

Structural Racism and the Other Pandemic

Camara Phyllis Jones, MD, MPH, PhD

Invited Speaker

NHMA / NMA Joint Webinar

“COVID-19 Impacts on Black and Latino Communities: Where are we now?”

National Hispanic Medical Association

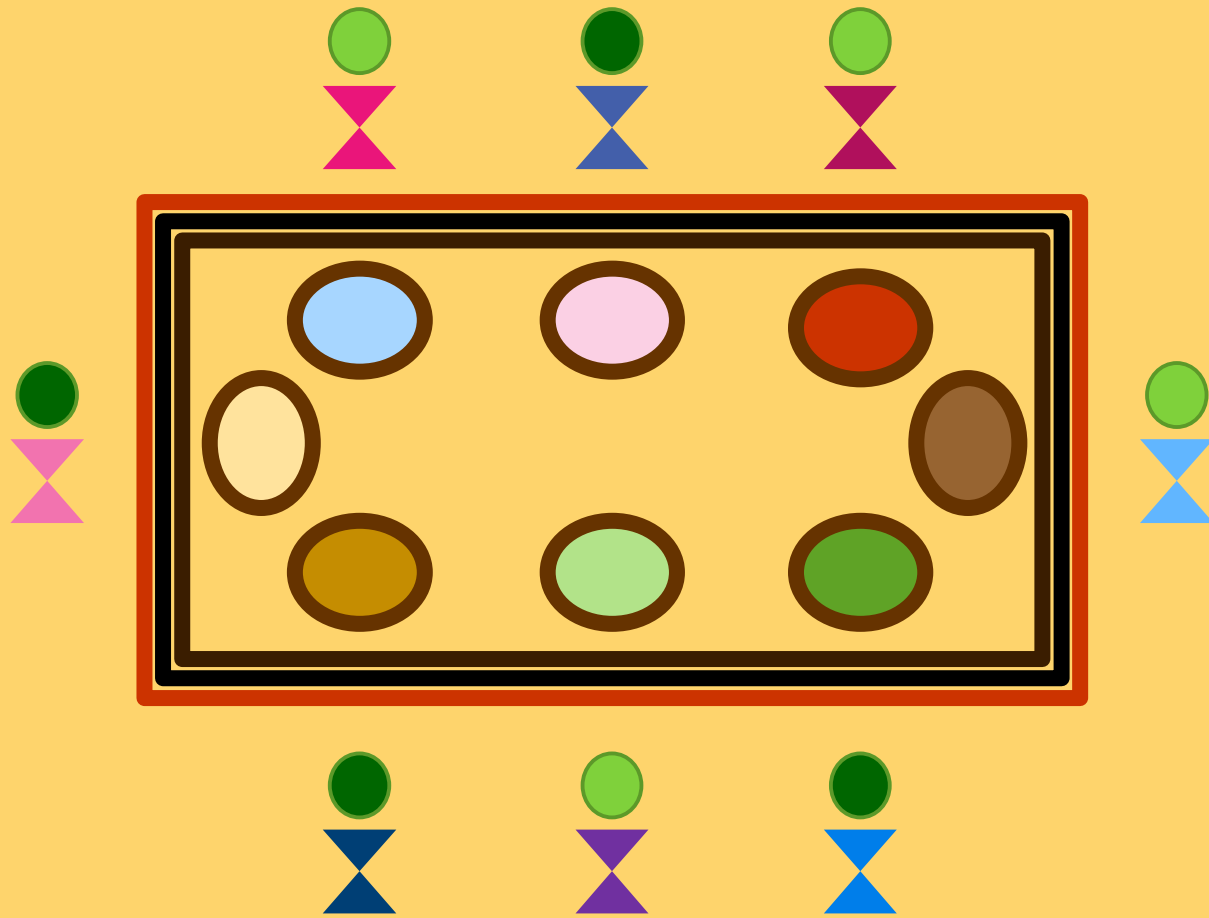
National Medical Association

Via Zoom from Atlanta, Georgia

April 28, 2021

Dual Reality: A restaurant saga





I looked up and noticed a sign . . .

OPEN

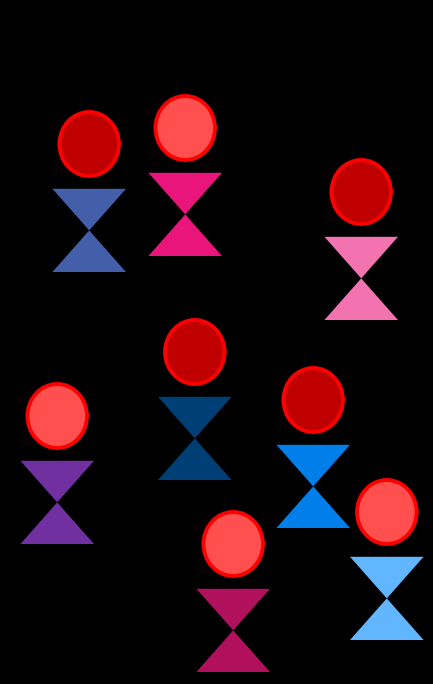
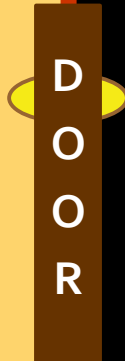
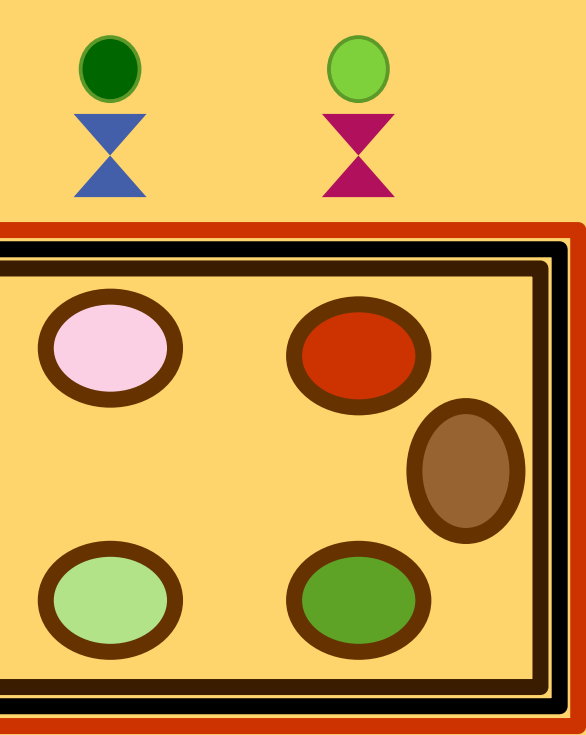




CLOSED

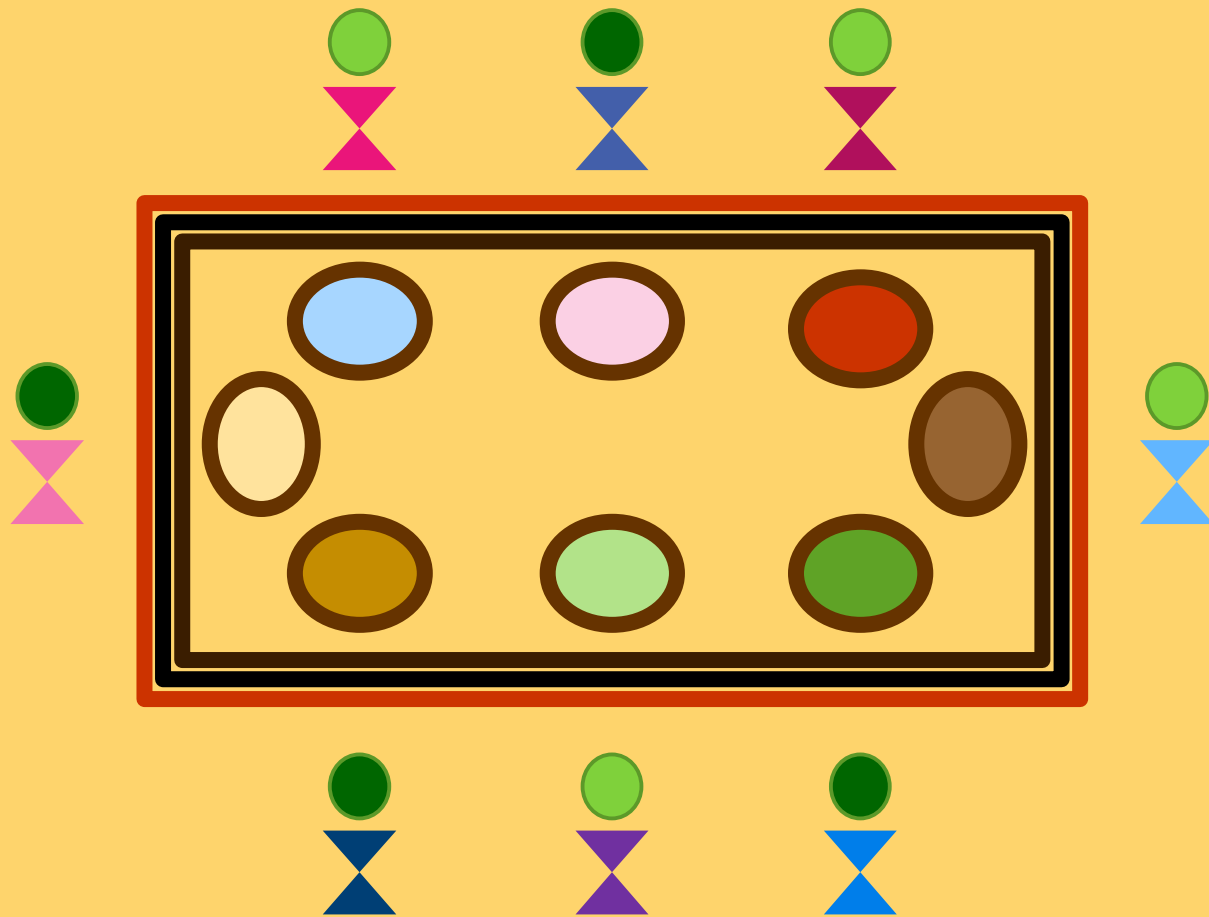


Racism structures “Open/Closed”
signs in our society.



It is difficult to recognize a system of inequity that privileges us.

Those on the outside are very aware of the two-sided nature of the sign.



Is there really a two-sided sign?

Hard to know, when only see “Open”.
A privilege not to HAVE to know.
Once DO know, can choose to act.

What is racism?

A system

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A system of structuring opportunity and assigning value based on the social interpretation of how one looks (which is what we call “race”), that

- Unfairly disadvantages some individuals and communities
- Unfairly advantages other individuals and communities
- Saps the strength of the whole society through the waste of human resources

“How is racism operating here?”

□ Identify mechanisms

- **Structures:** the *who?, what?, when?, and where?* of decision-making
- **Policies:** the written *how?*
- **Practices and norms:** the unwritten *how?*
- **Values:** the *why?*

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Excess deaths of people of color from COVID-19

- ❑ **More likely to become infected**
 - More exposed
 - Less protected
- ❑ **Once infected, more likely to die**
 - More burdened by chronic diseases
 - With less access to health care

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- **Norms:** Racism denial

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Narrow focus on the individual and the COVID-19 pandemic

- ❑ **Testing**
- ❑ **Masking**
- ❑ **School re-opening discussions**
- ❑ **Vaccine clinical trial endpoints**
- ❑ **Vaccine optimism**
- ❑ **Vaccine roll-out phases**
- ❑ **COVID-19 death toll**

Narrow focus on the individual and the COVID-19 pandemic

■ Testing

- Background: In 2020, the US treated COVID-19 as a medical care issue rather than a public health issue
- Medical care approach: Confirm individual diagnoses for those who are symptomatic or exposed
- Public health approach: Estimate the amount of virus circulating in the population by testing both symptomatic and asymptomatic persons
- **Why does it matter?** Time delay and undercount in estimates of the amount of virus circulating through the population
 - Positive tests of symptomatic persons: 7 to 10 days delay
 - Hospitalizations: 2 to 3 weeks delay
 - Deaths: 3 to 5 weeks delay
 - Probability surveys: real time

Narrow focus on the individual and the COVID-19 pandemic

□ Masking

- Individual orientation: Wear masks primarily to protect oneself
- Collective orientation: Wear masks primarily to protect others
- **Why does it matter?** Mask mandates are essential to protect the health of the public in the face of individual objections:
 - “There is no virus”
 - “I don’t feel vulnerable”
 - “Masks are uncomfortable”
 - “Masks make you sick”

Narrow focus on the individual and the COVID-19 pandemic

□ School re-opening discussions

- Individual focus: Low levels of childhood illness
- Community focus: Possibility that children can spread disease
- **Why does it matter?** Need safeguards against spread from schools into communities

Narrow focus on the individual and the COVID-19 pandemic

□ Vaccine clinical trial endpoints

- Individual focus: Symptomatic disease as primary endpoint
- Population focus: Asymptomatic viral infection as additional endpoint of interest
- **Why does it matter?** Asymptomatic spread is fueling the pandemic

Narrow focus on the individual and the COVID-19 pandemic

❑ Vaccine optimism

- Background: The virus will infect any available, vulnerable host
- Focus on vaccines: Decrease the vulnerability of individual hosts
- Focus on public health strategies: Decrease the number of available hosts
- **Why does it matter?** We need to fully implement public health strategies (both individual and governmental) even as we roll out the highly anticipated vaccines

Narrow focus on the individual and the COVID-19 pandemic

❑ Vaccine roll-out phases

- Background: Need to acknowledge two types of risk
- Individual risk: Increased VULNERABILITY due to age or medical conditions
- Structural risk: Increased EXPOSURE at work or where live
- **Why does it matter?** Vaccine allocation addressing structural risk is needed to address the disproportionate impact of COVID-19 on communities of color

Narrow focus on the individual and the COVID-19 pandemic

■ COVID-19 death toll

- Individual focus: Those dying from COVID-19 represent private losses to loved ones
- Collective focus: Those dying from COVID-19 represent shared losses to the whole society
- **Why does it matter?** We all need to recognize and mourn our monumental collective loss as a nation

Even those who have not yet experienced the loss of a family member, friend, or colleague to COVID-19

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