

Health Disparities Among Racialized Communities and the COVID-19 Pandemic

In Brief	an M	COVID-19 has highlighted how socio-economic inequalities and race intersect with health outcomes. <u>Analysis of Montreal and Toronto neighbourhoods</u> show a correlation between higher rates of COVID-19 infections with low-income neighbourhoods and neighbourhoods with higher percentages of Black
	IJ	residents. In New York, <u>Hispanic and Black individuals are twice as likely</u> to die of COVID-19, and <u>Black Chicagoans are five times more likely</u> than whites to die in these cities.
	a a	Indigenous communities are similarly <u>disproportionately impacted by</u> <u>COVID-19</u> . In Arizona, the death rate for Indigenous peoples is nearly six times higher than for white people. A <u>study by Public Health England</u> found that individuals of Black and Asian ethnicity were at a 10-50% higher risk of death from COVID-19 as
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In order to understand the link between race and unequal health outcomes, <u>researchers have</u> <u>looked at the concept of social vulnerability</u>, which links social conditions and risk exposure. <u>Other research</u> cautions that when considering racial disparities in health outcomes it is critical to mitigate territorial stigmatization, myths of racial biology and behavioral explanations predicated on racial stereotypes. Therefore, it is more useful to explain disparities through the lens of resource deprivation caused by low socioeconomic status, chronic stress due to racial discrimination and place-based risk.

With regards to place-based risk, racialized individuals in the US are <u>disproportionately</u> <u>represented in essential workes</u> (including, retail grocery workers, public transit employees, health-care workers and custodial staff), and are <u>more likely to live in multi-generational</u> <u>households</u> and care for vulnerable seniors. For these reasons, implementing social distancing measures may be more challenging.

Others are pointing to long-standing systemic inequities in healthcare as another cause of higher death rates within racialized communities. Researchers highlight studies that show how myths surrounding Black people lead to <u>conscious or unconscious bias when treating Black</u> <u>patients</u>. There is ample evidence of racial bias in the medical field <u>influencing which patients</u> <u>receive additional medical care</u>, and these treatment disparities can have <u>fatal consequences</u> in the context of the pandemic.