

Race and Gender Inequality Makes COVID-19 More Dangerous for Black and Brown People and for Women

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Black, Latino, and immigrant communities, and particularly women of color, are disproportionately suffering and dying from the coronavirus, also known as COVID-19. The pandemic has exacerbated existing race and gender disparities leaving marginalized people of color less able to safely shelter in place. Emerging lived experiences highlight a bleak reality: Black, Latino, and immigrant workers who keep our country running, especially during this global pandemic, are being left behind with little or no relief.

This brief highlights some of these race and gender disparities and offers a list of policy needs to alleviate these shortcomings.

People of color are disproportionately dying from COVID 19, exposing how systemic racism impacts the economy.

Although the Centers for Disease Control (CDC) has not released fatality rates by race, state and local governments continue to publish evidence that Black Americans have in some cities comprised more than 80 percent of coronavirus-related deaths. Cities and states across America note the uneven rates of deaths among Black residents due to COVID-19. Smaller cities and towns are also seeing similar trends among Black community members.

COVID-19 Deaths of Black Residents

Chicago: 70 % of COVID-19 deaths have been of Black residents; City is 23 % Black¹

New York: 28 % of COVID-19 deaths have been of Black residents; City is 24 % Black²

Milwaukee: 81 % of COVID-19 deaths have been of Black residents; City is 26 % Black³

Michigan: 41 % of COVID-19 deaths have been of Black residents; State is 14 % Black

North Carolina: 38 % of deaths have been of Black residents; State is 21 % Black⁴

Louisiana: 70 % of COVID-19 deaths have been of Black residents; State is 32% Black⁵

In Albany, Georgia, where nearly three out of four residents are Black, the city has become one of the worst Coronavirus hotspots in the country with 659 cases for every 100,000 people.⁶ In Mecklenburg County, North Carolina where a third of residents are Black, a little more than four in 10 of the confirmed coronavirus cases have been of Black community members.⁷

Latino Americans are similarly disproportionately at risk of contracting COVID-19, if not dying from it. In New York, Latinos have the highest death rate (more than a third of all fatality cases), followed by Black community members. A recent [Reuters/Ipsos nationwide poll](#) found that 16 percent of Latino Americans surveyed said they were infected, had been in contact with someone who was infected, or knew someone who was infected, compared with just nine percent of white Americans.⁸ Latino and immigrant communities have an added risk of becoming seriously ill as they are more likely to be uninsured or underinsured.⁹

Native people are also experiencing disproportionately higher rates of illness. Thirteen percent of Native American homes lack safe water or adequate wastewater disposal facilities, compared to the national average of less than one percent. [Sixteen percent](#) of American Indian and Alaska Native households in tribal areas are overcrowded, which is eight times the national average. Natives living in urban areas such as Salt Lake City, Seattle, and San Jose are contracting the coronavirus in high numbers. Within a week, the virus spread through the population of 350,000 Navajos tripling from 71 to about 270. Yet, of the \$80 million allocated to native communities from the first two relief packages, as of the end of March, 98 percent of tribal clinics had not received allocations due to bureaucracy at the CDC.¹⁰

Politicians and others have shared a narrative that COVID-19 as the great equalizer. It's not true. While anyone can get sick from COVID-19, Latinos, immigrants, and especially Black Americans have a higher risk of dying from it for two underlying reasons. First, they experience profound racialized health disparities, including higher rates of diabetes, hypertension, asthma, and diabetes—chronic illnesses that heighten the chance of adverse outcomes should one become ill with the coronavirus.¹¹ Second, they disproportionately work in frontline occupations that have higher exposure risks.

Black and brown workers and women are more likely to be essential workers in unsafe working conditions.

People of color work in industries that are on the frontlines of response to the coronavirus. They include grocery store clerks, nurses, cleaners, warehouse workers, and bus drivers, among others.¹² Before the COVID-19 crisis, these industries employed 30 million American workers, nearly two-thirds of whom were women. Black and brown workers are over-represented in occupations that put them at increased risk of COVID-19 exposure. While Latinos comprise more than 40 percent of workers in building cleaning services, Black workers comprise a fifth of workers in

child care and social services. [LGBTQ workers](#) are also overrepresented in food services, hospitals, and retail and are more likely to live in poverty-- especially LGBTQ workers of color.

Health care workers who are disproportionately women are especially at risk during this health pandemic. Of all the healthcare jobs in the U.S., women make up three quarters of the full-time workforce, and 85 percent of nurses are women.¹³ At least 5,400 nurses, doctors, and other health care workers responding to the coronavirus outbreak in the U.S. have been infected by the coronavirus, and dozens have died.¹⁴

Bus drivers and commuter train conductors, who are disproportionately people of color (57 percent), have been especially hard hit by COVID-19. Hundreds of transit workers have tested positive for the virus in more than 20 states.¹⁵ In New York, more than 6,000 transit workers have contracted the coronavirus or have self-quarantined because they are showing symptoms and more than 40 have died.¹⁶

Within these frontline occupations, many make poverty level wages and have inadequate or no health benefits¹⁷. Almost half of Black women and 57 percent of Latina women are low wage earners, compared to less than 30 percent of white men and 38 percent of white women.¹⁸ Service sector jobs, most of which are held by women, are particularly low paying as seven in 10 service sector workers make less than \$15 an hour.¹⁹ It is these same groups that are also increasingly losing their jobs due to layoffs or because of their increased risk of exposure.

Unemployment and lack of worker protections during COVID-19 is disproportionately harming Black and Brown workers and women.

People of color are overrepresented in low-wage positions, including retail and restaurants-- many of whom are now unemployed due to COVID-19.²⁰ In March alone, the Black unemployment rate increased from 5.8 percent to [6.7 percent](#), expected to rise even more in April. Part of what explains this rapid rise in unemployment is that Black and Latino workers are less likely to be able to work remotely either because this is not an option or because of lack of internet access, increasing their chances of not only losing work, but also healthcare coverage.²¹

Recent legislation that granted workers paid sick days and paid family leave protections due to COVID-19 left out the nearly 60 million workers who are employed at companies with 500 or more employees. This includes large grocery store chains, warehouses, and pharmacies.²² In short, companies that have the highest levels of revenues and federal tax breaks are being excused from providing the humane worker protections that are most needed during this crisis.

The wealth gap between Black and Brown households and white households means that Black and brown families will be much less likely to weather the economic shut-down that the pandemic has required. Black and Latino communities are less likely to own assets and more likely to live in debt. Most Black and Latino households

would not be able to afford to pay their bills after a \$400 emergency expense. As a result, families of color face greater risks of housing insecurity, eviction, and foreclosure, which will only worsen the racial homeownership divide between families of color and white families.²³

Undocumented workers are losing their jobs while blocked from accessing basic resources.

Access to health care, access to the new federal cash income support program, access to unemployment insurance—all the resources that people need to survive this crisis—are either entirely or virtually inaccessible to undocumented immigrants. Although immigrants pay income taxes using an Individual Taxpayer Identification Number (ITIN), they have been excluded from receiving federal cash income during this global crisis.

Undocumented immigrants are ineligible for Medicaid and for health coverage through the Affordable Care Act, leaving them increasingly vulnerable to COVID-19. Although recent legislation provides free testing to uninsured people, in addition to language barriers and fear of deportation, undocumented families may not have a primary care doctor and lack information regarding where to obtain a test.²⁴

Mass incarceration puts a disproportionate number of Black, brown, and immigrant people at risk.

COVID-19 is spreading quickly through prisons and jails across the country, which house Black and Brown people at a much higher rate than whites. Black Americans make up 13 percent of the U.S. population, but they comprise 40 percent of the incarcerated population. Among incarcerated women, nearly 30 percent are Black women. Moreover, the U.S. has the largest immigration detention center system in the world, holding almost 40,000 people in more than 200 facilities across the country.

U.S. correctional facilities are overcrowded and ill equipped to face the current coronavirus pandemic. These facilities often lack toiletries and other hygiene products, and have inconsistent access to clean water and operable plumbing systems. Cleaning products, soap, and alcohol-based hand sanitizers, which are recommended by the CDC to fight the coronavirus, are often viewed as contraband and are confiscated if found. As a result, recent reporting by the Federal Bureau of Prisons indicates that 138 inmates and 59 employees have tested positive for coronavirus and at least seven inmates have died. The Cook County Jail in Chicago has the highest count of any single site in the country, with at least 304 detained people and 174 staff members who have tested positive for the coronavirus.²⁵

Immigrants, including children, are increasingly experiencing criminalization, detention, and deportation. Yet, Immigration and Customs Enforcement (ICE) refuses to adopt measures to prevent the spread of COVID-19 in these facilities

including adequate testing or reducing overcrowding.²⁶ As of April 14, 77 detained people under ICE custody, as well as 19 employees have tested positive for COVID-19, rates that are expected to increase.²⁷

Shelter-in-place policies increase risk of domestic violence and disadvantage women.

Globally, the shelter-in-place orders have trapped millions of people in homes with their abusers. Safely getting help is normally difficult for people in abusive relationships, and now nearly impossible for many who must shelter-in-place. The National Domestic Violence Hotline reports that a growing number of callers say that their abusers are using COVID-19 as a means of further isolating them from their friends and family. “Perpetrators are threatening to throw their victims out on the street so they get sick,” Katie Ray-Jones, the CEO of the National Domestic Violence Hotline tells TIME. “We’ve heard of some withholding financial resources or medical assistance.” Alarming, the hotline reports that the number of calls they receive from survivors seeking help has actually gone down since the pandemic took hold because they are unable to place their calls to the hotline safely.

In the course of the pandemic, most U.S. states have closed schools and daycare facilities. By mid-March, half of all kids in the U.S. were at home rather than in school. This has dramatically increased the need for child care. Given that grandparents and friends are mostly unavailable due to social-distancing requirements, most families have no choice but to watch their kids themselves. Based on the existing distribution of child care duties in most families, mothers are likely to be more affected than fathers. Single mothers, who to begin with are often in a disadvantaged economic position, will have the most difficulty safely balancing work and child care duties.

Addressing systemic inequality with a bold, inclusive, and caring agenda.

We need to address the unequal systemic conditions that marginalize women, Black, brown, and immigrant communities and leave them more susceptible to financial hardship and even death, as we have seen during the COVID-19 crisis. Every family, regardless of where they live or their immigration status, needs and deserves housing, access to healthcare, and living wages without fear of being detained or incarcerated for non-violent offenses.

We are calling for policies that protect all people living in America, including undocumented and mixed-status families. Especially for the duration of the current coronavirus crisis, we need:

- To end job losses. Pay employers to keep workers on payroll. For workers separated from their jobs, ensure that state Unemployment Insurance systems have all the resources necessary to provide full wage replacement for all workers who need it until we return to full employment.

- Expand cash payments and strengthen safety net programs so that they act as a foundation for families, including: Food assistance, unemployment insurance, Medicaid, CHIP, TANF, and direct cash payments. And ensure everyone has access to paid leave and sick time so families can get healthy.
- Pass a massive state and local aid package. Fighting COV-19 has drained state and local budgets; already state after state is facing massive cuts to education, safety net programs and critical work forces that keep us safe and healthy. Congress has already acted to unlock trillions of dollars of support to big business. Congress should provide at least \$1 trillion of assistance to states and localities to keep public services flowing and prevent unnecessary unemployment.
- Hire now: Safely put millions of currently unemployed people to work right now making Personal Protective Equipment, ventilators, and other tools health care professionals need to: care for the sick; check on families sheltering-in-place; and sanitize public spaces so it's safe to return to work.
- Provide child care: Allocate \$100 billion for child care so that the child care system is able to continue operating and providers don't shut their doors during this crisis. Funding will also be used for emergency child care, so essential workers can stay on the job. Child care workers providing emergency care need medical and cleaning supplies and safety training. Child care workers must be paid fairly.
- Keep workers safe: Protect workers and families by ensuring that no worker can get fired or lose their job for staying home to protect their health and the health of people around them in the workplace. No worker should get fired for blowing the whistle on practices of their employer that put people at risk.
- Protect front line workers: Healthcare workers, first responders, grocery workers, farmworkers, childcare providers and other essential workers must immediately have adequate protection and provisions for their health and safety and financial security, including hazard pay.
- Shelter is safety: End all evictions and foreclosures and suspend all rent and mortgage payments so families can maintain a safe and secure home for the duration of the pandemic and economic crisis. Immediately secure short-term rentals and hotel rooms so that survivors of domestic violence and people living in congregate shelters and outside can safely shelter in place. Develop a robust and flexible fiscal response to keep the housing market solvent, such as securing mortgage refinance opportunities that allow owners to forgo payments for up to 12 months for developers, landlords and homeowners; and

create an emergency mortgage assistance fund for landlords and property owners that requires their ongoing participation in federal rent assistance programs moving forward. Embark on a housing infrastructure production initiative that protects our public health and that will put us on course to end the affordability crisis, end homelessness, and that includes green and sustainable retrofits for all public and federally funded housing that reduces utility expenses for residents.

- Direct resources to Black, brown, and immigrant communities: Collect data on the ways communities of color — especially Black and immigrant communities — are being disproportionately impacted by this crisis and drive resources to directly impacted people. Also, generate nationwide data on coronavirus cases and deaths by race and sex.
- Protect incarcerated people: End cash bail and arrests for minor offenses, commute sentences of all terminally ill inmates, and release everyone in pretrial detention, everyone who has an underlying health condition, and all detained immigrants on their own recognizance. All who remain incarcerated, as well as workers and other staff, must be immediately tested and provided with healthcare.
- Protect democracy: All voters should be offered the option to cast their ballot by mail (with multiple submission options, as provided below), to enable voters to avoid lines at the polls and exposure to COVID-19.

These policy responses must increasingly become part of our vision and path to a more just world where everyone, including all Black, Latino, and immigrant community members can thrive.

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