



# COVID 19


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## Arizona Hispanic / LatinX Virtual Town Hall Meeting

Sponsored by Mayo Clinic  
and in partnership with  
Magellan Health  
Equality Health

Arizona Hispanic Chamber of Commerce  
University of Arizona, Phoenix  
University of Arizona, Tucson  
National Hispanic Medical Association  
Valle del Sol  
Mary Rabago Productions

May 19, 2020





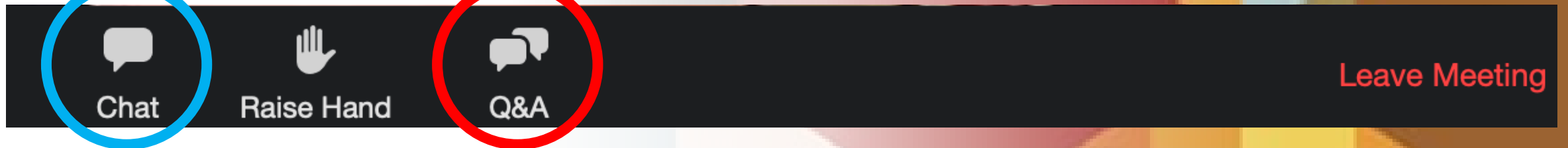
Dr. Keith J. Cannon

Consultant,  
Division of Hospital Internal Medicine

Mayo Clinic

To ask a Question

Chat Feature







# Mary Rabago


Speaker / Entrepreneur /  
Journalist

Mary Rabago Productions



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Join key leaders in healthcare and community leaders for a candid discussion that highlights the underlying conditions that put our communities at great risk to health and well-being.



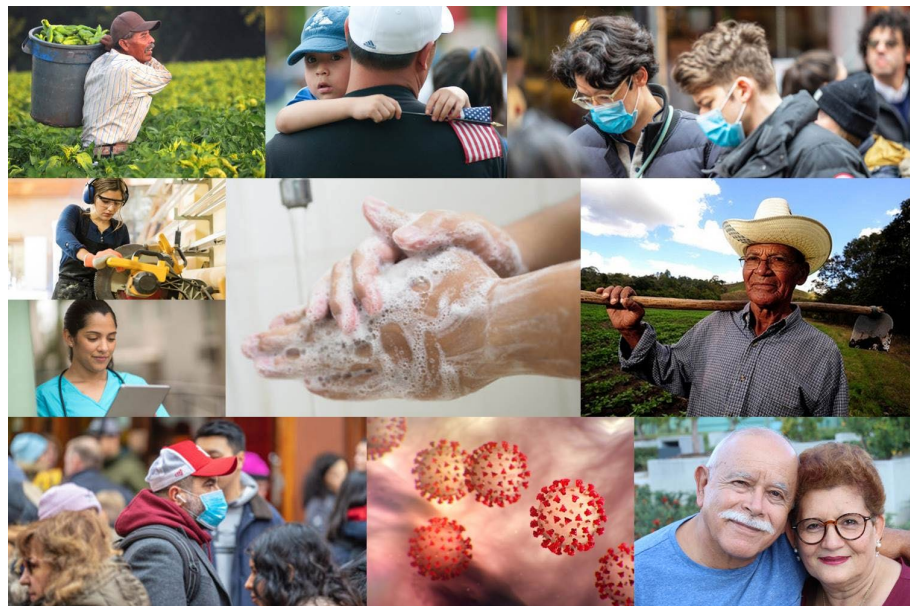
Learn about the direct impact of  
COVID-19 on the Hispanic &  
LatinX community, ways to  
lessen the impact of disease, and  
how we as a community can  
come together for a call to  
action.



Dr. Judith Flores

Chairwoman

National Hispanic Medical  
Association (NHMA)



# National Impact of Coronavirus: **Latinos**

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JUDITH FLORES MD FAAP, CHCQM

BOARD CHAIR , NATIONAL HISPANIC MEDICAL ASSOCIATION

CHIEF OF AMBULATORY CARE, HEALTH + HOSPITALS NYC/CONEY ISLAND HOSPITAL





Latino, Hispanic residents make up largest percentage of coronavirus cases in Clark County  
by Tiffany Lane, Thursday, May 14th 2020.

*The health district says Hispanics make up 27 percent of the total positive cases in the county*



## CORONAVIRUS Hispanic Community in NYC 'Disproportionately' Impacted by COVID-19: Officials

Overall, data suggests that minorities, particularly the African American and Latino communities, are disproportionately affected by the virus

By Jennifer Vazquez • Published April 8, 2020 •  
Updated on May 6, 2020 at 2:47 pm



Real Possibilities

## Blacks, Hispanics Hit Harder by the Coronavirus, Early U.S. Data Show

Chronic health conditions and social factors are to blame, experts say  
by Rachel Nania, [AARP](#), Updated May 8, 2020

## The New York Times

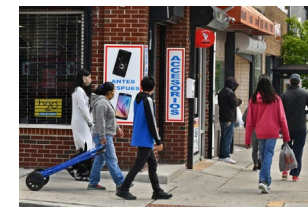
For Latinos and Covid-19, Doctors Are Seeing an 'Alarming' Disparity  
The outsized infection rate among Hispanics in some states could hobble efforts to quash the spread of Covid-19, prompting states like Oregon to step up testing and take emergency measures.

May 7, 2020

By MIRIAM JORDAN and  
RICHARD A. OPPEL JR.



Latinos disproportionately hurt by coronavirus in Maryland, Baltimore and among Johns Hopkins patients  
Thalia Juarez  
By THALIA JUAREZ  
BALTIMORE SUN |



MAY 12, 2020 | 1:05 PM



## The impact of the coronavirus pandemic on Latinos Wednesday, May 13, 2020

COVID-19 has hit minority communities especially hard. Latinos are also being impacted by the collapsing economy and the "types" of businesses that are closing. Horizonte host Jose Cardenas talked to Gilberto Lopez, from ASU's school of trans-border studies, about the impact of COVID-19 on the Latino community.

# Covid-19 Cases in the U.S and Latinos

- Total US Cases: 1,467,065

## Number of Cases by AGE

0-17	18-44	45-64	65-74	75+	
35,141	438,069	400,556	120,890	142,742	

## Percent cases by RACE\*

AI/AN	Asian	Black/AA	Multiple/other	NH/PI	White
1.2	4.7	27.0	14.2	0.3	52.5

## Percent cases by Ethnicity\*\*

Hispanic/Latino	Non-Hispanic/Latino
28.4	71.6

# COVID-19 Deaths in the US and Latinos

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On May 13, 2020, CDC reports on available racial/ethnic data on provisional death counts for COVID19.

The current Latino population in US is 18.3%.

The CDC reports that 16.6% of U.S. COVID-19 deaths are among Latinos.

However, when you look at comparable geographic locations with large populations of Latinos, the Latino COVID -19 death rate is much higher on average 26. 8%.

# Distribution of deaths involving coronavirus disease 2019 (COVID-19) by age and by race and Hispanic origin group, U. S. \*

Age group	Total COVID-19 Deaths	Non-Hispanic White	Non-Hispanic Black or African American	Non-Hispanic American Indian or Alaska Native <sup>2</sup>	Non-Hispanic Asian <sup>3</sup>	Non-Hispanic Native Hawaiian and Other Pacific Islander <sup>4</sup>	Non-Hispanic More than One Race	Hispanic or Latino	Unknown <sup>4</sup>
All Ages	54,861	28,701	12,312	234	3,164	41	139	9,105	1,165
Under 1 year	4	2	0	0	0	0	0	2	0
1–4 years	2	1	1	0	0	0	0	0	0
5–14 years	6	1	4	0	0	0	0	0	1
15–24 years	59	15	17	0	2	0	1	23	1
25–34 years	388	64	133	8	22	3	4	146	8
35–44 years	973	152	312	15	45	0	3	426	20
45–54 years	2,772	625	875	27	188	5	11	963	78
55–64 years	6,725	2,201	2,141	48	490	6	22	1,617	200
65–74 years	11,524	4,996	3,307	60	752	15	31	2,041	322
75–84 years	14,930	8,274	3,257	44	807	8	34	2,186	320
85 years and over	17,478	12,370	2,265	32	858	4	33	1,701	215

\* As of May 9, 2020. Numbers do not reflect all the deaths since only single ethnicity Latino is reported, not all states reporting racial/ethnicity data, time lag in death reports.

[https://www.cdc.gov/nchs/nvss/vsrr/covid\\_weekly/#StateCountyData](https://www.cdc.gov/nchs/nvss/vsrr/covid_weekly/#StateCountyData)



# Why are Latinos disproportionately impacted by COVID19?



## Employment

Essential workforce- higher risk of exposure (hospitals, transit systems)

Service industries – loss of jobs (restaurants, hotels )

Agricultural industry



## Socio -Economic inequities

Low wages

Less savings

Higher poverty rates

Food insecurity



## Health Vulnerabilities

Loss/lack of health insurance

Less healthcare access

High incidence of Chronic diseases



## Undocumented Immigrants

Fear of accessing care

No unemployment aid

No stimulus check



Dr. Cecilia Rosales

Associate Dean  
Professor & Chair  
Division of Public Health Practice  
& Translational Research

University of Arizona, Phoenix



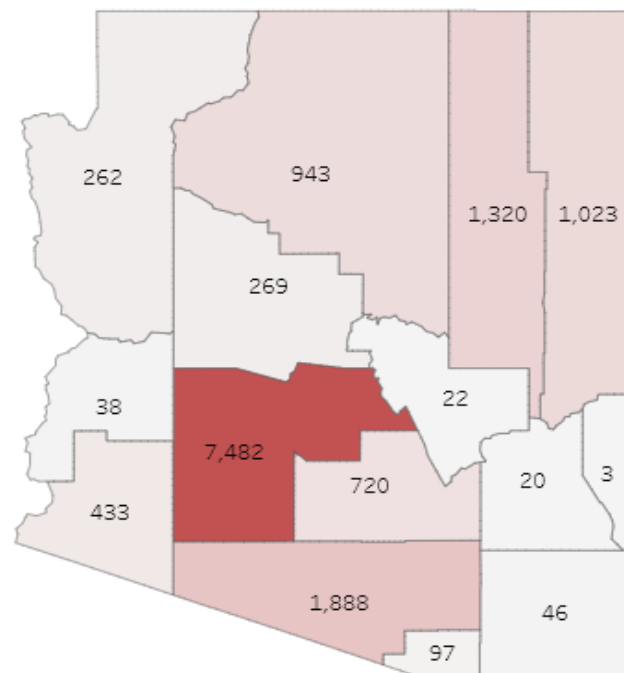
# Arizona

Number of Cases

14,566

Select a county to filter the other graphs.

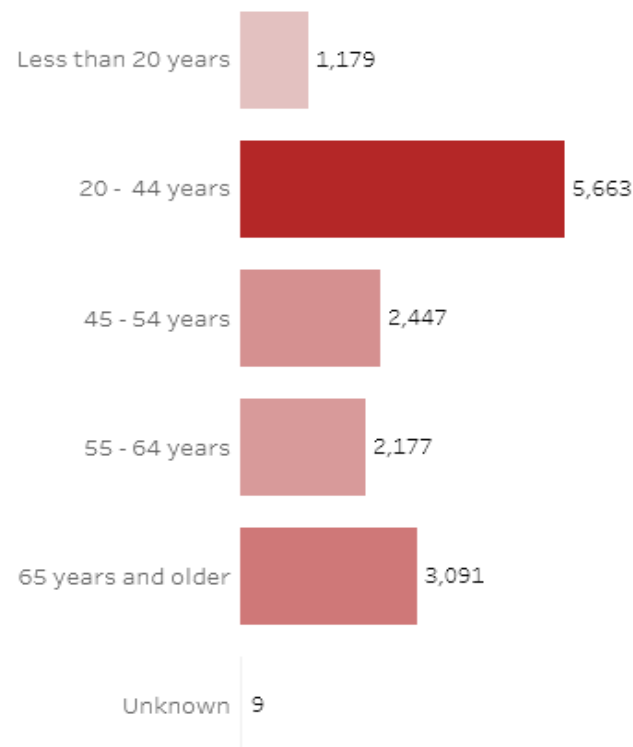
Graphs will not be displayed for counties with fewer than 10 cases.



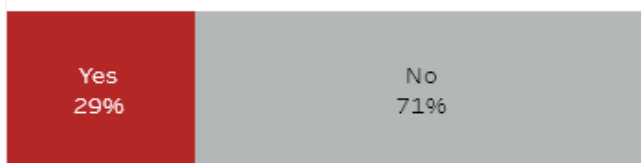
COVID-19 Cases by Gender



COVID-19 Cases by Age Group



Chronic medical condition

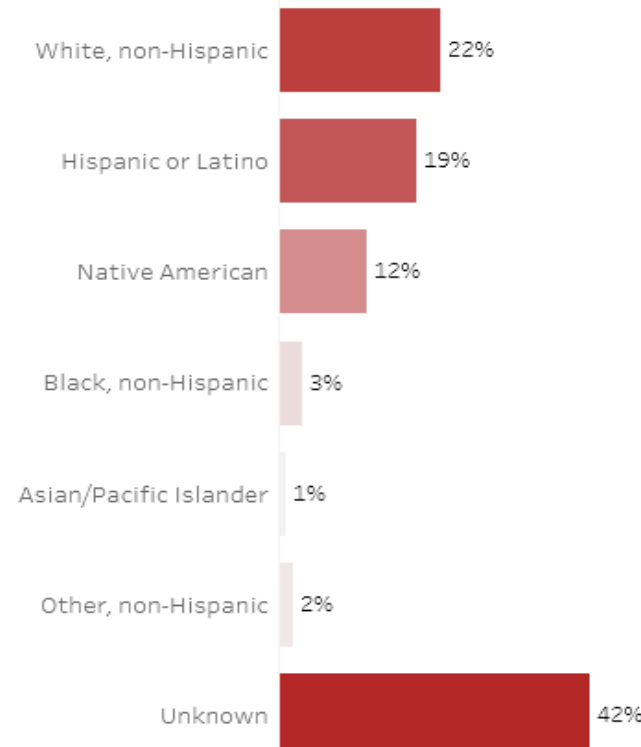


Chronic medical conditions include diabetes, cardiac disease, hypertension, chronic pulmonary disease, chronic kidney disease, or chronic liver disease.

Hover over the icon to get more information on the data in this dashboard.



COVID-19 Cases by Race/Ethnicity



High-risk

(65+ years OR 1+ chronic medical condition)



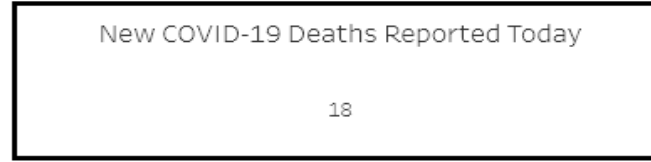
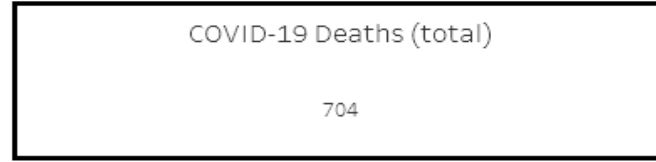
Date updated: 5/19/2020

# Demographics



# COVID-19 Deaths

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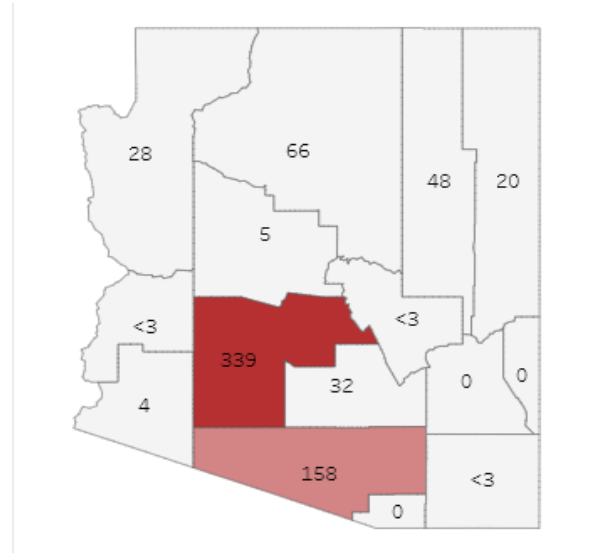


Hover over the icon to get more information on the data in this dashboard.

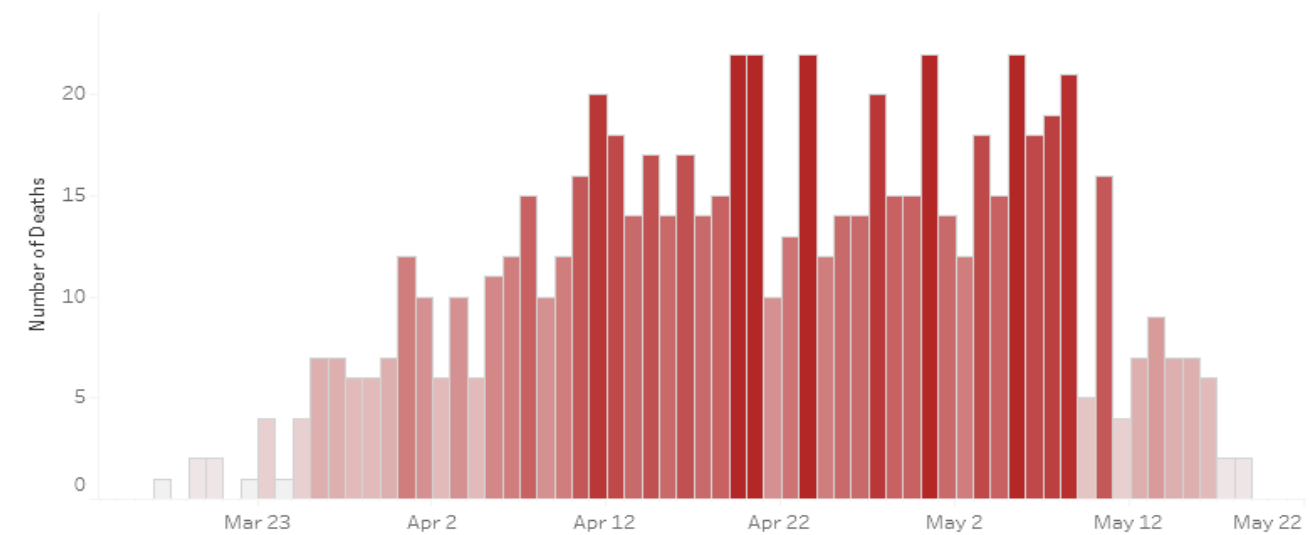


## COVID-19 Deaths by County

Data will not be shown for counties with fewer than three deaths.



## COVID-19 Deaths by Date of Death

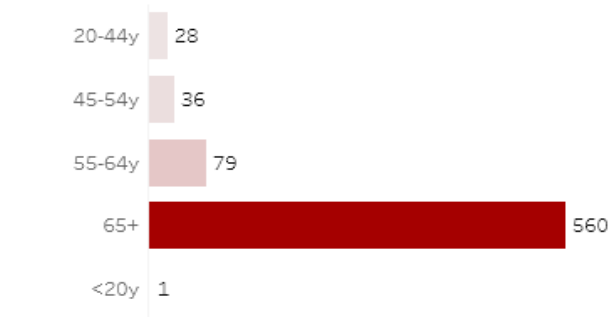


Recent deaths may not be reported yet.

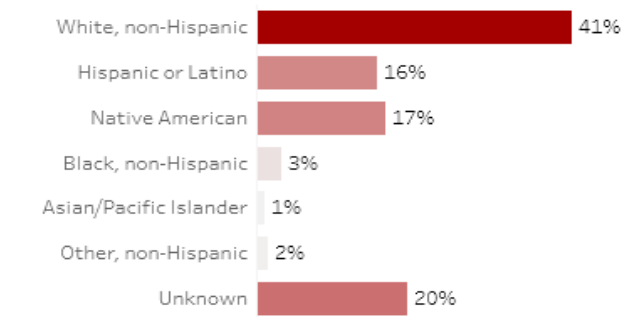
## COVID-19 Deaths by Gender



## COVID-19 Deaths by Age Group



## COVID-19 Deaths by Race/Ethnicity



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# Hospitalization

Hover over the icon to get more information on the data in this dashboard.

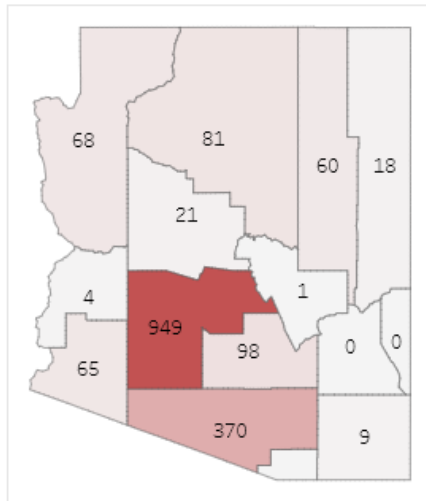


Number of Cases Hospitalized

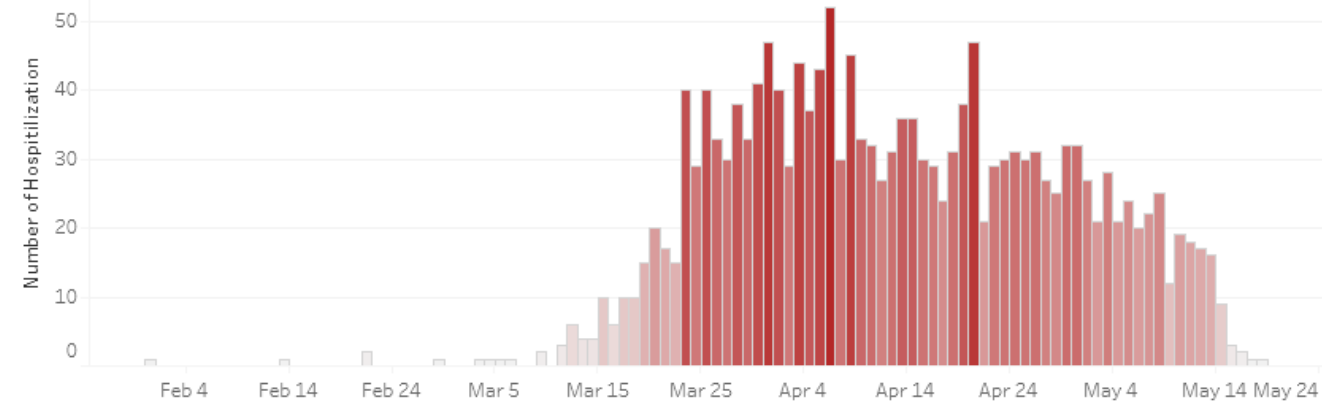
1,746

Percent of Cases Hospitalized

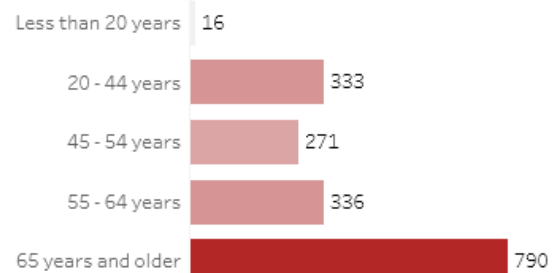
12%



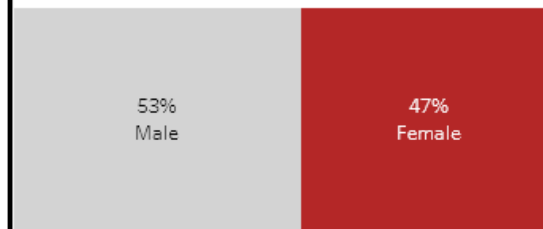
Number of COVID-19 Cases that are Hospitalized by Date of Hospitalization



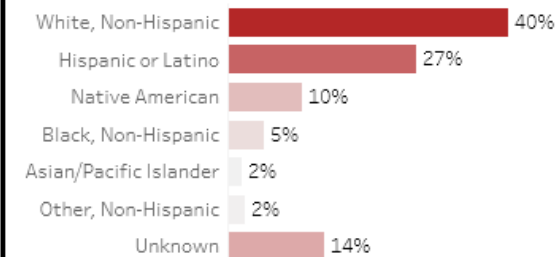
COVID-19 Hospitalized Cases by Age Group



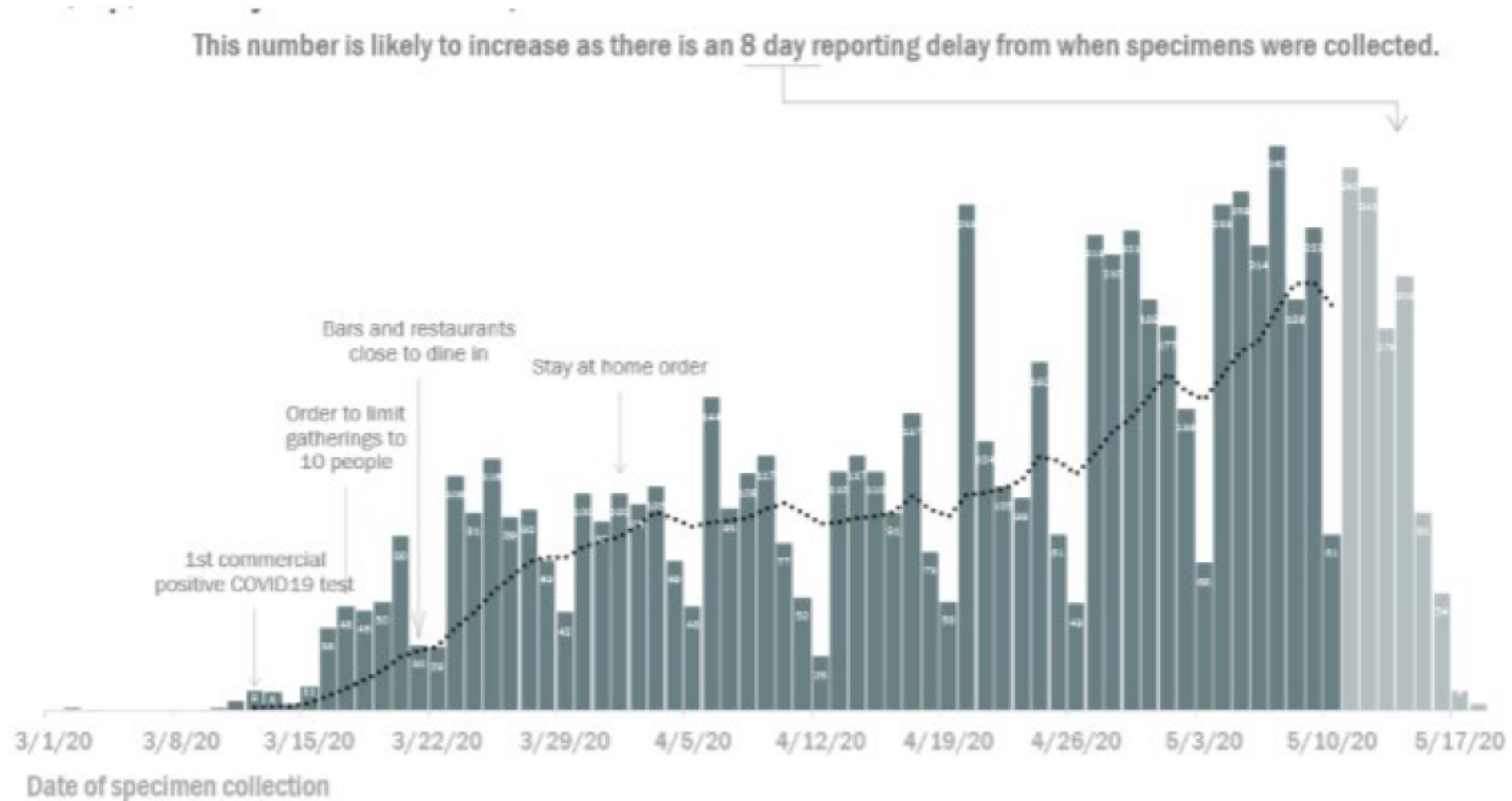
COVID-19 Hospitalized Cases by Gender



COVID-19 Hospitalized Cases by Race/Ethnicity

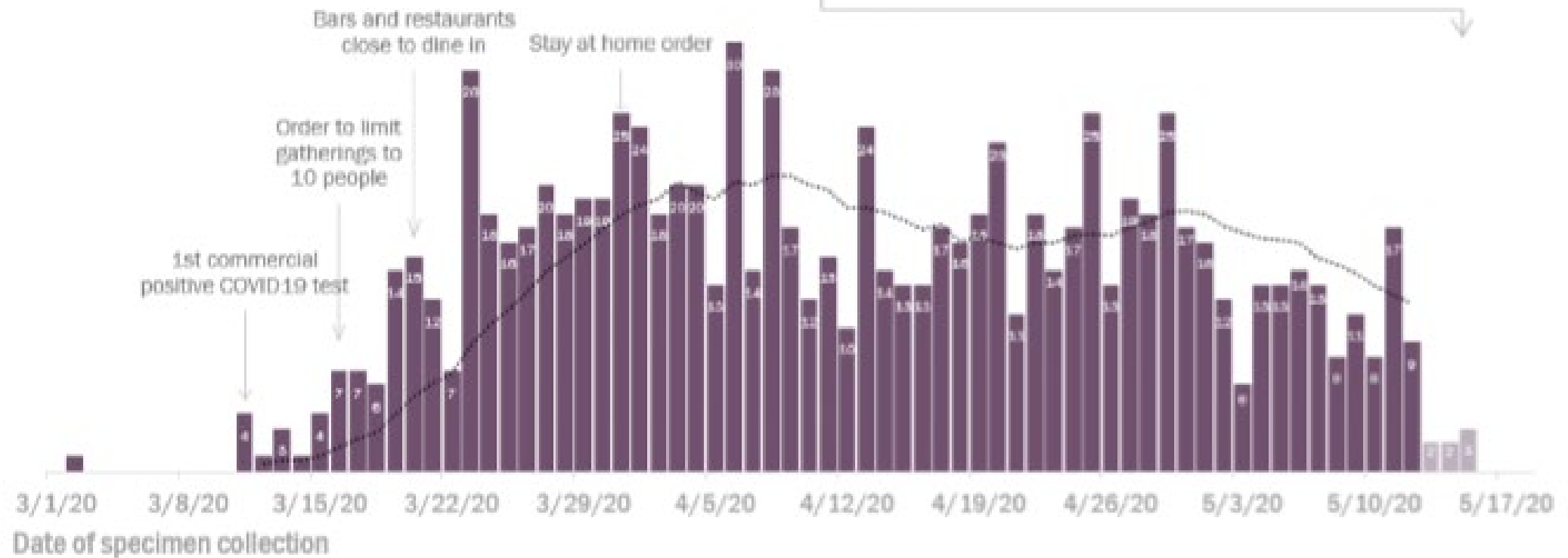


# Maricopa County














This number is likely to increase as there is a 6 day reporting delay from when specimens were collected.





## These numbers present a more severe picture than what is actually happening in the community.

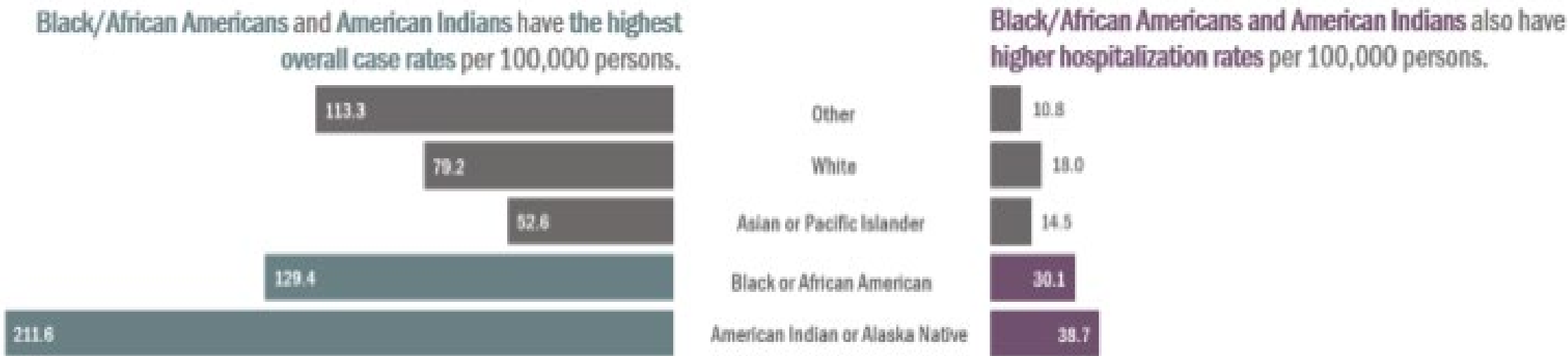
Total number of cases*			Cases as of yesterday	
	<i>number</i>	<i>(%) (% overall)</i>	<i>number</i>	<i>(change)</i>
<b>Cases</b>	7409	(100%)	7225	(+184)
<b>Sex</b>				
Female	3951	(53%) 	3841	(+110)
Male	3458	(47%) 	3384	(+74)
<b>Age group</b>				
0-19 years	490	(7%) 	471	(+19)
20-44 years	2914	(39%) 	2833	(+81)
45-64 years	2338	(32%) 	2278	(+60)
65+ years	1664	(22%) 	1638	(+26)
Unknown	3	(0%)	5	(-2)
<b>Hospitalized‡</b>	945	(13%) 	931	(+14)
<b>ICU‡</b>	265	(4%) 	258	(+7)
<b>Deaths</b>	325	(4%) 	310	(+15)

\*This is a rapidly-evolving situation. The Maricopa County case count might vary slightly from that of ADHS depending on the time of day data were downloaded. This breakdown includes all cases to date in the outbreak (1/22/2020 – present).

‡This count includes all cases ever hospitalized or admitted to the ICU during their illness.



# Race and Ethnicity



*Race information is only available for 49% of COVID-19 cases reported to public health. About 51% of cases have unknown race status and are not reflected in this chart.*

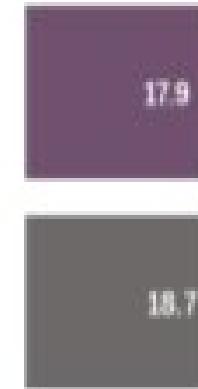


# Race and Ethnicity

Hispanic or Latino populations have higher overall case rates per 100,000 persons than non-Hispanic or Latino populations.



Hispanic or Latino populations have similar hospitalization rates per 100,000 persons as non-Hispanic or Latino populations.

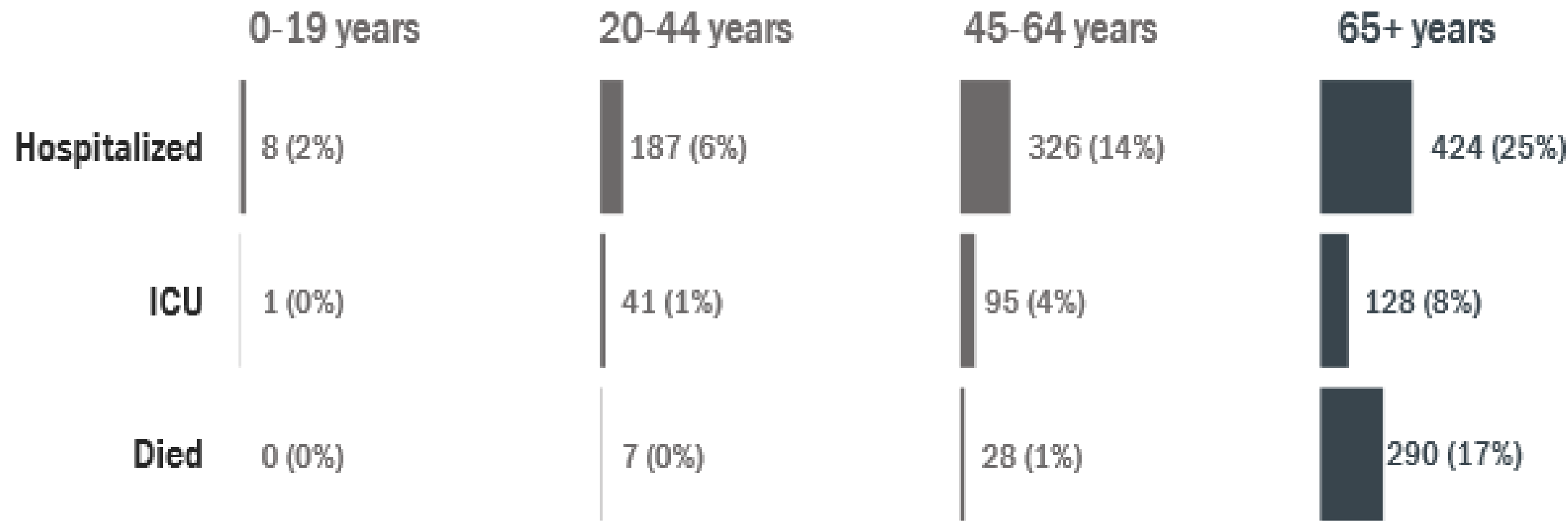


*Ethnicity information is only available for 53% of COVID-19 cases reported to public health. About 47% of cases have unknown ethnicity status and are not reflected in this chart.*



The risk of being admitted to a hospital, Intensive Care Unit (ICU), or dying due to COVID-19 infection increases with **age**.

*Risk Severity by Age*





Eduardo S. Alcantar, MD, MPH

Chief Medical Officer

Valle del Sol



# COVID 19 MYTHS

LatinX/Hispanic Community

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Eduardo Alcantar MD, MPH

Chief Medical Officer

Valle del Sol, Inc.



**Valle del Sol**  
COMMUNITY HEALTH

# Myth: LatinX/Hispanic is the same group .

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**Fact:** America's 60 million Hispanics/LatinX represent a wide range of backgrounds and lifestyles – new immigrants and multigenerational families, high earning professionals and poor migrant workers.



**Valle del Sol**  
COMMUNITY HEALTH

# Myth: US-Mexico Border main problem is illegal immigration.

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**Fact:** Mexico's border states are home to more than 6,000 maquiladoras – US-owned factories that manufacture products for export – and the plants, which employ hundreds of thousands of people, have been the focus of several coronavirus outbreaks.



**Valle del Sol**  
COMMUNITY HEALTH

# Myth: LatinX/Hispanics are not worried about COVID 19

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**Fact:** Hispanics are more concerned than Americans overall about the threat the COVID-19 outbreak poses to the health of the U.S. population, their own financial situation and the day-to-day life of their local community. (Source: PEW Research Center)



**Valle del Sol**  
COMMUNITY HEALTH

# Myth: LatinX/Hispanics have health insurance.

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**Fact:** They perform jobs that require interaction with the general public in food services, transportation and delivery; and some also work in meatpacking plants that have emerged as major hot spots. They are less likely to have health insurance. (Source:



# Myth: LatinX/Hispanics aren't following government guidelines to stop COVID.

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**Fact:** impossible for many LatinX/Hispanics. Large number live in close quarters, often multiple families to a house or with several farmworkers crowded into a barracks-style room, where they can neither social distance nor self-isolate.



**Valle del Sol**  
COMMUNITY HEALTH

**Myth:** LatinX/Hispanics do not want to wear cloth masks.

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**Fact:** Covering the face with a bandanna, scarf, or T-shirt is often associated with gang affiliation, crime, or violence. Many don't feel safe wearing these in place of masks, according to Fernando Alfonso III of CNN.



**Valle del Sol**  
COMMUNITY HEALTH



**Myth:** LatinX/Hispanics reluctant to testing.

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**Fact:** Uncertainty remains regarding the accuracy of many tests; concern a (+) test might be used for employment and/or immigration discrimination. Many unknowns remain regarding how effective immunity to COVID-19 is and how long it will last.



**Valle del Sol**  
COMMUNITY HEALTH



# First Aid

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# Treatments by Race

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**Valle del Sol**  
COMMUNITY HEALTH

# Myth resources

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12 Myths About Coronavirus, From the World Health

<https://www.health.com/Condition/Infectious-diseases/Coronavirus-myths>

[Debunking COVID-19 \(coronavirus\) myths - Mayo Clinic](#)

<https://www.mayoclinic.org/diseases-conditions/...>

[OSHA Publications - COVID-19, Novel Coronavirus ...](#)

<https://www.osha.gov/pls/publications/publication...>

[COVID-19 MITOS Y REALIDADES | Secretaría de Salud ...](#)

<https://www.gob.mx/Salud/Documentos/Covid-19-mitos-y-realidades?tab>



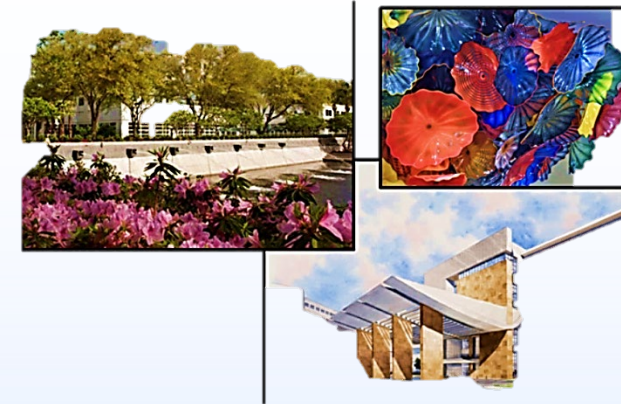
**Valle del Sol**  
COMMUNITY HEALTH



Dr. Richard White

Consultant,  
Community & Internal Medicine

Mayo Clinic



## Patient Care during COVID-19:

### The Hispanic/Latinx Perspective

AZ Hispanic/Latinx COVID-19 Town Hall  
May 19, 2020

Richard O. White III, MD, MSc  
Assistant Professor Internal Medicine & Pediatrics  
Community Internal Medicine  
Mayo Clinic Florida



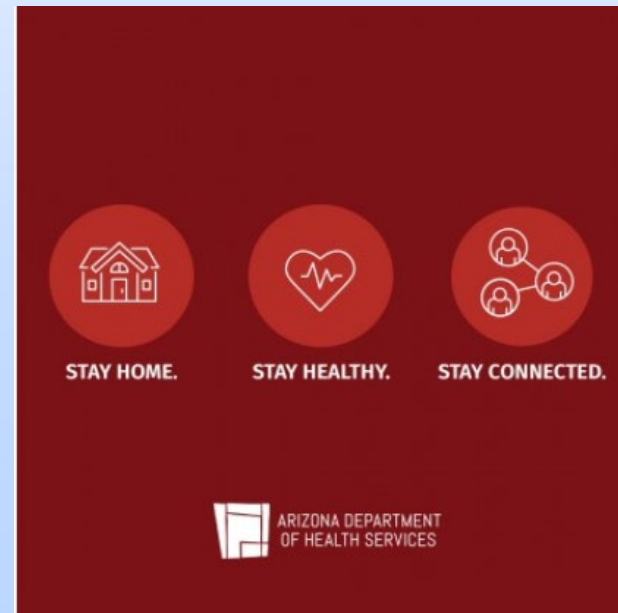
# COVID-19 & THE UNIQUE NEEDS OF OUR COMMUNITIES

- Our Homes
- Our Jobs
  - Impact on exposure risk (e.g. Agriculture, Restaurant/Food Packaging Industries)
  - Paid leave, Exclusionary Policies, Telework
- Our Health Risk
  - Diabetes, Obesity, Access to Care, Insurance, Respiratory Conditions (e.g. Asthma), Digital Divide
  - English Proficiency



# Our Rights & Responsibilities during COVID-19

- Prevention
  - Hand washing, mask, avoiding crowds, cleaning surfaces
- Medical Care
  - Testing (PCR, antibody)
  - Chronic disease management
  - Interpreter services
- Social Support
  - Physical but not social distancing!











Dr. Jorge Mallea

Consultant,  
Division of Pulmonary, Allergy and  
Sleep Medicine

Mayo Clinic

# Hospitalization for COVID-19

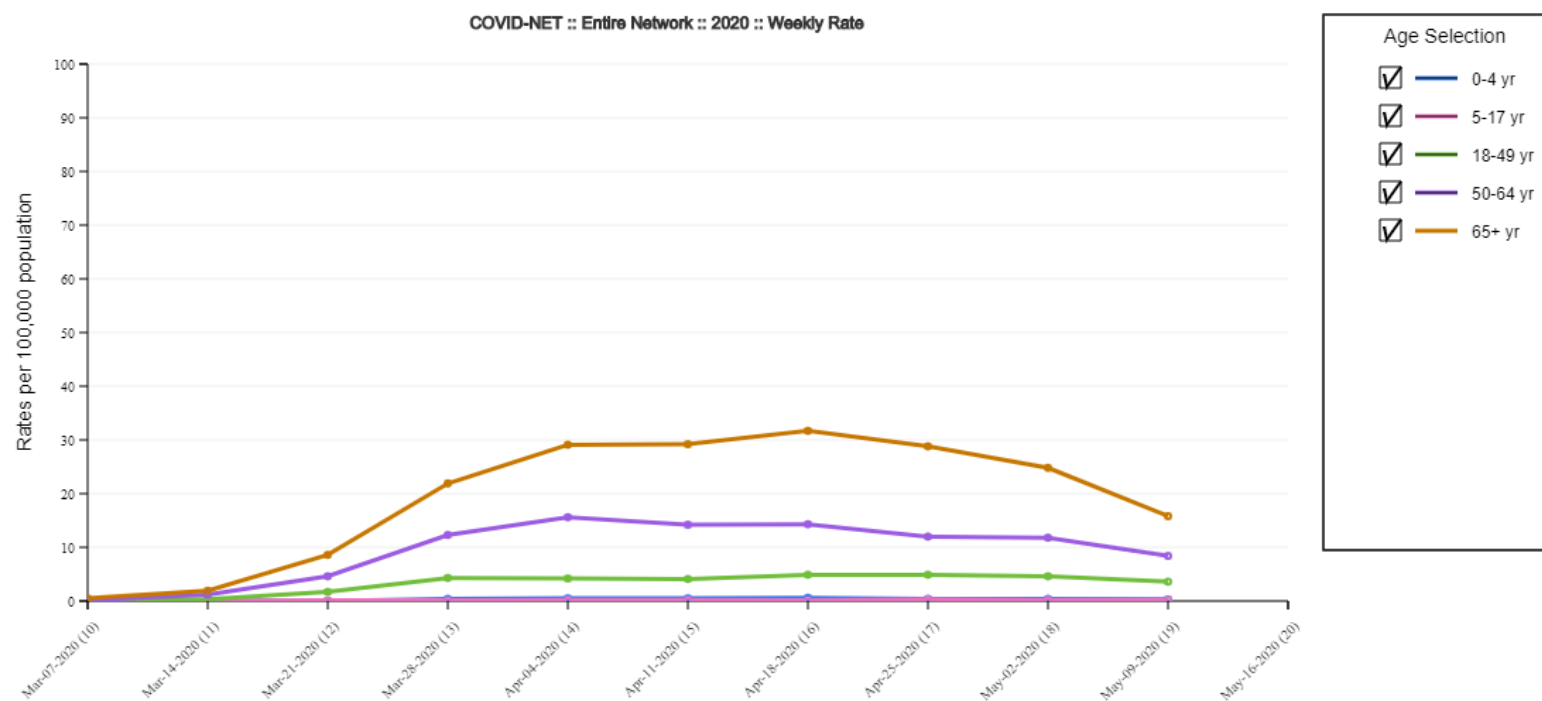
Jorge Mallea, MD

Consultant Division of Pulmonary, Allergy and Sleep  
Medicine

Mayo Clinic Florida

## Laboratory-Confirmed COVID-19-Associated Hospitalizations

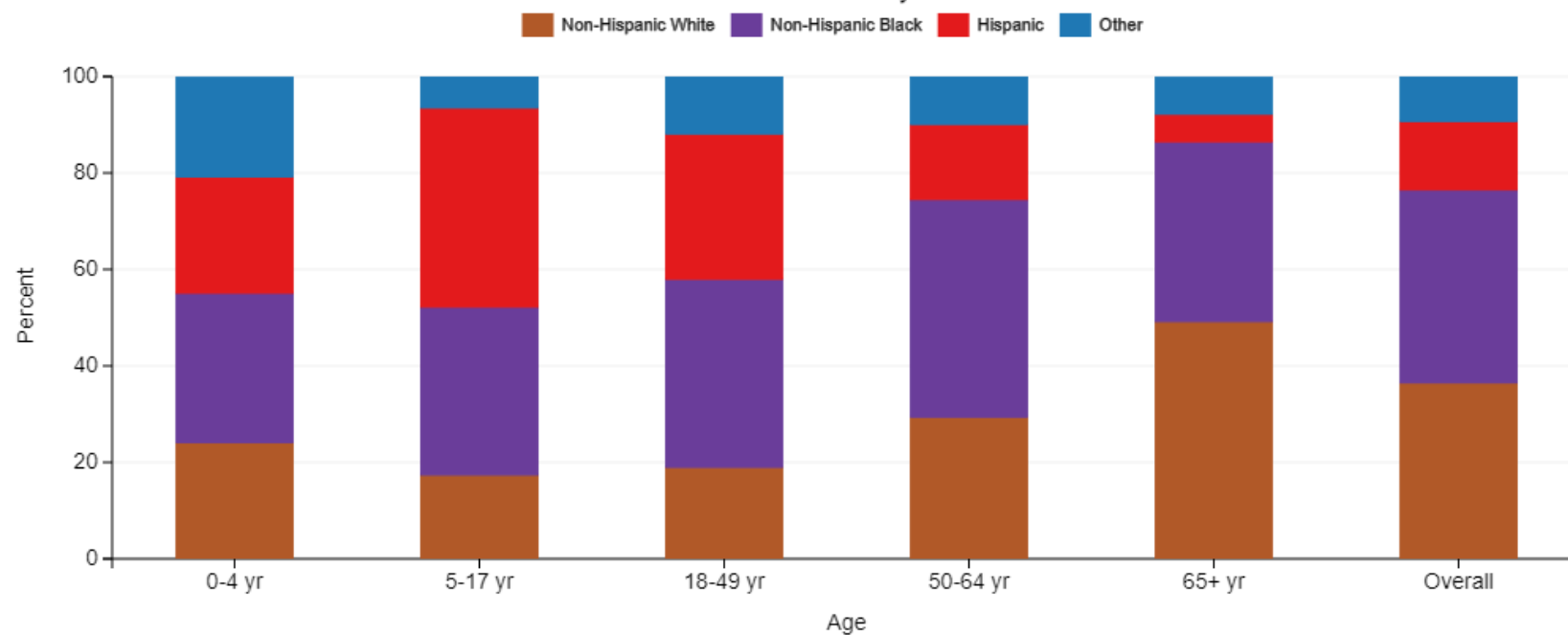
Preliminary weekly rates as of May 09, 2020





COVID-19 Laboratory-Confirmed Hospitalizations  
Preliminary data as of May 09, 2020

Characteristics Of Covid-19-associated Hospitalizations  
Race/Ethnicity



# General Care

- Isolation in private room and/or COVID-19 ward
- Monitoring
  - Oxygen saturation
  - Arterial blood pressure
  - Electrocardiogram
- Remote care

# General Care

- Oxygen
- Prevention or treatment for venous clots
- Laboratory testing to evaluate other possible infections, kidney and liver functions and “inflammation”
- Chest x-ray or CT chest
- Echocardiography
- Continue taking usual meds

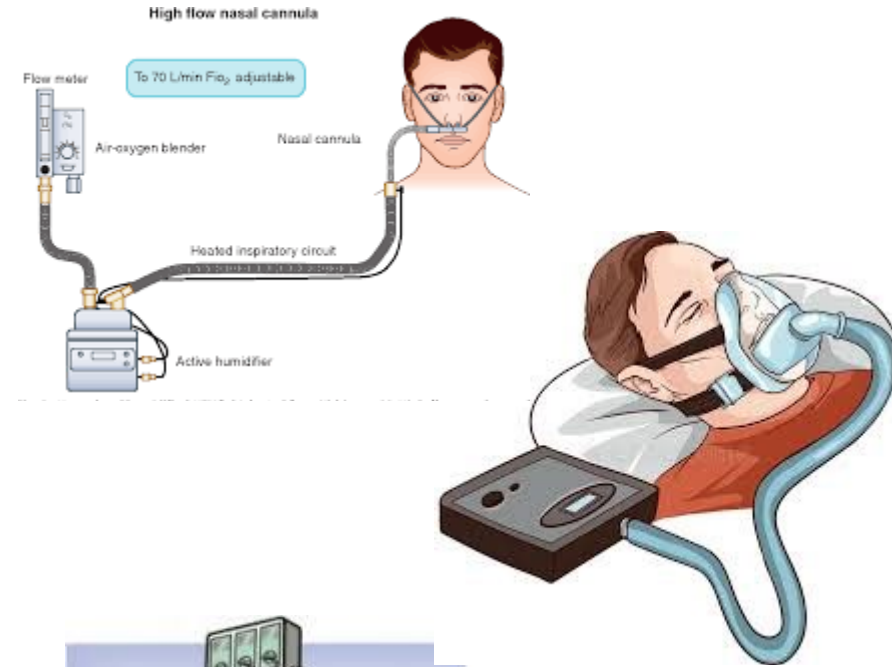
# Experimental Treatments

- Antivirals
  - Remdesivir
- Cytokine Storm
  - Tocilizumab
  - Sarilumab
  - Other
- Convalescent Plasma



# ICU

- ARDS
- Oxygen
  - High Flow Nasal Cannula
  - CPAP/BiPAP
  - Intubation and mechanical ventilation
- IV Meds
  - Keep adequate blood pressure
  - Antibiotics
  - Experimental Meds





# Discharge

- Low oxygen needs (2-3 L/minute)
- No IV meds
- Eating enough calories
- Lab values are improving



Dr. Francisco Moreno

Professor of Psychiatry

University of Arizona Colleges of  
Medicine Tucson and Phoenix

# Francisco A. Moreno, MD

Professor of Psychiatry, Colleges of Medicine Phoenix and Tucson  
Associate Vice President, University of Arizona Health Sciences  
Director, Arizona Hispanic Center of Excellence



# COVID-19 Risk Factors for Mental Health and Suicide

Reger et al., 2020  
JAMA-Psychiatry



Economic Stress



Social Isolation



Decreased Support



Less Access to Mental Health Care



Illness and Medical Problems



Community Anxiety



Firearm Sales

# Ways Coronavirus Impacts Latinos

**COVID-19 can affect anyone.**

**But, for Latinos, the coronavirus pandemic is worsening health, social, and income inequities, and raising fears of disparities in disease rates, exposure, testing, and prevention.**

**1 CORONAVIRUS RATES**  
Early reports from hotbed areas, including NYC and Oregon, show higher COVID-19 incidence and death rates among Latinos and others of color.  
[salud.to/POCcoronavirus](https://salud.to/POCcoronavirus)

**2 TESTING & HEALTHCARE**  
People with health insurance get tested for COVID-19 more frequently than those who don't, even if tests are free. 19% of Latinos are uninsured.  
[salud.to/covidisparities](https://salud.to/covidisparities)

**3 JOBS ON THE FRONT LINES**  
Only 16.2% of U.S. Latinos can work from home. They are overrepresented in high-contact jobs (food, retail, hospitality, health) with little or no paid leave.  
[salud.to/covidworkers](https://salud.to/covidworkers)

**4 SOCIAL DISTANCING**  
Essential workers are more likely to be exposed to coronavirus, and less likely to be able to do social distancing. They risk exposure for a paycheck.  
[salud.to/covidisparities](https://salud.to/covidisparities)

**5 POVERTY**  
Latinos represent 27.2% of the population in poverty. Coronavirus exacerbates inequities in access to social support, housing, food, and more.  
[salud.to/coronaviruspoverty](https://salud.to/coronaviruspoverty)

**6 FOOD INSECURITY**  
Amid coronavirus, families who rely on nutrition aid can't stock up on food or buy online. 16.2% of Latinos suffer food insecurity (not enough food).  
[salud.to/covidfoodsecurity](https://salud.to/covidfoodsecurity)

**7 HOUSING AND RENT**  
56.9% of Latinos are "housing cost burdened," spending about a third of their income on housing. Coronavirus is exacerbating housing instability.  
[salud.to/coronaaffecthousing](https://salud.to/coronaaffecthousing)

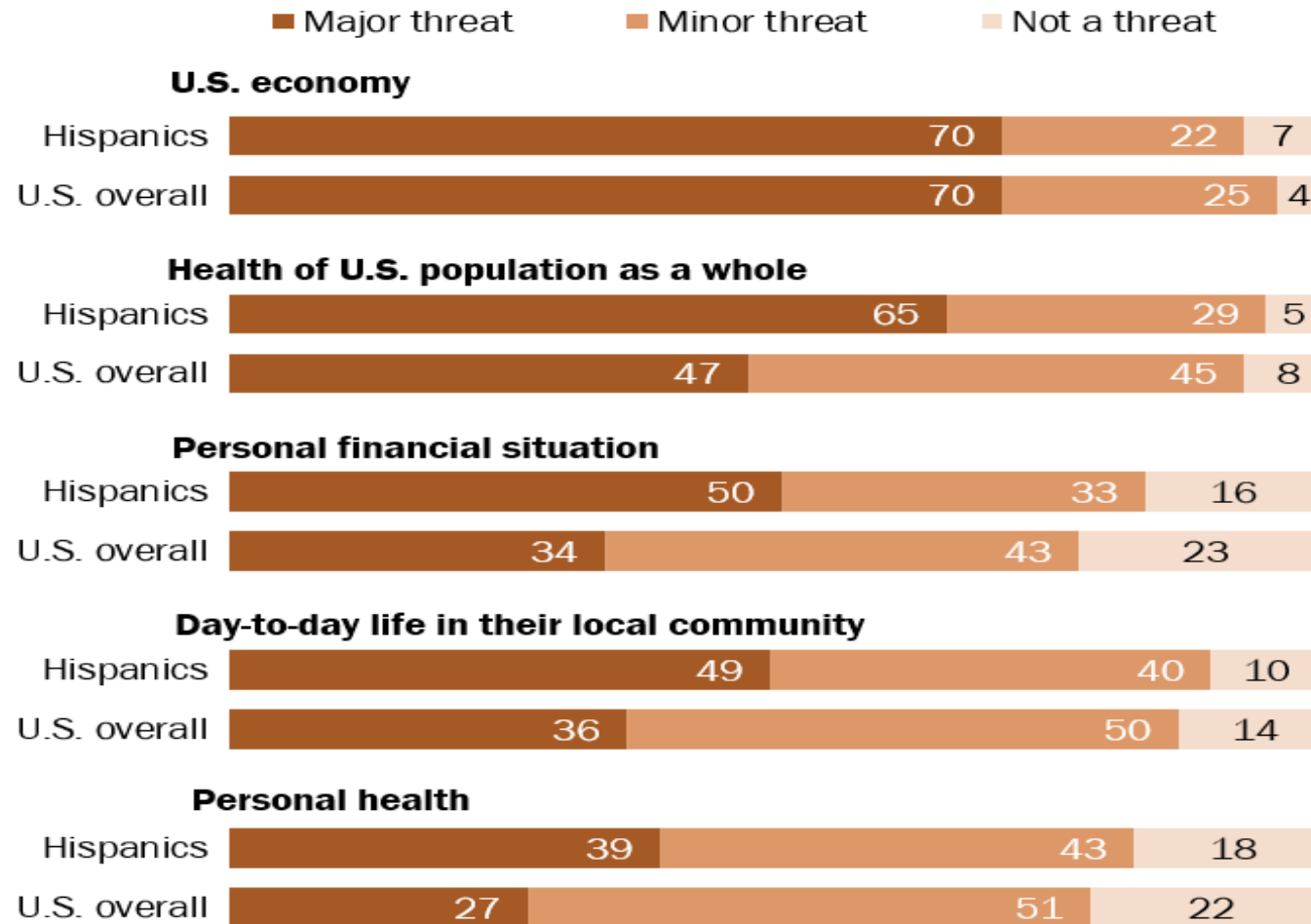
**8 NO OPEN SPACE**  
Walking and biking are up during COVID-19. Trail use is up 200%! But Latinos have less access to sidewalks and green, open spaces for activity amid social distancing.  
[salud.to/covidwalk](https://salud.to/covidwalk)

**Latino families deserve our help in avoiding coronavirus and fixing these big inequities!**  
**Get involved at [salud.to/coronaequity](https://salud.to/coronaequity)!**



GRAPHIC BY SALUD AMERICA! ON 4/15/20  
A PROGRAM BASED AT UT HEALTH SAN ANTONIO

# Hispanics are more threatened by COVID-19



Note: Share of respondents who didn't offer an answer not shown.

Source: Survey of U.S. adults conducted March 10-16, 2020.

# Protective Strategies



Intentionally Work for Your  
Mental Health Wellness



Managed your information,  
Balance Meeting Safety &  
Basic Needs



Minimize Tensions, Be  
Respectful and Kind to  
Others, Remain Optimistic



Physical Distancing with  
Social Proximity, Family,  
Church, Friends



Decrease Alcohol, Eat Well,  
Keep Physically and  
Mentally Active



Identify your Need for Help,  
and Find Help that Fits your  
Language and Culture