

Your Benefits Administration Department April Wellness Tip

April is **National Minority Health Month** and the U.S Health & Human Services (HHS) Department Office of Minority Health (OMH) announces the theme for the month, #VaccineReady.



#VaccineReady | April 2021

This is an important focus particularly due to "the disproportionate impact the COVID-19 pandemic is having on racial and ethnic minority and American Indian and Alaska Native communities, underscoring the need for these vulnerable communities to get vaccinated as more vaccines become available. COVID-19 vaccination is an important tool to help us get back to normal, and to prevent the spread of COVID-19 to bring this pandemic to an end."

The HSS Department supports this **#VaccineReady** focus they hope will empower communities to:

- Get the facts about COVID-19 vaccines.
- Share accurate vaccine information.
- Participate in clinical trials.
- Get vaccinated when the time comes.
- Practice COVID-19 safety measures.

As more vaccines become available, the OMH reminds us all there are steps everyone can take to protect themselves until they can get vaccinated. Be sure to: Wear a mask to protect yourself and others and stop the spread of COVID-19.

- Wash your hands often with soap and water for at least 20 seconds.
- Stay at least 6 feet (about 2 arm lengths) from others who don't live with you.
- Avoid crowds. The more people you are in contact with, the more likely you are to be exposed to COVID-19.







You can keep up to date on National Minority Health Month news and activities by $\underline{\text{signing up}}$ for OMH email updates or by following them on $\underline{\text{Twitter}}$, $\underline{\text{Facebook}}$, and $\underline{\text{Instagram}}$.

Below the **Centers for Disease Control** point out "some of the many inequities in social determinants of health that put racial and ethnic minority groups at increased risk of getting sick and dying from COVID-19."

Factors that contribute to increased risk according to the CDC:



- **Discrimination**: Unfortunately, discrimination exists in systems meant to protect well-being or health. Examples of such systems include health care, housing, education, criminal justice, and finance. Discrimination, which includes racism, can lead to chronic and toxic stress and shapes social and economic factors that put some people from racial and ethnic minority groups at increased risk for COVID-19.[5], [7], [8], [9]
- **Healthcare access and utilization**: People from some racial and ethnic minority groups are more likely to be uninsured than non-Hispanic whites. [10] Healthcare access can also be limited for these groups by many other factors, such as lack of transportation, child care, or ability to take time off of work; communication and language barriers; cultural differences between patients and providers; and historical and current discrimination in healthcare systems. [11] Some people from racial and ethnic minority groups may hesitate to seek care because they distrust the government and healthcare systems responsible for inequities in treatment [12] and historical events such as the Tuskegee Study of Untreated Syphilis in the African American Male and sterilization without people's permission. [13], [14], [15], [16]
- Occupation: People from some racial and ethnic minority groups are
 disproportionately represented in essential work settings such as healthcare
 facilities, farms, factories, grocery stores, and public transportation. [17] Some
 people who work in these settings have more chances to be exposed to the virus
 that causes COVID-19 due to several factors, such as close contact with the public
 or other workers, not being able to work from home, and not having paid sick
 days. [18]
- **Educational, income, and wealth gaps**: Inequities in access to high-quality education for some racial and ethnic minority groups can lead to lower high school completion rates and barriers to college entrance. This may limit future job options and lead to lower paying or less stable jobs. [19] People with limited job options likely have less flexibility to leave jobs that may put them at a higher





risk of exposure to the virus that causes COVID-19. People in these situations often cannot afford to miss work, even if they're sick, because they do not have enough money saved up for essential items like food and other important living needs.

• **Housing**: Some people from racial and ethnic minority groups live in crowded conditions that make it more challenging to follow prevention strategies. In some cultures, it is common for family members of many generations to live in one household. In addition, growing and disproportionate unemployment rates for some racial and ethnic minority groups during the COVID-19 pandemic[19] may lead to greater risk of eviction and homelessness or sharing of housing.

These factors and others are associated with more COVID-19 cases, hospitalizations, and deaths in areas where racial and ethnic minority groups live, learn, work, play, and worship.[5],[10], [20], [21] They have also contributed to higher rates of some medical conditions that increase one's risk of severe illness from COVID-19. In addition, community strategies to slow the spread of COVID-19 may cause unintentional harm, such as lost wages, reduced access to services, and increased stress, for some racial and ethnic minority groups. [22]

What We Can Do According to the CDC

The COVID-19 pandemic may change some of the ways we connect and support each other. As individuals and communities respond to COVID-19 recommendations and circumstances (e.g., school closures, workplace closures, social distancing), there are often unintended negative impacts on emotional well-being such as loss of social connectedness and support. Shared faith, family, and cultural bonds are common sources of social support. Finding ways to maintain support and connection, even when physically apart, can empower and encourage individuals and communities to protect themselves, care for those who become sick, keep kids healthy, and better cope with stress.

Community- and faith-based organizations, employers, healthcare systems and providers, public health agencies, policy makers, and others all have a part in helping to promote fair access to health. To prevent the spread of COVID-19, we must work together to ensure that people have resources to maintain and manage their physical and mental health, including easy access to information, affordable testing, and medical and mental health care. We need programs and practices that fit the communities where racial and minority groups live, learn, work, play, and worship.





Click on the CDC link for more information: https://www.cdc.gov/coronavirus/2019-ncov/community/health-equity/race-ethnicity.html.

Additional Resources:



The Office of Minority Health Resource Center is a nationwide service of the Office of Minority Health that provides minority health literature, research and referrals for consumers, community organizations and health professionals. The Resource Center offers a variety of information resources, including access to online document collections, database and funding searches, and customized responses to requests for information.

The Resource Center is available Monday through Friday 9am-5pm EST.

Call Toll Free: 1-800-444-6472 Email: <u>info@minorityhealth.hhs.gov</u>

Knowledge Center

The Knowledge Center Library is an online collection of more than 60,000 documents, books, journal articles and media related to the health status of racial and ethnic minority populations. The library collection also includes sources of consumer health material in more than 40 languages. Click on this link for their catalogue: https://www.minorityhealth.hhs.gov/.

Lastly, this focus on being vaccine ready is a call to all of us. Be sure to check The Journey Back to the Workforce portal for the COVID-19 FAQ decks, particularly the most recent FAQ Deck 20 to learn about the current phases of PA and NJ vaccine eligibilities. You can find who is currently eligible to make an appointment for a COVID-19 vaccine in the Commonwealth of Pennsylvania on slide 19 and in the State of New Jersey on slide 2.

We hope you find this information helpful. Stay well.

