

## MEMORANDUM

TO: House Committee on Health Care: Rep. William Lippert, Jr. (Chair) and Rep. Anne Donahue (Vice Chair) Demis Martin ([demis@leg.state.vt.us](mailto:demis@leg.state.vt.us))

House and Senate Appropriations: Theresa Utton-Jerman ([tutton@leg.state.vt.us](mailto:tutton@leg.state.vt.us)) and Chrissy Gilhuly ([cgilhuly@leg.state.vt.us](mailto:cgilhuly@leg.state.vt.us))

FR: Accurate Race/Ethnicity COVID Data Tracking Committee, Community Equity Collaborative of the Brattleboro Area Diana Wahle ([dianawahle@gamil.com](mailto:dianawahle@gamil.com))

Date: September 1, 2020

RE: **Testimony re: Future COVID Funding designated for Vermonters of Color**

The Accurate Race/Ethnicity COVID-19 Data Tracking Committee works towards a more accurate and comprehensive picture of how COVID-19 has impacted our Vermont community members of color in Windham County and statewide. Our goal is to collect, analyze and report data dis-aggregated by age, race, ethnicity, gender, disability, neighborhood and other sociodemographic characteristics. We were founded by the Windham County NAACP and the Community Equity Collaborative of the Brattleboro Area. Our membership includes Brattleboro Memorial Hospital administrators, Vermont Department of Health staff, as well as NAACP and CEC representatives.

The COVID cases in Vermont reflect the national trend. See attached our committee's Change Over Time data tracking report and check the State-All page. For COVID-19 cases, the Black/African American rate is ten times the white rate per 10,000. Since March the rate of Black/African American and Hispanic Vermonters has doubled. We strive to get beyond data analysis to promote effective ways to reduce these appalling health disparities.

### **Deepen the investment in outreach and health services support for migrant workers**

**statewide:** The goal is to test everyone – we need to better target vulnerable populations who have lacked access to testing thus far. During COVID, many workers fear being tested or receiving health care because of problems with ICE. We recognize a gap in testing is occurring. In Windham County, the only pop-up testing clinics to date have been in Brattleboro and in long term care facilities. Big issues are trust and connection. There are a range of barriers: testing is by appointment online, which requires English language and awareness of how to make an appointment. Testing also requires access to the internet and to transportation. We recommend investment in community health workers who can reach out to farm workers and their employers effectively. We also recommend having testing take place at work sites.

A COVID relief fund has recently been established by VDH for migrant workers: \$67,000 of CARES funding has been awarded by VDH to the UVM Extension Service to assist access to treatment and testing for this population. We recommend expanding on this investment. UVM Extension views access to testing for agricultural workers as a particular concern. On-farm

testing capacity is on a county by county and health entity by health entity basis. UVM Extension is able to facilitate communication and scheduling but without a health entity in a particular county that offers mobile testing, on-farm testing is not possible. We recommend funding health services so that every county has an effective testing outreach strategy in place.

**We need to understand what is driving these growing disparities. COVID-19 offers us the opportunity to develop a long-term strategy.** In this present tumultuous pandemic situation, we want to take advantage of the opportunities for positive change in our health care system. Presently Black, African American, Asian and Hispanic Vermonters have the highest rates of COVID-19, growing higher every day. We are aware that people of color are more likely to be front-line workers, to live in dense or overcrowded housing, to lack health insurance, and to experience chronic diseases, all of which are linked to structural racism. Race and ethnicity data accountability needs to focus on ensuring the health of the population, ensuring equitable access to care, and ensuring better quality of care. We recommend investing now in understanding the intersection of race and ethnicity with chronic diseases, socio-economic status and hardships and lack of access to health services. With One Care as a partner, develop a strategy that improves the health of marginalized populations post-COVID-19.

Thank you for considering these recommendations as you finalize your plan for the use of COVID funding.

Accurate Race/Ethnicity COVID Data Tracking Committee Membership

Wichie Artu, BMH Data & Analytics Specialist

Becky Burns RN, Director of BMH Community Initiatives

Imogene Drakes PhD, BMH Director of Laboratory Services

Steffen Gillom, President, Windham County NAACP

Gilbert Green MD

Rebecca Jones MD

Kat McGraw MD, BMH Chief Medical Officer

Jodi Stack RN, BMH Chief Nursing Officer

Diana Wahle, Community Equity Collaborative (CEC) member and committee convenor