



THE COUNCIL OF THE CITY OF NEW YORK

BRIEFING PAPER

COMMITTEE ON OVERSIGHT AND INVESTIGATIONS

Hon. Ritchie J. Torres, Chair

April 30, 2020

Oversight - Disparate Impacts of COVID-19 on Communities of Color

Introduction

On April 30, 2020, the Committee on Oversight and Investigations, chaired by Council Member Ritchie J. Torres, will hold an oversight hearing on the disparate impacts of COVID-19 on the city's communities of color. The Committee expects to hear testimony from a number of experts and stakeholders in order to explore factors that may be contributing to these disparities and potential avenues for mitigating them in both the short- and long-term.

Impacts of COVID-19 on Communities of Color

The ongoing outbreak of COVID-19 in New York City has disproportionately affected racial and ethnic minority groups. The starkest evidence of this disparity can be seen in the racial and ethnic breakdown of New Yorkers who have died as a result of this disease. The age-adjusted death rate in the African-American population is 127 per 100,000 and in the Hispanic/Latino population it is 114 per 100,000, as opposed to 64 per 100,000 among the white population and 52 per 100,000 among the Asian population. Similar disparities are evident in the hospitalization and non-hospitalized case rates, as illustrated in Appendix A. Notably, residents of the Bronx are twice as likely to die from the virus as residents of the city overall.¹

Possible Reasons for Disparate Impacts

Many different factors may account for the fact that the brunt of the outbreak has fallen disproportionately on communities of color. As the virus and the disease that it causes are new, the scientific community is still racing to learn more about them and much remains unknown. As the outbreak develops and more evidence is analyzed, it is likely that researchers will be able to come to more precise conclusions regarding the reasons for these clear disparities. Nonetheless, a number of factors are likely at play.

¹ Ese Olumhense and Ann Choi, *Bronx Residents Twice as Likely to Die from COVID-19 in NYC*, THE CITY, (Apr. 3, 2020) available at <https://thecity.nyc/2020/04/bronx-residents-twice-as-likely-to-die-from-covid-19-in-nyc.html>

While it appears clear that if exposed, anyone can contract the novel coronavirus, health experts have consistently warned that older people and people with underlying health conditions are at significantly greater risk of an infection causing serious symptoms, complications, and death. Linking specific conditions to a greater risk of dying or becoming severely ill due to COVID-19 is complicated, especially while the virus remains relatively new. However, the Centers for Disease Control and Prevention (CDC) warns that suffering from conditions such as asthma, chronic lung disease, diabetes, and serious heart conditions may put people at higher risk for severe illness from COVID-19.² In New York State, the most common comorbidities found in fatal COVID-19 cases are high blood pressure, diabetes, and high cholesterol.³ The rates of asthma, diabetes, and high blood pressure among both Black and Latino New Yorkers are noticeably higher than comparable rates for city residents overall.

	NYC Overall	White	Black	Latino	Asian
Asthma	13.4%	11.1%	17.2%	16.4%	8.0%
Diabetes	11.5%	6.9%	15.0%	15.7%	11.6%
High blood pressure	28.0%	23.1%	35.1%	32.6%	20.7%

Source: NYC DOHMH Adult Community Health Survey, 2017

It is important to note that a multitude of factors account for the fact that communities of color suffer disproportionately from these chronic health conditions, many of which can be attributed to decades of racial inequality and systemic racism. For instance, it is well-documented that communities of color are disproportionately burdened by air pollution, causing dramatically higher rates of health conditions such as asthma. For instance, among the adult population of New York City, the rates of emergency room visits for asthma that are attributable

² Centers for Disease Control and Prevention, *Groups at Higher Risk for Severe Illness*, as of Apr. 26, 2020, available at <https://www.cdc.gov/coronavirus/2019-ncov/need-extra-precautions/groups-at-higher-risk.html>

³ New York State Dept. of Health COVID-19 Fatality Data as of 4/26/2020, available at <https://covid19tracker.health.ny.gov/views/NYS-COVID19-Tracker/NYSDOHCOVID-19Tracker-Fatalities?%3Aembed=yes&%3Atoolbar=no>

to air pollution are nearly five times higher in neighborhoods with high levels of poverty compared to such rates in low-poverty neighborhoods.⁴ A recent national study conducted by researchers at the Harvard University T.H. Chan School of Public Health found that higher levels of air pollution were associated with higher death rates from COVID-19.⁵ A recent Council report also found that neighborhoods that predominantly house low-income communities of color have less access to healthy food and experience greater food insecurity and food-related illnesses such as diabetes.⁶

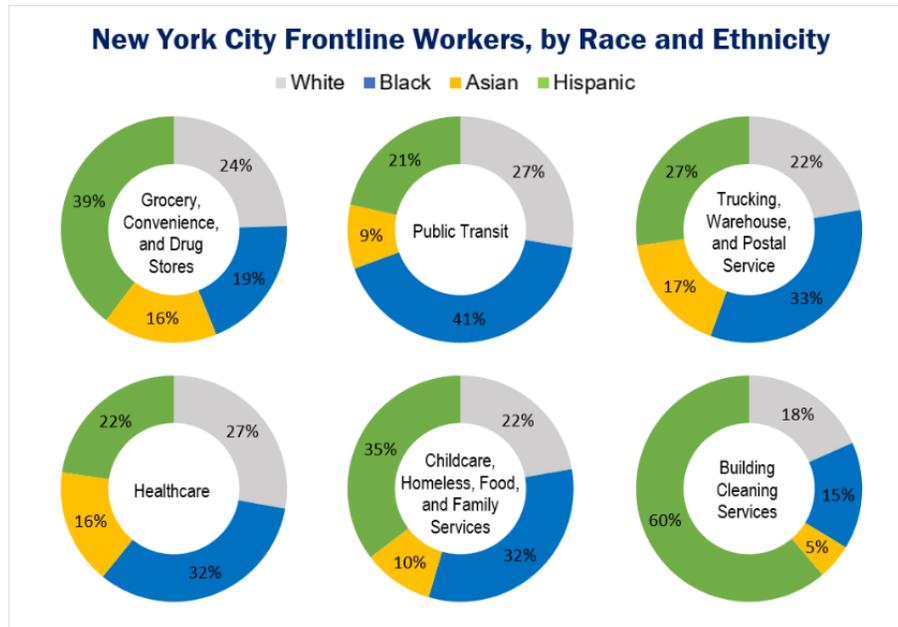
The fact that many “essential” or “frontline” workforces are disproportionately comprised of people of color represents another potential factor behind the outsized impact of COVID-19 on communities of color. While much of the city’s population has been directed to remain at home during the outbreak as a matter of public health, frontline employees doing work that has been deemed essential must continue to report to work in person and therefore risk exposure to the virus both at work and while commuting. A recent analysis by the City Comptroller’s office found that 75 percent of the city’s frontline workers (defined as working in one of six selected “essential” industries) are people of color.⁷ The across-the-board shortage of personal protective equipment throughout this crisis has also affected many of these workers, potentially making working conditions even more dangerous.

⁴ N.Y.C. Dept. of Health and Mental Hygiene, *Air Pollution and the Health of New Yorkers: The Impact of Fine Particles and Ozone*, (2011), at 24, available at <https://www1.nyc.gov/assets/doh/downloads/pdf/eode/eode-air-quality-impact.pdf>

⁵ Harvard University T.H. Chan School of Public Health, *Linking Air Pollution To Higher Coronavirus Death Rates*, (April 13, 2020) available at <https://www.hsph.harvard.edu/biostatistics/2020/04/linking-air-pollution-to-higher-coronavirus-death-rates/>

⁶ New York City Council, *Growing Food Equity in New York City*, (August 2019) available at <http://council.nyc.gov/data/wp-content/uploads/sites/73/2019/08/growing-food-equity-1.pdf>

⁷ Office of the Comptroller, *New York City’s Frontline Workers* (March 26, 2020) available at <https://comptroller.nyc.gov/reports/new-york-citys-frontline-workers/>



Source: Comptroller's Office analysis of American Community Survey 2014-2018 5-Year Estimates

Cramped quarters at home among low-income communities of color, especially communities of immigrants, may also be a factor in the disparities evident in the virus's impact. According to one recent analysis, among the 25 zip codes with the highest number of COVID-19 cases in the city, 16 of these zip codes had the highest rates of overcrowding.⁸ Multiple people living together in a small space can make it harder for someone exposed to the virus to successfully isolate themselves, which can be especially problematic when the household includes multiple generations, including higher-risk elderly family members. New York City experienced a 17 percent increase in the number of overcrowded housing units in the decade following the

⁸ Janaki Chadha, *New York City's Most Crowded Neighborhoods are Often Hardest Hit by Coronavirus*, Politico, (Apr. 11, 2020) available at <https://www.politico.com/states/new-york/albany/story/2020/04/11/new-york-citys-most-crowded-neighborhoods-are-often-hardest-hit-by-coronavirus-1274875>

2008 financial crisis.⁹ And 15 percent of Black, 24 percent of Asian, and 25 percent of Hispanic New Yorkers live in an overcrowded home compared to just 10 percent of white New Yorkers.¹⁰ People of color are also more likely to live in institutional congregate settings where social distancing and isolation is inherently more challenging. African-American and Hispanic New Yorkers comprise 88 percent of the city’s jail population and 86 percent of the city’s single adult shelter population.¹¹

Other potential factors may be harder to quantify but nonetheless likely also play a role in the outsized impact of COVID-19 on communities of color. Mistrust of government can be an issue in many communities. For instance, one report indicated that some undocumented immigrants in the Bronx declined to take advantage of the limited testing available due to fear that their information would wind up in the hands of federal authorities.¹² Language barriers may also limit many communities’ ability to access vital information about the disease and available resources. Furthermore, many low-income New Yorkers may be reluctant or unable to access quality medical care (both for underlying conditions and during the current outbreak) due to concerns about cost. 22 percent of non-citizen city residents lack health insurance compared to 7 percent of residents overall.¹³

⁹ Office of the Comptroller, *Protecting NYC’s Most Vulnerable Populations During COVID-19* (April 15, 2020) available at <https://comptroller.nyc.gov/reports/protecting-nycs-most-vulnerable-populations-during-covid-19/>

¹⁰ *Id.*

¹¹ N.Y.C. Dept. of Correction, Population Demographics Report – FY20 Q2, available at https://www1.nyc.gov/assets/doc/downloads/pdf/FY20_Q2_Demographics_Report.pdf; N.Y.C. Dept. of Homeless Services, *Data Dashboard Charts FY 2019*, available at <https://www1.nyc.gov/assets/dhs/downloads/pdf/dashboard/FY19-DHS-Data-Dashboard-Charts.pdf>

¹² Kevin Deutsch and Sasha Gonzales, “*The Government Is Not Helping Us*”: Coronavirus Hotline Thwarting Bronx Residents in Need of Testing, Bronx Justice News (Apr. 11, 2020) available at <https://bronxjusticenews.com/the-government-is-not-helping-us-coronavirus-hotline-thwarting-bronx-residents-in-need-of-testing/>

¹³ N.Y.C. Independent Budget Office, *Are NYC Health + Hospitals Facilities Located in Community Districts with the Highest Share of Uninsured New Yorkers?* (July 1, 2019) available at <https://ibo.nyc.ny.us/cgi-park2/2019/07/are-hh-facilities-distributed-in-community-districts-with-the-highest-proportion-of-uninsured/>

City and State Response to Disparate Impacts

On April 8, 2020, the City released racial demographic data that highlighted the impact the virus has had on communities of color.¹⁴ Advocates and elected officials had been calling for such data to be released and for additional resources to be provided for these communities.¹⁵ Once the data was released, Mayor de Blasio announced a four-point plan to address racial disparities, including a \$10 million campaign that would target the 88 zip codes hardest hit by the virus.¹⁶ The plan included the following goals:

- 1) Ensuring that public and independent hospitals have ventilators, personnel, and personal protective equipment (PPE);
- 2) Conducting a \$10 million public awareness campaign that focuses on the 88 zip codes with the highest number of positive cases. This would include TV, radio, digital, and print ads in 15 different languages;
- 3) Strengthening the City's grassroots outreach via robocalls, peer-to-peer texting, and direct outreach to households; and
- 4) Building on 311 to provide tele-health with real-time answers on risk factors, symptoms, and care.¹⁷

During the week of April 27th, the City plans to reach out to 3.4 million New Yorkers by mail in English, Spanish, and Chinese. The City will also conduct 1.1 million bilingual "robocalls" with basic information about resources to address the virus and will use the City's social media to reach people in 24 languages. Additionally, the City is partnering with faith leaders to conduct four tele-town halls and is creating webinars with health officials and commissioners of different agencies to help people receive information directly. The City is also working with community-based health providers to provide tele-health services; as of April 24th,

¹⁴ Office of the Mayor, Press Conference Transcript (April 8, 2020) available at <https://www1.nyc.gov/office-of-the-mayor/news/239-20/transcript-mayor-de-blasio-holds-media-availability-covid-19>

¹⁵ *Id.*

¹⁶ *Id.*; Office of the Mayor, Press Conference Transcript (April 24, 2020) available at <https://www1.nyc.gov/office-of-the-mayor/news/288-20/transcript-mayor-de-blasio-holds-media-availability>.

¹⁷ Office of the Mayor, Press Conference Transcript (April 8, 2020) available at <https://www1.nyc.gov/office-of-the-mayor/news/239-20/transcript-mayor-de-blasio-holds-media-availability-covid-19>; Office of the Mayor, Press Conference Transcript (April 24, 2020) available at <https://www1.nyc.gov/office-of-the-mayor/news/288-20/transcript-mayor-de-blasio-holds-media-availability>

250 community-based clinicians had signed up to get trained in telemedicine. The partnership with community-based clinicians is intended to provide support to individuals with preexisting conditions.¹⁸

The City had previously spent \$8 million on a citywide public health campaign relating to the coronavirus.¹⁹ According to Health Commissioner Oxiris Barbot’s testimony at a March 5th Council oversight hearing on coronavirus preparations, the City had conducted specific outreach to communities of color, particularly to Asian-American communities.²⁰ The City partnered with community-based organizations to disseminate information consistent with the City’s initial policy at the time advising frequent handwashing, limited facial touching, and staying at home when sick.²¹ When asked what was being done to protect high-risk groups, the Commissioner stated, “So the most basic message...is the frequent hand washing, the covering of the mouth and the nose when coughing or sneezing, doing it into your sleeve as opposed to into your hands, and, if you’re feeling symptomatic, to communicate with your doctor. That holds for everybody.” The Commissioner also noted that they were working closely with nursing home populations by providing additional face masks.²² On April 26th, Mayor de Blasio announced the creation of two task forces aimed at informing the City’s response and recovery efforts, including the issue of disparate impacts: the Fair Recovery Task Force and the Administration Task Force on Racial Inclusion and Equity.²³

¹⁸ Office of the Mayor, Press Conference Transcript (April 24, 2020) available at <https://www1.nyc.gov/office-of-the-mayor/news/288-20/transcript-mayor-de-blasio-holds-media-availability>

¹⁹ *Id.*

²⁰ Testimony of Commissioner Oxiris Barbot before the Council Health and Hospitals committees, March 5, 2020

²¹ *Id.*

²² *Id.*

²³ Office of the Mayor, Press Release - Mayor de Blasio Announces Fair Recovery Taskforce (April 26, 2020) available at <https://www1.nyc.gov/office-of-the-mayor/news/290-20/mayor-de-blasio-fair-recovery-taskforce>

Access to Testing

The availability of coronavirus testing has been an issue from the beginning of this outbreak. Once labs in New York were authorized to produce their own tests, the number of available tests greatly increased, but there were issues with the rollout of testing.²⁴ During the week of March 19th, New York State opened a drive-through test center on Staten Island.²⁵ These tests were reserved for those with underlying health conditions and people over the age of 65. This approach was immediately criticized because only individuals *in* vehicles were able to get tested, while those without vehicles were turned away or told they would need to arrive by taxi or for-hire vehicle.²⁶

On March 19th, the City announced additional testing sites at 10 acute care hospitals, seven Gotham Health community-based health centers, and four drive-through testing sites (in addition to the State-operated testing site on Staten Island).²⁷ However, in a swift reversal announced on March 20th, the City Department of Health and Mental Hygiene (DOHMH) directed healthcare facilities to immediately stop testing non-hospitalized patients for COVID-19 and also advised providers and hospitals not to test asymptomatic people, including healthcare workers and first responders.²⁸ This reversal was due to the limited availability of personal

²⁴ U.S. Food and Drug Administration, Press Release (March 13, 2020) available at <https://www.fda.gov/news-events/press-announcements/coronavirus-covid-19-update-fda-gives-flexibility-new-york-state-department-health-fda-issues>

²⁵ Spectrum News-NY1, *City's First Coronavirus Drive-Thru Test Site Opens on Staten Island*, (March 19, 2020) available at <https://www.ny1.com/nyc/all-boroughs/news/2020/03/19/first-nyc-drive-thru-coronavirus-testing-facility-opens-on-staten-island>

²⁶ Julianne Cuba, *The City to Open Drive Through Testing Sites- But What About Those without a Car?* Streetsblog, (March 18, 2020) available at <https://nyc.streetsblog.org/2020/03/18/city-to-open-drive-through-testing-sites-but-what-about-those-without-a-car/>

²⁷ Office of the Mayor, Press Release - Mayor de Blasio and NYC Health and Hospitals Expand Appointment Only Covid-19 Testing Capacity (March 19, 2020) available at <https://www1.nyc.gov/office-of-the-mayor/news/166-20/mayor-de-blasio-nyc-health-hospitals-expand-appointment-only-covid-19-testing-capacity>.

²⁸ Office of the Mayor, Press Release - Mayor de Blasio Issues New Guidance to New Yorkers (March 20, 2020) available at <https://www1.nyc.gov/office-of-the-mayor/news/173-20/mayor-de-blasio-issues-new-guidance-new-yorkers>

protective equipment.²⁹ The City's decision created confusion for both members of the public, who tried to schedule appointments, and hospital officials.³⁰ On March 22nd, the Mayor clarified that 10 sites would be open but only to individuals who required hospitalization; and that Jacobi and Coney Island drive-through testing would no longer be available, with testing instead consolidated into the emergency departments.³¹

Despite the Bronx being particularly hard-hit by the virus, residents of the South Bronx were struggling to receive tests.³² Reports indicated that people were turned away by the State-run hotline because they were dismissed for not being sick enough.³³ Other families struggled with the "bureaucratic hoops" required to access tests.³⁴

The *New York Post* recently reported that residents of Staten Island had a higher rate of testing than any other borough.³⁵ This is due in part to the fact that the borough has a large number of first responders, such as nurses, firefighters, and police officers. DOHMH responded that the guidance to clinicians was to preserve tests for the most vulnerable populations, but that testing decisions were ultimately up to the physician.³⁶

In response to the testing availability issue, on April 9th, Governor Cuomo announced that additional drive-through mobile testing facilities would open in Brooklyn and Queens and three walk-in facilities at health care centers would open in the South Bronx; Jamaica, Queens; and

²⁹ *Id.*

³⁰ Rose Adams, *City Abruptly Closes Coronavirus Testing Centers, Confusing Locals and Officials*, Brooklyn Paper, (March 24, 2020) available at <https://www.brooklynpaper.com/city-abruptly-closes-coronavirus-testing-centers-confusing-locals-and-officials/>

³¹ Office of the Mayor, Press Conference - Mayor de Blasio, NYPD Prepare to Enforce New Guidelines (March 22, 2020) available at <https://www1.nyc.gov/office-of-the-mayor/news/178-20/mayor-de-blasio-nypd-prepare-enforce-new-guidelines>

³² Deutsch and Gonzales, *supra* note 12

³³ *Id.*

³⁴ *Id.*

³⁵ Nolan Hicks, *Most NYC Coronavirus testing done in whitest and wealthiest Zip codes*, NY Post, (April 16,2020) available at <https://nypost.com/2020/04/16/most-nyc-coronavirus-testing-done-in-wealthiest-zip-codes-analysis/>

³⁶ *Id.*

Brownsville, Brooklyn.³⁷ Similarly, Mayor de Blasio announced that three walk-in test centers would open for high-risk patients in East New York, Brooklyn, Morrisania in the Bronx, and Staten Island through NYC Health + Hospitals.³⁸ He also announced that two additional sites would open on April 20th at NYC Health + Hospitals Queens and Sydenham in Manhattan.³⁹ At these locations, priority would be given to people over the age of 65 and those with preexisting conditions.⁴⁰ These five sites would be able to conduct 2,400 tests per week.⁴¹

While testing has been made available for the more vulnerable populations, the City has advised individuals with mild symptoms to “self- isolate” in their homes.⁴² This concept has been criticized by many advocates and public officials due to the often crowded and multigenerational homes found in New York.⁴³ On April 16th, Mayor de Blasio announced that 11,000 hotel rooms would be made available for individuals who tested positive to isolate beginning on April 22nd.⁴⁴ While many criticized the delayed response, Mayor de Blasio defended the timing, indicating that the City had previously assumed that it was going to need the hotel space for additional hospital capacity.⁴⁵ Also, prior to the April 16th announcement, the City had started making hotel rooms available to individuals referred by homeless shelters or by

³⁷ Office of the Governor, Press Release - Amid Ongoing Covid-19 Pandemic, Governor Cuomo Announces Five New Testing Facilities (April 9, 2020) available at <https://www.governor.ny.gov/news/amid-ongoing-covid-19-pandemic-governor-cuomo-announces-five-new-covid-19-testing-facilities>

³⁸ N.Y.C. Health + Hospitals, Press Release - Mayor de Blasio Expands Testing to Communities Hardest Hit by Covid-19, (April 17, 2020) available at <https://www.nychealthandhospitals.org/pressrelease/nyc-health-hospitals-opens-5-new-covid-19-testing-sites/>

³⁹ *Id.*

⁴⁰ Press Release NYC Mayor: Mayor de Blasio Expands Testing to Communities Hardest Hit by Covid-19, available at <https://www1.nyc.gov/office-of-the-mayor/news/265-20/mayor-de-blasio-expands-testing-communities-hardest-hit-covid-19>

⁴¹ *Id.*

⁴² Chadha, *supra* note 8

⁴³ Carl Minzer, *Quarantine the Sick in New York's Hotels*, NY Times, (March 30, 2020) available at <https://www.nytimes.com/2020/03/30/opinion/coronavirus-new-york-quarantine.html>

⁴⁴ Office of the Mayor, Press Conference Transcript, (April 16, 2020) available at <https://www1.nyc.gov/office-of-the-mayor/news/260-20/transcript-mayor-de-blasio-holds-media-availability-covid-19>

⁴⁵ *Id.*

hospitals.⁴⁶ *The City* reported that this system required too many sick individuals to first enter a hospital, creating an additional burden for the already-burdened hospital system. The hospital staff have to confirm whether or not a person was registered with the Department of Homeless Services (DHS) and also liaise with the Office of Emergency Management (OEM). Because of this system, sick individuals have faced long waits for transportation to these hotels.⁴⁷ Despite these weaknesses in approach, Mayor de Blasio noted that the additional hotel capacity announced on April 16th would similarly be administered through hospital referrals.⁴⁸

Parallel Focus on Public Housing

Both the Mayor and the Governor have also targeted specific efforts to protect residents in public housing. On April 20th, Governor Cuomo announced that additional resources would be distributed to public housing residents, including masks and hand sanitizer.⁴⁹ Also, the State is partnering with Ready Responders to bring healthcare services, including diagnostic testing, to residents in public housing. The initial pilot began the week of April 20th at Highbridge Houses, Edenwald Houses, Washington Houses, and Andrew Jackson Houses in the Bronx; Queensbridge Houses and Brevoort Houses in Queens; and Red Fern Houses and Hammel Houses in Brooklyn.⁵⁰ During the week of April 27,th Mayor de Blasio announced that additional testing sites would open at Jonathan Williams Houses in Brooklyn, Woodside Houses in Queens, and Saint Nicholas Houses in Harlem. He declared that the City would also distribute face

⁴⁶ Claudia Irizarry Aponte, *Isolation Hotel Referrals Add to Strains of Overwhelmed Hospitals*, THE CITY, (April 16, 2020) available at <https://thecity.nyc/2020/04/isolation-hotel-referrals-add-to-strains-of-slammed-ers.html>

⁴⁷ *Id.*

⁴⁸ Greg B. Smith, *City Shuttles Homeless and Other Virus Patients to Hotels*, THE CITY, (March 25, 2020) available at <https://thecity.nyc/2020/03/nyc-sends-homeless-other-coronavirus-patients-to-hotels.html>

⁴⁹ Office of the Governor, Press Conference - Governor Calls for Hazard Pay, (April 20, 2020) available at <https://www.governor.ny.gov/news/video-audio-photos-and-rush-transcript-amid-ongoing-covid-19-pandemic-governor-cuomo-calls>.

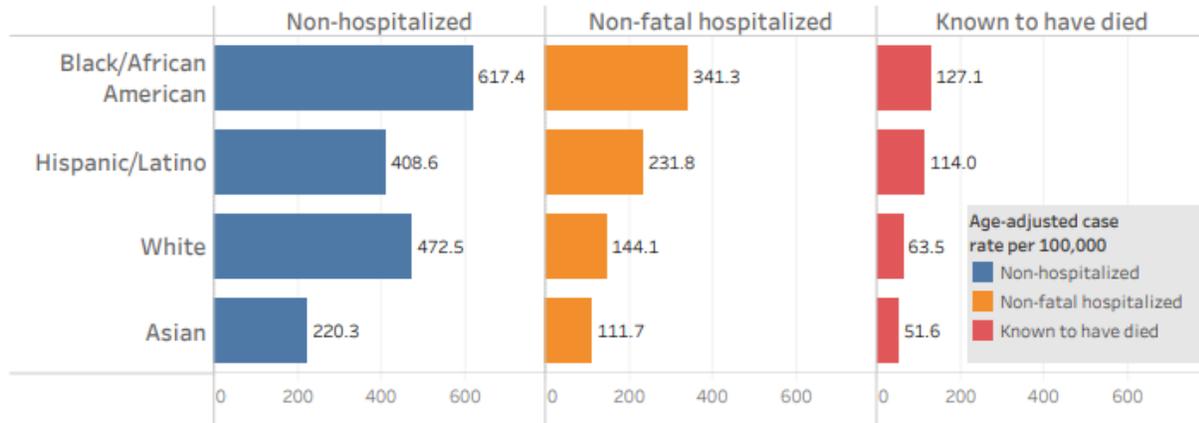
⁵⁰ *Id.*

coverings and gloves to all residents, expand door-to-door meal distribution, and conduct live phone calls to all seniors and vulnerable residents to check on health and basic necessities.⁵¹

⁵¹ Office of the Mayor, Press Release - Mayor de Blasio Announces New Plan to Combat Covid-19 at NYCHA, (April 22, 2020), available at <https://www1.nyc.gov/office-of-the-mayor/news/279-20/mayor-de-blasio-new-plan-combat-covid-19-nycha>

Appendix A

Age-adjusted rates of lab confirmed COVID-19 non hospitalized cases, estimated non-fatal hospitalized cases, and persons known to have died per 100,000 by race/ethnicity group



RACIAL DEMOGRAPHIC DATA COMPLETE* FOR
 40% of non-hospitalized cases, 79% of non-fatal hospitalizations, 92% of persons known to have died

Source: NYC Dept. of Health and Mental Hygiene data, as of April 22, 2020