explain why.

Why was it reduced and why was there any amount in the first place? None of these are questions we'll ever get answers to. And then I went on the warpath, talking to the news stations. Then magically overnight, his overpayment balance goes to zero on the website and we get a letter in the mail saying, "Now your overpayment balance is zero." And then a few months later, they claimed that it's reactivated. I wanted to say, "No, we have a letter from you guys in the mail saying that it's zero. I have that letter. You can't take it away. You can't unsend me that letter." So the debt keeps building more interest and it's higher now than it ever was. They refunded it when they sent him that we-cleared-it-at-zero letter and now they're reactivating and telling us to pay it back.

It was very disillusioning and I keep worrying: Is my husband going to have this growing debt looming over his head and will it be sent to collections? We're wanting to move relatively soon and maybe buy a new house. How is that going to affect prospects if he has this huge debt that otherwise he wouldn't have? And time invested trying to get information, trying to give them what they want, trying to attend all the meetings, trying to do whatever I can to help other people. It felt like we're making progress with the zero overpayment letter—and then it was literally reversed and taken away. It's just so defeating and exhausting.

People who have to pay back overpayments experienced chronic anxiety over how they were going to manage it.

A friend of mine had to pay back around \$20,000. She had a hearing but she didn't know how to defend herself.

—Asian mixed-race scientist in his 50s

It keeps me up at night because this \$27,000 is going to be hanging over my head forever. There's no way I could physically pay this.

—Health care technician in her 40s

Stress? I'm always thinking about it. How can I pay this? I don't know what I'm going to do next. Even when I'm asking my husband what I'm going to do because I don't know anything about unemployment. I called them how many times — they didn't have any accurate information to give to me. What am I going to do?

—Asian restaurant server in her 30s

It's not easy for anyone to come up with tens of thousands of dollars. It took a little over a year for me to get those payments. And I had to spend it to cover my day-to-day expenses, like buy groceries or help out with utilities. I didn't have the original amount and I also wasn't working when they informed me of the overpayment.

—Hospitality industry worker in his 20s



As with the production worker case above, for another claimant there was no explanation of the overpayment and then the resulting disappearance or partial reduction of their overpayment left the claimant baffled as to why and how.

After I did a public comment on that November night at the Unemployment Insurance Advisory Committee meeting, ESD reviewed it in detail and then the overpayment was reduced from \$30,000 down to \$19,000. And it seems that the amounts owed vary tremendously, depending on the time and who seems to be refunded at any given moment.

—Administrative worker in her 60s

Overpayments could arise from mistakes by a claimant or mistakes by the agency, but many claimants viewed those as just two different ways they could be punished. Unemployed and without resources to fall back on, they sometimes found themselves having to use money ESD paid them by mistake just to cover the rent.

The overpayment was for a very simple mistake. And I wasn't trying to put anything over on them. It was actually an honest mistake. They didn't care. I filed for a week when I went back to work. I didn't know that it was supposed to have been a waiting week. I don't recall everything that happened but I know that they charged me for two checks or something like that, and I had to pay that back. Otherwise they were going to garnish my bank account.

—Black customer service representative in his 60s

I submitted all my Paid Family Medical Leave to unemployment. When they eventually back-paid for the six months, they didn't take into account the Paid Family & Medical Act benefits. So I did my best to not spend it. But then they never collected it back from me and, when they stopped giving me money and I still had that money, I had no other way to be able to pay for my rent except to use it. I haven't heard anything back about that yet. I may have to pay back that money.

—Student in her 30s

It's not obvious to claimants why a job they tried for one day and quit because their physical limitations made it difficult would doom their benefits claim that was based on months of other work. However, the rule about base-year jobs (the four or five quarters before a benefit claim is filed) is that all job separations (except those that have been "purged" through a complicated formula of later earnings and hours worked) must be either layoffs, good cause quits, or discharges without misconduct. As a result of this rule, many claimants unwittingly find themselves with an overpayment.

I did one shift and we said we would see how it went. And, when I got home, I decided it just wouldn't work. It was restocking all their shelves, up and down, and we tried everything. We tried my using a bench. We tried all different things and still it did not work. They said "I'm sorry." I wasn't offered any other position. So we just kind of let it go. Then unemployment said I owed all this money back because I had gotten the job and I quit.

—Latinx restaurant manager in her 30s

It seems like they reserve the right to say, Oh, we made a mistake. But it's your fault that we made a mistake.

—Sales representative in his 40s

I feel like ESD is just coming after anybody that pops up a red flag in their system, because they've just given money away left and right without making sure if it's going to the right person. Now I'm getting targeted even though I needed that money. I was honest about everything.

—Bartender in his 30s

There was considerable angry confusion over ESD's statements that it was pausing collections of overpayment when a claimant was awaiting a hearing on their appeal. Claimants did not understand that the pause—and in ESD's eyes, the word "collections"—refer only to actual garnishments of bank accounts or paychecks and actual foreclosures, not to demand letters. Unfortunately, whether the denial was appealed or not, there was never a pause in letters demanding payment until payment was received.

They claim that they have paused collection efforts and pursuit of overpayments but that's not true, because they are sending the letters in the mail to

people and we're still receiving them every month. It's been really obnoxious, attending these meetings where they claim they're doing all of these things to help the poor victim of the overpayments that they created and sent to people. And nobody can get any good current information.

—Spouse helping production worker with his claim

Seeking Overpayment Waivers

Although overpayment waiver policy varied as the pandemic wore on, waivers were technically available but there was no clear route to applying for one, claimants said. Waiver forms were difficult to find and Claims Center agents sometimes doubled the difficulty by refusing to mention waiver as a possibility.

My husband tried to call them many times either to get an understanding of what this was about, or to engage in an appeal, or answer their surveys and whatever they're sending in their information requests, and was spending hours and hours on hold. We never seem to get through to human beings. And if he finally does, then he'd get really frustrated trying to explain the situation to them. And all they keep saying is "Well, there's nothing we can do. You just have to pay it." Very unhelpful. I waited for hours just for you to not see the scope of the problem. People will throw their hands up in the air and give up and say "Okay, I guess I'll just pay because I don't want this on my credit," or decide "I can't spend hours on the phone arguing with people who aren't going to help and don't care."

—Spouse helping production worker with claim

Complete denial by ESD representatives that waivers even existed was not infrequent. Many claimants couldn't get an explanation about why they might not qualify for a waiver—just a flat "There's no such thing." Conflicting information was also given out on the subject of waiver, with some claimants concluding that they were deliberately being misinformed to keep the use of waivers down.

The Claims Center rep had just said, try going down to WorkSource to ask them for an application for a waiver. And then I asked at WorkSource and he said, we don't have a waiver. But you could use our

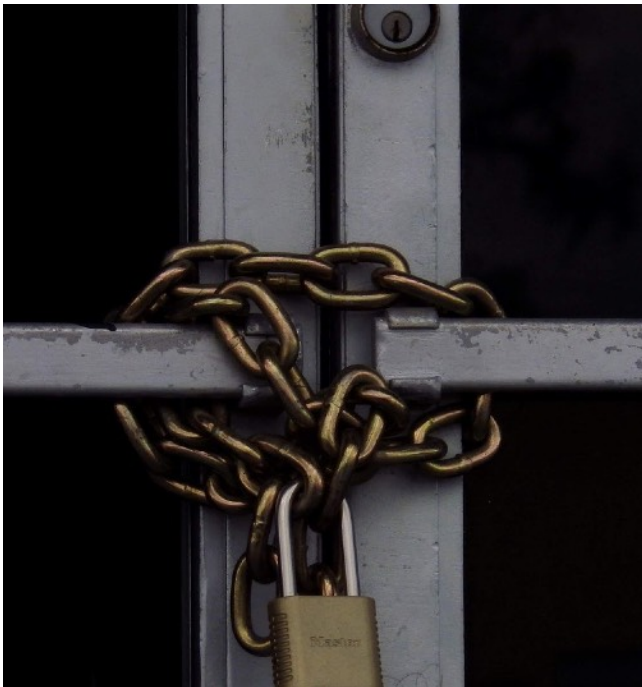
phones or call them. Then as I'm sitting in their waiting room, I could hear them talking about me and my request: "People are being told to come down here to ask us for a waiver." I called the lady from the WorkSource phone, and he told me, "There is no waiver, Ma'am, I don't know what you're talking about. There's no waiver. We gave you plenty of chances to appeal this." And I said, "I know. I was late, I missed them. But at this point, I just need help with a waiver." "There's no waiver. There's no waiver for you."

—Health care technician in her 40s

I don't think that we were aware that review by the Commissioner was an option. Everything after receiving the overpayment has just been like, you're in the dark, you're not going to get any help. And certainly they're not going to help you figure out what your options are to pursue a waiver or escalate your case somehow.

—Wife helping production worker with his claim

On the flip side, claimants who may have gotten blanket waivers—automatically granted for certain overpayments of the federally funded programs—were not told the reason for the charges that suddenly went away.



The overpayment flood starting in 2021 highlighted one source of misunderstanding and confusion in particular: the conspicuous lack, in communication with claimants, of any straightforward accounting of money that was debt, interest on the debt, or amounts repaid, garnished, refunded, sent to the IRS, reversed on appeal, or waived.

This absence of accounting was made even worse by the different sources of payments (regular unemployment benefits from the state; CARES program benefits including PUA, FPUC, etc., from the federal government) during the pandemic. Said one claimant, looking back on the mass of notices received over the pandemic and post-pandemic period from ESD:

I still don't have any clue about what I received and what I didn't receive. It was very much a patchwork of little things. In fact, I got not one overpayment notice, but several—with differing figures on each one. And that's part of what I couldn't get an answer to—what they based it on.

I would get constant monthly statements saying: "You owe this money and you have to pay it now or put it on a payment plan" and that they could garnish my income tax refund. They actually ended up doing that and I've never heard back whether or not I will get that. During this time, I got two deposits in my account with no explanation of what they were for, and why.

To this day, I don't know if they still have a garnishment against my IRS refund. Yet another overpayment came in later. First, it was \$500 and then that changed to \$625. And I just couldn't go on that merry-go-round after the bout over the first one. I applied for a waiver and they said no, you have too much money in savings. And so I just ended up paying off that \$625. Which I don't think I owe. But rather than just being beat up over this anymore, I just paid it.

—Administrative worker in her 60s

Impact of Unemployment & Benefits

EFFECTS UPON WORKERS AND THEIR FAMILIES

Asked about the impact of unemployment upon them and their family, many claimants responded that being unemployed and trying to get benefits meant non-stop anxiety. Several had to move out of their homes and constantly feared that they would become unhoused. The uncertainty and stress of barely making it through the crisis led to feelings of depression, and those who had medical conditions could not afford health insurance or doctor visits. Claimants who received their benefits felt significantly better, but they still experience an underlying fear that benefits could be stripped away.

We were affected. We're now in a motorhome and it affected us a bunch in many different ways. We could have used that money to help survive, and we've been living broke every month. Because I can't work right now. And so it's bad. We barely keep our phones going.

—Construction worker in his 40s

I got COVID right after my dad died and five family members died so I was exhausted and grieving. And there were side effects I didn't know about. It took me 7 or 8 months to get over it and back to working full time. I didn't know about the overpayment until my wages at my new job got garnished. I successfully appealed, but lost my house and my savings.

—Latinx caregiver in her 50s

It was kind of all-consuming, to be honest with you. Once you're in that unemployment thing, it almost consumes your life. Whether it's being on the phone, standard communications, waiting on hold, trying to get a knowledgeable person—if you're unemployed, it kind of becomes your life to find a way to ESD.

—Father assisting claimant with autism

With my husband's salary, it was enough. We had to change our lifestyle a little bit. Harder, but it was



helpful for sure. I lost health insurance, but was able to get on my husband's, which cost more but was better than if I had had no insurance.

—Health information specialist in her 30s

Moving in with relatives, sharing space with a roommate, or in one case moving for six weeks to a hotel were among the measures claimants took to make ends meet.

I stayed in a two-bedroom apartment with my son. I'm still trying to recover from the deaths in the family. I lost my home in May and then I stayed with my son in June and July. And that's when I went back to work. And I was able to go on full time putting in my 40 hours. But by that time I was already getting garnished because of the overpayment. I was getting hit left and right.

The unemployment program was a hardship for me. Instead of helping, it really hurt me financially, and not only that, physically. I was drained, mentally stressed. I was on anxiety medications like you just don't know. I couldn't sleep at night, wondering where I was going to end up. I wondered am I going to be homeless? Do you know what's going to

happen to me? Do we know what's going to happen to us?

—Pacific Islander caregiver in her 50s

I had to leave my home—I couldn't afford rent. And it was still during a pretty deep and grueling part of the pandemic when finding work was really difficult. I'm very, very fortunate and blessed to have a strong and supportive community and family.

—Design professional in her 30s

Thankfully, I have some savings. So the wait on unemployment benefits wasn't super detrimental, I was living with roommates and my rent was lower than when I was living alone. I don't have kids or anyone to take care of but it was getting kind of close there. I don't have too much in savings anymore to be able to get some income, even though I could still find jobs, but everything was changing at that point. So it was definitely stressful and I was losing health insurance on top of that.

—Transgender community organizer in her 20s

Several claimants interviewed said they lost their home—sometimes a rented home, sometimes one they had owned.

The benefits met almost none of my needs. I lost health insurance, I couldn't get food stamps as I was making too much. I even had to sell my house, because I couldn't keep up with the payments.

—Route driver in his 50s

We actually had to move out of our apartment and move in with my dad. I basically had to get rid of the vehicle that I had paid almost \$6,000 on and owed only \$3,000 because I just couldn't make payments anymore. And I had to reach out to the Opportunity Council for help with electricity bills and stuff like that.

—Wife helping production worker claimant in his 40s

I had just broken up with a partner who was becoming a meth addict and I needed a place to live and I couldn't find one. I ended up living on my best friend's living-room floor for a month or two because I couldn't really pay rent.

—Retail worker in her 40s

Interviewees who successfully did receive benefits generally felt that they really helped turn their finances around.

Oh, gosh, the benefits were significant. I was finally able to get caught up on quite a few bills and put money away and savings, buy things I needed for my personal well-being. It was a big relief.

—Customer service representative in her 30s

COVID came in and I lost the best job I had ever had. So that was really unfortunate. But as far as unemployment goes, they really helped me out. I probably couldn't have been able to function without it.

—Mixed-race gig worker in his 30s

Wondering whether I'm going to get approved or not, and having to go through that appeal process because of answering a question wrong and not being able to access anyone—that was very anxiety-provoking for me. But the benefits were helpful once they went through.

—Latinx transgender self-employed worker

After losing his house and being forced to sleep on friends' couches, one claimant was especially grateful that when he did get benefits, he did not feel so ashamed that he had no option but to live with his parents, who were getting by on limited retirement income.

The benefits let me be able to actually take care of my parents because I was living with them. I could help out and feel like I wasn't dependent on their Social Security.

—Sales representative in his 40s

Claimants were often harmed by the delayed payments.

It helped a lot when I did get paid. But, as far as my own expenses, it didn't help because I didn't receive the benefits for about a year after I applied.

—Pacific Islander computer programmer

It changed me as a person. The failures caused me to lose everything that I've worked my entire adult life building. I'm not going to lie. I checked myself into a hospital one time because I couldn't get out of

this negative loop. I've never had depression. My parents were law enforcement and I came from a middle-class family. I am definitely a product of White privilege. And then all of a sudden, I'm a non-entity, a non-person. I'm being overlooked. And that mentally is something that I'm glad I experienced. I didn't quite understand what White privilege was until I went through that and at the end of the day, I can't be too mad at it, but it hit me very hard.

—Self-employed worker in his 30s

An added blow to claimants was the loss of important job benefits—especially health insurance. Claimants reported two ways they could lose their health insurance. One was by losing their job, which also might mean their entire family would no longer be covered. The other was by losing their access to the free state health insurance program, AppleCare, because their unemployment benefits kicked them into an income bracket that disqualified them. As one claimant, a custodian in his 30s, summed up that particular problem: “Health insurance is not a problem as long as I stay poor.”

Of the claimants interviewed, 10 said they lost their health insurance when they lost their jobs. At least two then went without coverage, three said they were able to join their spouse’s program, and a few were able to sign on with Apple Care.

After I lost my health insurance, I did not figure something else out. I just went uninsured for a while. I didn't really know how to navigate that.

—Film industry worker in her 30s

The unemployment benefits I received weren't enough, but my husband and I were both covered so for a few months that was just enough to cover our mortgage. When we got laid off in March, the company covered health insurance for only five months. Then we had nothing.

—Asian sales clerk in her 50s

Several others who were already on AppleCare lost those benefits because of their income from unemployment benefits.

I was in this loophole where at some point my healthcare did get canceled. And I got a huge healthcare bill. I thought they couldn't cancel anyone's health care during COVID. And they

checked and said, “Oh, you're right. We shouldn't have canceled your health care, so here's your health care back next month.” But they couldn't tell me for how long that would be. Now that I'm not getting unemployment anymore, I don't have the concern about my health care being canceled again. But I certainly couldn't have afforded to pay for health care with the very small amount of unemployment that I was getting. And I couldn't look for a new job because of COVID.

—Transgender community organizer

Three claimants said they did not have any insurance when they became unemployed. Some blamed employer policies requiring a certain number of hours of work per week to establish eligibility for health insurance and rarely or never allowing that threshold to be crossed.

I didn't have health insurance. You only got it if you worked over 35 hours a week, but my friend with a full-time job with that employer—they would never let him go over that 35-hour requirement.

—Black restaurant server

Less frequently acknowledged is that even after receiving unemployment benefits, claimants will seldom be able to afford the health insurance they had with the prior job they lost.



I lost my health insurance and I still don't have it. That national coverage costs money and I can't really afford it—and I'm sure I'll be paying a penalty on taxes owed to cover benefits. But I'm squeaking by to pay rent and that was last month. A while back I had to overdraft because I didn't have enough money until around two days after rent was due.

—Social services manager in his 30s

Knowing there is an unemployment system they can count on, one claimant stressed, would reduce their panic about losing a job, but people often don't know the unemployment system can help them.



If I had known, it would have eliminated a lot of anxiety. I wouldn't have felt so heavy with the panic of it all when I lost my job. It would have been nice to know that that resource was out there, or that I qualified for that resource more specifically. Because it didn't even cross my mind. And I know that I'm not the only person who's been in that situation before. So for the sake of other people who've been in that situation, I would like them to know that too.

—Black transgender office worker

IMPACT OF PAYMENT LIMITATIONS AND DELAYS

Losing a steady income presents extreme challenges to most people, claimants say, because benefit amounts tend to be only around half of regular wages or salary, although they were supplemented by the CARES Act programs during the pandemic.

Regular benefit amounts are not sufficient to cover their essential expenses, many felt. After a few months on unemployment benefits, even when re-employed, they were regularly hit with late fees for the credit card charges they had used to make ends meet.

Added to that, there were often two or three weeks without any income once they informed ESD they had a new job.

It doesn't replace a whole lot of pay. And ESD was super-strict around when you could still be getting even that small amount. As soon as I was offered another job, even though I hadn't started the next job yet, and I let them know, they said, "Well, you don't get paid benefits anymore." I was like, "Hey, but there's still a week or two before I'm going to get started."

—State agency worker in her 30s

Claimants with small children said that the limited benefit amounts were particularly painful.

You're already stressed out because you don't have a job to feed your family. They don't give you enough to even live off of. The price of food. Everything is just so high.

—Administrative worker in her 20s

Some indicated a need for payment amounts to correlate with prior wage income and monthly expense amounts, or more permission for the claimant to make up the difference with outside work.

Several claimants interviewed said they would be unwilling to file for unemployment benefits again after their experiences. One of the stated goals of the current UI system is to help workers find a new full-time job in their accustomed field. But, citing bureaucratic inefficiencies and a lack of trust in the system, claimants frequently said they would find alternatives, such as giving up on finding a job in their

field and taking the first job that came along, rather than have to file for unemployment benefits again.

I don't know if I want to ever use the unemployment agency ever again if I can help it. Because they're so blind. And the tiniest mistake will hurt you. I'm very burned by this whole experience.

—Restaurant server in his 30s

I would rather just not even apply for unemployment. I'd rather not even go through that process again. It was just such a headache.

—Black project manager in his 40s

A quandary that some interviewees encountered was how to supplement a benefit amount to have a closer-to-adequate income when the system counts around 75% of any added income against their benefits.

It was extremely hard. It was demoralizing. The whole thing. And I'm a privileged person. I have an education. English is my first language. So I can't imagine how they would treat other people.

—Restaurant worker in his 30s

A claimant with a disability restricting his mobility said some other states took more lenient stances on outside income.

In California, the benefit program would let you bring in some income and come closer to what you were making or what you'd be entitled to based on your income. But in Washington you're essentially encouraged not to work because most of it would be deducted from your benefits.

—Gig worker in his 30s

“Living comfortably” should be an attainable goal for people willing to supplement their benefits, but it often triggers a cutoff of benefits, many claimants with lower-paying or part-time jobs said.

First off, I would look into what they're paying monthly for rent, utilities, cable and internet, car insurance, all of that stuff. They deserve to have a little bit beyond that so that they can still live comfortably. So the system should not be saying, "Oh, well, you don't qualify because you make too much over what your weekly benefit amount is."

—Retail salesperson in her 30s

The long waits for benefits were cited as a hardship by other claimants who felt there was systemic indifference to their having nothing to keep bills from going unpaid.

I first applied at the end of March 2020. And I didn't actually start receiving benefits until August. So that was difficult. Having nothing to pay bills with was really difficult.

—Customer service representative in her 30s

\$300 a week did not meet my basic needs. And without health insurance, I felt naked while recovering from back surgery.

—Asian patient services representative in his 30s

Having already been hit with an overpayment, some claimants opted against filing more claims, in case they made things worse.

I've had many periods of unemployment where I definitely would have qualified for benefits. But my experience in 2009 was so horrible that I was too terrified to even try. I only tried during the pandemic because I knew I wasn't going to be able to just struggle for a couple of months and find something else. I was looking at a long, long period of unemployment, and the jobs that I could get would not be safe for me as an immunocompromised person. Then I stopped claiming even though I was still unemployed. I was already in an overpayment appeal and I just didn't want to make it worse.

—Black transgender self-employed worker

It was horrifying for me. It was bad. I was trying to live and it was hard—very stressful. I borrowed money from my grandson and I took out a high interest loan and I had credit card debt.

—Black customer service worker in his 60s

My credit went from 800 to 480. It was devastating. I still haven't financially recovered from being let down by the state.

—Gig worker in his 30s

I'm quite sure my experience applying for benefits shortened my life.

—Administrative worker in her 60s



my job separation after a year, I lost at hearing, and received rude and disdainful treatment from ESD. They told me there were no waivers available. And —no joke—every single person I've talked to knows someone that is going through the exact same thing. Every single person. Like "Oh, my cousin. That's what happened to my cousin." "Oh, that's happening to my aunt." "Oh, that's my daughter." Everyone.

—Health technician in her 40s

I'm not going to apply. I would rather drink sewer water next time. With the bureaucracy, you can get in trouble so easily and they think everyone's trying to

defraud them. I have a negative feeling about it.

—Black customer service worker in his 60s.

I would not go through the Employment Security Department. I don't trust them anymore. I would just try to hustle and make money through creative means.

—Communications worker in his 20s

I would rather not even apply for benefits, it was just such a headache.

—Black project manager in his 40s

As one claimant noted, the feeling that there is no reliable unemployment insurance program can dissuade workers from relocating to the state.

I probably won't ever work in Washington state again, because even if my job is great, if there's a possibility that the job will end or anything happens, there's no way that I'm going to count on getting any unemployment even if I'm entitled to it. It's a very broken, broken system. And I think a lot of people are overworked and underpaid, and there are so many bureaucratic inadequacies and policies in that agency.

—Mixed-race tech worker in her 30s

I applied for benefits back in December of 2020, and I didn't get any sort of compensation from ESD for three months. It had something to do with having to verify my identity. I had already submitted everything they needed and, thankfully, I did have some savings. But I was hearing from a lot of other folks who had submitted claims every single week for months on end and were not receiving payment. Not having any savings can cause a really big issue.

—Community services worker in her 20s

The unemployment system was so bogged down that I just assumed I wasn't going to get any money and even if I did get any money, I felt like it doesn't matter at this point. I didn't get a single payment for four or five months and then, when it came in, it was completely unexpected. That anxiety of not knowing, that's one of the most difficult parts. Because do I have to take a job now that's lower-paying just as a bridge job to keep money coming in, or do I hold out to find the right job?

—Asian health care worker in his 30s

At least half of the claimants interviewed said they were unwilling to file for unemployment benefits again after their experiences.

I don't think I would apply next time, honestly, knowing what I know. My employer filed an appeal of



Findings and Recommendations

Claimants' Views on Needed Reforms

Q: If you were put in charge of ESD, what would you do first to improve the agency's performance?

In the interviews, claimants were asked which form of assistance they would find most helpful when applying for unemployment benefits: the current system using eServices and calls to the Claims Center; filling out an application with phone assistance; working with a caseworker by phone or in person to fill out an application, or another system.

More than a third of interviewees said an agent walking them through the application in person would be their preference. Half of the rest said anything involving an agent's assistance would be their wish—either in-person or by phone. None felt that eServices was able to cover all the bases without effective assistance from humans to rely upon.

There was strong feeling among a majority of claimants that to navigate the unemployment system, being able to talk to a human is essential—not only because automated choices on phone systems can be tedious and not relevant to the claimant's inquiry, but because the instructions for applying for benefits can be so confusing.

Asked what they would do first to improve ESD's performance, a majority said they would assure that human assistance was easily accessible by all claimants, especially by those with barriers like a disability, low literacy, or lack of computer skills.

I would absolutely have places that you could go to actually talk to a human being—because everything being automated is just a nightmare. I would say we need to have an unemployment office as they did back in the day. Because unemployment is no joke. Whatever it takes to make things easier for people to get access to that resource is very, very important.

—Health care technician in her 40s

I would assure there are enough people covering the phones so that if somebody called in, no matter what time it was, there would be somebody to answer questions. Because I know there are people that aren't as comfortable with computer systems or they don't have a computer or a laptop and they really need help.

—Bank manager in her 60s

There needs to be in-person help. Absolutely. There is nothing more stressful than being online, on hold, and then being disconnected and you've just given up hours of your life and you're nowhere.

—Teacher in her 60s

One claimant suggested that communications about eligibility to applicants should be tailored to the questions appearing on the screen during the application process and easily available in an audio format.

The number one thing that I would do if I headed ESD is have a notice that pops up on your screen, in big text, where you can click an audio button and someone will read you the precise scenario in which you may be eligible for unemployment. Or you could call a number and talk to a caseworker or someone

like that. And they would work with you to figure out whether you fit into the system or not. Instead of you having to interface endlessly with confusing text.

—Transgender restaurant worker

Another interviewee noted that ESD did make efforts during the pandemic to address some claimants' confusion by stressing the bottom-line importance of continuing to file weekly claims, no matter what.

I think they must have been inundated with questions and so on but they eventually got better at communicating. And I remember them saying "If you're confused, just apply, weekly. Just do it." That was the communication they were putting out on their website.

—Asian mixed-race scientist in his 50s.

But many claimants expressed concern that the inaccessibility of benefits and the complexity of ESD procedures undermine a central goal of unemployment benefits—to mitigate economic harm. Grievances overwhelmingly focused on access issues. "They need to beef up their response time considerably," said one claimant.

Having enough staff to support the calls that are coming in would be really helpful not only for the claimants but also for the workers so they're not overworked. I think staffing needs to be adequate to not be a barrier for people to access the help they need. ESD should consider more community partnerships and opportunities to actually have people sign up for times to get assistance, not just wait on the phone hopelessly for certain hours—and people also might be working while they're having to do that.

—Transgender higher-education worker in her 20s

Communication is key with any relationship, right? But at ESD, they're impossible to get in touch with and when you do it's almost like a build-up to a letdown. You can't really talk to the person, you've got to wait to talk to someone else on another tier who can address your question. Or they just don't have people available to speak to or even email or chat or whatever. And I understand that this is an unprecedented time, but it's been that way forever.

—Property manager in her 40s

A few recalled that help for claimants was once available in person at WorkSource, and help for food stamp or SNAP applicants was still available quickly now, following a short interview at the Department of Social and Health Services.

People were still able to get EBTs and food stamps throughout the pandemic. You'd fill out the online application and have one quick interview.

—Communications worker in her 20s

A coworker who was on unemployment 8 or 10 years ago had a very similar situation where there was an overpayment, and it was just a hiccup in the system. And he went to a WorkSource Center and talked to somebody in person, who said, "Oh yeah, this is just a total mix-up. I'll just clear it up right now. You don't owe us all that money."

—Restaurant server worker in his 30s

Before they farmed out the ESD branch offices to WorkSource, they did have offices where you could get assistance. If the phone was not really an option, then you could at least go to an ESD contact at the local WorkSource.

—Sales representative in his 40s

Many claimants advocated expanding the number of ESD workers on the telephone lines, instituting a call-back/texting system, or launching a scheduling portal.

The need for plain language and better communication in general was cited as a common problem. Claimants repeatedly expressed frustration over the convoluted legalese on ESD's website and in determination notices and applications, and suggested that defining terms more clearly might prevent the bogging down of phone lines.

Definitely, I would make the language more accessible. I've worked in legal departments and I feel I have a bit more literacy in that type of language and I even found it very confusing.

—Teacher in her 30s

I went through college and I'm going through a master's program right now, and yet I couldn't understand some of the questions without a clear explanation. So, if I can't get through it. I can only

imagine how people who have trouble understanding or limited English can do it.

—Administrative worker in her 20s

It seems like they just expect people to understand even if it's their first time going through the website. An explanation of what, say, "terminated" means — I'm sure I'm not the only one who had confusion on that.

—State agency worker in her 30s

But claimants also stressed that plain language alone would not suffice—interaction with knowledgeable ESD staff is necessary.

It would be very, very helpful to me if there was some sort of immediate interaction that I could access whether that be a chat box, or just a messaging system, where they'll say, we'll reply in 48 hours or something. Having a timeframe would be much less stressful.

—Actor in his 40s

I would go for a system where you allow people to make an appointment for a phone conversation. Maybe you could go online on a Monday and say, "OK, I'd like to make an appointment on Friday at 8:40 AM in the morning to talk to somebody."

—Parent helping son with autism with claim

The fact that you're fairly conversant with tech and understand computers doesn't even matter. Usually you'd still rather do it in person.

—Restaurant server in his 30s

With today's technology, it just seems like there are so many better ways to handle when there's an overload of calls or missed communications. And doing it with messages would be fine.

—Retail sales worker in her 30s

Claimants also made suggestions on how in-person services could be delivered, including scheduling events in different cities for people to come in with their questions.

Making sure that there's either an ESD-trained person at all WorkSource offices for at least the Monday through Friday work schedule would be great. It would be nice to be able to go in person, pandemic notwithstanding. It would probably have saved the department money to put two people on staff at every WorkSource location instead of placing hundreds of people in phone banks.

—Black transgender self-employed worker

Honestly, if they had had a recording at the Claims Center saying, "Hey, we're just too busy and it's not functioning. We'll reach out to you," or something like that, it would have made a huge difference because it would let you progress a little bit further every day in the phone tree. Instead, they'd say, "You're going to be on hold for the next available agent," and then you'd wait for half an hour and it would just hang up.

—Sales manager in his 40s

I think it also would have been great if there could be an event where people would be available in a



certain place on a certain day that was publicized. For people who live rurally, that would be really supportive to be able to go and have an appointment time and meet with someone without having to drive for hours.

—Transgender human resources worker

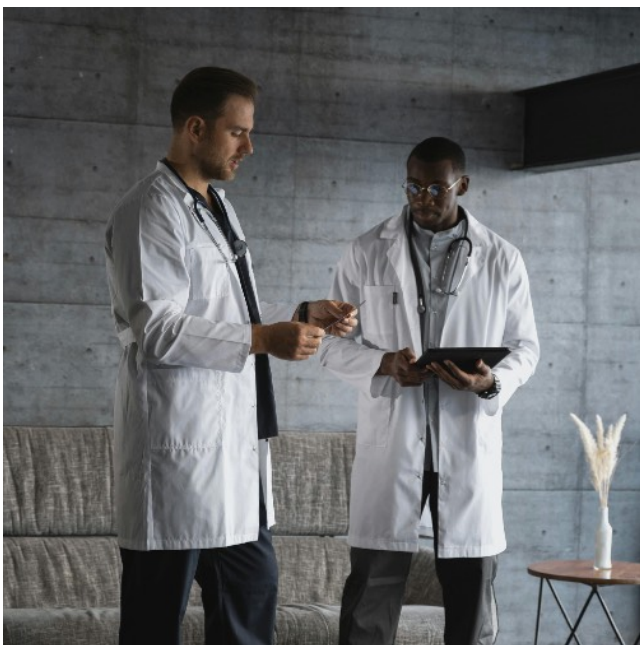
Several claimants believed that assigning individualized caseworkers to claimants would facilitate clear, direct communication and demonstrate a commitment to each claim.

Having a caseworker, a point person that you could contact every time you needed to talk to someone would have been a vast improvement.

—Transgender social services worker in her 30s

Hire caseworkers, someone coming out and working with people one on one. Each time slot there would be someone who can come show you and work with you, meet you at WorkSource, go over your papers, be an advocate. Every person's situation is different, so have a different type of professional who knows the system and can give you some hands-on help. The people helping with resources didn't know that much about unemployment. It was traumatizing, to be honest.

—Indigenous delivery worker in his 30s



A few claimants commented on what they perceived as an overactive focus by ESD on fraud, and the agency's setting a tone that people receiving benefits owed a debt to the state. They believed those attitudes were more harassing than warranted.

The pressure to find a job, some interviewees said, tends to create some counter-productive incentives for claimants trying to rejoin the employed workforce with a job in their field.

It's kind of difficult to work your way back into the workforce, the way it's currently set. It should be set up in a way that is encouraging people to find good jobs, not take the first job. And I think it would be great if there was less of a penalty for working odd jobs. Or say you got offered a part-time gig that could turn into a full-time gig. The way it's set up right now, you have absolutely zero incentive to do that.

—Program coordinator in his 30s

Ideally, another leading target for reform, several claimants said, is the IT system as exemplified by eServices.

The first priority should be updating the software. It's kind of clunky, definitely. In 2020, it was outdated and that's why it crashed as much as it did.

—Customer service representative in his 30s

To improve the system on a regular basis, collecting user feedback should be a priority, added one claimant who believed this might have a more direct effect upon the agency's motivation to sharply reduce Claims Center hold times.

I was trying to apply for jobs. Oftentimes, I'd get a call and I'd have to pick it up. And then I'd go back and pick up the ESD line and it's already hung up. Then with the automation—there were times where it would tell me, if you want to talk to someone or if you want to do this, press this number. And it happened over and over again that there were some numbers that didn't work.

I would document those failures and start from there to constantly improve the system. I would have a place that would make it easy for people to make comments and suggestions and express their experience and actually use that.

—Black project manager in his 40s

Observations on Claimant Interviews

As a qualitative research project, this study does not generalize about all claimants based on numeric data from responses of our 100 interviewees, since they were not selected randomly. That being said, many of the claimants we interviewed indicated that they no longer have confidence in our state unemployment insurance (UI) system.

Several of the respondents had lost their job and applied for benefits during the last major recession of 2007-2009, which lasted approximately 18 months; some had filed claims before 1999 when the in-person application process was changed to a call-center-based filing system, or before internet filing became available.

Their treatment by the Employment Security Department (ESD) during and after the COVID-19 recession was comparatively much worse and the recent experience sharply reduced their belief that in the event of future job loss, unemployment benefits will supply them basic temporary means of support, many commented.

These are some of the important contexts that shed light on their shared frustration and, often, failure to obtain help or receive benefits:

A complex state UI system imposing self-service on most users but providing inadequate assistance, hitting marginalized claimants the hardest

The claimants interviewed broadly agreed that the complexity of the UI system makes the rules very difficult for the average person to understand and comply with, yet the application process is largely geared to self-service.

The assumption is that most applicants from Washington's roughly four-million-person labor force can navigate the system by reading the printed *Handbook for Unemployed Workers*, consulting the esd.wa.gov website for the rules and procedures, and doing online searches for information, with minimal need for staff to explain the rules or provide consistent and adequate accommodations to those with barriers.

This was not always the case and some historical context is helpful here. Until 1999, unemployed workers seeking benefits filed initial claims in Washington in person at the state's WorkSource Centers; applications were required to be in writing, with assistance available from UI staff working at WorkSource. In that year, ESD switched to a call-

center-based filing system and in 2000, ESD began accepting claim applications online.

It was projected that the new phone system would save more than \$2.8 million per year by replacing many staff members. But a 2021 evaluation by the legislature found that the cost to operate the new call center and continuing need for staff at Work Source erased the projected savings, while there was a decline in timeliness of first payment of benefits.⁸ One plus, however, was that claimants preferred filing by phone over applying at WorkSource offices because of the travel time and sometimes the need to wait in line for assistance.

Later, online application gradually became the norm. The Next Generation Tax System (NGTS), under a contract with Hewlett Packard, was launched in 2014 and EAMS (Employer Account Management Services) became accessible to employers through eServices. To replace the legacy mainframe system GUIDE, a commercial off-the shelf (COTS) information technology (IT) system was purchased

⁸ Evaluation of Employment Security Department Call Centers, Report 01-10, Washington Joint Legislative Audit and Review Committee (JLARC), 2001, <https://leg.wa.gov/jlarc/AuditAndStudyReports/Documents/01-10.pdf>.

from the vendor Fast Enterprises, UTAB (Unemployment Tax and Benefits) and launched in 2017 to provide eServices to claimants.

In 2021, responding to the deluge of claimants who had lost jobs due to the COVID-19 pandemic and the system overload, the legislature passed a law (ESSB 5193) requiring that ESD track and report a set of performance metrics, follow new standards for plain-language in notices and determinations, provide more help to people with limited English proficiency or computer skills, and set up a pre-trained pool of staff adjudicators always at the ready to step in and handle claims whenever another economic downturn or other emergency necessitated added staff.

The provisions were partly in response to claimants' swamping legislator offices with complaints that their benefits claim was pending for months on end while they struggled to get by with no income. Many legislators felt there was inadequate staff at ESD to handle the fact-finding needed for processing some claims.

But claimant comments in the interviews confirm that a shortage of adjudicators is not the most serious reason for delays in granting benefits. The most serious contributor to delays is claimants' inability to obtain guidance with their own application and claim-filing, most claimants interviewed maintained. Although messaging or emailing ESD staff has appeared to be an option at times, very few claimants said they received answers to their inquiries by that route.

The online information from eServices, the Claimant Handbook, Virtual Assistant, and the Frequently

Asked Questions pages on the website was generic and usually not helpful, most claimants also said. Only the ESD Claims Center could address complex application problems. However, the understaffed phone lines have frequently led to hours-long hold times, call-back-later messages followed by hangups, and abandoned calls.

Even if assistance were readily available, claimants would still find the rules difficult and often impossible to understand. People with literacy issues, disabilities, or limited English proficiency have little to no opportunity to obtain clear explanations of seemingly small, but often significant, aspects of benefits application.

The most frequently-cited problem with the application is the sense that questions don't reasonably match up with the claimant's situation, yet there are no options allowing them to explain why, and the majority were unable to connect with ESD by phone to resolve the problem.

The fact that the comprehensive *Handbook* to the system is no longer available in print exacerbates the problem. The last edition of the *Handbook*, printed in 2019, has not been updated but several claimants remembered finding answers on the printed pages more readily than through searches on the ESD website.

Today, claimants with disabilities, limited English proficiency, or issues that make online filing difficult may file by phone, but most claimants have essentially these options: accessing the system rules piecemeal online, enduring lengthy hold times and frequent hang-ups to get through to the Claims



Center; paying to print out the PDF of the *Handbook* at a local printer; or printing the *Handbook* at home if they have a working printer.

While assistance with applying is promised to claimants in WAC 192-120-010, nearly all claimants interviewed reported that with rare exceptions their requests for assistance were met with “high call volume,” (i.e., all-circuits-busy/call back later) recordings followed by hangups, long and often futile waits on hold, links to generic FAQs or videos, or no response at all.

Claims Center overload, which appears linked to chronic understaffing of helplines, is an important factor contributing to claimants’ plight.

Eighty percent of claimants interviewed for our project reported they called the Claims Center either because they did not understand vocabulary or terms; they could not see how their circumstances fit with the application questions; they received a notice that they didn’t understand or that conflicted with another notice; they needed to correct a mistake on their eServices application and were prevented from doing so; or they wanted to know why their claim seemed to be stalled.

Only 7% of the interviewees said they called to learn general information about requirements; 9% said they did not call the Claims Center at all. All interviewees who sought assistance by phone said that it was either very, very hard or impossible to obtain.⁹

Forcing claimants to endure lengthy waits on hold is more than inconvenient; it is a multi-faceted system failure that makes applying for benefits much more difficult for claimants. Hours on hold means fewer hours of availability to pick up an employer’s callback and less time to look for a job and be reemployed. It often means a stalled application, and possibly not meeting deadlines because of inability to find an answer on something essential for an appeal or an overpayment waiver application.

Not making explanations of the rules easily available to claimants is worse than an abandonment of agency

responsibility, because by default it relies on simple attrition—people making enough failed attempts to get a question answered that they give up—to cope with the overload.

Relying on people to give up and stop requesting assistance is equivalent to asking claimants with the most barriers, who are the most marginalized, to be kept indefinitely or permanently from assistance while more privileged claimants obtain help because they are able to wait longer in a queue. So it’s yet another way in which the marginalized are hit the hardest by lack of assistance. Unfortunately, it also undercuts the ability of equity measures to have an impact on inequitable access.

In past decades, people with questions about a benefit claim would typically not be working and might even have time to wait hours on a phone line, although it might interfere with their looking for jobs. But recent claimants have encountered an additional problem.

Because of the chronic backlog and delays in resolving their claims, many claimants have already returned to work and are not available during the daytime hours when the Claims Center is taking calls. Their financial stability, however, likely still hinges on receiving benefits so far denied, or fighting overpayments that will force them to return benefits already paid.

Many policies and practices in determining eligibility, administering benefits, and communicating with claimants also hurt the marginalized because they have fewer options. Middle- and upper-income claimants who encounter problems accessing benefits may decide it isn’t worth their time and energy to continue.

Claimants with fewer resources will endure far worse waits to get help even when they have tried everything, nothing works, and they have no other alternative. One claimant viewed her motivation to persist in this way:

⁹ In fairness, since many claimants interviewed had claims that were at least partially pandemic-era, the staff shortages made their experience much worse than normal. However, ESD’s Data Dashboard post-pandemic, in 2022 and 2023, still reflected high numbers of “high call volume” or call-back-later messages; average hold times of 30-37 minutes or more; and thousands of abandoned calls. These metrics contrasted with 5- to 7-minute hold times for employers with questions, who have found account managers much readier to respond.

A lot of people gave up—everyone I knew who attempted to apply for benefits as a gig worker during the pandemic gave up. I didn't because it was life or death. I had no income.

—Mixed-race gig worker in her 40s

There is one other way in which lack of assistance negatively affects claimants with barriers or fewer resources. The “prevailing work conditions” standard in unemployment insurance, written into Washington

law as “suitable work” at RCW 50.20.110(2), allows a claimant to refuse work that is substantially less favorable in terms of wages, hours, or other conditions than those prevailing for similar work in their locality.¹⁰

But when there are lengthy delays to receive benefits, some claimants noted, they can feel added pressure not to wait until suitable work comes along and instead decide to take a lower-paying “bridge job.”

Significant unmeasured factors undercutting access and shrinking percentages of the unemployed receiving benefits

There are severe and long-standing inequities of access to benefits nationally and those are reflected in detailed data collected by the U.S. Department of Labor and Census Bureau on race, gender, disability status, preferred language, and other claimant characteristics.

For example, wide discrepancies are seen nationally in the percentage of applicants by race, gender, and disability who actually become benefit recipients. These 2022 national patterns of different treatment are known¹¹:

- Nationally, men who applied for benefits had a 57.6 % likelihood of receiving benefits in 2022; women applicants had only a 51.2% chance of receiving benefits.¹²

- A White applicant who applied had a 56.6% chance of receiving benefits, while the chance that a Black or African applicant received benefits was significantly lower: 48.7%. The chance that a worker of Hispanic or Latinx ethnicity who applied received benefits was even worse: 45.1%.¹³
- There were larger gaps between native U.S.-born UI applicants, who had a 56.3% chance of receiving benefits, and foreign-born applicants, who had only a 48.2% likelihood.
- Unemployed workers with a disability were less likely to even file an initial application for benefits. Of 342,000 unemployed workers with a disability, only 20% applied for benefits. The application rate for workers with no disability was 26.4%.¹⁴

¹⁰ This standard was designed to ensure that the UI program does not undermine existing labor standards by exerting downward pressure on wages and other conditions of work. In other words, if unemployed workers were forced, through potential denial of benefits, to work in conditions less favorable than what is generally available in their locality, this could lead to a race to the bottom in terms of job quality.

¹¹ U.S. DOL, Table 1. Unemployment insurance (UI) benefits applicants and recipients among unemployed persons who had worked in the past 12 months by selected characteristics, 2022, <https://www.bls.gov/news.release/uisup.t01.htm>.

¹² Using 2022 data, U.S. DOL analyzed application and receipt of benefits for 4,149,000 unemployed U.S. workers who worked in the last 12 months.

¹³ The base number of Asian applicants, less than 75,000, is not included because it did not meet publication criteria for the data.

¹⁴ The number of applicants with a disability who received benefits was below 75,000 and is not included because it did not meet publication criteria for the data.

- Educational attainment was also associated with a greater chance of success in receiving benefits. Applicants with less than a high school diploma had only a 27.3% chance of receiving benefits. Every applicant with a high school degree or higher (associate degree, some college, or bachelor's degree) had at least a 55% chance of receiving benefits.

But data on inequities of access that are specific to Washington state is scarce. DOL does not require, and most states do not collect, data to show the varied rates of application, benefit reciprocity, and other important UI metrics disaggregated by demographics of race, gender, disability status, limited English proficiency, etc. within each individual state. DOL has never required states to specifically report on the patterns of benefit applications, payments, denials, appeal outcomes, and other metrics for people with disabilities, nor for people with limited English.

Data showing claimant experience metrics reflecting ease of UI application, time to payment of benefits, appeal wins and losses, etc., could be measured and broken down by race, ethnicity, gender, and English proficiency and enable some very useful analysis. But for the time being, there continues to be a significant information gap on possible relationships between these metrics and different barriers.

Within Washington itself, gaps in reciprocity depending on race, ethnicity, gender, and other characteristics have been noted, but not established and clarified with published data. If that information has been reported by Washington or other states, it is not readily available.



Even before and after the pandemic years of 2020 and 2021, most Washington claimants our project interviewed were seeking benefits when the odds were stacked against them in two ways: there has typically been more than a 40% chance their claim will be denied; and fewer of the unemployed in our state are getting benefits in general.

Reciprocity rate (the proportion of the unemployed who are receiving benefits) is a benchmark of how many people a state's UI system is helping. Nationally, these rates have sharply declined since UI systems were launched in the mid-1930s.¹⁵ The average is now less than half the rates of the 1950s, and Washington's reciprocity rate has often dropped below the average. In 2022 it was 26.9%. In 2023, possibly reflecting a large overpayment waiver initiative for pandemic-era claims, Washington's reciprocity rate rose to 32%.

From 1976 to 1989, Washington's reciprocity rate averaged 38.5%. In the 1990s, it averaged 49.6%; then from 2000 to 2010 Washington average reciprocity slumped to 40%. After that, until the temporary spike from the 2020-2021 pandemic, Washington's average reciprocity never rose as high as 30%—it averaged 28.1%.

¹⁵ From 1950 to the mid-1960s, the average reciprocity rate was routinely between 44% and 58%. In the late 1960s and during the late 1970s, it began hovering between 37% and 42% until 1980, when it started gradually declining to 30% and below by 2010. Since then, in non-pandemic years, Washington's reciprocity rate has fallen further.

Washington has some unique positive features: our state has one of the highest average wages in the country and provides the largest maximum benefit amount among the 50+ states.¹⁶ That means that the portion of claimants who have income of \$80,000 or more have especially high weekly benefits and—another fact in Washington’s favor— all claimants receive a weekly benefit amount that is 48.4% of their recent job income, up to \$1,019.

What is more striking, however, is that according to DOL’s figures, Washington applicants for benefits of all income levels are much more likely than other states’ claimants to be denied benefits.

Over the 15 years before the pandemic (2005-2019), Washington denied a larger percentage of benefit applications than the average U.S. state. In some of those years, in fact, Washington’s denial rate was markedly higher—by 9 to 12 percentage points—than the U.S. average. Notably, in the four years before the pandemic (2016-2019), our state averaged a denial rate of 41.3%, while the U.S. average was 29.25%.¹⁷

Next to four other high-income states with which it is often compared, Washington’s 41.3% denial rate looks even worse over the same time period. New York’s average denial rate was 19.9%; Massachusetts’ was 20.7%; Oregon’s was 21.4%; while California’s average denial rate was only 17%.¹⁸

Post-pandemic, Washington’s denial rate worsened; it climbed to 48.3% in 2023, again significantly above the national average denial rate and the rates in other high-wage states.¹⁹

Through one recent study, some racial and gender differences in denial rates have been found to be significant in Washington. Looking at some 130,000,000 Washington state wage records between 2005 and 2013, researchers found that denial rates were higher for Black and female claimants than for White and male claimants as well as for Asian males and American Indian males and females. Overall, “White male claimants were denied in 19.6% of their claims while Black male claimants were denied in 25.6% of their claims.”²⁰ In addition, the study showed, females overall were 5.6 percentage points more likely to have their claims denied than males. The increased probability of denial was even larger—11.0 percentage points—between male and female American Indian or Alaska Native claimants.²¹

¹⁶ Washington Employment Security Department, <https://esd.wa.gov/newsroom/2022-average-annual-wage>.

¹⁷ U.S. DOL Unemployment Insurance Chartbook, <https://oui.doleta.gov/unemploy/chartbook.asp/A13.asp>.

¹⁸ The Century Foundation, Unemployment Insurance Graphic Explorer, <https://tcf.org/content/data/unemployment-insurance-and-racial-equity-explorer/>.

¹⁹ In 2023, there were 121,371 claims filed in Washington and 58,621 were denied. The Century Foundation, Unemployment Insurance Data Dashboard, <https://tcf.org/content/data/unemployment-insurance-data-dashboard/>.

²⁰ Marta Lachowska and Stephen A. Woodbury, “Gender, Race, and Denied Claims for Unemployment Insurance: The Role of the Employer” (Kalamazoo, MI: Upjohn Institute for Employment Research, 2022), <https://www.dol.gov/sites/dolgov/files/OASP/evaluation/pdf/DeniedUIClaims-20230215-508.pdf>.

²¹ Lachowska and Woodbury, p. 25. To obtain a database of manageable size, the authors left claimants with multiple employers out of this study. Since those might often be part-time employees with more than one employer, it should be noted that this exclusion, while understandable, might have left a large number of women, people with disabilities, and people of color—all groups that are more likely to have part-time jobs—out of the analysis. So their absence from the study could have altered the study’s comparisons of the number of denials attached to White male claimants versus denials to women, claimants with disabilities, and claimants who are Black, Asian, LatinX, Pacific Islander, or Native American.

Employers' outsized and detrimental impact upon claimant benefits



The UI system is largely funded for administrative purposes by the U.S. Department of Labor (DOL) and, for purposes of benefit payments, by federal and state taxes paid by employers. Extensive state laws under Title 50 RCW and Title 192 WAC govern administration of benefits in Washington state. Establishing claimant eligibility usually requires employer input on the claimant's wage and hour history and job separation.

Yet research and claimants' comments both indicate that employers have an outsized and detrimental impact upon claimants' access to unemployment benefits—an impact that Washington's UI system appears to accommodate.

Some research indicates that an important factor in the decline in reciprocity rate and increase in denials may be Washington's adoption of an experience-rated tax system in 1985. The aim of that conversion was to set higher taxes for employers who had more layoffs and other job separations than to employers who had fewer such job separations. But analysis of the following 15 years of benefits claims has shown that the experience rating provides employers an incentive to be involved in the administration of benefit claims,

and has led to reduced UI claims and increased claim denials in Washington.²²

Perhaps reflecting the incentive to be involved in claims handling is the growth in recent years of a small “third-party representative” industry, led by companies like Equifax, Experian, and Corporate Cost Control, which help employers' fight claimants' benefits through appeals—very often successfully. The more claimants who are denied benefits, the less tax burden for employers. This context should be considered whenever assessing employers' motivations in providing input to decisions about claimants' benefits.

Many of our interviewees gave examples of employers using a range of practices that, intentionally or not, can interfere with claimants' ability to access benefits. Some mentioned specifically include:

- Failing to tell employees who lose their job that unemployment benefits are available and how to apply for them, as required by RCW 50.120.040. (Most claimants interviewed said they knew either little or nothing about the availability of unemployment benefits when they lost their job.)
- Canceling online access to employee wage records—often needed for an application for benefits—once the employee has separated from the job.
- Asking the employee not to file for benefits because it will hurt the employer by raising their taxes.
- Misrepresenting a job separation. “The system just takes the employer's word, and anyone can make up anything,” one claimant said, reflecting a widely-expressed complaint.

²² See Patricia Anderson and Bruce D. Meyer, “The Effects of Unemployment Insurance Payroll Taxes on Wages, Employment, Claims and Denials,” *Journal of Public Economics* 78, no. 1-2 (October 2000), 81-106, <https://www.sciencedirect.com/science/article/abs/pii/S0047272799001127>.

- Accusing an employee forced to quit by a family emergency or dangerous workplace conditions of quitting without good cause.
- Arranging that any part-time employees work at least one week a year for more than 17 hours, which under RCW 50.20.119 disqualifies them from restricting their availability to work to less than full-time hours, thus ruling out benefit eligibility for many unemployed part-time workers.
- Falsely representing that an employee who was fired for underperformance committed misconduct on the job.
- Advising an employee to quit “because it isn’t working out,” without disclosing that a quit considered not for good cause will likely make it harder for the employee to receive UI benefits than if they were discharged.
- Making it a routine practice to file appeals of employee claims for benefits, whether or not the employer had facts to relate or evidence to show the worker was disqualified.
- Telling employees that “we don’t pay” for benefits under certain situations, wrongly implying that the employer, not state law, governs who receives unemployment benefits and who writes the checks.

The larger the employing unit from which a claimant separated, the more likely that a claimant will be denied benefits, except where mass layoffs occurred, the study of Washington state denials also found.²³

When seeking answers to questions about taxes or claimant benefits, employers also have access to assistance that can only be called preferential, compared to that experienced by claimants. Individually assigned account managers at ESD’s Account Management system may be reached by employer representatives with current hold times of 6



to 8 minutes. That pattern contrasts strikingly with the recent average 32 to 39 minutes on hold for claimants and countless hours on hold during the pandemic.²⁴

When there is an appeal and employer and claimant are adverse parties, employers can much more easily get answers from ESD to questions they may have. There is a strong feeling that they are also treated with greater lenience when missing filing deadlines. And employers’ most significant advantage over claimants is that finality of a decision to pay benefits is not assured. As RCW 50.20.160 is frequently interpreted, employers have latitude to appeal an employee’s benefits, on grounds that they have new information, indefinitely—even for years—after the benefits have already been paid.

One claimant reported that after receiving a notice that their benefits denial was reversed, within one day the denial was reinstated and their overpayment restored because the employer had filed an appeal and ESD quickly made a redetermination in response. Unfortunately, the employer’s appeal in such a case does not proceed to hearing for the claimant to have a chance to respond. ESD has confirmed that such quick redeterminations occur with regularity.²⁵

²³ Lachowska and Woodbury, p. 25. They add that they consider that correlation puzzling in light of the fact that large employers are less likely to dispute claims.

²⁴ Q4 2022 and Q1 2023 ESD Quarterly Data Dashboard figures, <https://esd.wa.gov/unemployment/dashboard>.

²⁵ One implication of this somewhat “back-door” appeal resolution is that a reversal of benefits through a redetermination prompted by an employer appeal is not reflected in statistics on lower-level appeal win rates of employers—so those win rates could be misleadingly lowered.

Entrenched barriers to effective communications

Washington has UI accessibility infrastructure that many other states lack. We were one of the earliest to make eServices accessible by mobile phone. We have a law requiring that notices be written in plain language and that determinations include facts, reasoning, and conclusions justifying the decision. State law requires that ESD provide assistance in applying for benefits when any claimant requests it. WAC 192-120-010.

ESD standard notices feature pages with brief instructions (“Babel” notices) in multiple languages and referrals to assistance via interpreters. Our online application is available in Spanish as well as English. Since 2023, Washington has offered claimants with one-party appeals of benefits denial—usually no employer involved—some administrative hearings that are fully conducted in Spanish.

We have dedicated phone lines providing language assistance service for limited-English-proficiency claimants. Dedicated phone lines, auxiliary aids, and other services are available upon request to individuals with disabilities. Plain language is required for notices and determinations sent to claimants, and ESD has been engaged in rewriting notice letters and adding specific facts, reasoning, and conclusions when sending determination letters. If claimants figure out how to access them, dedicated phone lines are offered for people with difficulties using computers. Implementation of these laws, many of them written

into ESSB 5193, passed in 2021, has been uneven, however.

There may also be less attention paid to an essential feature of effective communication: plain messaging. Unfortunately, with automated notices, there is a “signal-to-noise” problem that can occur, which many claimants commented on in the interviews.

It is confusing to receive one automated notice with vague references to issues—e.g., “You have been denied benefits based on information we have at this time.” But worse, multiple automated notices may be posted on a claimant’s eServices account or arrive in the mail apparently generated independently. One claimant said, “It was very much a patchwork of little things. In fact, I got not one overpayment notice, but several—with differing figures on each one.”

In such a case the core message can be indecipherable, leaving claimants uncertain about what the actual status of their benefits is, or what deadlines they might be about to miss to address a question.

A lesser-known equity gap exists for people who may need to pay for phone access time by the minute. Asked “Is there anything that makes communicating with the unemployment department especially difficult for you?” an IT worker in his 40s who was interviewed pointed out: “Just cost. You need a cell phone or a computer with internet.”

A structural hostility to paying benefits

Employers’ interests seem to be favored by the system not only in lengths of hold times but also in Washington’s very high denial rates and low benefit reciprocity rates, and recent reform programs have made those rates even worse.

Our state’s efforts to modernize the UI system in 2017 were expected to benefit claimants. In fact, a 2019

study showed, modernization did increase the percentage of online claims between 2016 (58.2%) and 2018 (64.9%) and nonmonetary determination timeliness improved from 50.7% to 71.3%.

But modernization brought worse performance on most other major UI indicators over the same period. Denials as a percentage of claims went up sharply

from 24% in 2016 to 46% in 2018; first payment timeliness fell from 85.5% to 83.8%; quality of benefit decisions on non-monetary issues fell from 78.8% to 65.6%; overpayments rose from 13.6% to 19.3%²⁶; Washington's reciprocity rate, falling slightly from 26.39% to 26.5%, remained below the U.S. average of 27%.²⁷

As to the increases in the denial rate, the national trend has been similar in the 20+ states that modernized since 2002, according to Centering Workers. "Among modernized states, the number of unemployment insurance denials increased by 16.7 percent from 2002 to 2018. Among non-modernized states, the trend is nearly the opposite—denials decreased by 16.5% from 2002 to 2018."²⁸

Many claimants we interviewed confirmed feeling it was getting harder to obtain benefits when

unemployed, not easier. Some reported that they felt they were viewed as suspects rather than as applicants for support the state is mandated to provide to eligible workers who lose their job.

There were so many questions, it felt like they were constantly poking around and they thought we were committing fraud. It felt like we were doing something bad, rather than receiving a public benefit, so I stopped filing claims.

—Asian gambling industry worker in her 50s

Claimants find language used in notices to benefit applicants or appellants is more likely to be stern, and even scolding, than the language used in notices to employers, which are inclined to be polite and even somewhat apologetic about the state's obligation to



²⁶ Julia Simon-Michel et al., Centering Workers: How to Modernize Unemployment Insurance Technology, The Century Foundation, National Employment Law Project, & Philadelphia Legal Project (2020), <https://tcf.org/content/report/centering-workers-how-to-modernize-unemployment-insurance-technology/>.

²⁷ U.S. Dept. of Labor Chartbook, <https://oui.doleta.gov/unemploy/Chartbook/a13.asp>.

²⁸ Simon-Michel et al., p. 37. As the authors note, most national and state agency officials they interviewed expressed little surprise that modernization was associated with an increasing share of denial rates. "...[T]hese leaders saw it as a positive sign that modernized systems were more accurately determining benefits eligibility" by identifying problems with benefit claims sooner through more effective fact-finding. Non-separation denials are driving the increase in denial rates, the authors add—typically through modernized systems' ability to ask claimants more detailed questions about their availability to work and to more regularly request names connected with job search activities.

enforce penalties against employers—say, for late filing of employer taxes.

Unfortunately, the different attitude within ESD toward employers, including the accommodating treatment by account managers and constant mention of rooting out fraud by claimants, seems to reflect and sustain a belief that unemployed workers' claims are likely to be invalid, that they are seeking benefits to avoid working, and that employers' desire to hasten workers back to employers' payrolls whether or not the work is suitable should take precedence.²⁹

Many claimants we interviewed wanted to give ESD the benefit of the doubt early in the pandemic, since all knew that the Claims Center at ESD was besieged and overwhelmed by desperate unemployed workers. If they encountered difficulties with successfully

claiming benefits, as most did, these claimants largely expressed general anger at the way they were treated, with a degree of resignation.

But they do detect favoritism by the UI system toward employers and a certain hostility toward workers. Through neglect or outright opposition to spending the necessary resources to adequately staff the Claims Center, some interviewees concluded, ESD either did not care about or wished to actively block their applications for benefits. One claimant described ESD's modus operandi this way:

If I could change anything about Washington's unemployment system, it would be to end its M.O. of delay, dismiss, and deny.

—Service worker in his 30s

Embedded assumptions disqualifying claimants who have barriers from receiving benefits

Access to benefits can be all but problem-free for claimants with resources and familiarity with computers and mobile technology. Denials, however, often seem based upon triggers that are tangential to eligibility for benefits—e.g., missing a deadline to respond to a request for more information—or conditions that may be caused by very common barriers such as lack of access to a printer or scanner or reliable internet access, claimants note. The “reasonably prudent person” standard used in adjudicating claims and weighing appeals increases inequality of access,³⁰ some claimants said.

They noted that there is a disconnect between the standards language utilized in rules and policies (e.g.,

the judge evaluating a good cause for late appeal based on how a “reasonably prudent person” would proceed) and the circumstances of real persons. Many administrative law judges' rulings may cite the standard of a reasonably prudent person without regard for extreme circumstances creating financial hardship or other very common barriers that many claimants may have.

One claimant, a restaurant manager, posed this hypothetical to illustrate the problem:

What's a reasonably prudent person who is not literate, and who has no computer?

²⁹ The last remaining mention of the “master-servant” relationship in Title 50 RCW, in fact, was only removed in April 2023 in a bill requested by ESD. When the legislature almost unanimously voted for HB 1107 to make that change, it was a milestone. But the employer/employee relationship in American law, with its origins in English common law, remains far from a relationship of equals.

³⁰ WAC 192-100-010 Reasonably prudent person defined.

A reasonably prudent person is an individual who uses good judgment or common sense in handling practical matters. The actions of a person exercising common sense in a similar situation are the guide in determining whether an individual's actions were reasonable.

Confusion over WorkSource's role in assisting claimants

Several years ago, claimants told us, there were formerly ESD branch offices throughout the state to assist claimants with their unemployment benefit applications—offices that were transformed into WorkSource offices, and were geared primarily to job search assistance. They alleged that at least some WorkSource offices were banned entirely from helping claimants with benefit applications. Confusion about WorkSource's role often reigns today; some claimants interviewed said they were given completely opposite policies on assisting claimants with UI benefits, depending on whom they spoke with—even within the same WorkSource office.

Claimants sometimes expressed praise for WorkSource staff who tried to help them either with their claims or their job search. (In fact, claimants frequently mentioned the unfortunate closure of WorkSource offices and most libraries during the pandemic, which made applying for benefits more difficult for many.) But while some computer access at WorkSource is available, access is patchy, some claimants contended. Others noted that WorkSource offices are long distances from each other and may not be easily reached by claimants in rural areas.

To their surprise, several interviewees said, they received few to no job leads in their field from WorkSource staff. They sometimes added that there was often no response or follow-up by employers or WorkSource when they filed a job application, and that the job search advice given was generic and of limited use—more like what they received in high school career counseling.

Job search reviews—though when ordered are still mandatory—are through a 2019 rule now set by appointment. And that is a helpful improvement over prior days when claimants could be summarily assigned a non-negotiable time by ESD. But a zero-forgiveness policy for failing to pick up the phone at the assigned time is not understood by many claimants. If a call is missed by accident—say, an existing call about a job lead goes longer than the claimant expected—returning the call 20 minutes later is not acceptable as it is considered a violation of job search requirements. Such a “failure to respond,” however, is often due to oversight or something out of the claimant's control, so having it put the claimant's benefits at risk may be overly harsh.

Lack of claimant access to financial details of their UI payments, deductions, overpayments, repayments, waiver, and refunds

Claimants say they cannot reliably access a straightforward, understandable accounting of payments received from ESD and deductions or charges against their account.

Dozens of claimants interviewed for this project complained about the lack of simple accounting by the state of the record of payments they made, deductions, offsets, interest charged, overpayments charged, and waivers or partial waivers granted. Instead, they often received disconnected notices that were frequently incomplete and included a vague advisory that other notices would cover additional issues relating to the claim—further clouding claimants' understanding of the actual state of affairs.

This glaring missing piece—especially if the state has charged a claimant with an overpayment but is failing to provide full financial details—is harmful to claimants who can find no way to determine how much they supposedly owed; how much of an overpayment was waived; confirmation that payments they made were received or refunded; how much was garnished from their wages or bank account; or whether their income tax refund was ever coming to them or was seized by the state. This is basic, essential information that claimants must have to keep track of their income and payment record and the taxes they have paid or are owed back from the Internal Revenue Service.

Recommendations To Promote Equity and Restore Claimant Confidence in the State UI System

1) Shed light upon the sources of inequity by reporting expanded state data on claimant characteristics and access to benefits in an Equity Data Dashboard

The effects of differences in gender, race, ethnicity, disability status, and other claimant variables upon their access to benefits are little understood at the state level. To better understand how to not deny benefits to eligible workers in Washington, ESD should launch a data collection and reporting initiative with an Equity Data Dashboard.

The Dashboard would show, month by month or quarter by quarter, the breakdown of race, gender, language, disability status, limited English proficiency, military status, education, geography of residence (urban/suburban/rural), method of applying for benefits (computer/mobile phone/app/phone call/in-person) and other claimant characteristics in counts of denials, losses at appeal, time to first payment, defaults at hearings, imposition of overpayment, granting of waivers, and other metrics.

The comprehensive Equitable Access Toolkit of the Department of Labor, released in April 2023, provides a roadmap for such an initiative in Washington state.³¹

The National Employment Law Project's "Proposed Performance Standards for Equitable Access to Unemployment Insurance," published in July 2023, provides

detailed core measures and reporting measures for equitable access.³²

Within the Toolkit, DOL lists metrics that it recommends UI agencies collect, strongly advising that they consider them when complying with applicable federal equal opportunity law and other federal mandates and following guidance DOL has provided in its Unemployment Insurance Policy Letters (UIPLs). Components of the Toolkit include community outreach, plain language standards, and online access.



³¹ "Equitable Access Toolkit" (Washington DC: U.S. Department of Labor ETA, 2023), p. 8, <https://www.dol.gov/agencies/eta/ui-modernization/promising-practices/equity-toolkit>.

³² Amy Traub, "Proposed Performance Standards for Equitable Access to UI," 2023, <https://www.nelp.org/wp-content/uploads/Proposed-Performance-Standards-for-Equitable-Access-to-Unemployment-Insurance-.pdf>.

Leading the Toolkit list of 10 topics is “Equitable Access Data & Metrics.” The Toolkit recommends that state UI agencies collect demographic and operational metrics and says that these two types of metrics can be usefully combined. “The agency can disaggregate or “slice” the operational metrics by the demographic variables to investigate any disparities in equity or access that may exist within specific processes or activities across the claimant journey.” Some are already obtained from claimants, are automatically captured, or can be pulled from state agencies, but many would be new additions.

Researchers, agency leadership, federal agencies, and the public would gain valuable insight about equitable access once these data are collected. For example, questions like these could be addressed:

- Are claimants of one gender likely to have a longer time to first payment than claimants of other genders?
- What correlation might there be between claimants’ having good access to broadband and metrics like ease of application or denial of benefits?
- How likely is it that claimants with disabilities find an overpayment imposed upon them and for what reasons?
- What are the rates of non-application, claim denial, and overpayment waiver for claimants of different races or ethnicities?

It is difficult to overstate the potential impact of having hard numbers in calculating policy and setting priorities. For example, nationally, according to researchers with the National Bureau of Economic Research, “Among individuals eligible for UI, raising the Black take-up rate to the White level would lead to a 14 percentage point increase in the individuals that receive UI and a \$1,299 increase in mean UI benefits.”³³

This improved data on initial claims, claims-processing times, claim denials, outcomes of appeals, overpayments, waivers, and other metrics will help ESD better understand and address the incidence and sources of inequity. Reporting and tracking expanded demographic data monthly or quarterly in an Equity Data Dashboard that publicly reveals trends will help incentivize the agency to take action where inequities exist.

We call for this tracking and transparency of equity indicators, followed by specific measures to remedy inequities found. Often, when differences are highlighted through the U.S. Department of Labor data and U.S. Census Bureau’s Current Population Survey, startling gaps emerge nationally and build the case for improved performance standards at the federal level. Individual state data will have the same impact when collected and disseminated in Washington state.

2) Commit to providing two-way communication and modeling claimant assistance after the help provided to employers through ESD’S Employer Account Management System (EAMS)

Making agency representatives reachable by phone and making in-person or phone assistance with applications available to claimants are crucial to claimant understanding of processes and rules and to

assuring fair and equitable administration of benefits. One of the most disheartening messages for anyone to receive when an important warning or announcement of a change in policy or price arrives

³³ Elira Kuka and Bryan A. Stuart, “Racial Inequality in Unemployment Insurance Receipt and Take-Up,” fact sheet (Cambridge, MA: National Bureau of Economic Research, 2021), p. 16. https://www.nber.org/system/files/working_papers/w29595/w29595.pdf.

in your Inbox is: "DO-NOT-REPLY. We will not receive it." Yet that is the de facto message conveyed when phone access is obstructed, claimant emails and eServices messages to the agency go unanswered, and often mystifying or contradictory automated notices are sent out with no realistic option for claimants to obtain clarification.

Communication is the best thing you can do. Just making people wait and not letting them speak with somebody or hear from anyone—there's a lot of anxiety with that. I would make sure that everybody is at least spoken to and given status updates on their claims.

—Customer service worker in her 30s

For assistance with applications, claims processing, and appeal issues, we call for a solution similar to what employers are provided when contacting the ESD Account Management Center. Seventy-five percent of claimants interviewed advocated individually assigned caseworkers or account managers available by phone or in-person.

I would approach it as social work, which is how I approach my teaching job. And know that every single person who has to file benefits is under an extreme amount of duress and stress and anxiety, and make sure that every single person who is answering those phones has the skills to be compassionate. And to say I will stick with you and we will figure this out. And yes, I will call you.

—Teacher in her 60s

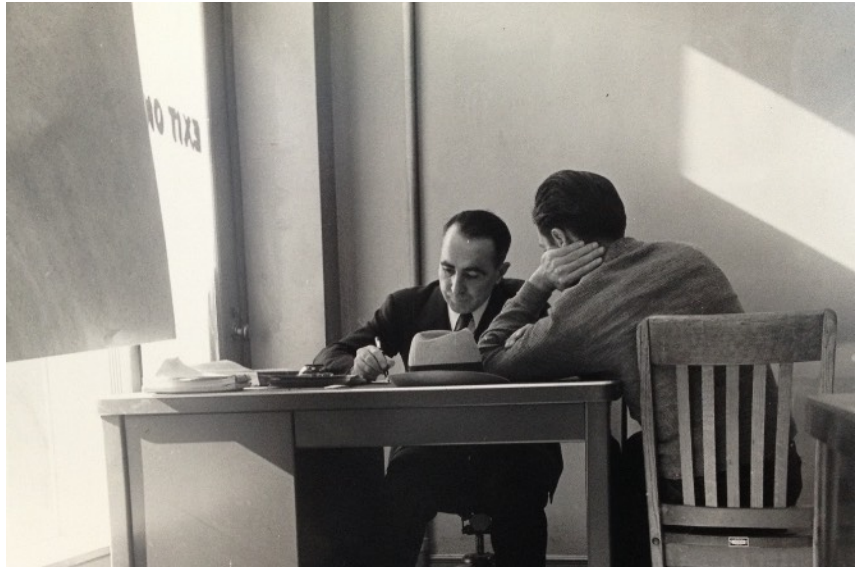
Personally, I would just listen to people's stories and go on a case-by-case basis, rather than have rigid requirements to fill out this thing online and you're either in or you're out.

I think if there weren't such a bureaucratic form that you have to fill out that is not taking the human being on the other end of this into account, that would be a good start.

—Carpenter in his 20s

I would definitely fix the communication piece, especially in this day and age. All it takes is someone picking up a phone, or someone sending a personal email and saying you're on my caseload and go ahead and communicate directly with me. We're going to get you through this. It's going to take a while, but I'm your contact like a social worker. I will be regularly checking in with you. And you can check in with me.

—Therapy assistant in her 50s



One interviewee who had claimed benefits in Oregon several years ago reported that Oregon then offered a kinder, gentler approach to claimants that Washington should consider as a model.

In Oregon, I applied twice for unemployment and each time a team of three people reached out to me. You had a supervisor, you had the person working the case, and then that person had an assistant. They were doing their best to get residents of that state the help they needed. It wasn't about "You've got to prove who you are and why you're going to get this." It was like "We're going to help you and we're going to get this done. And, if, along the way, something comes up, we might have to reevaluate things for you."

I was absolutely astonished at just how night and day the two departments were when doing the exact same thing with the same federal guidelines for unemployment insurance. I think Oregon was really, really on the right path. When people are experiencing these hardships, they need empathy.

And I would make unemployment insurance in Washington solely about helping people who have worked faithfully.

—Service worker in his 40s

This model is no longer in place in Oregon. But a caseworker or account manager approach, with

partial continuity so that a claimant would not need to explain their situation to a new agent each conversation, could reduce the number of wasted calls, lessen waste of claimants' time, reduce claimant frustration levels, and increase ease of application for benefits. Ending any department bans on three-way calling would also help facilitate communication by applicants with barriers.

3) Reduce employers' obstruction of benefit payments by collecting and reporting data on employer accountability metrics to add to the Equity Data Dashboard, and by reaffirming and enforcing state disclosure law on availability of benefits

Current law, giving considerable latitude to employers, convinces some that they themselves decide whether claimants receive benefits, allowing them to encourage misconceptions about this on the part of workers. It also allows employers to ignore

state requests or routinely overburden the system by contesting workers' eligibility for UI benefits. This is contrary to law and harmful to claimants, and ESD should consider how it can help claimants avoid misconceptions about employers' rights and claimants' rights



Tracking and transparency of additional data relating to employer accountability would provide disincentives to practices that interfere with providing benefits to claimants. As outlined by the National Employment Law Project's "Proposed Performance Standards for Increasing Equity in UI," accountability measures could include:

- the employer's performance in reporting timely information to the state;
- the number of UI eligibility claims contested by the employer;
- the number of employer-contested UI claims approved on appeal;
- UI claim decisions appealed by employers; and
- the number of each employer's appeals that are successful.

Publicly naming employers that contest more than 50 percent of employee claims only to have most of them overturned and employers that have more than 50 percent of appeals denied would provide a

disincentive to overburden the appeals system, NELP contends.³⁴

An additional use of employer performance measures would be to check those measures against the employer's own workforce demographics. Do employers with high percentages of non-White employees tend to treat claims filed by their employees differently from employers with high percentages of non-White employees? With tracking and transparency of employer performance

measures, that kind of equity question could be answered.

Given that most claimants interviewed said they knew either little or nothing about the availability of unemployment benefits when they lost their job, employers should be reminded of their obligation under RCW 50.20.140 to advise workers about UI benefits when there is a job separation, and compliance with that requirement should be tracked. ESD should also monitor and set standards to enforce this requirement.

4) Investigate and reduce Washington's excessively high denial rate and set a target of a 50% reciprocity rate for UI benefits for all demographic groups

As discussed above, Washington's denial rate, more than 48% in 2023, tends to be significantly higher than denial rates of other higher-income states such as Massachusetts, New York, Oregon, and California and the reasons for this discrepancy should be investigated so that the denial rate can be ramped down.

Washington's reciprocity rate reflects a national decline in the proportion of unemployed receiving benefits since the 1950s; but our state is often even below the national average on this measure. As the National Employment Law Project's "Proposed Performance Standards for Equitable Access to Unemployment Insurance" brief emphasizes, "States must pay special attention to reciprocity among demographic groups that are currently and historically underserved by UI."³⁵

If equitable access is the goal, an increased reciprocity rate is essential and a 50% reciprocity rate

is an attainable goal, NELP contends. Reciprocity rates above 50% were common in the 1950s and today, some states such as New Jersey and Minnesota already achieve and exceed a 50% reciprocity rate.



³⁴ Amy Traub, "Proposed Performance Standards for Equitable Access to Unemployment Insurance," (New York, NY: National Employment Law Project, 1983), <https://www.nelp.org/wp-content/uploads/Proposed-Performance-Standards-for-Equitable-Access-to-Unemployment-Insurance-.pdf>.

³⁵ Amy Traub, "Proposed Performance Standards for Equitable Access to UI," <https://www.nelp.org/wp-content/uploads/Proposed-Performance-Standards-for-Equitable-Access-to-Unemployment-Insurance-.pdf>.

5) Use equitable accessibility of benefits as the touchstone for evaluating any new agency policies or programs, contracts, initiatives, proposed rules, and requested legislation

In any Washington state legislation relating to access to unemployment benefits, there frequently appears a clause mandating an evaluation by the legislature of the new law's impact on the trust fund (which includes collected employer UI tax receipts). But conspicuously excluded from the evaluation of the proposed legislation is the impact the law might have upon reciprocity rates, ease of application, proper payments, overpayments, or other metrics central to claimants' access to benefits and equitable delivery of benefits. This omission violates federal law.³⁶

Evaluating new programs by narrowly focusing upon their cost works against claimants' access to benefits and against equitable access. Emphasis should be shifted to make a priority of reporting the programs' impact on reciprocity rates, ease of application for benefits, and other measures showing how the program contributes to Title 50's aim of "reducing the burden of unemployment and the suffering it causes to a minimum."

6) Additional recommendations

Upgrade standards for accommodating disabilities as well as limited English proficiency, literacy, understanding of technology, and access to technology.

The ESD website lists a toll-free line for limited English proficiency claimants to access an interpreter, and a special email and toll-free line to request an accommodation, noting that these accommodations are available exclusively to individuals with a disability, or "in unusual circumstances that make filing by telephone or internet difficult." But the procedures to access the accommodations need more clarification, repetition, and emphasis.

NELP's "Proposed Performance Standards" publication lists useful standards on access for people with disabilities that would apply equally well to claimants with limited literacy, limited computer literacy, or limited access to technology. The standards include:

- Providing access to web-based services and information that is comparable to the access available to other claimants;
- Offering alternative options such as via phone or in person for accessing benefits, services, and information;
- Permission for all workers needing accommodation to have a designated third party support person present at all interactions;

³⁶ Equitable access is a fundamental requirement of the federal UI program conducted by the U.S. Department of Labor Employment and Training Administration. Unemployment Insurance Program Letter (UIPL) No. 02-16, issued October 1, 2015, states the requirements under federal law to ensure access to the UI program and provides guidance to assist states with meeting these requirements. Unemployment Insurance Policy Letter (UIPL) No. 02-16, Change 1, issued May 11, 2020, highlights additional state responsibilities regarding access to UI benefits. Equitable access is also included as one of the three goals of Section 9032 of the American Rescue Plan Act (ARPA) and as a national priority in each state's State Quality Service Plan (see UIPL No. 09-23).

- Providing information about how claimants can file a complaint about delayed or denied services resulting from inaccessibility or failure to provide equally effective communication.

Complete conversion to plain language, develop more comprehensive language assistance services, and evaluate both through user testing.

Plain language initiatives and improved language assistance services are an ongoing priority at ESD with the agency's implementation of ESHB 5193 since 2021. The DOL Equity Toolkit provides elaborate guidance for accomplishing both of these priorities, by switching from often opaque bureaucratese to user-friendly language; using graphic design to draw claimant attention to the essential messages of a notice; and improving translation methods and access.

Standards on clear written communication recommended by NELP in its "Proposed Performance Standards for Equitable Access to Unemployment Insurance" include:

- Providing clear instructions and time frames for any actions claimants must take to proceed with their claim as well as description of the consequences of action or inaction.
- Where there is any allegation of fraud or false statements on the part of the claimant, providing the statement(s), representation(s) or fact(s) alleged to be false or withheld.

In addition to these improvements, when multiple notices are sent to any individual claimant, ESD should evaluate whether their delivery to claimants meets standards of "plain messaging" by asking how well the claimant holistically understands their claim, appeal, overpayment, or waiver status as a result.

Of note in NELP's proposed performance standards for access for claimants with Limited English Proficiency (LEP) are requirements to provide:



- Identification of a claimant's language assistance needs at the earliest point of contact;
- Spoken interpretation or written translation of both hard copy and electronic materials in the appropriate language for all vital information such as applications for benefits and identity verification requirements;
- Language assistance services in all languages spoken by 0.5 percent of a state's population or more than 10,000 people in the state, whichever is fewer;
- Assurance that LEP claimants can complete forms in their preferred language;
- Outreach to LEP communities to improve service delivery in needed languages; and
- Assurance that if language barriers cause a delay, the agency considers this good cause for late submissions or filing.

Adopt a policy of candor about the availability of assistance and website features that claimants might be relying on.

The agency should be honest with claimants about how and when their request for assistance will be met. As many claimants said, if they had a definite

place in a queue and could trust that their question would be answered at some point, it would greatly relieve stress on them. It is not reasonable, if the Claims Center is besieged and can in truth help only a fraction of people who have questions, to give advice on strategies or a hack to jump the queue.

Some claimants interviewed even encountered an implication that people having trouble are simply not relentless enough—when, in fact, the main issue is that the UI system is failing to provide assistance it is obliged to provide. Moreover, advising strategies like “Be persistent,” “Start at 6 am,” though well-meant, can create a vicious cycle that compounds the problem of a shortage of staff.

Similarly, prompt posting of warnings when features such as messaging are non-functional should be a priority to spare claimants’ false hopes about a response from ESD on a pressing issue relating to their claims.

Consistently apply and communicate significant changes in agency policy to claimants.

ESD’s 2022 decision to make expanded criteria for waiver available for pandemic-era overpayments was an unprecedented move to crack open the “equity and good conscience” standard, traditionally bound to financial hardship only, to include other circumstances or claimant barriers. This successfully convinced tens of thousands of claimants with pandemic-era overpayments to apply for an individual waiver. However, more direct and informative communication to those potentially eligible for waiver about the expanded criteria for pandemic-era overpayments might have resulted in a higher response in the form of waiver applications.

Lag time in posting of important updates such as the effects of rule changes and effective dates of new policies and laws can tend to dissuade claimants from checking out the Updates link on the website front page. Claimants could be more aware of important updates if the ESD website regularly posted entries and made frequent updates that could be easily referred to.

Clearly convey the meaning of claimant fault on overpayments, how it is determined, and how it can be appealed, and ensure that overpayments due to agency fault are waivable.

Better communication of how claimant “fault” is determined and the pivotal role of alleged claimant fault when claims are denied would reduce claimants’ frequently-expressed mystification about how an overpayment happened, why they are considered at fault for it, and what are their options for pursuing a waiver if their appeal fails.

Provide uniform and comprehensive training and consistent access to claimant files for all ESD employees.

Claimants interviewed for this project spoke compellingly about the need for more extensive and more uniform training of ESD staff at the Claims Center.

I felt like only 5% of those people were qualified to help me. Every time anything moved with my process was because somebody picked up who knew the job and knew what they were doing and could walk me through it.

—Black transgender service industry worker

Not only the people making decisions, but the people who were answering calls often didn't fully understand the laws. It seemed like a lot of times it was kind of off the top of their head. And that seems really, really fundamental to me, to make sure that people who are responsible for communicating and making decisions have the right answers.

—IT designer in his 50s

Update Title 50 RCW by proposing fixes for obsolete language through agency-requested legislation and submitting them to the legislature.

In 2023, ESD requested legislation to eliminate the last reference to a “master-servant” relationship that remained in state unemployment law (Title 50 RCW), and that bill (HB 1107) passed the legislature almost unanimously.

Other amendments to Title 50 could make provisions more responsive to current workplace realities that are variations unrecognized by the system. One example is current obsolete language in RCW 50.20.05(4) referring to claimants who have both a full-time and a part-time job. While this can occur, having multiple part-time jobs is much more typical in certain fields—or even two full-time jobs, and wording that seems to ignore this fact can often be the source of frequent calls to ESD for interpretation.

Solicit actual claimant experiences that are resulting from agency policies and claimants’ suggestions for addressing them.

Claimants advised working on a better match between what claimants need and how needs are addressed through soliciting and responding to claimant feedback and suggestions. This is particularly important for understanding both what facilitates access to benefits for people with barriers and factors that interfere with access.

Make a printed handbook conveniently available.

Although most interviewees were relatively at ease with computers, many still urge that ESD update and reissue its printed handbook for applicants to understand the system and ensure that paper copies are available at WorkSource offices located throughout the state. There should not be a presumption, which many claimants said they encountered, that anyone applying for benefits has a fully functional printer at home available to print a PDF, or can easily afford to pay for printing.

Increase user testing to develop a more responsive website design.

ESD should prioritize a more responsive web design in any future IT systems and to the extent possible with its existing IT system, several claimants said. They expressed hope that the agency would engage in more user testing, or invest in an IT product that has been more extensively user-tested, to ensure that the website is intuitive for users who need to access important information about their claims or take time-sensitive actions. There was also support for soliciting user suggestions to improve the system.

Reduce claimant confusion over availability questions.

ESD has acted to clarify the question of availability by adding help text to the weekly claim. This addition could also be useful in the eServices application for benefits, the first place a claimant will encounter this question. Claimants would welcome the addition of the help text everywhere the question appears.



On the eServices job search activity page, provide clear information about requirements in order to ameliorate confusion.

The job search advisories and help text should be edited so that claimants do not assume that contacting employers or completing a training at a WorkSource location are the only options, when many authorized job search activities can also be completed online.

On the eServices application, include clear directions about calculating income and hours per week.

The eServices questions can quickly confuse a claimant or mislead them into wrong answers they are

not allowed to correct. The eServices platform doesn't allow people to look at the entire application before starting to answer questions, so they can't tell if they are misunderstanding something that perhaps the application will clarify. Clear directions would prevent much confusion and misdirection of claimants' efforts.

Address hybrid wage/freelance income claimants' issues with application.

"It would be helpful if there were something that says, 'Are you a hybrid worker? Do you need to calculate such and such for small amounts of freelance work that you're doing? Here, use this little grid,'" one claimant suggested.

Conclusion

The challenge for anyone proposing an agenda for system reform is addressing the question of competing priorities that state UI leadership and staff must juggle.

Should the focus shift to equity at the cost of meeting other important goals? Which should be prioritized—getting benefits paid quickly, or waivers processed promptly, or access problems fixed, or questions fully answered, or a contract for a new IT system?

When "All of the above" isn't a practical answer, it's a serious dilemma. The agency receives almost all of its funding for administration from the U.S. Department of Labor based on a formula that covers all of the states' programs—and typically, funding does not flexibly adjust to cover the costs of new mandates.

However, it is critically important to be able to think flexibly in a crisis, and imperative to think more flexibly between crises to prepare for the next one. We believe the system must be routinely prepared for emergencies that stretch it to a breaking point through sudden and overwhelming circumstances such as recession or a public health emergency. There is every chance that another shocking blow to full

employment will happen with little warning. While it is difficult to prepare adequately for catastrophe, we hope the voices of Washington claimants from the pandemic era will increase attention to how devastating to workers and families mass unemployment is and underscore the necessity for reform before the next crisis occurs.

Passage of the 2020 CARES Act as a response to the COVID-19 pandemic necessitated fast action and innovative thinking from the states that sometimes involved shaking off assumptions about resource constraints. A worker-centered approach can help meet the challenge, Michelle Evermore, interim director of disability economic justice and policy analyst at The Century Foundation, points out.

In New Jersey, it was commonly understood that the IT system would need months to ramp up a program to administer the federal Pandemic Unemployment Assistance (PUA) benefits. But the existing UI staff at the agency managed to get a system rolling in a month. That accomplishment demonstrated that

improvements can be made without requiring time-consuming change orders to a procurement contract. Based on that, the agency adopted an approach that blends the use of in-house and vendor talent to make rapid improvements, Evermore says.³⁷

Questions about priorities should not distract attention from the core principle of UI, which a former Department of Labor official sums up this way: “I have sympathy for state agencies. But paying the right amount of money to the right people on time has to happen even when administrative funding is insufficient. I'll always fight for more funding and more appropriate reimbursement mechanisms, but no matter what, people need to get the benefits they are entitled to.”

If one core message emerged from interviews of the Claimant Experience Project, it was that the UI system needs to keep the provision of timely benefits to claimants entitled to them at the center of its

efforts, and to hear the voices of Washington's unemployed when they are reporting inequitable access to benefits.

Part of the goal of this Claimant Experience Project has been to draw back the curtain on the human costs of a UI system's inability to carry out its mandate and, through these first-hand accounts, convey the true impact of failing to assure equity of access to unemployment benefits for unemployed workers.

Using claimants' experiences for insight, we believe that Washington's UI system has the potential to provide a reliable safety net to all people who have lost a job. We also believe that establishing and meeting equitable access standards will help with that goal and sustain future claimants' confidence in the UI system's ability to protect workers, families, communities, and the state economy.



³⁷ Michele Evermore, *New Jersey's Worker-Centered Approach to Improving the Administration of UI*, Heldrich Center for Workforce Development, September 2023. https://heldrich.rutgers.edu/sites/default/files/2023-09/New_Jersey%E2%80%99s_Worker-centered_Approach_to_Improving_the_Administration_of_Unemployment_Insurance.pdf.



Resources for Reform

Since the first year of the pandemic, novel and detailed approaches to improving equity of access to UI benefits have been provided in an array of reports from research centers advocating for improved UI programs and have offered particularly targeted and useful advice on reforms. Among the most recent publications:

Matthew Darling and Will Raderman, "An Unemployment System That Works" (Washington, DC: Niskanen Center), September 2023. <https://www.niskanencenter.org/wp-content/uploads/2023/09/A-UI-System-That-Works-Final.pdf>

Michele Evermore, *New Jersey's Worker-Centered Approach to Improving the Administration of UI* (New Brunswick, NJ: Heldrich Center for Workforce Development), September 2023. https://heldrich.rutgers.edu/sites/default/files/2023-09/New_Jersey%E2%80%99s_Worker-centered_Approach_to_Improving_the_Administration_of_Unemployment_Insurance.pdf

Monee Fields-White, Vivian Graubard, Alberto Rodriguez Alvarez, Nikki Zeichner & Cassandra Robertson, *Unpacking Inequities in Unemployment Insurance* (Washington, DC: New America), September 2020. <https://library.naswa.org/doi/10.5555/20.500.11941/4867>

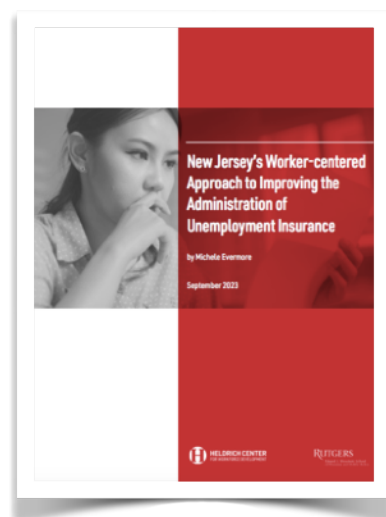
Elira Kuka and Bryan A. Stuart, *Racial Inequality in Unemployment Insurance Receipt and Take-Up* (Cambridge, MA: National Bureau of Economic Research, 2021). https://www.nber.org/system/files/working_papers/w29595/w29595.pdf

Christopher J O'Leary., William E. Spriggs, and Stephen A. Wandner. "Equity in Unemployment Insurance Benefit Access." Presented at the Allied Social Science Association's (ASSA) Annual Meeting on January 8, 2022. <https://research.upjohn.org/presentations/87>

Amy Traub, "Proposed Performance Standards for Equitable Access to Unemployment Insurance" (New York, NY: National Employment Law Project, 1983). <https://www.nelp.org/wp-content/uploads/Proposed-Performance-Standards-for-Equitable-Access-to-Unemployment-Insurance-.pdf>

Unemployment Insurance Equitable Access Toolkit (Washington, D.C.: U.S. Department of Labor ETA, 2023). <https://www.dol.gov/agencies/eta/ui-modernization/promising-practices/equity-toolkit>

Stephen A. Wandner. *Transforming Unemployment Insurance for the Twenty-First Century: A Comprehensive Guide to Reform* (Kalamazoo, MI: W.E. Upjohn Institute for Employment Research, 2023). <https://doi.org/10.17848/9780880996914>





Appendix

APPENDIX A

SURVEY INSTRUMENT

Interview Questions for Claimant Experience Project Participants

- What is your name?
- What are your preferred gender pronouns?
- What is your gender?
- What is your age?
- Are you Hispanic or Latino?
- How would you describe your race?
- In what country were you born?
- In what city or town do you live?
- Are you a veteran?
- What is your language preference?
- What do you typically do for work?
- If caregiving issues interfered with your availability for or ability to work, please explain
- At the job you were working when you became unemployed, what was your typical work shift? Did you work the same hours and days each week or were the shifts subject to change by your employer? Were changes frequent? Were they negotiable? How hard or easy was it to schedule other things—examples could be day care, family or personal trips or events, other jobs, classes you wanted to take—around the hours your employer wanted you to work?
- When you applied for benefits, did you have any temporary or long-term disabilities such as learning disabilities, chronic illness, mobility issues, deafness, etc.?
- What disabilities?
- When you lost your job, how much did you know about the availability of unemployment benefits?
- Had you filed for unemployment before? What occurred?
- If you had not filed before, how did you find out that you could apply (Did your employer tell you benefits were available? Did a friend or colleague tell you about benefits?)
- Did you ever lose a job and not file a claim for unemployment benefits, or did you ever start to file a claim and then change your mind?
- If you did not file, or if you started applying and then changed your mind, what were the main reasons?
- How do you feel now about not applying or changing your mind after you started applying?
- Is there anything else about your particular circumstances that makes applying for unemployment or communicating with the unemployment department especially difficult for you? Examples: where you live, housing, family responsibilities, limited English proficiency, caregiving responsibilities, work hours, disabilities, computer access, phone access, computer skills, etc.
- How did you apply for unemployment?

- What was your experience when you applied for benefits?
- What was your experience proving your identity to ESD?
- What was your experience when you were asked to submit documents? (Possessing documents requested; uploading, faxing, or mailing difficulties; ESD acknowledgment of receipt)
- Did you have any difficulties with your login information not working on e-Services? If so, what was it like trying to correct the issue and get back into your account?
- What was your impression of the website?
- Did you call the ESD Claims Center?
- If so, which of these were among the reasons you called? You received a notice you didn't understand or that conflicted with other notices; You had a question about your own circumstances and how they fit with the application questions; You had a question about general claim requirements; Your claim or your appeal appeared to have stalled and you'd like to know why; Other.
- What was your experience when you called? (wait times; communicating with agents; helpfulness of responses; your experience with callbacks, if offered)
- Is there anything that made waiting on hold with ESD especially difficult for you?
- Do you have family caregiving issues that interfered with your ability to call ESD?
- What was your experience if you sent an email to ESD through eServices? (Did they acknowledge receipt? Did they respond in a helpful way?)
- Many rules governing the unemployment insurance process have changed over the years, especially with new federal programs added during the pandemic. Did you have any difficulty understanding the rules for these new programs? What helped you get answers to your questions? (E.g., Internet searches, social network support group, friend or family member)
- Did anyone from ESD call you to ask questions concerning your eligibility for benefits?
- If someone from ESD contacted you, what was your experience with understanding and responding to their requests?
- After you already submitted your application for unemployment benefits, did you ever receive a questionnaire to fill out?
- If you were approved for benefits, what was the weekly benefit amount?
- If you did not appeal the negative determination, what made you make that choice?
- Did you seek out legal representation?
- If you filed an appeal, what was your experience? (wait time before a hearing date, finding help with your appeal, participating in a hearing, receiving a decision (an initial order) from the judge)
- Did you believe that the judge fairly considered the facts of your case and your arguments?
- Did you win or lose your hearing?
- If you lost, did you file a Petition for Review to the Commissioner?
- If you did not file a Petition for Review to the Commissioner, how did you come to that decision?
- If you lost and went to the next level of appeal by filing a Petition for Review with the Commissioner of ESD, how difficult did you find that process? Whether or not the commissioner ruled in your favor, did you believe your appeal received fair consideration?
- Were you told you had an overpayment and must repay benefits you received?
- If you were told you had an overpayment and must repay benefits you received, what was your experience?
- Was the overpayment notice clear as to why you owed money?
- If ESD tried to collect payment from you, what was that like?

- Did you seek waiver of the overpayment?
- If you sought a waiver, what was your experience? (Obtaining a waiver application; showing your financial circumstances and risk of financial hardship)
- If you didn't seek a waiver, why not?
- There are WorkSource offices throughout the state that claimants can visit in person. Do you know where your nearest WorkSource office is?
- Have you ever visited a WorkSource office, talked with a WorkSource employee over the phone, or visited the WorkSource website?
- What was your experience like?
- Before the pandemic, ESD offered a printed "Handbook for Unemployed Workers" explaining the benefits system and how workers could apply. It's no longer available on paper, although you can download a digital copy and print it out. Were you aware of this handbook when you applied?
- If so, did you find it helpful?
- Do you think a paper handbook would have been helpful to you? Or do you feel you had adequate guidance from what is available on the ESD website and eServices and the digital handbook if you needed it?
- Did you print out the handbook yourself?
- How were you and your family affected by your job loss and your experience with filing a claim for benefits?
- If you received any benefits, how much did they help you?
- If you were unemployed again, would you do anything differently next time?
- If you were appointed to head up ESD, what is the first thing you would do to improve the agency's administration of unemployment insurance?
- Washington state law requires ESD to provide people assistance in applying for benefits when people request it. The current system provides assistance through the website, eServices, and the

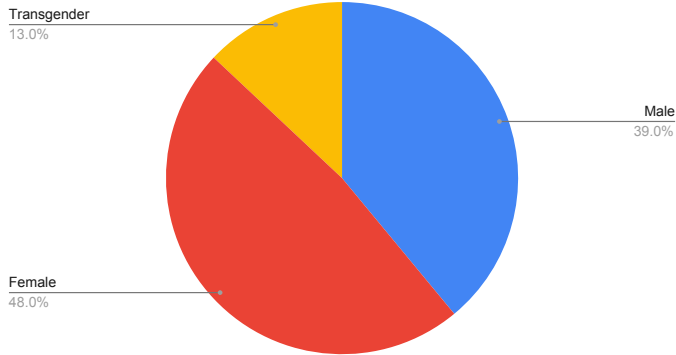
Claims Center phone assistance. Which of these forms of assistance would be most helpful for you?

- An ESD agent walks you through the questions on the application over the phone while you are using eServices and you can ask questions along the way.
- A caseworker or social worker interviews you in person and helps you fill out the application based on your answers, then asks you to review and sign it
- The current system in which most claimants apply through eServices on their own and may call the Claims Center if they have questions.
- Other.

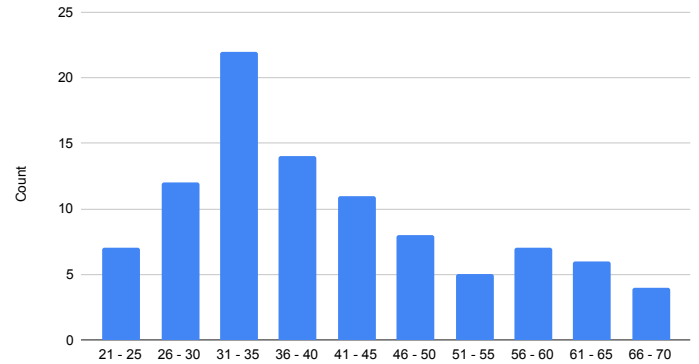
APPENDIX B

DEMOGRAPHIC CHARTS OF THE 100 CLAIMANTS INTERVIEWED

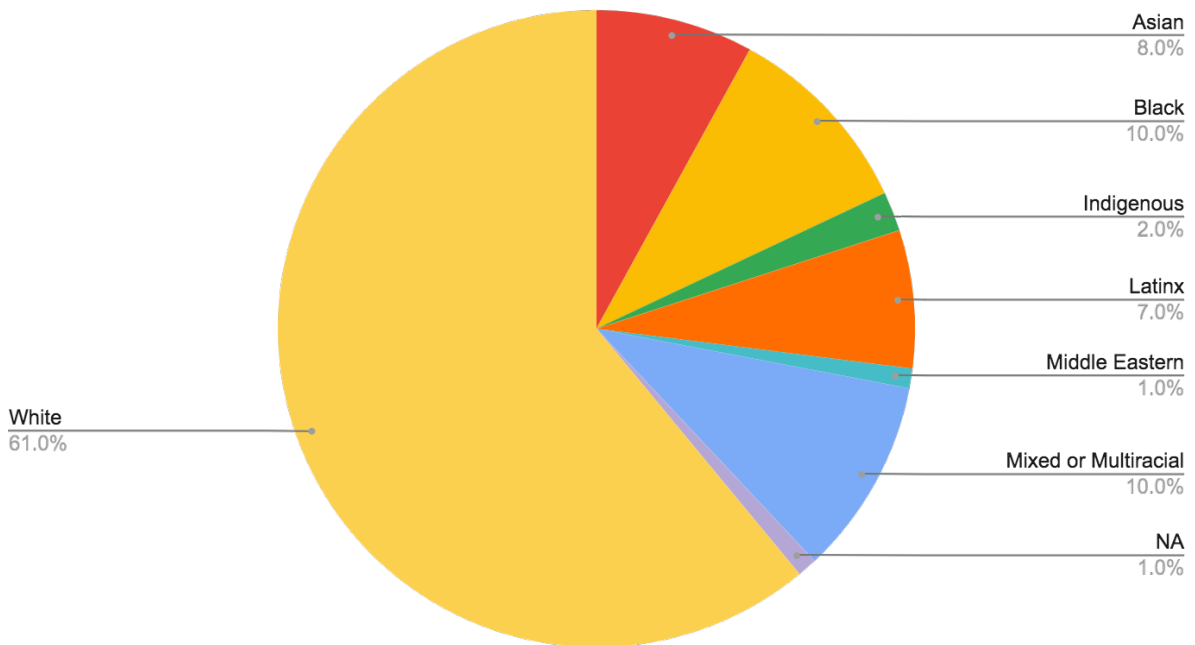
Count of gender standardized



Claimant Age



Respondent Racial & Ethnic Categories



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