COVID-19 Impact on Vulnerable Populations

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House Health Care Committee
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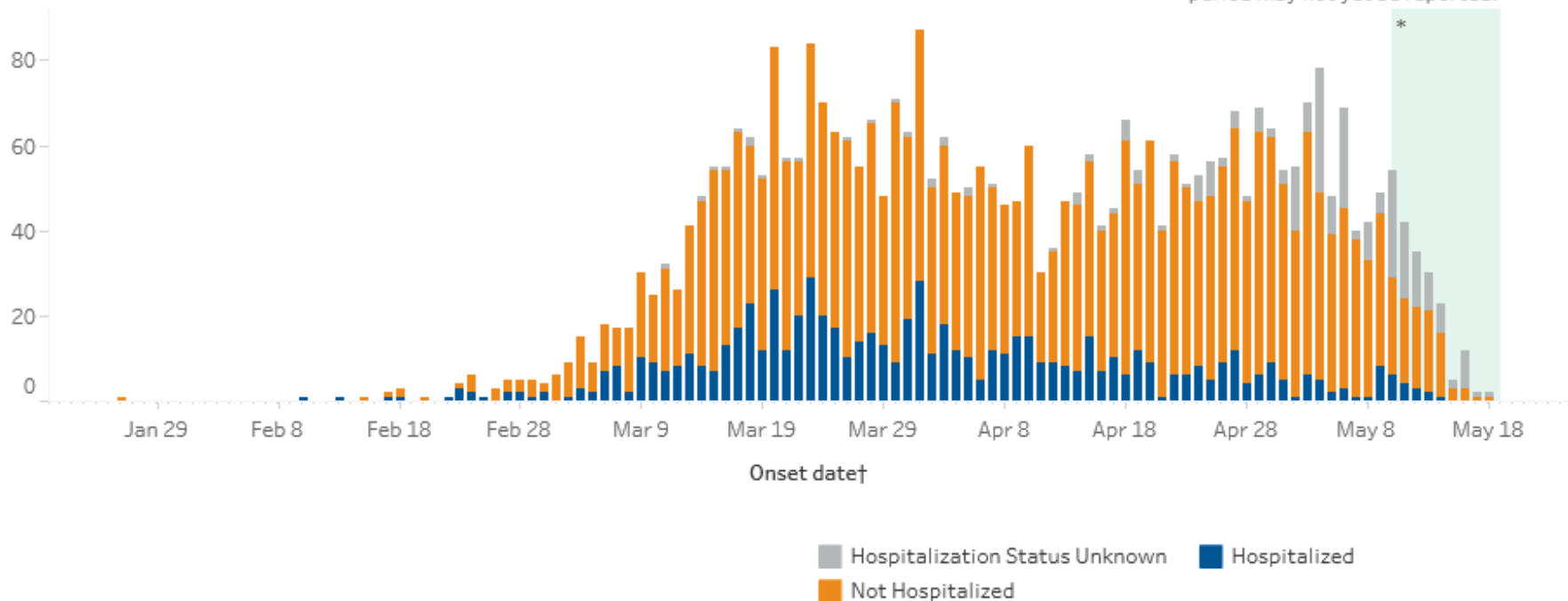Health Officer and State Epidemiologist

Oregon's Epi Curve

Oregon's Epi Curve: COVID-19 cases

This chart shows the number of Oregonians who have been identified as COVID-19 cases and whether they were ever hospitalized for their illness.‡

Total Cases	Hospitalized	Not Hospitalized	Hospitalization Status Unknown
3,726	714	2,754	258

*Illnesses that began during this time period may not yet be reported.

Onset date†

Legend:
- Hospitalization Status Unknown
- Hospitalized
- Not Hospitalized

Race and COVID-19 in Oregon

Table 3. Severity and rates of COVID-19 by race[a] (n=3,660)

Race	Cases	% of total cases	Cases per 10,000[b]	Deaths	Case fatality (%)	Hospitalized
White	1,842	50.3%	5.8	100	5.4%	434
Black	86	2.3%	10.5	6	7.0%	24
Asian	135	3.7%	6.9	7	5.2%	36
American Indian/Alaska Native	67	1.8%	14.3	3	4.5%	10
Pacific Islander	47	1.3%	27.9	1	2.1%	10
Other[c]	1,023	28.0%	n/a	9	0.9%	147
>1 race	70	1.9%	5.1	2	2.9%	12
Not available	390	10.7%	n/a	10	2.6%	34
Total	3,660	100.0%	8.7	138	3.8%	707

[a]During the course of the case investigation, people are asked to self-report their race, ethnicity, tribal affiliation, country of origin, or ancestry.
[b]NCHS Population Estimates: National Center for Health Statistics (NCHS), Estimates of the resident population of the US by year, county, age, bridged race, Hispanic origin, and sex (Vintage 2018). 2) Census Bureau Population Estimates: U.S. Census bureau, Population Division, Annual Estimates of the Resident Population by Age, Sex, Race, and Hispanic Origin for counties (Vintage 2018)
[c]1,003 of the 1,023 persons who identify as "Other" race also self-identify as Hispanic or Latino. See "Weekly Report Summary" for more information.

The rates among Black/African-Americans (10.5), Pacific Islanders (27.9) and American Indian/Alaska Natives (14.3) are all higher relative to whites (5.8).

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Ethnicity and COVID-19

Table 4. Severity and rates of COVID-19 by ethnicity (n=3,660)

Ethnicity	Case count	% of total cases	Cases per 10,000[a]	Deaths	Case fatality (%)	Hospitalized
Hispanic	1,162	31.7%	20.9	12	1.0%	166
Non-Hispanic	2,103	57.5%	5.8	108	5.1%	503
Not available	395	10.8%	n/a	18	4.6%	38
Total	3,660	100.0%	8.7	138	3.8%	707

[a]NCHS Population Estimates: National Center for Health Statistics (NCHS), Estimates of the resident population of the US by year, county, age, bridged race, Hispanic origin, and sex (Vintage 2018). 2) Census Bureau Population Estimates: U.S. Census bureau, Population Division, Annual Estimates of the Resident Population by Age, Sex, Race, and Hispanic Origin for counties (Vintage 2018)

In Oregon there is a high rate of COVID-19 among Hispanics (20.9 cases per 10,000 residents) relative to non-Hispanics (5.8).

Behind the Data

- Differences in COVID-19 distribution are likely to reflect the inequitable distribution of power and resources among Oregon communities.

- OHA believes by sharing this data, we can identify disparities and continue conversations with affected communities for how to redistribute resources and power to rectify longstanding injustices.

- OHA commits to helping the public better understand why the impact of the disease is shouldered more by certain communities.
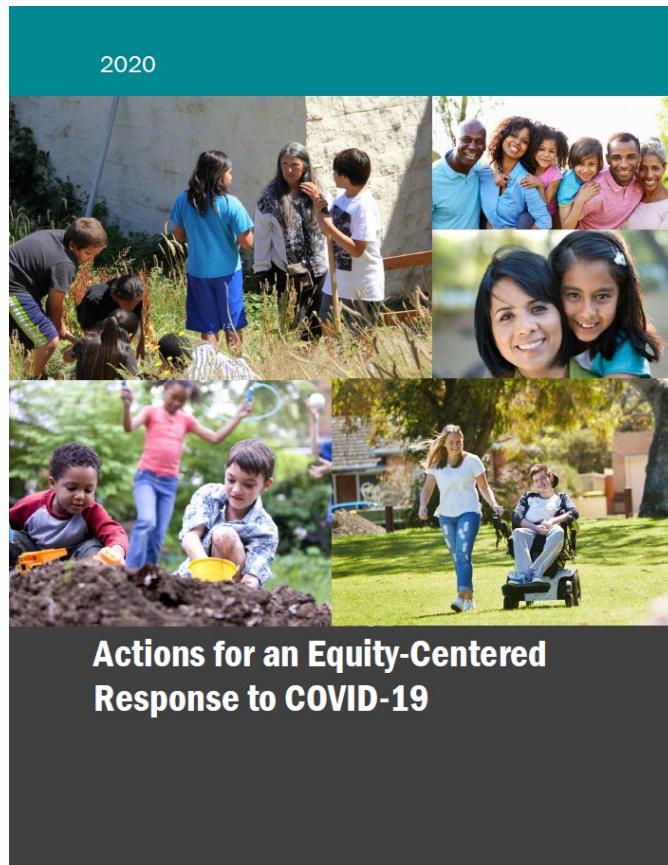
Improving Data Collection

- Updating COVID-19 testing guidance to include REAL D data collection.

- Providing resources to health care workers to ensure they have the tools necessary to collect the information.

- Verifying and collecting missing race and ethnicity information for positive cases through Local Public Health Authorities (LPHAs).

- Verifying and collecting missing race and ethnicity information for positive cases through state recovery follow up.

- Analyzing OHA's regulatory authority to maximize health care provider data collection and reporting.

Moving Forward with Equity

- Engaging through community conversations.
- Supporting testing, contact tracing, and wrap around support by or within trusted community-based organizations.
- Supporting Health Care Interpreters: OHA directed CCOs to reimburse Certified and Qualified Health Care Interpreters (HCIs) for interpretation services provided via telemedicine at the same rate as in-person interpretation services.
- Fully utilizing Community Health Workers (CHW).
- Co-creating outreach and education.

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Long-term Strategies to Center Equity

2020

Actions for an Equity-Centered Response to COVID-19

2020-2024 SHIP Priority Areas:

- Institutional bias
- Adversity, trauma and toxic stress
- Economic drivers of health
- Access to equitable preventive health care
- Behavioral health

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Thank You