

Culture of Health Blog

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Five Experts Reflect on the Health Equity Implications of the Pandemic

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As the novel coronavirus swept the globe, structural racism drove its disproportionate impact on communities of color in our nation. As we look ahead to a new year, experts weigh in with thoughts and hope for shaping a healthier, more equitable future.



When acclaimed Barbadian author Karen Lord envisioned life on a small island during a pandemic in her story *The Plague Doctors*, she never imagined that within weeks of its publication, “history would become present, and fiction real life.” Lord’s short story in the Robert Wood Johnson Foundation’s (RWJF) first-ever book of fiction, *Take Us to a Better Place*, was written months before coronavirus emerged. With chilling prescience, it imagines a deadly infectious disease besetting the globe and follows Dr. Audra Lee as she fights to save her 6-year-old niece. The heroine confronts not just the disease but also a society that serves the wealthy at the expense of others.

This latter point was especially relevant here in the United States where COVID-19 hit communities of color dramatically harder than others. Centuries of structural racism have created numerous barriers to health including [difficult living conditions](https://www.npr.org/sections/health-shots/2020/11/19/911909187/in-u-s-cities-the-health-effects-of-past-housing-discrimination-are-plain-to-see) (<https://www.npr.org/sections/health-shots/2020/11/19/911909187/in-u-s-cities-the-health-effects-of-past-housing-discrimination-are-plain-to-see>); limited educational opportunity; [high-risk jobs](https://www.ncbi.nlm.nih.gov/pmc/articles/PMC7241973/) (<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC7241973/>); [lack of access to paid leave](https://thehill.com/opinion/finance/522986-paid-leave-and-child-care-are-fundamental-to-recovery) (<https://thehill.com/opinion/finance/522986-paid-leave-and-child-care-are-fundamental-to-recovery>) and disparities in care. [Historical trauma](https://www.nbcnews.com/think/opinion/i-m-covid-19-vaccine-clinical-trial-honor-my-father-ncna1242787) (<https://www.nbcnews.com/think/opinion/i-m-covid-19-vaccine-clinical-trial-honor-my-father-ncna1242787>) has also driven [deeply rooted mistrust](https://www.motherjones.com/politics/2020/05/overcoming-black-communities-distrust-medicine-coronavirus/) (<https://www.motherjones.com/politics/2020/05/overcoming-black-communities-distrust-medicine-coronavirus/>) of the medical establishment. All of these interconnected factors have magnified risk for both exposure to COVID-19 and the worst possible outcomes from the virus.

A [series of polls](#) also highlighted the heavy financial impact of COVID-19—with more than 40 percent each of Latino, Black, and Native American households reporting serious financial problems during the coronavirus outbreak—including using all or most of their household savings.

As we reflect on the year and the ongoing pandemic, we share observations by a range of experts featured on RWJF's Culture of Health Blog in 2020. They provide important perspectives on the health equity implications of COVID-19, and offer some hope for the future.

We must keep equity at the forefront through activism.

Yolo Akili Robinson is the founder and executive director of the [Black Emotional and Mental Health \(BEAM\)](https://www.beam.community/yoloakili) (<https://www.beam.community/yoloakili>) Collective and recipient of the [RWJF Award for Health Equity](#). In a Q&A with [Dwayne Proctor](#), Robinson explores how the pandemic's disparate impact on communities of color have strained mental health. Taking note of data demonstrating higher COVID-19 death rates for Black Americans, Robinson says the numbers are distressing, but not surprising:



We now have to use our voices, through art, media, and politics, to keep issues

We have already been [living in spaces zoned](#) so that Black and Brown people aren't healthy—in food deserts, or where the water isn't safe to drink, for example. And we endure untreated chronic conditions that [lead to poorer outcomes from COVID-19](#) (<https://www.cdc.gov/coronavirus/2019-ncov/hcp/underlying-conditions.html>), while struggling to access health care. So, when COVID-19 began spreading, we were already in distress because of systemic and structural failings.... When people of color actually do manage to receive care, doctors are more likely to minimize their pain and dismiss their symptoms. We have a long way to go in dismantling all of the "isms" within the system....



[O]ften what looks like prophecy is merely the skill of reading the signs of the past to guess at the challenges—and solutions—of the future.

—Karen Lord ([Read her post](#)) →

of equity at the forefront.

—[Yolo Akili Robinson](#) ([Read the post](#)) →

Speaking weeks before George Floyd's murder touched off a national soul-searching on race, Robinson said:

I think back to the early days of the HIV epidemic and am reminded of all the ways advocates had to push the government to respond, over a period of years. They advocated and protested until finally the government put

its weight behind finding effective treatments. That also had a very real impact on the structure of health care and the way programs were designed to help people with HIV. We, too, have to force a discussion and remind ourselves what started and energized national conversations that led to change. It was Martin Luther King, the Black Panthers, Gloria Steinem, Angela Davis, Fannie Lou Hamer, Black Lives Matter, ACT-UP. They got in our faces, even antagonized, and they got us past the collective amnesia and wishful notion that racism or sexism or homophobia don't exist. We now have to use our voices, through art, media, and politics, to keep issues of equity in the forefront.

Maintaining social connections while physical distancing alleviates the pandemic's impact.

Yolanda Ogbolu [writes about families' pre-pandemic self-isolation](#) driven by fear of violence in her childhood West Baltimore neighborhood. Now a nurse researcher, Ogbolu is working to understand the effects of that "situational isolation," which she defines as self-isolating behavior driven by circumstances in the social setting and built environment that make it difficult to get out and about or develop friendships.

To ease this isolation while combatting COVID-19, the community has rallied in many important ways ranging from taking decisive action to [protect elderly nursing home residents from the virus](#) (<https://www.baltimoresun.com/opinion/columnists/dan-rodricks/bs-md-rodricks-1014-20201013-lcl3xvy4wfc5tlf5c3kebg2te-story.html>), [engaging trusted voices in community outreach](#) (<https://www.baltimoresun.com/coronavirus/bs-hs-kindred-coaches-tackle-coronavirus-20201020-2wqxjtgyrcvdmqgqkn5awawy-story.html>) and more.

She writes:

In Baltimore, food, housing, and electricity are considered basic needs and are being urgently addressed for many.

The [digital divide](#)

(<https://magazine.nursing.jhu.edu/2020/04/covid-19-and-the-digital-divide-in-baltimore-city-schools/>) that has been a barrier to equitable education is narrowing slightly through gifting of electronic devices and free internet services to the most vulnerable. The state has [halted prosecutions](#)

(<http://www.baltimoresun.com/coronavirus/bs-md-ci-cr-mosby-prisoner-release-20200318-u7kneb6o5gqvngmtpejftavia-story.html>) for drug,

prostitution, and some other offenses to protect vulnerable citizens in prisons. Baltimore ministers have created virtual "freedom schools" and are delivering free food to community members. The [city's schools](#) have served over 50,000 meals to children

(<https://www.bcps.org/news/articles/article10669.html>) and their families in need.



The one lesson I hope we've learned from standing together with family, friends, and community is how feeling connected can help all of us to not only survive but thrive.

—[Yolanda Ogbolu](#) ([Read her post](#)) →

Others in the community are working and providing essential services, including health professionals, grocery workers, truck drivers, and hospital environmental health service workers. Caregivers, mothers and fathers, like those in my study, are reporting through social media that for the first time they can spend quality time with their children, serving as teachers and health promoters. They are making collages of the best moments of their lives, having dance parties, and building relationships with family and neighbors in new ways.

She concludes, “The one lesson I hope we’ve learned from standing together with family, friends, and community is how feeling connected can help all of us to not only survive, but thrive.”

Health care, public health and social services must work together to overcome the racial inequities that COVID-19 has intensified.

Chris Lyttle, deputy director of [Systems for Action \(S4A\)](http://systemsforaction.org/) (<http://systemsforaction.org/>), focuses on the social determinants of health and how [the pandemic has exposed race-based gaps in the nation’s health system](#).



[S]ystems need to work together to advance health equity. Let’s all join forces to push that alignment forward.

—Chris Lyttle ([Read his post](#)) →

Lyttle points out a “through-line” between S4A’s work, the failed response to the pandemic, and “the racial injustice that has sparked such an outpouring of protest. Black and Latino communities have borne the brunt of the pandemic—from the risk of infection and the severity of the illness to its economic reverberations.”

“[F]ragmented systems prevent us from treating the whole person,” he writes, continuing,

Drawing on 16 years of data from hundreds of communities across the country, an RWJF-supported study found that deaths from cardiovascular disease, diabetes, and influenza fall significantly when collaborative mechanisms are in place to promote population health...

I’m not naïve enough to believe that if we could just align our systems, we would vanquish racial disparities, but I am convinced the pressure we are seeing on communities of color foregrounds the power of better

alignment. Early findings from that 16-year data set suggest that communities with strong multisector networks have fewer COVID-related deaths and lower infection rates. That information should certainly inspire action.

He concludes, “My personal and professional journeys have led me to much the same awareness—systems need to work together to advance health equity. Let’s all join forces to push that alignment forward.”

Data drives meaningful action.

Ericka Burroughs-Girardi, an action learning coach at [County Health Rankings & Roadmaps](https://www.countyhealthrankings.org/) (<https://www.countyhealthrankings.org/>), provides strategic guidance to communities that want to use data for meaningful action to improve health and advance equity. This year, the County Health Rankings team spoke with leaders from Black, Latino and Native American communities.

One key lesson emerged: Used strategically, disaggregated data (local-level data broken down by race, ethnicity, gender, and age) can help facilitate a faster response, making it easier to see where resources like new testing sites are needed most. Data also can guide community responses in a fraught environment where [politics and public health collide](#)



Equity-focused decision-making is key for a future ripe with opportunity for every person in America, no matter the color of their skin, how much money they make, or where they live.

—Ericka Burroughs-Girardi ([Read her post](#)) →

(<https://www.usatoday.com/story/opinion/2020/06/30/coronavirus-politics-gathering-data-column/3277967001/>), but its availability varies greatly from state to state and community to community.

She writes:

Local-level data broken down by race, ethnicity, gender, and age are critical for understanding community challenges, with COVID-19 being no exception. Since the arrival of the virus, quickly expanding access to disaggregated data has been paramount for evidence-informed decision-making.

As response and recovery efforts evolve, communities will continue requiring precise, accurate, and transparent data to make informed decisions about resident needs. However, it is also important to recognize that these data may not capture the full story in a community. Not every community has access to universal testing.

Additionally, many residents fear how their information may be used—or do not seek care due to lack of health insurance, immigration status concerns, and more. All of these factors impact the data collected and their availability.

Check back in 2021 to read more perspectives on supporting an equitable COVID-19 recovery. In the interim, explore the Robert Wood Johnson Foundation's [collection of resources and perspectives on COVID-19](#).

ABOUT THE AUTHOR



Najaf Ahmad is managing editor of the *Culture of Health Blog* where she highlights perspectives about how the Foundation is advancing health equity in communities across the nation.

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