



Health Literacy, Equity and COVID-19

Alicia Fernandez, MD

Director, UCSF Latinx Center of Excellence

University of California San Francisco

Alicia.Fernandez@ucsf.edu



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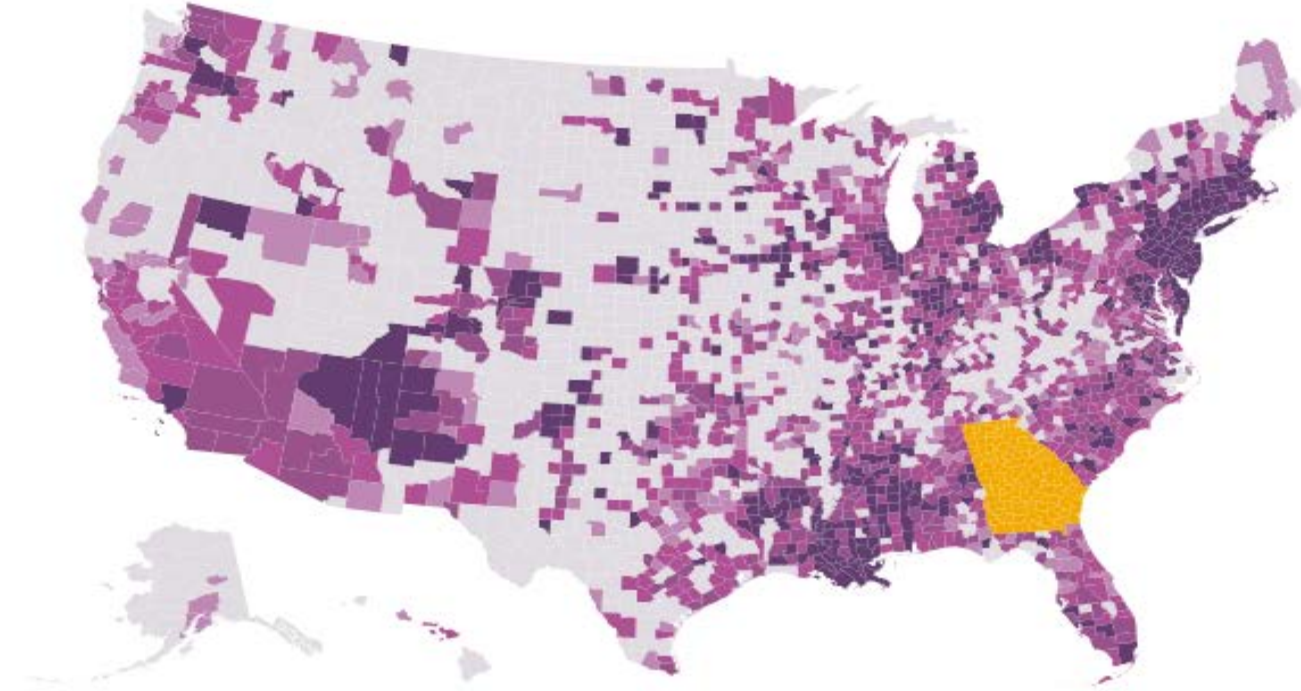
COVID-19 is affecting every community differently.
Some areas are much harder-hit than others. What is
happening where you live?

Click on a state below to drill down to your county data.

COVID-19 Mortality



Low High



<https://covid19.emory.edu/>

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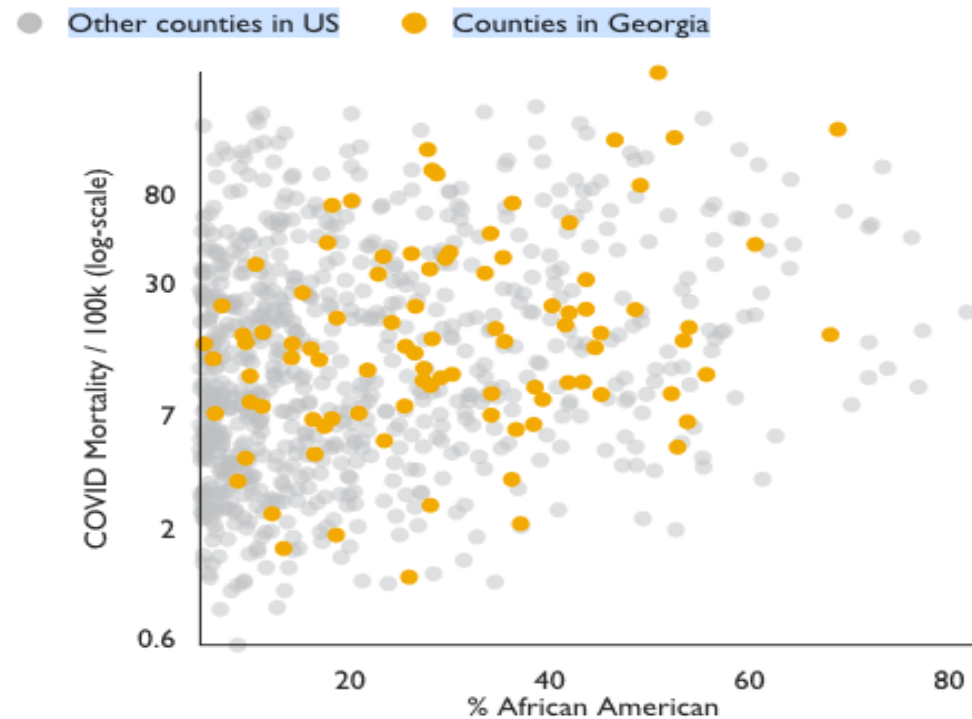
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COVID19 Mortality By County African American %

A Snapshot of Health Disparities in Georgia

Counties with higher proportions of African American residents tend to have higher COVID-19 mortality.

Click on the map to explore your state and county.



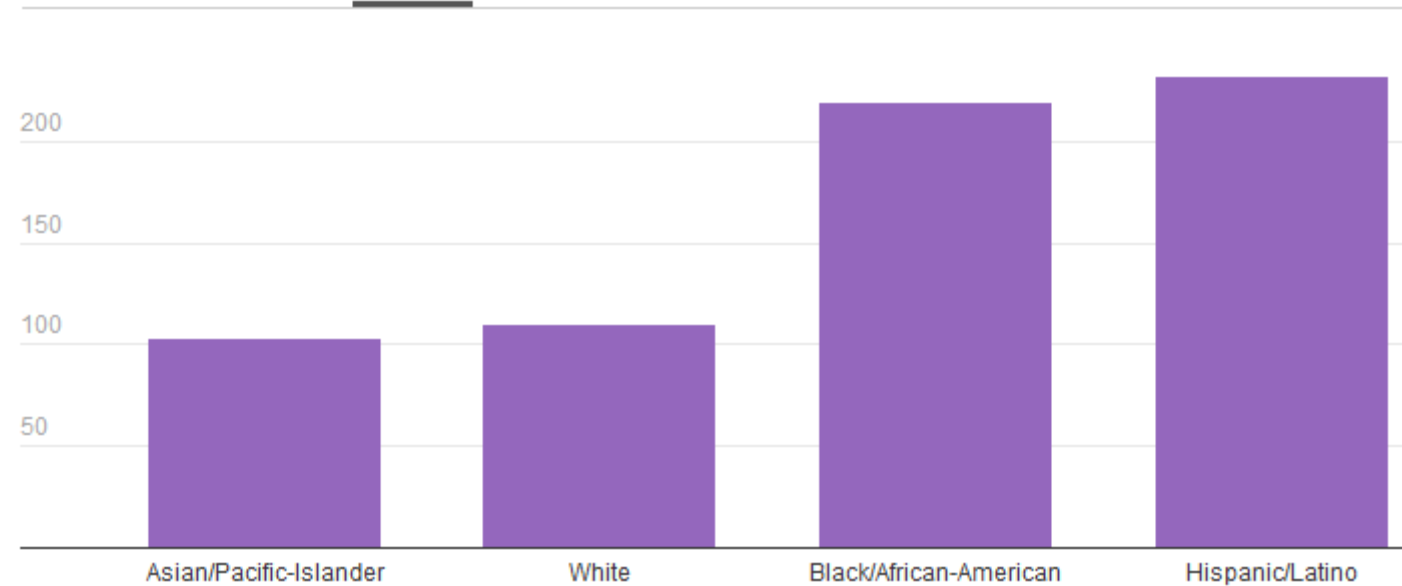
<https://covid19.emory.edu>

Case, Hospitalization and Death Rates

View by: ☐ Age ☐ Sex ☒ Race/ethnicity ☐ Poverty ☐ Borough

Rate per 100,000 people (age-adjusted)

Cases Hospitalizations **Deaths**



[Get the data](#) • Created with [Datawrapper](#)

Data on people identified as other categories, including Native American/Alaska Native or multi-racial, are not provided here. The Hispanic/Latino category includes people of any race. Race and ethnicity information is most complete for people who are hospitalized or have died. There are much less demographic data currently available for non-hospitalized cases.

<https://www1.nyc.gov/site/doh/covid/covid-19-data.page>

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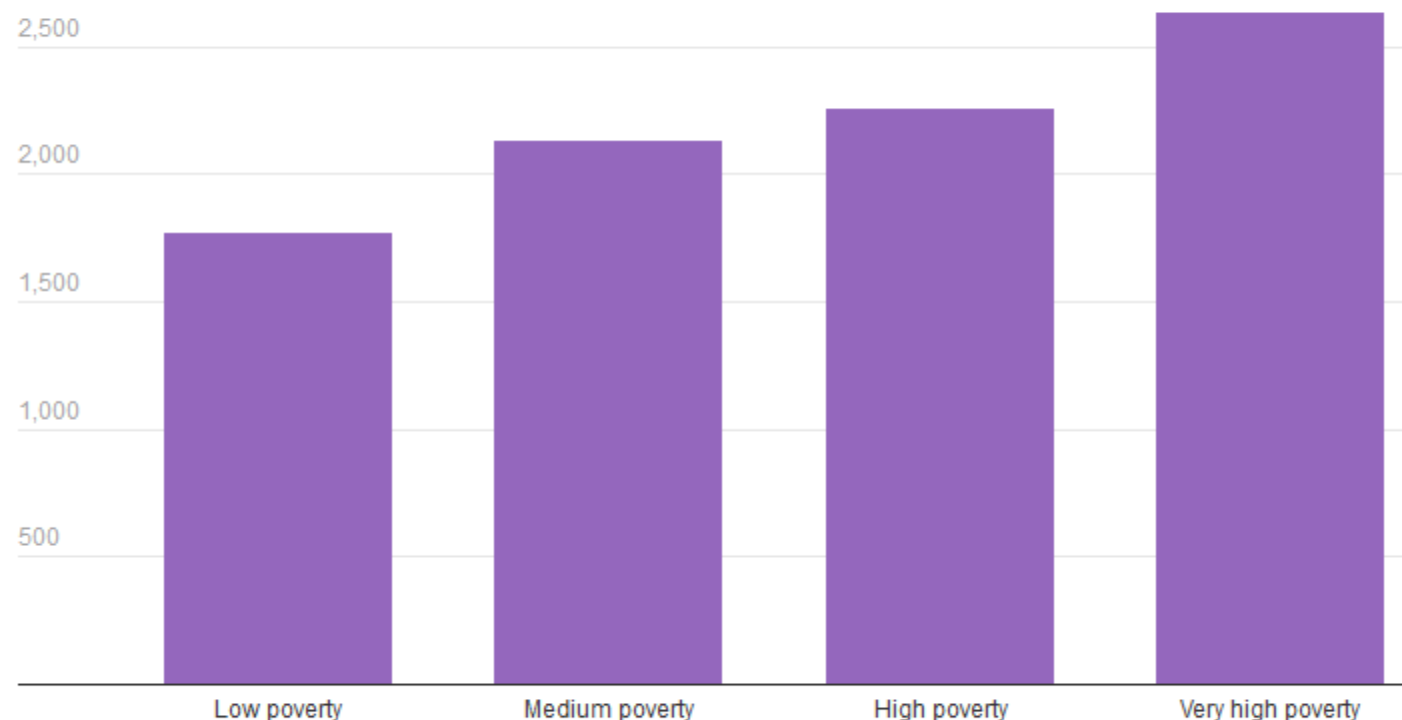
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Case, Hospitalization and Death Rates

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Cases Hospitalizations Deaths



Created with [Datawrapper](#)

Neighborhood poverty is the percent of a ZIP code's population living below the Federal Poverty Level, per the [2013-2017 American Community Survey](#). Low poverty: under 10%; Medium poverty: 10% to 19.9%; High poverty: 20% to 29.9%; Very high poverty: 30% and over.

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California COVID19 Cases and Deaths 6/4/20

All Cases and Deaths associated with COVID-19 by Race and Ethnicity

Race/Ethnicity	No. Cases	Percent Cases	No. Deaths	Percent Deaths	Percent CA population
Latino	45,965	54.2	1,665	39.4	38.9
White	16,634	19.6	1,416	33.5	36.6
Asian	7,471	8.8	619	14.6	15.4
African American/Black	4,378	5.2	424	10	6
Multi-Race	645	0.8	27	0.6	2.2
American Indian or Alaska Native	178	0.2	13	0.3	0.5
Native Hawaiian and other Pacific Islander	666	0.8	33	0.8	0.3
Other	8,902	10.5	33	0.8	0
Total with data	84,839	100	4,230	100	100

Cases: 119,807 total; 34,968 (29%) missing race/ethnicity

Deaths: 4,298 total; 68 (2%) missing race/ethnicity

<https://www.cdph.ca.gov/Programs/CID/DCDC/Pages/COVID-19/Race-Ethnicity.aspx>

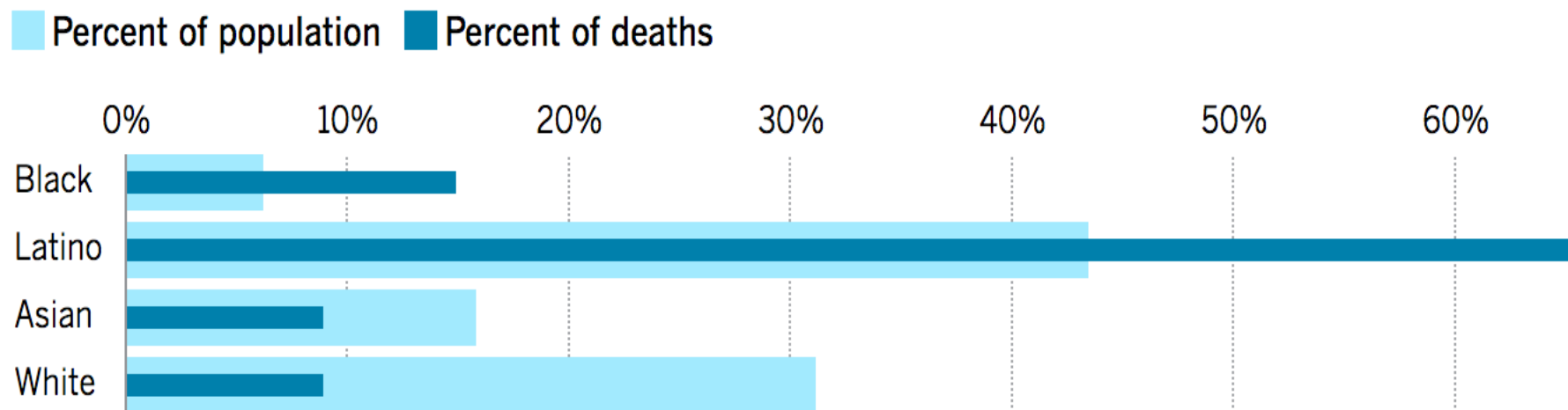
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California Deaths from COVID-19

Disparities found in COVID-19 death rates

In California, black and Latino patients ages 18 to 49 are dying of COVID-19 more often relative to their share of the population than other racial groups and their older counterparts.



NOTE: Figures as of April 23.

California Department of Health

Ran Poston

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Striking report compares coronavirus response in San Francisco, New York City

By [Eric Ting](#), SFGATE



New York City		San Francisco	
Cases	Deaths	Cases	Deaths
204,576	17,203	2,809	44

6/10/2020



Unidos en Salud Preliminary Report

UCSF and UC Berkeley in collaboration with Latino Task Force on COVID-19, Ward 86 and ZSFG, the San Francisco Department of Public Health, Office of Hillary Ronen and the Chan-Zuckerberg Biohub.

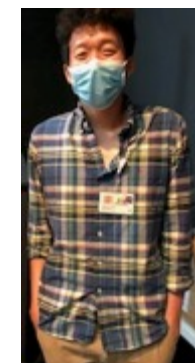
What did we do to overcome these barriers?



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ZUCKERBERG
SAN FRANCISCO GENERAL
Hospital and Trauma Center

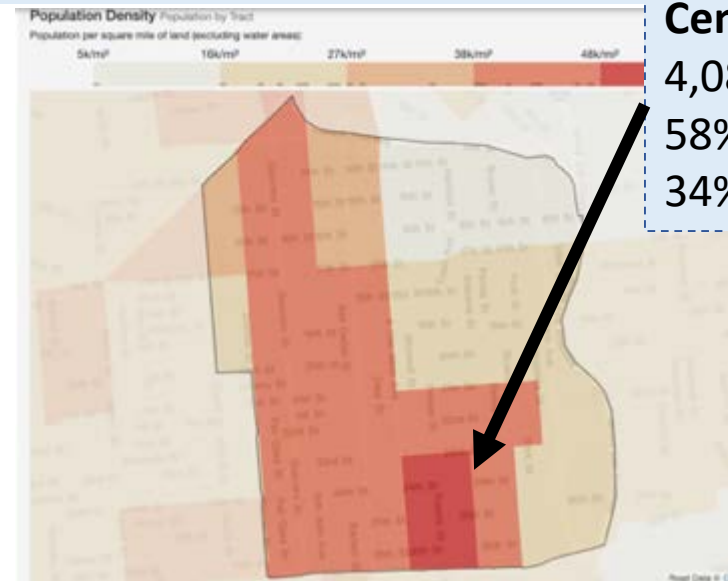
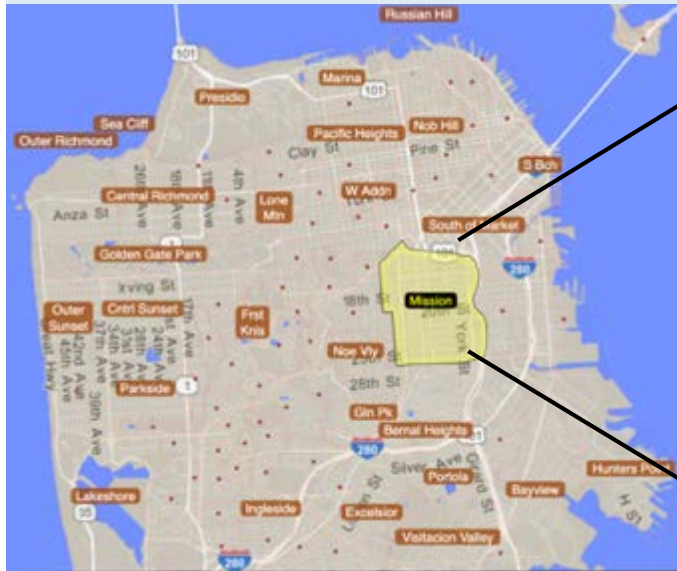


Center
excellence

Setting: Mission District

April 25-28 – 6 weeks into shelter in place

The Mission, San Francisco

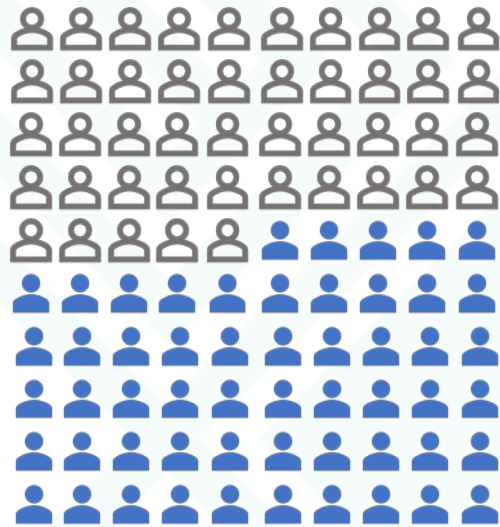


Census Tract 022901*
4,087 adults (>20 years)
58% Latinx
34% HH Income < \$50K

This census tract in the Mission is the **second most dense** in San Francisco of all census districts >5,000 persons (and the highest with a significant Latinx population).

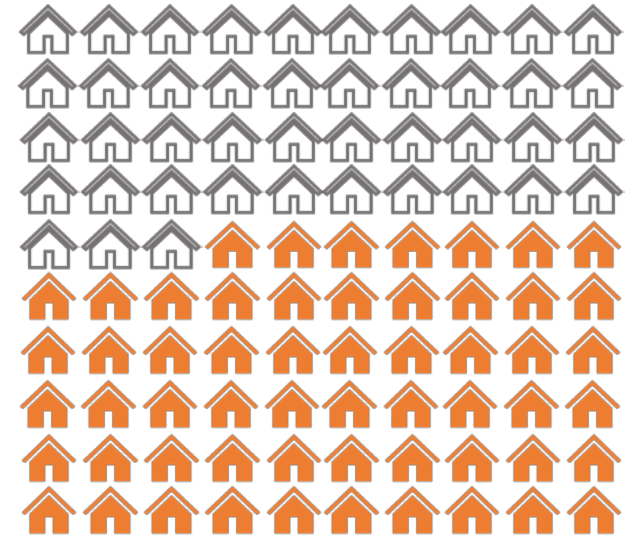
*2018 American Community Survey (U.S. Census Bureau)

Overall testing coverage of the population



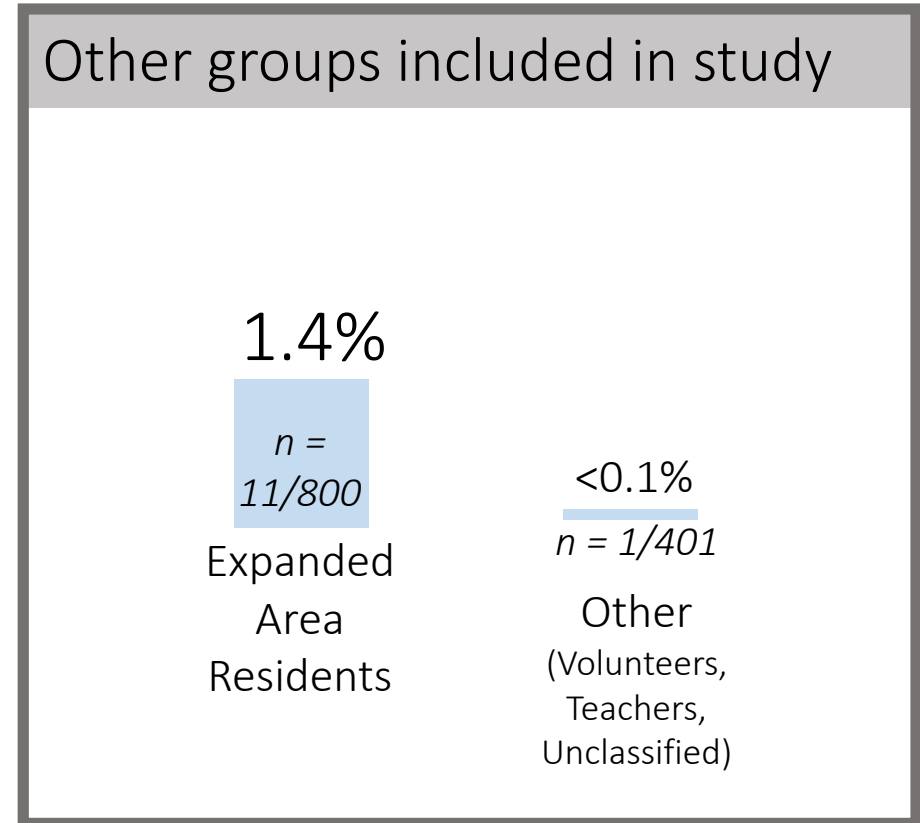
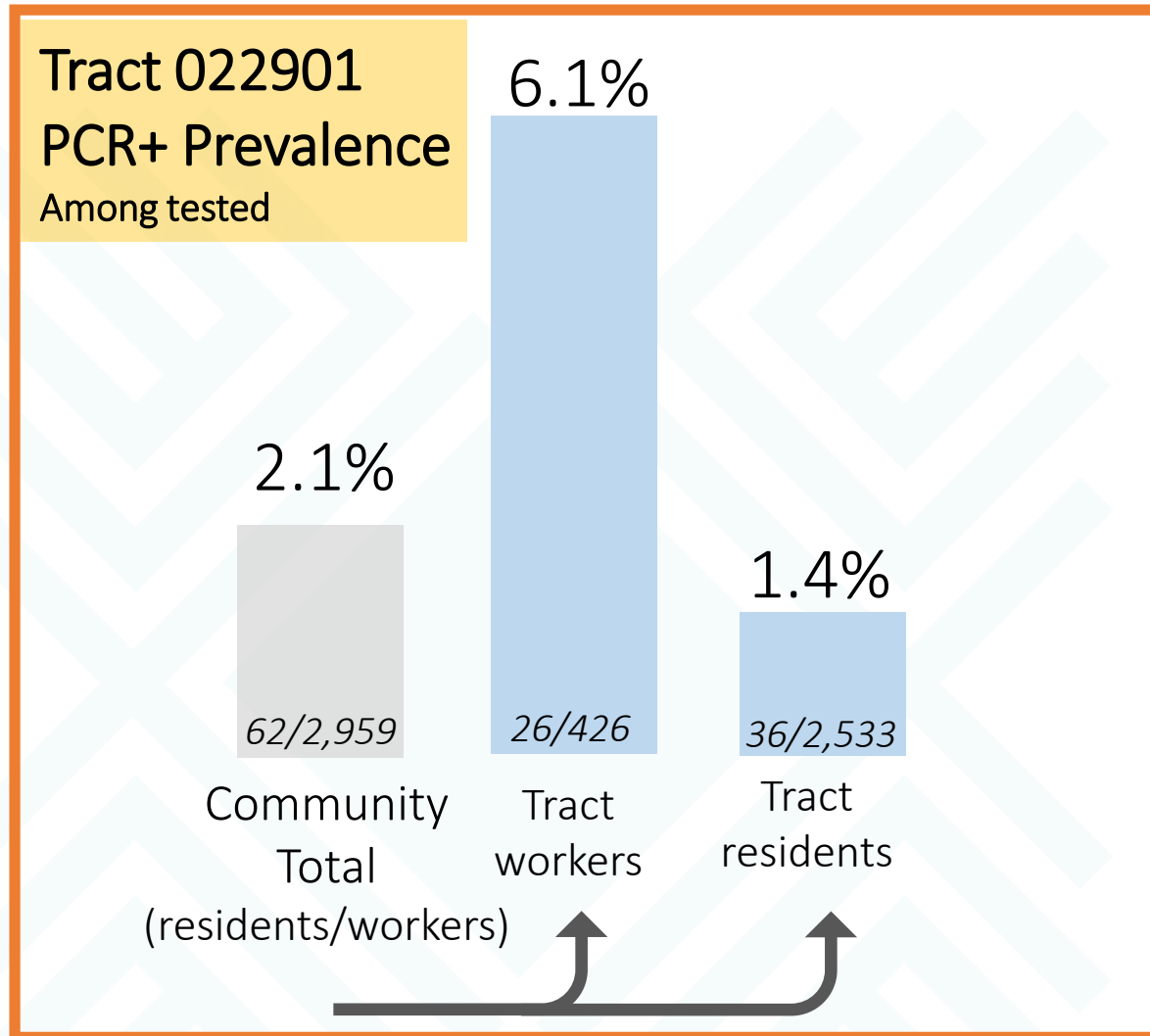
2,271 residents
represent **55%**
of the total
estimated
population of
census tract
022901

Preliminary
estimates suggest
the study reached
57% of the
households
of census
tract 022901



The above population coverage statistics include residents only

Testing Results: PCR+ for COVID-19



PCR positive vs. negative: Work Impact

PCR+ (n=61)		Overall Tested Residents + Workers
Can work from home	10%	43%
Cannot work from home (still working outside of home, furloughed, unemployed)	90%	57%

People who cannot sustain their income while sheltering in place are disproportionately represented in the PCR+ cases

PCR+s versus overall tested population

PCR+ (n=61)

Overall Tested Residents + Workers

Sex		100%	Total # Tested	
Male	75.4%	54.8%	1,439	
Female	24.6%	45.2%	1,188	
Ethnicity		100%	Total # Tested	
White or Caucasian	0.0%	37.8%	981	
Black or African American	0.0%	2.9%	76	
Hispanic or Latino/Latinx	95.1%	44.1%	1,145	
Asian or Pacific Islander	4.9%	11.4%	296	
Native American	0.0%	0.2%	5	
Other	0.0%	3.5%	91	

PCR+s versus overall tested population

PCR+ (n=61)

Overall Tested Residents + Workers

Income	100%
< \$50,000 per year	88.9%
\$50,000-100,000 per year	7.4%
>\$100,000 per year	3.7%
Household Size	100%
1 to 2	11.5%
3 to 5	59.6%
> 5	28.8%
Age Group	100%
<10	6.5%
10 to 17	3.2%
18 to 50	71.0%
50 - 70	14.5%
> 70	4.8%

100%	Total # Tested
39.3%	989
26.9%	677
33.8%	849
100%	Total # Tested
35.7%	871
49.6%	1,211
14.7%	359
100%	Total # Tested
2.2%	66
4.0%	119
64.0%	1,893
24.6%	729
5.1%	152

Inpatient Demographics for COVID-19 Positive Cases at Zuckerberg San Francisco General (as of 4/13)

- First 70 cases
 - 83% Latinx
 - 64% Men
 - Median age: 47y
 - Housing status
 - 40% high density
 - 36% multi-family

Jain V, Marquez C, Ranji S

Prototypical patient

Middle age Latino man with diabetes, limited English, low-wage worker, congregate living situation.

This prototypical patient also has low health literacy and little education in Spanish

UCSF Latinx Center of Excellence

<https://latinx.ucsf.edu/>



ADVISORY BOARD

- UCSF
- DPH
- SFSU
- Workforce experts
- CBOs
- Ntl Experts

CHC Foundation
Chancellor, CSF
Pres, NHMA

50% AA staff
50% Latino
All programs open
to UIM broadly

UCSF LCOE COVID-19 Response

- Prevention --- trustworthy information re SIP (stay at home), physical distancing, masks
- Testing: working with SF-DPH to lower barriers to testing
 - Access; costs; immigration fears, public charge
- Contact tracing: the workforce we need
- Health policies: I=Q; workplace safety; paid sick leave

Reliable Public Health Information in Spanish

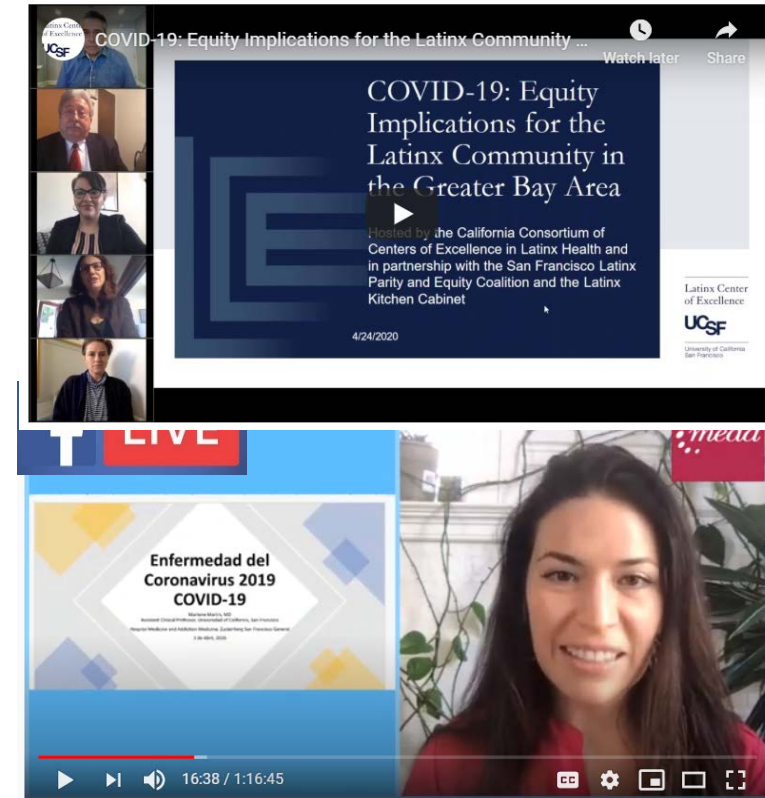
- Media
 - Television
 - Radio -- interviews and call-in shows
- CBOs
 - trusted intermediaries
 - needed accurate, rapid information and
 - get their own questions answered
- Community members



LCOE Webinars & Facebook Live Sessions To Date

- Five (5) webinars about COVID-19 for CBOs serving vulnerable populations (immigrant, refugee, asylee, and/or housing insecure)
- Four (4) Facebook Live Sessions with Mission Economic Development Agency (MEDA-SF)
 - Spanish: 4.4K views

All videos available online: <https://bit.ly/2wDQvRq>



Dr. Marlene Martín
(4.3.2020)

LCOE Street Team

- Outreach to individuals in food distribution lines
 - Disseminate health information and answer questions
 - Provide resources for testing
 - Address misinformation and immigration fears
 - Provide masks to community members
- UCSF student volunteers
 - Dental, Medical, Nursing, Pharmacy & Physical Therapy



Materials and Engagement

- Plain language
- Spanish vetted multiple times for country-specific idioms and simplicity
- Low literacy format: less is more. (Very difficult for academics)
- Address cost and documentation fears in every talk/handout

Testing

- Access: where to go, cost (free), risk (ICE, INS)
- Appointments as barriers
- Intrusive questions
 - LCOE secret shoppers
- Alternate test sites in trusted locations YET integrated to health care system

Contact Tracing:

- Phone call: *Tell me everyone you have been in contact with starting two days before you became ill*
- Fear, worry, uncertainty vs. trust and comprehension
- Trust: much higher with language concordance MD
- Comprehension twice as high of ED instructions w/ language conc.
- Blood sugar control improves after switch to Spanish speaking MD
- >>>>language concordance is a must
- >>>>cultural concordance likely important >>>>CBO CHWs

Collective Impact Model

The Five Conditions of Collective Impact

Common Agenda	All participants have a shared vision for change including a common understanding of the problem and a joint approach to solving it through agreed upon actions.
Shared Measurement	Collecting data and measuring results consistently across all participants ensures efforts remain aligned and participants hold each other accountable.
Mutually Reinforcing Activities	Participant activities must be differentiated while still being coordinated through a mutually reinforcing plan of action.
Continuous Communication	Consistent and open communication is needed across the many players to build trust, assure mutual objectives, and create common motivation.
Backbone Support	Creating and managing collective impact requires a separate organization(s) with staff and a specific set of skills to serve as the backbone for the entire initiative and coordinate participating organizations and agencies.

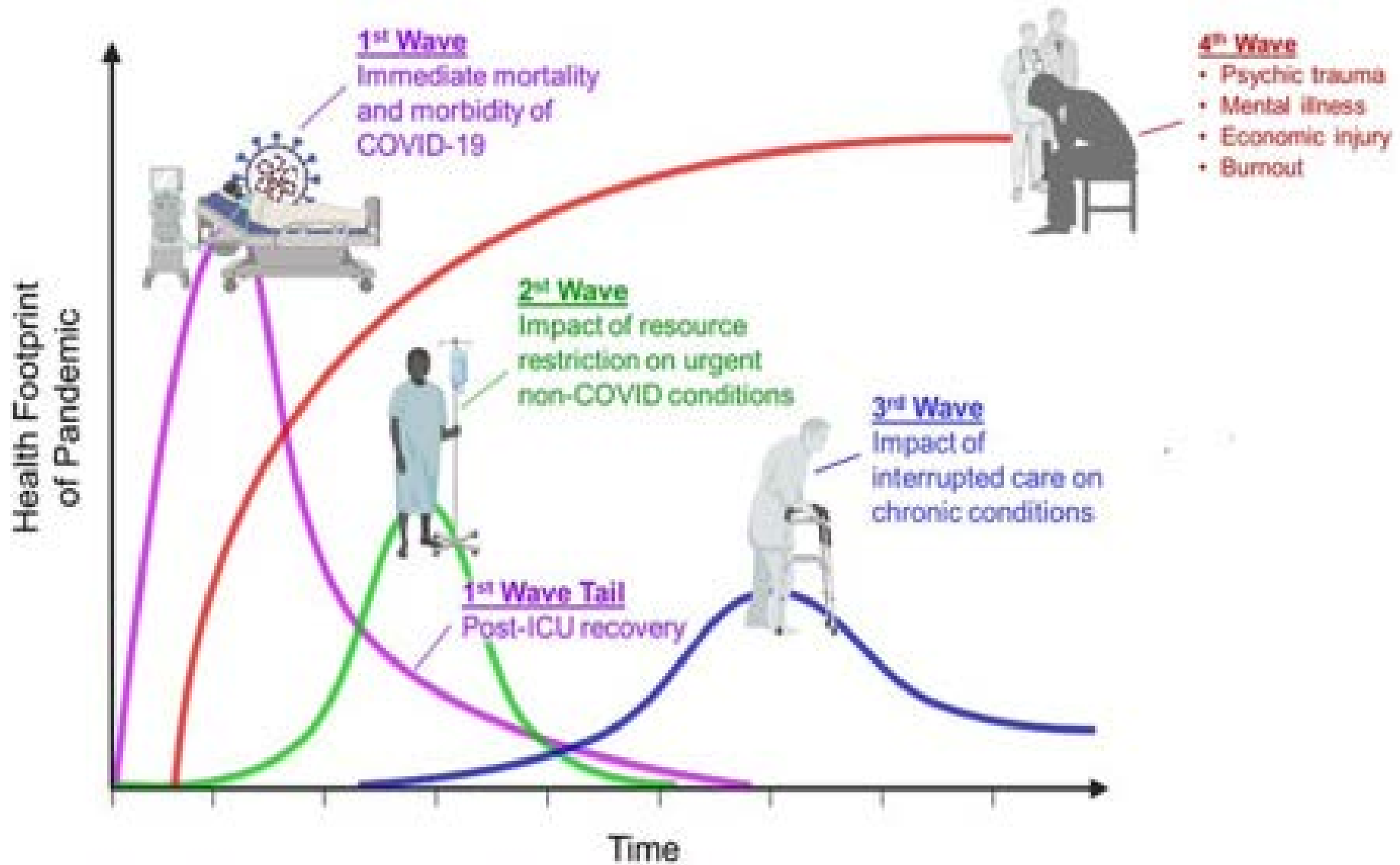
- Stanford Social Innovation Review: <https://bit.ly/2Y06xyF>
- FSG: <https://www.fsg.org/>
- Community Tool Box: <https://bit.ly/2XAzOMK>



Chicano/Latino/Indígena
Health Equity Coalition



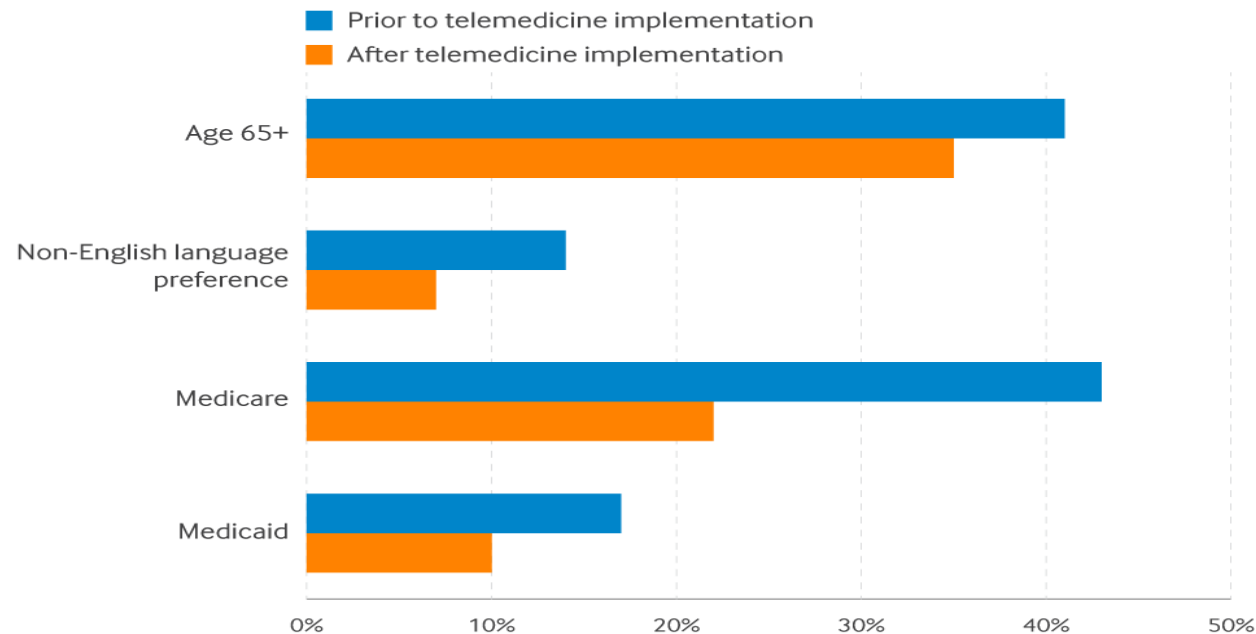
SF District Attorney's Office, Victim
Services Division



Disparities in Telehealth: UCSF Health Data

Patient Visits by Age, Language, and Insurance Before and After Telemedicine Scale-Up

This chart shows the proportion of patient visits seen by age, language preference, and insurance type prior to (2/17–2/28/2020) and after (3/23–4/3/2020) scaled-up telemedicine implementation to address the Covid-19 pandemic at the UCSF General Internal Medicine Primary Care Practice (P=0.002 for age ≥ 65 and P<0.001 for other comparisons). A significantly smaller proportion of visits after scaled-up telemedicine implementation were with vulnerable patients.



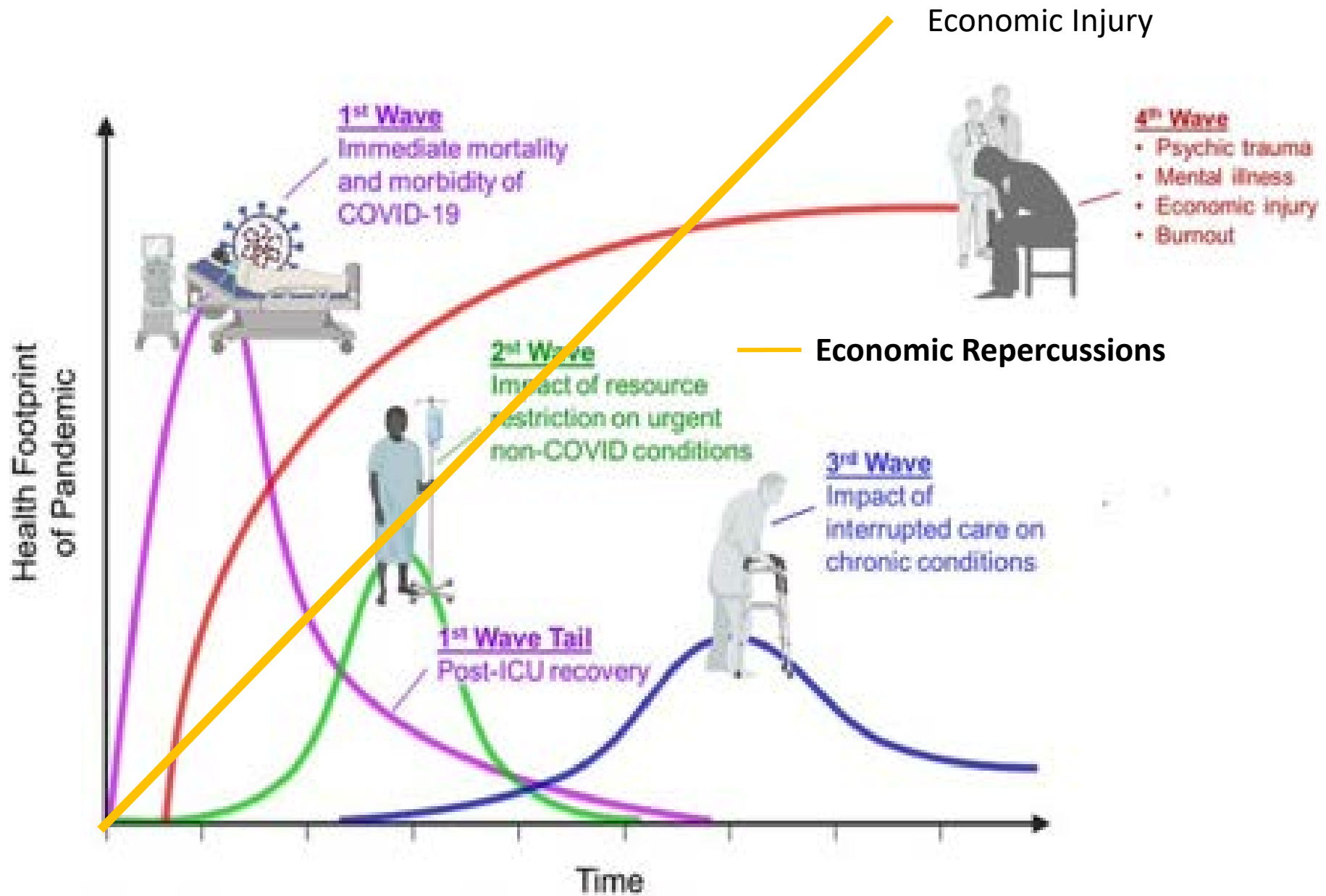
Source: The authors
NEJM Catalyst (catalyst.nejm.org) © Massachusetts Medical Society

Sarah Nouri, MD,
MPH,
Elaine C. Khoong,
MD, MS,
Courtney R. Lyles,
PhD &
Leah Karliner,
MD, MAS

NEJM Catalyst

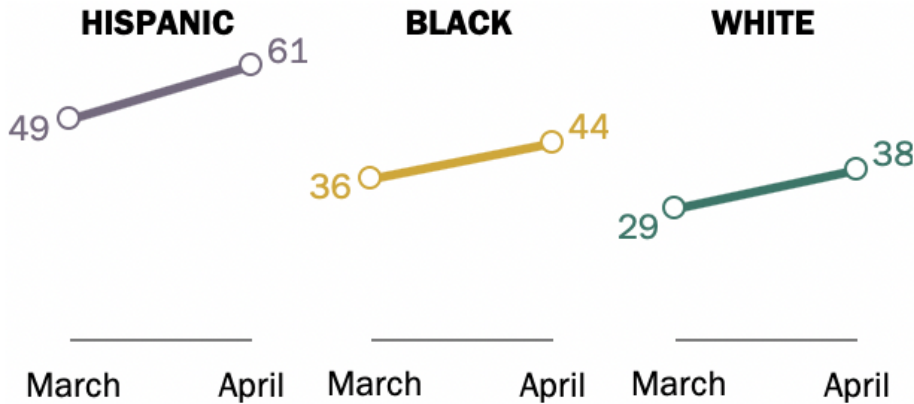
Telehealth

- Digital literacy and Digital divide
- Health literacy: self-management and self-triage
- Language access



Hispanic and black Americans have been hardest hit in COVID-19 wage, job losses; most do not have rainy day funds

% saying they or someone in their household has lost a job or taken a pay cut due to the corona virus outbreak



% who said in April they do not have rainy day funds to cover expenses for three months in case of emergency



Note: Whites and blacks include those who report being only one race and are non-Hispanic. Hispanics are of any race. Share of respondents who didn't provide an answer not shown.
Source: Surveys of U.S. adults conducted March 19-24 and April 7-12, 2020.

Health Policies

- Workplace protection: guidance and mandates
- Extend the CARES Act sick leave to small (<50) and large (>500) corporations
- Extend sick leave to undocumented and mixed status families
- Diversification of healthcare workforce

Summary

- COVID19 as great revealer
- COVID19 as great enforcer
- COVID19 as opportunity
 - public health
 - health systems
 - social policies
 - professionalism

References

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