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Massachusetts in the Dark on Demographic Impact of Outbreak, Say Public Health and Civil Rights Leaders
As Evidence of Inequities Pile Up, Groups Call on Baker Administration to Take Swift Action

Boston, MA - Today, public health and civil rights organizations called on the Baker Administration to move quickly to collect and release demographic data about COVID-19 testing, confirmed cases, and deaths, including race, ethnicity, socio-economic status, language, disability, age, and county of residence.

The groups pointed to data being released in other parts of the country such as Michigan, Florida, Louisiana, Milwaukee, Chicago, and the District of Columbia. The data collected and released so far strongly suggest that the pandemic is disproportionately impacting Black and Latinx residents. Boston has begun releasing data which suggests that infection rates are higher in neighborhoods with a large proportion of the city’s residents of color and low-income residents.

“As a state, Massachusetts is stumbling in the dark right now. Without good data on who is being most impacted, our response will be both ineffective and irresponsible, and it will predictably serve to deepen the inequities that existed across Massachusetts before this outbreak,” said Carlene Pavlos, Executive Director of the Massachusetts Public Health Association. “Collecting this data is crucial to inform us about who is getting sick and who is dying, so that we can develop effective prevention strategies and deploy limited health resources in ways that will save the most lives.”

The groups cited the higher prevalence of underlying chronic diseases among people of color, including diabetes, hypertension, and respiratory illness – conditions stemming from and exacerbated by poverty, racism, environmental pollution, and limited access to affordable healthy food, among other challenges disproportionately borne by communities of color.

“The NAACP has sounded the alarm across the country regarding the racial equity implications of the COVID-19 pandemic. The NAACP, New England Area Conference, is demanding that states collect and release racial and ethnic data, and Massachusetts should lead the way,” said Juan Cofield, President of the NAACP, New England Area Conference. “The Commonwealth cannot possibly address this public health crisis without considering racial and ethnic impacts of this virus, and the community cannot work on targeted solutions if we do not have this data. As a civil rights organization we have witnessed what happens when Black and Brown communities are an afterthought in times of crisis. That cannot be the case this time.”

While some states are releasing data on race and ethnicity, no jurisdiction appears to be releasing data on disability, language, or socio-economic status – factors for which wide inequities in health outcomes are observed for other health conditions, and factors which may put residents at greater risk now.
“Data collection regarding the impact of the virus on people with disabilities is essential for fair decision-making during this crisis,” said Dennis Heaphy, Policy Advocate with the Disability Policy Consortium. “Nationwide persons with disabilities are frightened of what the Office Of Civil Rights calls "ruthless utilitarianism" that can lead to rationing and denial of lifesaving care solely based on disability status. People like myself with disabilities are at high risk of contracting COVID 19. The specter of contracting the virus should not be compounded by fear of being denied care. It is imperative that MassHealth require healthcare providers to enact the triage guidelines recently submitted to Gov. Baker by the Center for Public Representation.”

The groups cited examples from other states, including:

- The Michigan Public Health Department has reported that African American make up 33% of all confirmed cases and 41% of deaths, yet they represent only 14% of the state population. Detroit, where the Black population is 78%, contains 7% of the state population but represents 29% of Michigan’s COVID-19 cases.

- In Illinois, Black residents account for 30% of the confirmed COVID-19 cases and 42% of deaths, but are only 15% of the state population. The Illinois Public Health Department reports that 68% of people who died from COVID-19 in Chicago were Black, but comprised 30% of the city’s population. 81% of Black patients who died from COVID-19 had comorbidities such as hypertension, blood pressure, or both.

- In Orleans Parish, Louisiana, where 60% of the population is Black, the infection rate is higher than that of New York City, Los Angeles, and Miami combined.

- Although racial data is not being reported in New York City, available data demonstrate that the highest concentrations of infections are within low-income neighborhoods with large immigrant populations. A surge in flu-related emergency room visits occurred in March among residents of neighborhoods where the typical household income in less than the city median of $60,000.

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