Insights on racial and ethnic health inequity in the context of COVID-19

COVID-19 is disproportionately impacting racial and ethnic minorities. There are at least two reasons for this.

- There is an opportunity to more broadly represent Racial and ethnic minorities in the healthcare workforce, and to support consumers, especially during a pandemic.

- Systematic racism, a form of structural racism, is among the factors that exacerbate health disparities for a wide range of health outcomes, e.g., asthma, cancer, and mental illness.

Raced has been associated with stress and deaths have been shaped by structural racism.

A composite metric including income, employment, use of public assistance, food insecurity, and unemployment to measure socioeconomic vulnerability.

Higher levels of socioeconomic vulnerability defined as the top quintile of counties for a given socioeconomic factor and lower levels defined as the counties in the bottom quintile.

Socioeconomic disparities in COVID-19 deaths per 100,000.

There are racial and ethnic disparities in access to care in the context of COVID-19. The highest access to care is among White Americans.

There is an opportunity to more broadly represent Racial and ethnic minorities in the healthcare workforce, and to support consumers during a pandemic.

Factors that exacerbate health disparities for a wide range of health outcomes, e.g., asthma, cancer, and mental illness.

Racial and ethnic representation in the healthcare workforce is an opportunity to more broadly represent Racial and ethnic minorities in the healthcare workforce, and to support consumers during a pandemic.

Hispanic/Latinx Americans were 3x more likely to try to get tested for COVID-19, but more likely to report loss of health insurance during the pandemic.

There is an opportunity to more broadly represent Racial and ethnic minorities in the healthcare workforce, and to support consumers during a pandemic.

COVID-19 deaths are higher in areas with higher neighborhood stress scores, which are associated with race and ethnicity.

Racial and ethnic disparities in COVID-19 deaths per 100,000.

There are racial and ethnic disparities in access to care in the context of COVID-19.

In context of COVID-19 and ethnic health:

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