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**HEALTH DISPARITIES, COVID-19, AND MOVING FORWARD:  
Looking Into Policy Changes That Can Address Health Inequities In  
Marginalized Communities Since Covid-19**

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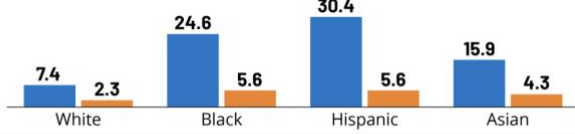
## BACKGROUND:

The COVID-19 pandemic has revealed and exacerbated long-standing health inequities that disproportionately affect marginalized communities. These communities, including racial and ethnic minorities, low-income individuals, and individuals with limited access to healthcare, have experienced higher infection rates, severe illness, and mortality rates compared to more advantaged groups. These disparities are rooted in structural inequalities, including systemic racism, socioeconomic disparities, and limited access to healthcare services.

### COVID-19 Hospitalization and Death Rates among Active Epic Patients by Race/Ethnicity

Rate per 10,000, as of July 2020

● Hospitalization Rate ● Death Rate



Total Active Patients (millions): White 34.1, Black 7.0, Hispanic 5.1, Asian 1.4

A comprehensive examination of the California Department of Public Health's recent report on COVID-19 Race and Ethnicity Data reveals concerning trends regarding the impact of the pandemic on low-income communities and communities of color. The report highlights that these communities have experienced higher rates of COVID-19 infection and death within California. Notably, Hispanic communities have reported the highest number of cases in 2023, accounting for 44.5% of cases. These statistics underscore the existence of systemic issues that disproportionately affect these marginalized communities. Effectively addressing these disparities necessitates a holistic approach encompassing policy initiatives that enhance healthcare and social service accessibility, as well as substantial investments in mental health services for marginalized populations.

In addition to the disparities emphasized by the California Department of Public Health's report, a study conducted by Sohn et al. in 2021 identifies a higher risk of COVID-19 contraction among immigrants in California. This heightened risk is attributed to factors such as limited access to healthcare and social services, as well as the fear of deportation, which discourages immigrants from seeking necessary medical care and testing. Furthermore, the study reveals that immigrants are less likely to receive government assistance, including stimulus checks, exacerbating health inequalities. Sohn et al.'s study emphasizes the urgent need for policies that support immigrant communities by ensuring access to healthcare and providing financial assistance. It also underscores the significance of addressing the fear of deportation, which acts as a barrier to healthcare utilization. Choi's (2020) research on the mental health implications of COVID-19 in low-income communities and communities of color highlights existing disparities. The pandemic has exacerbated mental health inequities, emphasizing the need for increased investment in mental health services tailored to marginalized communities. This investment would benefit individuals within these communities and alleviate the burden on the healthcare system.

The COVID-19 pandemic has shed light on the pre-existing health inequities in California, particularly among low-income communities and communities of color. By examining the research question "What policy changes can be implemented to address and diminish health disparities within marginalized communities?" we can establish connections between various injustices and their impact on these communities, such as increased mortality rates and the mental health crisis. Effectively tackling these inequities requires a multifaceted approach that includes policies aimed at improving healthcare and social service accessibility, as well as substantial investments in mental health services for marginalized communities. By undertaking these measures, we can strive towards a more equitable healthcare system in California that ensures equal access to care for all.

## POLICY ALTERNATIVES:

Addressing health inequities requires comprehensive policy alternatives that enhance healthcare access and target the underlying social determinants of health. By expanding Medicaid coverage, policymakers can ensure that low-income individuals have access to vital healthcare services. Additionally, increasing funding for community health centers enables comprehensive care for marginalized populations. Investing in telehealth infrastructure overcomes geographical barriers to healthcare. Policies that focus on social determinants of health, such as affordable housing initiatives, income support programs, and food security programs, address structural issues contributing to disparities. Moreover, promoting culturally competent healthcare, community-based participatory research, and targeted health education and outreach empower marginalized communities and address their unique needs. Through the implementation of these policy alternatives, significant progress can be made in reducing health inequities and promoting equitable access to healthcare for all.

**Enhancing Healthcare Access:** Expand Medicaid coverage — Governments should consider expanding Medicaid eligibility to ensure that more low-income individuals have access to essential healthcare services, including testing, treatment, and vaccines. This approach directly targets the population most vulnerable to health inequities—those with limited financial resources. Expanding Medicaid can significantly improve healthcare access for low-income individuals who might otherwise be unable to afford necessary medical care. By providing coverage for preventive services and chronic disease management, this policy alternative aims to address health disparities at their root.

For example, a study conducted in states that expanded Medicaid under the Affordable Care Act found that expansion led to a significant reduction in uninsured rates, increased access to primary care, and improved health outcomes for low-income individuals (Soc, 2014). By expanding Medicaid, policymakers can ensure that marginalized populations have a consistent source of healthcare coverage and reduce the financial barriers that often prevent individuals from seeking necessary care.

**Increase Funding for Community Health Centers:** Allocating additional resources to community health centers serving marginalized communities allows them to expand their capacity

and provide comprehensive care to underserved populations. This policy alternative is desirable because community health centers are often the primary source of healthcare for individuals in low-income and minority communities. By increasing funding, policymakers can support these vital healthcare institutions and enable them to offer a broader range of services, including preventive care, chronic disease management, and mental health support.

For example, a study published in the *New England Journal of Medicine* found that increased funding for community health centers was associated with improved access to care, increased use of preventive services, and reduced hospitalization rates among low-income patients (Sandhu et al., 2022). By investing in these community-based clinics, policymakers can ensure that marginalized populations have access to quality healthcare that is culturally competent and responsive to their specific needs.

**Telehealth Infrastructure:** Investing in robust telehealth infrastructure and promoting its use in marginalized communities can improve access to healthcare services, especially in rural or geographically isolated areas. This policy alternative is desirable because it addresses the barriers of distance and transportation that often prevent individuals from seeking timely medical care. Telehealth enables individuals to receive remote medical consultations, access specialists, and

receive necessary prescriptions without the need for physical travel.

For example, during the COVID-19 pandemic, telehealth utilization significantly increased, showcasing its potential to bridge healthcare access gaps. However, it is crucial to ensure that telehealth services are accessible to all, including those without reliable internet access or digital literacy skills. By investing in infrastructure and promoting telehealth services, policymakers can leverage technology to overcome geographical and logistical barriers, thus improving healthcare access for marginalized communities.

### **Addressing Social Determinants of Health:**

**Affordable housing initiatives:** Implement policies that increase the availability of affordable housing options in marginalized communities, reducing overcrowding and exposure to infectious diseases. This policy alternative is desirable because stable and safe housing is a fundamental social determinant of health. It can significantly impact individuals' ability to maintain good health and access healthcare services. By implementing affordable housing initiatives, policymakers can address the underlying structural issues that contribute to health disparities, such as homelessness, housing instability, and unsafe living conditions.

For example, a study published in the *American Journal of Public Health* found that housing interventions, such as rental assistance and supportive housing programs, were associated with improved health outcomes, reduced healthcare costs, and decreased hospitalization rates among homeless individuals (Farzana, 2022). By investing in affordable housing initiatives, policymakers can improve the overall well-being of marginalized communities, reduce the burden on healthcare systems, and promote health equity.

**Income Support Programs:** Strengthening and expanding income support programs, such as unemployment benefits and living wage policies, can alleviate poverty and its impact on health outcomes. This policy alternative is desirable

because socioeconomic status is a crucial determinant of health, and individuals living in poverty face significant barriers to healthcare access. By providing financial support and ensuring fair wages, policymakers can help individuals afford healthcare services, nutritious food, safe housing, and other essential resources that directly impact their health.

For example, a study published in *JAMA Internal Medicine* found that states that expanded Medicaid and enacted minimum wage policies had significant improvements in health outcomes, particularly among low-income individuals (Tipirneni & Ayanian, 2022). By strengthening income support programs, policymakers can reduce income inequality, lift individuals out of poverty, and ultimately improve health outcomes for marginalized populations.

**Food Security Programs:** Investing in programs that promote access to nutritious food in marginalized communities, such as community gardens, farmers' markets, and incentives for healthy food retailers to operate in underserved areas, is a desirable policy alternative. Food insecurity is a critical social determinant of health that disproportionately affects low-income and minority populations. By ensuring access to healthy and affordable food options, policymakers can support individuals in maintaining a balanced diet, prevent chronic diseases, and improve overall health outcomes.

For example, a study published in the *American Journal of Public Health* found that community-based interventions, such as farmers' markets in low-income neighborhoods, significantly increased fruit and vegetable consumption among participants (Farzana, 2022). By investing in food security programs, policymakers can empower marginalized communities to make healthier food choices, reduce health disparities related to diet-related illnesses, and promote long-term well-being.

**Community Engagement and Empowerment:** Culturally competent healthcare: Improving cultural competency training for healthcare providers is a

desirable policy alternative to ensure that marginalized communities receive care that is responsive to their cultural and linguistic needs. Cultural competence involves understanding and respecting the beliefs, values, and practices of diverse populations. By enhancing healthcare providers' cultural competency, policymakers can reduce health disparities arising from language barriers, cultural misunderstandings, and implicit biases.

For example, research has shown that culturally competent care leads to improved patient satisfaction, increased adherence to treatment plans, and better health outcomes (Sommers & Bindman, 2012). By providing healthcare professionals with training in cultural competence, policymakers can promote trust and effective communication between healthcare providers and marginalized communities, resulting in improved access to care and overall health outcomes.

**Health Education and Outreach:** Implementing targeted health education campaigns that provide accurate information and resources to marginalized communities is a desirable policy alternative. Health education is a powerful tool for promoting preventive measures, addressing vaccine hesitancy, and increasing awareness of early detection and disease management. By tailoring health education initiatives to the specific cultural and linguistic needs of marginalized communities, policymakers can empower individuals to make informed decisions about their health and well-being.

For example, community-based health education programs have successfully increased knowledge about disease prevention, encouraged behavior change, and improved health outcomes (Sommers & Bindman, 2012). By investing in health education and outreach, policymakers can bridge information gaps, reduce disparities in health literacy, and empower marginalized communities to take control of their health.

## POLICY RECOMMENDATIONS:

**Adopt an Intersectional Approach:** Recognize the intersectionality of race, ethnicity, socioeconomic status, gender, age, disability, and other relevant factors that contribute to health disparities. It is crucial to acknowledge that individuals experience multiple dimensions of inequality simultaneously, and policies should address these intersecting factors to effectively reduce health inequities. This approach requires a comprehensive understanding of how various social determinants of health interact and impact different communities.

**Allocate Resources Strategically:** Governments should strategically allocate resources to ensure that marginalized communities receive adequate healthcare, social support, and community development programs. This entails identifying the specific needs of disadvantaged populations and directing resources accordingly. Resource allocation should prioritize areas with the greatest health disparities and consider factors such as income,

education, geographic location, and cultural barriers to access. It is essential to create targeted interventions that address the root causes of health inequities.

**Foster Collaboration:** Encourage collaboration between government agencies, healthcare providers, community organizations, and researchers to develop and implement comprehensive interventions that address health inequities. Collaboration facilitates the sharing of knowledge, resources, and expertise, leading to more effective policies and programs. By working together, stakeholders can design initiatives that consider the unique needs and perspectives of marginalized communities. This collaboration should extend beyond traditional healthcare sectors to include sectors like education, housing, employment, and transportation, which significantly influence health outcomes.

**Monitor and Evaluate:** Establish robust monitoring and evaluation systems to track progress in reducing health inequities and ensuring accountability. Regular data collection and analysis are crucial to understanding the impact of policies and interventions. Monitoring should focus on health outcomes, access to healthcare services, social determinants of health, and disparities among different population groups. By continuously monitoring and evaluating efforts, policymakers can identify areas that require improvement, identify successful interventions, and make evidence-based decisions to address health inequities effectively.

**Promote Cultural Competency and Sensitivity:** Policies and programs should prioritize cultural competency and sensitivity to ensure that healthcare services and interventions are accessible and appropriate for diverse populations. This involves training healthcare professionals to understand and address the unique cultural, linguistic, and historical

factors that influence health outcomes. By promoting cultural competency, policies can help overcome language barriers, improve trust, and enhance the overall quality of care provided to marginalized communities.

**Invest in Health Promotion and Prevention:** Policies should prioritize investments in health promotion and prevention strategies to address the root causes of health inequities. This includes initiatives that promote healthy lifestyles, early detection of diseases, and preventive care. By focusing on prevention, policies can help reduce the burden of chronic diseases, improve overall population health, and mitigate health disparities. Investing in education, community-based programs, and awareness campaigns can empower individuals to make healthier choices and reduce health inequities in the long run.

## CONCLUSION:

This policy brief emphasizes the urgent need to address health disparities that have been exacerbated by the COVID-19 pandemic in marginalized communities. The evidence presented highlights the disproportionate impact of the pandemic on low-income communities and communities of color in California. These disparities are rooted in systemic inequalities, including structural racism, socioeconomic disparities, and limited access to healthcare services. To effectively tackle these inequities and strive towards a more equitable healthcare system, a multifaceted approach is required, encompassing policy initiatives that enhance healthcare and social service accessibility, as well as substantial investments in mental health services tailored to marginalized populations.

The policy alternatives and recommendations proposed in the brief offer a comprehensive framework for addressing health inequities. By adopting an intersectional approach that considers various dimensions of inequality, policymakers can better understand the unique challenges faced by different communities and develop targeted interventions. Strategic resource allocation is vital to ensure that marginalized populations receive the necessary support and care, with a particular focus on areas with the greatest disparities. Collaboration between various stakeholders, including government agencies, healthcare providers, community organizations, and researchers, is essential to design and implement effective policies. Regular monitoring and evaluation are necessary to track progress and make evidence-based decisions. Cultural competency and sensitivity should be promoted in healthcare services to overcome barriers and improve trust among diverse populations. Investing in health promotion and prevention strategies is crucial to addressing the root causes of health inequities. By focusing on prevention and empowering individuals with knowledge and resources, policies can create lasting improvements in health outcomes.

Overall, by implementing these policy alternatives and recommendations, policymakers can lay the groundwork for sustainable change. They can work towards a future where marginalized communities have equal access to healthcare, essential resources, and opportunities for empowerment. Through collective efforts and a commitment to addressing systemic disparities, a more equitable and inclusive healthcare system can be built, fostering better health outcomes for all Californians.



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