
**Report to
The Vermont Legislature**

Addressing COVID-19 Health Related Disparities

**In accordance with Sec. 8 of Act 136. An act relating to health care-and human services-
related appropriations from the Coronavirus Relief Fund**

Submitted to: House Committee on Appropriations, Health Care, and Human Services
Senate Committee on Appropriations, and Health and Welfare

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Introduction

Sec. 8 of [Act 136 \(2020\)](#) directs the Health Department to report to the Legislature on the use of Epidemiology and Laboratory Capacity (ELC) Enhanced Detection Grant funding and Coronavirus Relief Funding (CRF) to address health disparities during the COVID-19 pandemic. While a comprehensive plan for using these funds continues to be developed, an outline of the grants planned to date are provided below.

In order to determine the best use of these funds, the Health Department established the Health Equity and Community Engagement Team to consider the needs of vulnerable Vermonters facing health inequities during the pandemic. This report reflects only the beginning of the Department's response to support these populations.

This report covers funding plans for the current CRF. Use of the ELC grant has not yet been planned.

Grants Planned

Recipient: Spectrum Youth and Family Services

Amount: \$225,001

Summary: Funds will support the Cultural Brokers program – a community health worker program designed to engage members of a community in health messaging and care management. Funding will also be used to offer health equity, implicit bias training to the Health Department workforce. Funds will also support needs assessments with refugee cultural groups with findings reported back to the Health Department in order to inform future work.

Recipient: UVM Extension Bridges to Health

Amount: \$66,761

Summary: Funding will support outreach workers, nurses, personal protective equipment procurement, and messaging/communications targeted to migrant worker populations statewide.

Recipient: Open Door Clinic

Amount: \$18,445

Summary: Funding will support outreach workers, nurses, personal protective equipment procurement, and messaging/communications to the migrant worker population in Addison County, where there is a large number of migrant workers.

Recipient: United Way of Windham County

Amount: \$100,000

Summary: United Way will award funding to subgrantees to address racial and social justice and to meet the essential needs of vulnerable populations during this pandemic.

Recipient: United Way of Rutland County

Amount: \$89,763

Summary: United Way will award funding to subgrantees to address racial and social justice and meet the essential needs of vulnerable populations during this pandemic.

Coordination with the Racial Equity Taskforce

The Health Equity and Community Engagement Team has presented to the Racial Equity Taskforce and are engaged in the State of Vermont Racial Equity Team. The Team met with State Racial Equity Director, Xusana Davis, twice in July to seek recommendations and comment on the funding ideas outlined above and received positive feedback on the direction.

Potential Future Directions

The Health Equity and Community Engagement Team will continue to develop recommendations in coordination with community groups, and based on the experiences from these first initiatives. Many lessons from the Winooski-Burlington outbreak in July were also documented and will be used as the group plans future work. Some examples of initial key takeaways include:

- The importance of developing a community health workforce;
- The need to hire members of a specific community in order to ensure all Vermonters have access to the information they need; and
- The importance of engaging local community groups to assist in conducting outreach in the event of a community outbreak.

As additional Coronavirus Relief funding becomes available, the Health Equity and Community Engagement Team will prioritize populations most likely to experience adverse outcomes from COVID-19, including:

- Abenaki
- BIPOC Vermonters
- Youth
- Older adults
- People with disabilities
- Migrant workers
- Rural individuals of low socioeconomic status
- Precariously housed individuals
- Essential workers