



## COVID-19 Considerations for Racial and Ethnic Minorities, and Marginalized Communities

March 2020

### Guiding Principles

- Racial and ethnic minorities are at greater risk for social and economic disadvantage, including living in marginalized communities. Historical accounts document ill preparation and communication related to disaster preparedness and crisis response for racial and ethnic minorities. To be effective, disaster preparedness strategies and efforts to mitigate the transmission of disease among these populations must address these vulnerabilities and incorporate lessons learned.
- Historically there has been mistrust in relationships between racial and ethnic minorities and disaster personnel, governmental entities and/or medical facilities. It is critically important for disaster preparedness, governmental and medical organizations to establish and maintain trusting partnerships with racial and ethnic communities long before disaster/emergency situations occur. Our current national crisis related to COVID-19 is an opportunity to connect with racial and ethnic minorities and include them in strategies to address challenges they are experiencing.
- Racial and ethnic minorities have higher rates of comorbid conditions (cardiovascular disease, diabetes, hypertension, chronic respiratory disease, cancer) which put them at greater risk for negative outcomes related to COVID-19.
- To effectively protect Michigan's racial and ethnic minority communities at highest risk, strategies and communication plans must be developed in partnership with these communities in order to meet their unique needs.

### Recommendations for MDHHS staff and other stakeholders

- A. Collect demographic information and report COVID-19 cases by race and ethnicity**
- B. Use additional methods to communicate with racial and ethnic minorities.**
  1. Use communication methods in addition to online methods, including radio, community newsletters, newspaper, flyers, etc.
  2. Work with local business (community centers, churches, etc.) to communicate messaging virtually.
  3. Work with organizations (e.g. racial/ethnic minority-based organizations, community-based organizations, Community Health Innovation Regions) in the affected communities to develop messaging, to disseminate information and to develop effective intervention and dissemination strategies.

4. Utilize current systems of communication - i.e. School Alert System, 911 text alert, Amber Alert, 211 & 411.
- C. Communicate to residents without insurance or who are unfamiliar with navigating the health system.**
1. Develop messaging for residents who do not have insurance.
  2. Develop messaging for residents who have not used their insurance or the health care system. This includes residents who do not know their primary care physician.
    - i. Consider wait time for making appointments to see primary care physician. Develop strategies to improve promptness to see a doctor.
    - ii. Designate one or more urgent care centers as testing sites for individuals who don't know or do not have access to their primary care doctor for the above-mentioned reasons.
- D. Communicate to residents with economic and social challenges about their ability to "stay home" if feeling ill.**
1. Develop messaging for residents who do not have sick leave and the ability to "stay home" if feeling ill.
  2. Develop resource list for those who might need financial and other assistance related to lost work time.
- E. Reduce stigma.**
1. Develop messaging to prevent stigma to racial or ethnic populations or residents with the disease.
- F. Provide culturally and linguistically appropriate services.**
1. Make all communication available in multiple languages.
  2. Work with organizations that service the deaf and hard of hearing communities to develop and disseminate messaging.
  3. Provide guidance for creating culturally sensitive environments in health facilities.
- G. Provide paid sick leave.**
1. Implement policy for employers to allow for sick days and provide paid leave for ill employees and/or their dependents/family members.
  2. Provide unemployment benefits to residents who are not able to work due to their illness or illness of their dependents/family members.
- H. Provide financial relief for small businesses.**
1. Implement policy to provide financial relief for businesses, particularly small businesses, that allow for sick days and provide paid leave for ill employees and/or their dependents/family members.
- I. Reduce barriers to testing.**
1. Make testing available at no cost to the uninsured, underinsured, low-income, undocumented immigrants and people with disabilities.
    - i. Consider a fee scale or no cost structure for treatment of these populations.
  2. Incorporate strategies to make testing readily available in the community
    - i. Prioritize neighborhoods.

- ii. Testing should be made available in the neighborhood-specific predominant language/s. Recruit staff who speak the language or have medically qualified interpreters on testing sites at all times.

**J. Determine need to prescribe medications for longer time periods for individuals at higher risk.**

1. Determine need to provide waivers for physicians to prescribe.
2. Determine need to provide waivers for insurance companies to approve physician requests.
3. Assess supply/demand concerns with medications manufactured in other countries.

**K. Incorporate additional hygiene messaging.**

1. Messaging to wash hands to include instruction to not touch faucets and doorknobs after washing hands – use paper towel to turn off the faucet and turn doorknobs.
2. Provide guidance regarding the use of cleaning materials that may exacerbate health conditions. (Example: Utilizing bleach as a cleaning agent can be detrimental to those who have asthma.)
3. Provide guidance on the use of at-home cleaning products that can be used safely and at a low-cost to disinfect surroundings.

**L. Address transportation concerns.**

1. Identify strategies with local department of transportation to decrease the risk of transmission.
2. Advocate and implement strategies with public and private transportations services to transport to medical services.

**M. Address food insecurity.**

1. Due to school closings, identify strategies to provide food to children and families.
2. Implement WIC and food assistance allowances.

**N. Address child-care related challenges.**

1. Provide childcare subsidies for individuals with low wage/hourly positions who do not have paid leave.
2. Provide financial and mental health resources for grandparents and other aging caregivers.
3. Offer educational support to older children who are acting as full-time caregivers and require extra assistance with maintaining the virtual learning pace.

**O. Prevent price inflation on goods and services.**

1. Implement policy and directives to prevent price inflation on goods and services.
2. Advocate for the assurance of accessible prices in the market for low-income, working class, and those in poverty.

## Resources

1. Michigan Department of Health & Human Services – [Information in Multiple Languages](#)
2. [Cultural Competency Curriculum for Disaster Preparedness and Crisis Response, Department of Health and Human Services, Office of Minority Health](#)
3. [Ethnicity and Minority Status Effects on Preparedness, Nadia J. Siddiqui, Jonathan P. Purtle, Dennis P. Andrulis](#)
4. [Cultural and Linguistic Competency in Disaster Preparedness and Response Fact Sheet](#)
5. [Lack of Cultural Competency in International Aid Responses: The Ebola Outbreak in Liberia. Southall, Hannah Grace, Sarah E. DeYoung, and Curt Andrew Harris.](#)
6. Race Forward Statement on the Coronavirus Emergency, [Official Response and Its Impacts on Communities of Color](#)
7. [King County, Washington Anti-stigma Social Media Toolkit](#)
8. [Recommendations for Immediate Action Regarding: The Rights & Needs of People with Disabilities Who Use Personal Assistance Services & Supports Throughout COVID-19 Planning & Response](#)
9. Switchboard: A Round-Up of Multilingual Resources on COVID-19 [COVID-19 information in multiple languages from multiple entities](#)