



# COVID 19

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Arizona African American  
Virtual Town Hall Meeting  
Sponsored by  
Mayo Clinic  
in partnership with the  
Arizona Commission of  
African American Affairs  
April 28, 2020



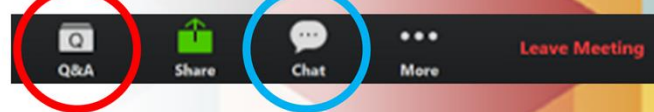


Dr. Michele Y. Halyard  
Consultant and  
Professor Radiation  
Oncology  
Mayo Clinic

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To ask a Question

Chat Feature





Marion Kelly  
Director, Community  
and Business Relations  
Mayo Clinic

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Dr. Eula Saxon Dean  
Community  
Leader/Educator  
Moderator

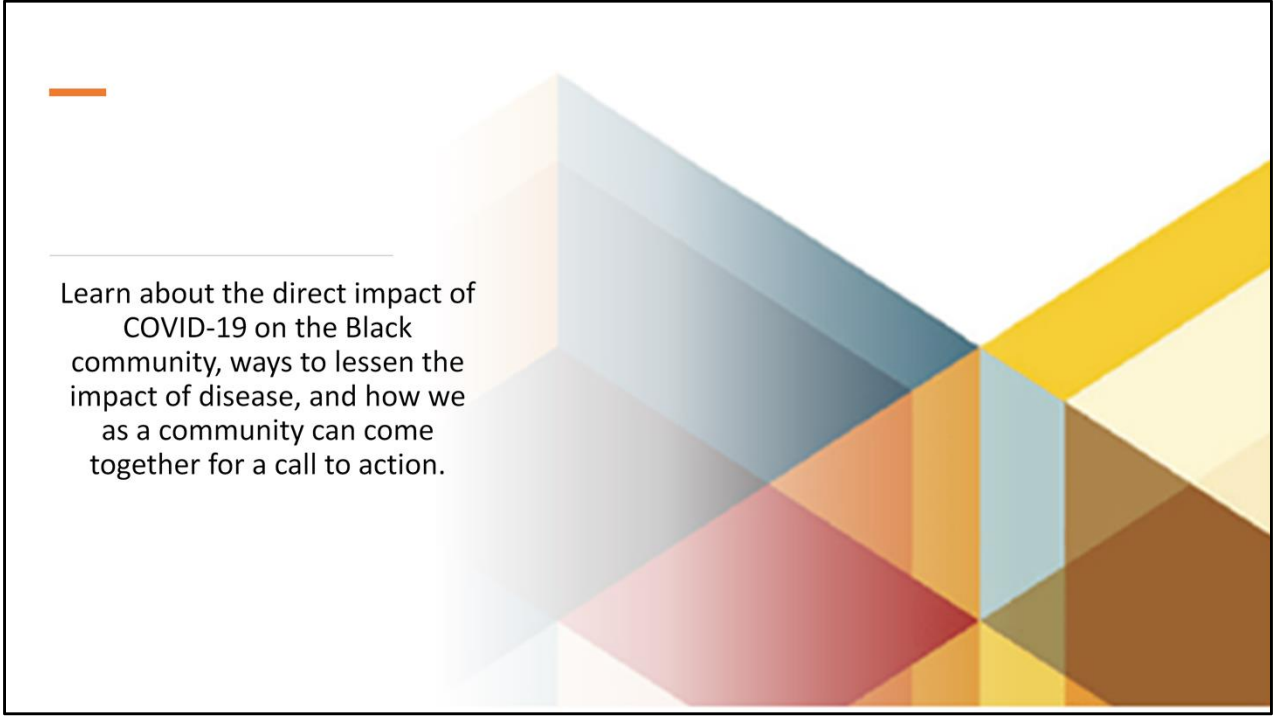
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Join key leaders in healthcare and community leaders for a candid discussion that highlights the underlying conditions that put our communities of color at great risk to health and well-being.





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



## Speakers

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**Mr. Cloves Campbell, Chair**

Arizona Commission of African  
American Affairs

**Dr. Edmond Baker**

Medical Director, Equality Health

**Dr. Angela Allen**

Clinical Instructor, ASU College of  
Nursing and Health Innovation Scholar





## Speakers

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**Dr. Brittane Parker**

Hospitalist, Mayo Clinic

**Dr. Chyke Doubeni, Chair**

Center for Health Equity &  
Community Engagement Research  
Mayo Clinic





Mr. Cloves Campbell  
Chair, Arizona  
Commission of African  
American Affairs

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## **Arizona Commission of African-Americans Affairs**

### **Arizona's COVID-19 Actions to Date**

- The following is an abbreviated list of the actions taken by the State of Arizona to combat the COVID-19 pandemic. A full list is available at "[azgovernor.gov](http://azgovernor.gov)".

#### **January 27<sup>th</sup>: The Health Emergency Operations Center was Activated**

- Opened the Health Emergency Operations Center after the first reported case of COVID-19 in Arizona to monitor the situation at the local, national, and international level.



## **Arizona Commission of African-Americans Affairs**

### **March 2<sup>nd</sup>: Started Testing for COVID-19 at the State Lab**

- Became one of the first states in the nation to be certified by the Centers for Disease Control (CDC) to test for COVID-19.

### **March 11<sup>th</sup>: Declared Public Health Emergency**

- Gave Health officials more funding to fight COVID-19
- Designated ADHS as agency leading Arizona's response to COVID-19
- Activated State Emergency Operations Center in addition to the Health Emergency Operations Center to coordinate resources
- Waived certain licensing requirements to increase access to healthcare
- Gave State emergency procurement authority to purchase supplies

### **March 12<sup>th</sup>: Passed New State Public Health Funding**

- \$55 millions to AZ. Public Health Emergency Fund.



## **Arizona Commission of African-Americans Affairs**

March 15<sup>th</sup>: Closed Schools to address staffing shortages

March 16<sup>th</sup> : Issued New Guidance to Cancel Gatherings

March 19<sup>th</sup>: Activated the Arizona National Guard

March 19<sup>th</sup>: Released New Guidance for Dining Establishments and other Businesses

March 20<sup>th</sup>: Expanded Access to Unemployment Insurance

March 21<sup>st</sup>: Secured PPE for county Health Departments

March 23<sup>rd</sup>: Issued Executive Order to Accentuate Tracking of COVID-19



## **Arizona Commission of African-Americans Affairs**

March 25<sup>th</sup>: Requested Special Healthcare Enrollment Period

March 28<sup>th</sup>: Signed a bi-partisan State Budget Agreement

March 30<sup>th</sup>: Announced an agreement with states banks to protect Small Business

April 2<sup>nd</sup>: Issues order allowing certain prescription refills without having to see a Doctor

April 7<sup>th</sup>: Issued Executive Order Expanding COVID-19 Data Gathering

April 9<sup>th</sup>: Receives approval for online SNAP Purchases from USDA

April 22<sup>nd</sup>: Executive Order is issued Removing Restrictions on Elective Surgeries



## **Arizona Commission of African-Americans Affairs**

As we await the decision to keep May 1<sup>st</sup> as the day to remove the closure of businesses, I will provide updates as they are released. If anyone has questions, feel free to contact me directly.

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## Dr. Edmond Baker

Chief Medical Officer, Equality Health



## Dr. Angela Allen

Clinical Instructor  
ASU College of Nursing and Health  
Innovation Scholar

## Dr. Brittane Parker

Hospitalist, Mayo Clinic





What is it?

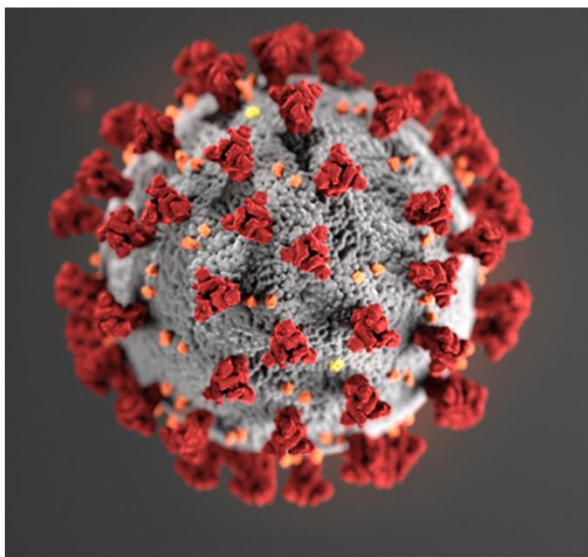
How is it spread?

Who is at risk?

Why the African American Community?

When to seek help?

Where to get care?



## What is the COVID 19?

- Coronaviruses are a type of virus.
- This new coronavirus has not been identified in the past.
- Another name for this coronavirus is COVID-19.
- Most coronaviruses cause mild diseases.
- But COVID-19 causes severe respiratory disease.
- Similar coronaviruses:
  - SARS-CoV China 2002
  - MERS-CoV Saudi Arabia 2012

## How is the virus spread?

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- Person to Person
- Through respiratory droplets
  - Coughs
  - Sneezes
- Close contact
  - less than 6 feet
  - more than 10 minutes



## How to control the virus?

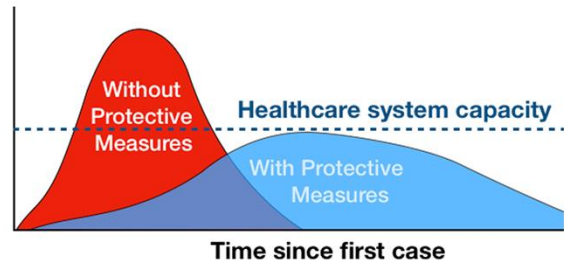
- Social Distancing
- Shelter in Place
- Self-Monitoring
- Self-Quarantine
- Self Isolation
- Official or Mandatory Quarantine



Goal is to slow the spread and reduce its effect on the population

## Why control the virus?

- Goal is to slow the spread and reduce its effect on the population



*Adapted from CDC / The Economist*

# COVID-19 Statistics \*04/26/20

	Total Confirmed Cases	Total Deaths
World	2,968,627	206,402
US	928,619	52,459
Arizona	6,526	275
Maricopa	3,351	121



## Who is highest risk for serious illness?

- Older adults (> 60yo)
  - Chronic diseases (heart disease, lung disease, diabetes)
  - Immunocompromised (cancer, HIV, transplant patients, chronic steroids)
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## Disparity in Medicine

- African Americans are at higher risk for:
    - Heart Disease
    - Lung Disease
    - Diabetes
  - African Americans high poverty rate
- 

Access to healthcare....



# African American COVID-19 Statistics

\*04/26/20

	% AA	% AA Deaths
US	13	26*
Arizona	3	3*
Mississippi	38	61
Michigan	14	41
Louisiana	33	59
Chicago	30	56


US 65% of race not specified

AZ 29% of race not specified



## Clinical Signs and Symptoms

- High Body Temperature 99% (100.4°F)
- Loss of Appetite 84%
- Dry Cough 82%
- Very Tired 70%
- Shortness of Breath 40%
- Muscle Soreness 35%
- Thick Mucus 33%



## Signs and Symptoms less than 10%

- Headache
- Confusion
- Runny nose
- Sore throat
- Coughing up Blood
- Vomiting
- Diarrhea
- **Loss of Smell**
- **Loss of Taste**



## COVID-19 Severity

- Mild – 81% of cases
  - No or mild pneumonia
- Severe – 14% of cases
  - Shortness of Breath, Low Oxygen in Blood
- Critical – 5% of cases
  - Lung Failure, Kidney and Liver Failure
- Death Rate – 2.3%

## Best Practices

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- Wash hands with soap and water for 20 seconds
- Avoid touching face, nose and mouth with unwashed hands
- Avoid close contact (6 feet/10 minutes)
- Stay at home if you are sick (except to get medical care)
- Cover coughs and sneezes
- Wear face **cover** or **mask**
- Clean and disinfect frequently touched areas




## Wear Facemask?

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- Recommendations are:
  - cloth face coverings in public settings where other social distancing measures are difficult to maintain
  - masks preserved for specific situations





## When to seek care

- Fever of 100.4°F or greater
- Worsening Cough
- Worsening Shortness of Breath
- Inability to keep down food or fluids
- Excessive Tiredness or Confusion
- Any other concerning symptoms

Call your primary care provider first.

If your symptoms are consistent with a possible COVID infection, testing should be considered.

A note about testing...



## Hospitalization


- Evaluation for COVID-19 and other respiratory diseases
- Treatment
- Monitoring for worsening symptoms
- Follow up with primary care provider after discharge





## Self Care

- Self evaluation
- Sleep
- Schedule Breaks
- Exercise
- Continue scheduled mental and medical care



## Improving outcomes

- Continue best practices and self care
- Expand the STAY AT HOME initiative
- Improve the stream of education
  - Culturally competent
  - Available to masses
- Improve resources
  - Community testing
  - Contact tracing
  - increase community partnerships
- Limit your exposure in the community
- Advocate for policy initiatives that address issues that concern our community

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Dr. Chyke Doubeni  
Director, Center for  
Health Equity &  
Community Engagement  
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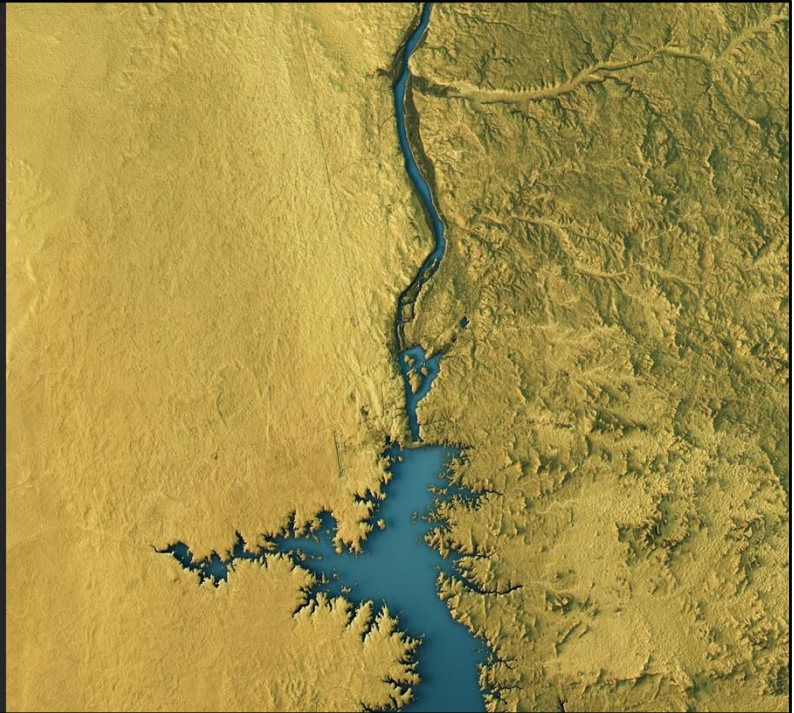
# COVID-19 Pandemic

Chyke Doubeni  
Mayo Clinic

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THE AFRICAN AMERICAN  
EXPERIENCE OF HEALTH  
DISPARITIES AND SOCIAL  
INJUSTICE

- UNDERSTAND
- ACT/MOBLIZE
- "YES I RISE"



On Behalf of Mayo Clinic, I want to once again welcome you to this Virtual Town Hall to address existential threat to the black community. I am the Director of the Center for Health Equity and Community Engagement Research. The Center was established by the Mayo Clinic with a:

**Vision** to: Realize the ideal of transforming communities for everyone to achieve the highest possible level of wellbeing and health.

**Mission** to: Build on Mayo's values to create innovative solutions that address health disparities throughout the life course and advance the ideal of health equity, locally and globally.

## How Did COVID Get into Black Communities?

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The COVID-19 pandemic originated in a foreign country and introduced into the country through international travel

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Yet, it has affected blacks the hardest – a group that is less likely to travel abroad.

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Among patients with COVID and known race, 30% are blacks: blacks are only about 13% of the US population

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In New York state, blacks die of COVID-10 at 4 times the rate in whites.

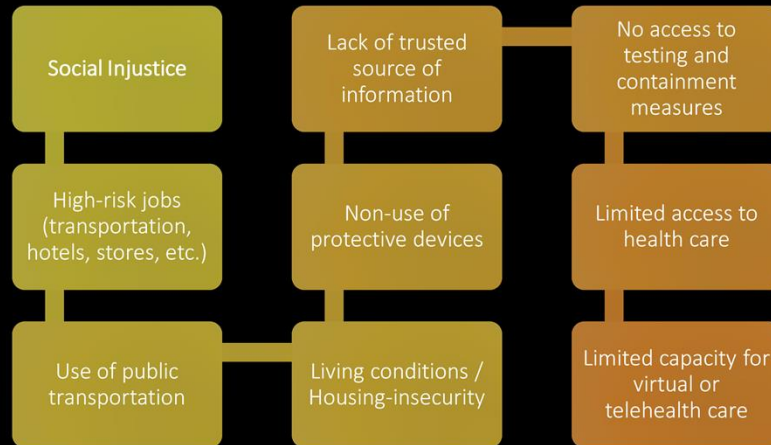
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In Louisiana, 33% of the population is black, but 59% of people dying of COVID are blacks.

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This has hit the African American community very hard and many people listening have experienced it, have family member with COVID, know of someone else or at least know about it from TV.

## Blacks are Dying from COVID-19 for the same Reasons as other Causes of Health Disparities



Reason: This is because of social factors and social injustice that has created the conditions for this:

Employment in high-risk occupations for COVID-19 infections such as transportation, utility and other service industries

Use of public transportation

Living conditions

Overcrowding

Homeless

Multiple generations in the same home (with older family members with health condition)

Caregivers

Need to survive – unemployed or in jobs in which taking time off is not option

Not having protective devices

Not having trusted source of information.

Not having access to testing and containment measures

Barriers to health care and access to clinics and telehealth resources

Some community clinics just closed down

Access to the internet for medical care and information

# Why is there a higher rate of death from COVID-19 in black communities?

Having the highest death rate from preventable conditions is part of the lived experience for blacks in the US

- Blacks have the highest death rates in cancer, asthma, coronary heart disease, diabetes, kidney disease, and many other preventable causes
- Sadly, it is not a surprise that blacks have the highest death rate from COVID-19

The causes of death from COVID-19 in black communities trace back to social injustice

- High-risk medical conditions are common in homes
- Multiple generations living together
- Limited ability or capacity for self-isolation
- Caregivers and nursing home staffing is socioeconomically patterned

Office of minority health: <https://minorityhealth.hhs.gov/>

Because of social injustice, a higher percentage of blacks have conditions that increase the risk of dying from COVID-19 when infected:

Cancer, diabetes, high blood pressure, heart disease, kidney failure, asthma and other conditions are more common in black communities

Caregivers of people with those conditions may be more likely to get exposed because of their working conditions

Blacks are getting and dying from COVID-19 at a higher percentage than represented in the population.

Among people for whom race is known, 30% of known cases are blacks  
In New York State, the death rate in blacks is 4 times higher than that of whites

## Consequences of COVID for blacks

The fatality rates from COVID in blacks is only the tip of an iceberg of inequities.

COVID-19 unveiled effects of systemic policies and conditions that have existed for decades

Unmet social needs unfortunately persist in minority communities and

The massive social, economic, and health fallout from COVID-19 will worsen social inequalities.

### Consequences:

The markedly higher, but preventable, fatality rates in black and other minority communities from COVID-19 are only the tip of an iceberg of inequities.

Social injustice create conditions that increase acquisition and transmission of COVID-19.

Systemic policies and conditions that have existed for decades recreate persistent social inequalities

COVID-19 unveiled effects of systemic policies and conditions that have existed for decades as manifestations of social determinants of health (SDH).

Unmet social needs have unfortunately flourished in minority communities and will be exacerbated by the massive social, economic, and health fallout from COVID-19.

If nothing is done, COVID-19 the massive social, economic, and health fallout from COVID-19 will worsen social inequalities.



## Some things we are doing

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Researchers at Mayo are existing community partnerships to:

- Help community leaders communicate information to friends and contacts to fill gaps in information (Drs. Mark Wieland and Irene Sia)
- Translate information to other languages
- Work with churches to develop emergency preparedness plans
- Conduct research to understand how working with the community directly can improve access to rapid testing and information

Mayo Clinic is coordinating clinical trials on the use of convalescent serum from the blood of patients who have recovered from COVID-19

## What can policymakers do for black communities

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### Address social and health inequities

- Improve access to the internet and trusted information
- Support research led by minorities with minorities – for us by us!
- Improve health, well-being, and the quality of care

### Provide adequate resources for health centers to improve the quality of care

- Improve telehealth capacity
- Improve access to evidence-based interventions
- Transform behavioral health services to the new reality

### On COVID and future pandemics:

- Collect data on race/ethnicity and other social factors
- Address stigma and bias from race, COVID, or other factors
- Improve access to rapid testing, contact-tracing, and containment measures

Can this crisis serve as a turning point for effective policies and actions to improve the health of minority communities?

# STAYING SAFE

# STAYING WELL

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## BE PREPARED, BE INFORMED

- Know the symptoms
- Talk with family about how to protect yourself and each other
- Make a plan for other health and family needs

## DON'T GET IT

Don't exposed:

- Social distancing
- Wear a mask if you have to be outside
- You can't always tell who has COVID-19
- Control stress, stay connected, stay fit

## DON'T SPREAD

If someone in the family is exposed:

- Seek help to quarantine in a safe place away from others
- Avoid contact with other family members till you are not contagious

## IF YOU BECOME SICK:

- Contact your doctor so you can get tested
- If COVID-19 positive, get medical help
- 95-99% of people with COVID-19 do not die from it

# STILL I RISE

~ Maya Angelou



## BE INFORMED

STOP THE SPREAD OF COVID – there is no cure or vaccine now

There is nothing wrong with the DNA of black people

The disparities are due to social injustice  
injustice in black communities



## GET INVOLVED

Unite, educate and organize

Participate in clinical studies

Donate blood through the American  
Red Cross if you recovered from COVID-  
COVID-19



## Still I Rise “UP”

Demand answers from scientists and  
and policy makers

Take personal responsibility

Write a better story for the next  
'COVID'

## OTHER THINGS INDIVIDUALS CAN DO

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### Be Aware

Know the data about your community:

- Causes of death
- Why social conditions kill

### Health

Despite the challenges of everyday life, find time for your health and wellbeing

### Advocate

Advocate for and partner in research on the priorities for your communities

### Participate

Participate in research:

- Yes, experiments are the only way to know what will work for black people



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