

# What New York's learned about health equity during the pandemic

SEP 15, 2020

**Tanya Albert Henry**

Contributing News Writer

There are steps public health departments, physicians and other health professionals can take to make health equity a priority during the pandemic, including actively reaching out to patients who have historically experienced structural racism and working as a community to help patients get the care and support they need.

But first, “to address equity, you have to have your eyes open to equity and be clear that there are folks that you need to work to reach out to during an emergency,” Demetre Daskalakis, MD, MPH, deputy commissioner of disease control at the New York City Department of Health and Mental Hygiene (NYC Health) said during a recent panel discussion led by AMA Chief Health Equity Officer Aletha Maybank, MD, MPH.

Dr. Daskalakis was one of three physicians from NYC Health who shared what they've done to prioritize health equity during the COVID-19 outbreak. The conversation was part of the AMA's “Prioritizing Equity” series that illuminates how COVID-19 and other determinants of health affect marginalized communities, public health and health equity, with an eye on both short-term and long-term implications.

Dr. Daskalakis still sees primary care patients, including patients living with HIV, so when his clinic closed at the height of the pandemic in New York City, he looked at his patient list and contacted HIV patients and patients living in neighborhoods hardest hit by the virus.

“Patients who have historically had issues because of structural racism are going to have issues during the emergency as well,” he said.

The AMA created the COVID-19 health equity resources page to help shine a light on structural issues contributing to and exacerbating health inequities amid the COVID-19 pandemic.

Stay up to speed on the AMA's COVID-19 advocacy efforts and track the fast-moving pandemic with

the AMA's COVID-19 resource center, which offers a library of the most up-to-date resources from JAMA Network™, the Centers for Disease Control and Prevention, and the World Health Organization.

## Working with a community

Providing support and assurances for people in communities that have experienced health inequities is a must, said Torian Easterling, MD, MPH, deputy commissioner for health equity and community wellness at NYC Health.

“We are really thinking about what we can do to ensure that individuals know that the resources are being allocated to them, that we are minimizing any barriers and ensuring that individuals understand that this information is not being used to penalize or criminalize individuals in New York City neighborhoods where historically that has happened,” he said.

With New York City suppressing the virus, the health department can move resources into an area where there may be low testing, but high positivity rates. For example, in Tremont in the South Bronx, NYC Health partnered with a church and physicians in the neighborhood.

They brought rapid testing to the neighborhood and medical professionals were able to talk to those who tested positive 15 or 20 minutes after they got their results to explain what the next steps were in keeping themselves isolated so they didn't spread the virus to family or community members. They were able to connect people with mental health support and help them find assistance in getting food or prescriptions delivered or securing their job while they isolated.

“It's not just a testing site,” Dr. Easterling said.

## Physician aid in contact tracing

Contact tracing is a key piece in continuing to suppress COVID-19 rates in New York City. But people have understandable reasons to be skeptical of the government and getting an unexpected call from a contact tracer asking personal questions about where they have been and who they have had contact with can be off-putting, said Neil M. Vora, MD, director of tracing at NYC Health and the Health + Hospital Corporation. But physicians can help.

“When clinicians tell their patients who are getting tested for COVID to expect a call from a contact



tracer, that helps us to do our contact tracing job,” Dr. Vora said.

Learn more about the health equity education on the AMA Ed Hub™ featuring CME from the AMA’s Center for Health Equity and curated education from collaborating organizations. To earn CME on the AMA’s “Prioritizing Equity” videos, visit the courses page on AMA Ed Hub™.