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An Epidemic of Racism: Unpacking the Intersection of Inequality and COVID

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An Epidemic of Racism: Unpacking the Intersection of Inequality and COVID

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Supported by the De La Salle Institute for Advanced Teaching and Learning
Health is rooted in social, political and economic structures.
Structural inequalities are caused by systems that marginalize populations and make them vulnerable to abuse and trauma.

What are some ways that existing inequalities have enhanced the pain of living through a pandemic?
Age Matters

Study: Elderly Most At Risk From The Coronavirus

COVID-19 fatality rate by age (as of February 11, 2020)

- 10-19: 0.2%
- 20-29: 0.2%
- 30-39: 0.2%
- 40-49: 0.4%
- 50-59: 1.3%
- 60-69: 3.6%
- 70-79: 8.0%
- 80+: 14.8%

n=44,672 confirmed COVID-19 cases in Mainland China
Source: Chinese Centre for Disease Control and Prevention
People of color have a higher incidence of all of these conditions:

- Cardiovascular disease: 10.5%
- Diabetes: 7.3%
- Chronic respiratory disease: 6.3%
- Hypertension: 6.0%
- Cancer: 5.6%
- None: 0.9%

By age:
- 0-9: 3.3%
- 10-19: 2.8%
- 20-29: 3.5%
- 30-39: 4.1%
- 40-49: 5.4%
- 50-59: 6.8%
- 60-69: 8.2%
- 70-79: 10.6%
- >80: 11.9%
- Overall: 13.5%

COVID-19's Devastating Impact On African Americans

African American share of state/city populations and COVID-19 deaths (as of Apr 06, 2020)

- Share of state/city's population
- Share of COVID-19 deaths

<table>
<thead>
<tr>
<th>State</th>
<th>Males</th>
<th>Females</th>
<th>Louisiana</th>
<th>Illinois</th>
<th>Michigan</th>
<th>North Carolina</th>
<th>Chicago</th>
</tr>
</thead>
<tbody>
<tr>
<td>Share of pop</td>
<td></td>
<td></td>
<td>32%</td>
<td>15%</td>
<td>14%</td>
<td>22%</td>
<td>30%</td>
</tr>
<tr>
<td>Share of deaths</td>
<td>70%</td>
<td>42%</td>
<td>41%</td>
<td></td>
<td>22%</td>
<td></td>
<td>69%</td>
</tr>
</tbody>
</table>

Sources: 2010 Census, respective state/city health departments
Age-adjusted COVID-19-associated hospitalization rates by race and ethnicity

COVID-NET, MARCH 1 - MAY 23, 2020

COVID-19-associated hospitalization rates are highest among people who are non-Hispanic American Indian/Alaska Native, non-Hispanic Black, and Hispanic/Latino.

Rates are statistically adjusted to account for differences in age distributions within race and ethnicity strata in the COVID-NET catchment area. Rates are based on available race and ethnicity data which is now complete in 83% of cases from COVID-NET sites. COVID-19-associated hospitalization rates for American Indian and Alaska Natives (AI/AN) may be impacted by recent outbreaks among specific communities within this population and the small numbers of AI/AN cases included in COVID-NET.

cdc.gov/coronavirus
The Share of Adults Ages 18-64 at Risk of Serious Illness if Infected with Coronavirus is Higher for People with Low Household Incomes

Share of Adults Ages 18-64 at Higher Risk of Serious Illness if Infected with Coronavirus by Household Income:

- Total Non-elderly Adults: 21%
- Less than $15,000: 35%
- $15,000-$25,000: 30%
- $25,000-$35,000: 24%
- $35,000-$50,000: 21%
- $50,000 or more: 16%

Note: Data includes adults ages 18-64; excludes adults living in nursing homes or other institutional settings. Source: KFF analysis of 2018 Behavioral Risk Factor Surveillance System.
Incarceration Matters

**THE IMPACT OF COVID-19 ON INCARCERATED POPULATIONS**

- **Alameda County, CA**
  - Santa Rita Jail: 11.1
  - 18.9

- **New York City, NY**
  - 21.2

- **Rikers Island**
  - 95.71

- **Cook County, IL**
  - 130.1

- **LA County, CA**
  - 2.93
  - 20.95

- **Orange County, CA**
  - 0.97

Infections per 1,000 People

Sources: U.S. Census, Cook County Public Health Department, Los Angeles County Sheriff’s Department, LA County Public Health Department, Orange County Sheriff’s Department, Orange County Health Care Agency, The Legal Aid Society, Alameda County Public Health Department, Alameda County Sheriff’s Department
Georgia Reopens, April 2020
Discussion

How do we reopen in an equitable fashion while considering vulnerable populations?
Break Out Discussions

• You will be randomly grouped with five other people
• You will discuss for about ten minutes
• Please discuss the prompt
• The prompt and announcements will occur in the chat as well as a banner
• Select someone to report out your conversation
Discussion

How do we reopen in an equitable fashion while considering vulnerable populations?
There is clear disproportionate impact on populations of color. These communities are more likely to:

- Work at essential, low wage jobs
- Experience high unemployment
- Have poor access to healthcare
- Experience risky co-morbidities
Poster carried in the 1963 March on Washington.

Alabama, 1965
Police disperse a protest with tear gas, 1965.
In 1992, Rodney King was arrested for drunk driving and savagely beaten by police.

Footage of the brutality was captured by a bystander.

The officers involved were initially acquitted, leading to nationwide protests.
2013 - Present

Trayvon Martin
Michael Brown
Eric Garner
Freddy Gray
Philando Castile
Who is missing?

Breonna Taylor
Riah Milton
Dominique “Rem’mie” Falls

#SayHerName

Trans Lives Matter
Racist Housing Segregation

Racist Economic Policies

Racist Police Brutality

Health Disparities

Racist Healthcare Systems

COVID-19
Philadelphia, June 2020
“The landmarks of political, economic and social history are the moments when some condition passed from the category of the given into the category of the intolerable...The history of public health might well be written as a record of successive redefinings of the unacceptable.”

Geoffrey Vickers, Secretary, Medical Research Council, Great Britain, 1958
Discussion

In your group…

Brainstorm and record a list of “things” affecting the public’s health that have passed from tolerable (accepted) to intolerable (unaccepted).

Include items that you wish would become unacceptable.
What kind of future can you imagine that addresses inequities for our:

Aging population?
Incarcerated population?
Black and Native populations?
Essential low-wage workforce?
Health is rooted in social, political and economic structures.