The COVID-19 Pandemic

The National Black Nurses Association (NBNA) above all health care entities, is concerned with the COVID -19 pandemic, and the shattering effect it is having on communities of color that have been disproportionately impacted. As nurses we are the caregivers in most direct contact with those affected. It is also well known that nurses are the most trusted profession giving us leverage with society. NBNA calls on the 117th Congress to address the many social justice and health equity issues that are related to how the COVID-19 pandemic has manifested in our communities.

Background:

With 25.1 million cases and over 420,000 deaths so far in the United States, the COVID-19 pandemic has revealed the extent and depth of persistent health inequities in communities of color. The incidence and death toll rates from the beginning of the pandemic has disproportionately impacted black and other communities of color. With a lack of organization at the federal level this public health crisis was allowed to spread due to issues with access to testing, and the availability of personal protective equipment (PPE) for essential workers. With vaccines now available, early reports are concerning about the disproportionate low uptake in the most affected communities of color.

- All populations of color experienced higher nationwide death rates in 2020 than White Americans
 - The Indigenous, Black, and Latino American death rate was 2.7 times higher than the White death rate.
 - o Pacific Islanders were also 2.3 times more likely to die than Whites.
- COVID-19 Death Rates per 100,000 by Race and Ethnicity at the end of 2020

Indigenous: 133 / 100,000Black: 123.7 / 100,000

o Pacific Islander: 90.4 / 100.000

Latino: 86.7 / 100,000
White: 75.7 / 100,000
Asian: 51.6 / 100,000

Recommendations to Legislators:

NBNA calls upon the 117th Congress to:

- Support the passage of a comprehensive COVID-19 relief bill for all Americans, with provisions to address the specific needs of communities of color such as,
 - o Expanded access to testing for all essential workers.
 - Setup a comprehensive vaccination campaign targeting communities of color and ensuring free vaccination for all.
 - Expanded SNAP food benefits.
 - o Direct relief payments of \$2,000 a month until the end of the pandemic.
 - o Continue rent and mortgage payment suspension.
 - o Cancellation of student loan debt as students of color have the highest debt loads.
 - o Extend unemployment benefits for those affected.

- Support legislation that will ensure that all essential workers have access to free PPE for the duration of the pandemic.
- Support legislation to raise the minimum wage to \$15 dollars an hour.
- Develop and support legislation that promotes the ethnic, racial and gender diversification of the health care workforce aimed at increasing overall cultural competence.
- Develop and support legislation that directly augments the underlying social determinants of health (e.g., socioeconomic factors, education, employment, housing) that historically have disproportionately impacted black and other communities of color that have made them more vulnerable to the COVID-19 pandemic.

Congress.gov. Retrieved 12/2020. https://www.congress.gov/

Coronavirus (COVID-19) frequently asked questions

https://www.cdc.gov/coronavirus/2019-ncov/index.html

CDC Coronavirus Diseases (2021). COVID-19 Data Tracker: death by race. retrieved January 14, 2021. https://covid.cdc.gov/covid-data-tracker/#demographics

Egbert, A., Lioa, K (2020). The color of Coronavirus: 2020 Year in Review. Retrieved on January 24, 2021 from: https://www.apmresearchlab.org/covid/deaths-2020-review

Substance Abuse and Mental Health Services Administration (2020).

https://www.samhsa.gov/sites/default/files/covid19-behavioral-health-disparities-black-latino-communities.pdf

World Economic and Financial survey for US population (WEO) (2020) https://www.imf.org/en/Publications/WEO/weo-database/2020/October

Black Maternal and Infant Health Mortality

The National Black Nurses Association supports comprehensive efforts to reduce maternal and infant mortality and its devastating effects. Black medical neglect towards women has a longstanding historical tragedy. NBNA calls on the 117th Congress to address maternal mortality as a public health crisis. Maternal and infant mortality disproportionately impacts the Black community in comparison to other communities and this is unacceptable.

Background

- 700 women die each year in the United States as a result of pregnancy or delivery complications.
- Black women are shown to have a disproportionate fatality rate during pregnancy or within 42 days after giving birth.
- In 2018, the national maternal mortality rate was 17.4 deaths per 100,000 births in 2018, 37.1 black women died per 100,000 births.
- Black infants have 2.3 times the infant mortality rate as white infants.
- African American infants are 3.8 times as likely to die from complications related to low birthweight as compared to non-Hispanic white infants.
- Black infants are at three times greater risk of accidental death than are white babies, and at more than four times the risk of developing SIDS.

Recommendations to Legislators

NBNA calls upon the 117th Congress to:

- Support the Department of Health and Human Services Healthy Women, Healthy Pregnancies, Healthy Futures: Action Plan to Improve Maternal Health in America to reduce the U.S. maternal mortality rate by 50% and low-risk cesarean deliveries by 25%; and, achieve blood pressure control for at least 80% of women of reproductive age with hypertension.
- Support the President's FY 2021 Budget that proposes \$31.9 million for the Program for Treatment for Pregnant and Postpartum women.
- Support legislation that will increase the diversity of the perinatal health care workforce.
- Provide investment in digital tools like telehealth to improve maternal health outcomes, especially in underserved areas.
- Support efforts to establish the Office of Sexual and Reproductive Health & Wellbeing in the White House to align federal policies and programs so they promote sexual and reproductive health and wellbeing through a human rights, reproductive justice, and racial equity lens.

Centers for Disease Control and Prevention. National Center for Health Statistics, 2021. Retrieved on January 5th, 2021 from https://www.cdc.gov/nchs/nvss/index.htm

Centers for Disease Control and Prevention. Maternal Mortality, 2021. Retrieved on January on January 5th, 2021 from https://www.cdc.gov/nchs/maternal-mortality/index.htm

Centers for Disease Control and Prevention. National Vital Statistics Reports, 2019. Retrieved on January 5th, 2021 from https://www.cdc.gov/nchs/data/nvsr/nvsr68/nvsr68 10-508.pdf

U.S. Department of Health and Human Services. Infant Mortality and African Americans, 2021. Retrieved on January 11, 2021 from https://aspe.hhs.gov/system/files/aspe-files/264076/healthy-women-healthy-pregnancies-healthy-future-action-plan 0.pdf

The Health Effects of Systemic Racism

The National Black Nurses Association (NBNA) supports comprehensive efforts to endorse actions to address the health effects of systemic racism. NBNA calls on the 117th Congress to support curriculum and training around the impact of implicit bias and institutional racism to decrease their deleterious effects on Blacks and other communities of color.

Background:

- Inequities in health and health care persist despite improved medical treatments and better access to care. Health care organizations have a critical role to play to improve health equity for their patients, communities, and employees. In 2016, the Institute for Healthcare Improvement (IHI) published "Achieving Health Equity: A Guide for Health Care Organizations", a white paper that presents a five-component framework to guide health systems in their efforts to improve health equity.
- By 2050, the nation's racial and ethnic mix will look quite different than it does now. Non-Hispanic whites will be 47% by 2050. Hispanics will be 29% by 2050. Blacks will be approximately 13% by 2050. Asians will be 9% by 2050. The health care workforce should mirror this increasing racial/ethnic diversity.
- Historical mistreatment of disadvantaged communities has caused significant mistrust among communities of color.

Recommendations to Legislators:

NBNA is calling upon the 117th Congress to:

- Support the passage of H.R. 379 / S. 104 The Improving Social Determinants of Health Act of 2021. This will authorize the CDC to set up a program to improve health outcomes and reduce health inequities by coordinating CDC social determinants of health (SDOH) activities and improve capacity of public health agencies and community organizations to address SDOHs.
- Support the passage of a federal version of the "Crown Act" to ban discrimination based on race-based hair styles in the workplace and schools.
- Support the passage of legislation focused on ways to increase the diversity of the U.S. health care workforce (especially nurses, physicians, dentists, and mental health workers) to include enhanced tuition and student loan repayment programs for those from Black communities and other communities of color.
- Support the passage of legislation to combat institutional racism in all governmental health related agencies and programs.

- Support the establishment of a commission on restorative justice to investigate the ramifications of reparations that includes the acknowledgment of historic health related atrocities.
- Support the expansion of the Affordable Care Act with a focus on historically underserved Black and other communities of color.

- NCHHSTP Social Determinants of Health: Definitions. Centers for Disease Control and Prevention. https://www.cdc.gov/nchhstp/socialdeterminants/definitions.html
- Jones CP. Levels of racism: A theoretic framework and a gardener's tale. American Journal of Public Health. 2000 Aug;90(8):1212-1215. 3
- Feagin, J., & Bennefield, Z. (2014). Systemic racism and US health care. *Social science & medicine*, 103, 7-14.
- Wyatt R, Laderman M, Botwinick L, Mate K, Whittington J. Achieving Health Equity: A Guide for Health Care Organizations. IHI White Paper. Cambridge, MA: Institute for Healthcare Improvement; 2016. http://www.ihi.org/resources/Pages/IHIWhitePapers/Achieving-HealthEquity.aspx
- Improving Health Equity: Guidance for Health Care Organizations. Boston: Institute for Healthcare Improvement; 2019.

 http://www.ihi.org/resources/Pages/Publications/ImprovingHealth-Equity-Guidance-for-Health-Care-Organizations.asp

The Crown Act. Retrieved on January 8, 2021 from https://www.thecrownact.com/

Environmental Health Justice and Related Consequences

The National Black Nurses Association (NBNA) supports comprehensive efforts to ensure action to improve urban green spaces, public health, environmental health justice and global warming. These comprehensive efforts should support novel initiatives to establish equitable socioecosystems services. NBNA also calls on the 117th Congress to support clean air / water protections and initiatives that ensure healthy environments for all people. The most recent data reveal that people of color compared to their white counterparts are disproportionately affected by poor socio-ecosystems that affect their physical, mental and social well-being.

Background

Poor socio-ecosystem services translate to disparities in health risks.¹ Innovative and multifaceted strategies aimed at reversing the following issues are critical to improve the health and well-being of all Americans and specifically people of color.

- According to the World Health Organization (WHO), poor access to the environmental determinants of health (e.g. clean water, air and nutrition) decreases protection against all health risks.¹
- Global warming (i.e. climate change) threatens the availability of environmental determinants of health and medical care, including for infectious diseases such as COVID-19.¹
- Limited access to urban green space such as parks has been linked to many chronic diseases² and mortality.³
- The Flint water crisis provides an example of environmental health *injustice*. Prolonged exposure to toxins such as lead contaminated drinking water exacerbates brain / nervous system damage and contributes to lower IQ.⁴

Recommendations to Legislators:

NBNA calls on the 117^{th} Congress to:

- Support the inclusion of nurses, specifically from populations of color to serve as spokespersons on national committees charged with addressing equitable socioecosystems services and environmental health justice.
- Support comprehensive environmental justice legislation designed to achieve health equity and climate justice for all.
- Support the resubmission of the *Environmental Justice for All Act* that was introduced in the 116th Congress, by Senators Tammy Duckworth, Cory Booker, and Kamala Harris.⁵

- 1. World Health Organization. (2020). *Coronavirus disease (COVID-19): Climate change*. Retrieved from https://www.who.int/news-room/q-a-detail/coronavirus-disease-covid-19-climate-change
- 2. Grahn, P., & Stigsdotter, U. K. (2010). The relation between perceived sensory dimensions of urban green space and stress restoration. *Landscape and Urban Planning*, 94(3), 264–275. dx.doi.org/10.1016/j.landurbplan.2014.01.017
- 3. Bauchner H, Rivara FP, Bonow RO, et al. (2017). Death by Gun Violence—A Public Health Crisis, *JAMA*, 318(18), 1763–1764. doi:10.1001/jama.2017.16446
- 4. Centers for Disease Control and Prevention website, *Health effects of lead exposure*. Retrieved from https://www.cdc.gov/nceh/lead/prevention/health-effects.htm
- 5. The Environmental Justice for All Act (2020). Retrieved from https://www.harris.senate.gov/imo/media/doc/EJ%20for%20All%20Act%20-%20Final%20Text.pdf

Cancer Inequities

The National Black Nurses Association supports comprehensive efforts to reduce cancer inequities and its devastating effects. NBNA calls on the 117th Congress to address cancer inequities as a public health crisis that affects people of all ages and races in the United States. According to the American Cancer Society, Blacks have the highest mortality and poorest survival rate of any racial – ethnic group in the U.S. Experts are concerned that the COVID-19 pandemic will exacerbate disparities in cancer care among Blacks, Hispanics, and other people of color.

Background

The effects of systemic racism and socioeconomic disadvantages on health care access as well as health care delivery are clearly a dominating pervasive factor in the complex picture of cancer incidence and care.

- For black people with cancer, the risk of COVID-19 infection was highest in patients who had breast, prostate, colorectal and lung cancer.
- For all cancers combined black men have the highest rate of new cancer diagnosis. The most common cancers in men are prostate, lung, bronchus, and colorectal.
- Breast cancer is a leading cause of cancer death among black women and by far the most common cancer among all women, black or white.
- Obesity, hypertension, and cardiovascular disease are well –documented contributing
 factors to the cancer burden among communities of color and emerged early on as risks
 for poor outcomes associated with COVID-19 infections. COVID-19 adds urgency to
 fight against inequities in cancer care.

Recommendations to Legislators

NBNA calls on the 117th Congress to:

- Support (H.R. 8845), the Multi-Cancer Early Detection Screening Coverage Act which would ensure prompt access to FDA-approved multi-cancer screening tests and fuel innovation in cancer screening.
- Support legislation that would provide ongoing research and education for minorities impacted by cancer.
- Support legislation that limits and reduces the cost of cancer medications and medical treatment for all populations with an emphasis on disproportionately impacted Black and other communities of color.
- Support legislation (H.R. 1570) to Remove Barriers to Colorectal Cancer Screening and to modify cost-sharing requirements for colorectal cancer screening tests, and drug manufacturer reporting requirements under Medicare medical services.
- Support legislation (H.R. 113) to provide for research and education with respect to triple negative breast cancer and for other purposes.

National Cancer Institute. Cancer Stat Facts: Cancer Disparities, Surveillance, Epidemiology and the End of Results Program.

Prevent Cancer: Thursday, December 10, 2020 (Stat News)

Reducing Inequities in Cancer Outcomes through Community. Retrieved on December 2, 2020 from, https://www.cdc.gov/chronicdisease/about/foa/inequities-cancer/index.htm

Inequities in Broadband Telemedicine and Telehealth

The National Black Nurses Association (NBNA) supports comprehensive efforts to endorse action to address the inequities in broadband telemedicine and telehealth. NBNA calls on the 117th Congress to support programs and services to promote broadband access among black and other communities of color.

Background:

- Racially and economically segregated neighborhoods tend to experience lower levels of broadband services. The impact of disparate access on healthcare utilization, exacerbated the risk of COVID exposure in populations already experiencing greater vulnerability, has been felt throughout the nation. COVID-19 has brought on a critical shift to telehealth services, but all access is not created equally.
- Telehealth services can now provide access to specialty services that previously might not have been available. A lack of access to these services due to technology and broadband barriers has been given a new label: a "super-determinant of health." Older adults and those who are socioeconomically disadvantaged stand to feel the greatest burden of this divide.
- A better understanding of this growing equity gap will be critical to improve outcomes in these communities.
- 12 million children live in homes lacking a broadband connection, and white residents are more likely to have broadband in their homes than people of color.

Recommendations to Legislators:

NBNA calls upon the 117th Congress to:

- Reintroduce and support legislation similar to H.R.6474 Healthcare Broadband Expansion During COVID-19 Act, to better provide access to care to vulnerable groups.
- Reintroduce and support legislation similar to H.R. 8650 to provide for a comprehensive plan to Eliminate the Digital Divide Act.
- Support legislation to make high-speed broadband internet service accessible and affordable to all Americans.
- Reintroduce and support S. 4789 Eliminate the Digital Divide Act of 2020: To amend
 the Communications Act of 1934 to provide funding to states for extending broadband
 service to unserved areas in partnership with broadband service providers and for other
 purposes.

- Khairat, S., Haithcoat, T., Liu, S., Zaman, T., Edson, B., Gianforcaro, R., & Shyu, C. R. (2019). Advancing health equity and access using telemedicine: a geospatial assessment. *Journal of the American Medical Informatics Association*, 26(8-9), 796-805.
- Riddlesden, D., & Singleton, A. D. (2014). Broadband speed equity: A new digital divide. *Applied Geography*, *52*, 25-33.
- Townsend, L., Sathiaseelan, A., Fairhurst, G., & Wallace, C. (2013). Enhanced broadband access as a solution to the social and economic problems of the rural digital divide. *Local Economy*, 28(6), 580-595.
- U.S Congress Joint Economic Committee (2017). The Digital Divide. Retrieved on January 25, 2021 from: https://www.jec.senate.gov/public/_cache/files/ff7b3d0b-bc00-4498-9f9d-3e56ef95088f/the-digital-divide-.pdf

Diversity of the Nursing Workforce

The National Black Nurses Association supports comprehensive efforts to increase diversity of the nation's nursing workforce. The nation is becoming increasingly more diverse, yet the nursing workforce does not reflect this changing demographic. Having a diverse nursing workforce is essential in achieving health equity, decreasing health disparities, and institutional healthcare racism.¹

Background

The disparities in health care and health outcomes between majority and racial/ethnic minority and underserved populations are well documented. Numbering over 3.8 million, nurses are the largest segment of the health care workforce and the most trusted. No other profession comes in contact more with patients. Hence, nursing has a special social contract and moral obligation to care for everyone in our society. Increasing the overall cultural competence of the profession through diversification will lead to improved patient health outcomes. In addition, only 10% of the current nursing workforce are men and increasing the gender diversity of the profession is also needed.

- Based on the 2018 National Sample Survey of Registered Nurses the current racial, ethnic makeup of the nursing profession is:³:
 - 73.3% White
 - 10.2% Hispanic, Latino, or Spanish
 - 7.8% Black
 - 5.2% Asian
 - 1.7% Multiple Races, non-Hispanic
 - 1 % Some Other Race, non-Hispanic
 - 0.6% Native Hawaiian or Other Pacific Islander, non-Hispanic
 - 0.3% American Indian or Alaska Native, non-Hispanic
- According to the census population projections, the racial composition of the nation will look different by the year 2050. Whites who made up 67% of the population in 2005, will be 47 % in 2050. Hispanics will increase from 14% of the population in 2005 to 29% in 2050. Blacks were 13% of the population in 2005 and will roughly be the same in 2050. Asians who were 5% of the population in 2005, will be 9% in 2050. The sum of the non-white population is 51%.

Recommendations to Legislators

NBNA calls on the 117th Congress to:

• Target funding legislation to support education for careers in nursing. The federal Nursing Education Loan Repayment program supports advanced practice education but does little to support entry level nursing programs. Resources to support entry must be available to those with greatest financial need, which are often students from diverse backgrounds.⁵

- Provide funding to pipeline nursing programs targeting minorities in accordance with the 2010 Institute of Medicine (IOM) report on *The Future of Nursing: Leading Change, Advancing Health*. The report recommended the nursing profession increase the number of registered nurses (RNs) with a bachelor's degree in nursing (BSN) to 80 percent by the year 2020.
- Support the funding of the Title VIII Nursing Workforce Reauthorization Act which provides for (1) loan repayment and scholarships for nurses; (2) loans for nursing faculty development; (3) advanced education nursing grants; (4) grants for increasing nursing workforce diversity; and (5) nurse education, practice, quality, and retention grants.
- Provide more funding to Health Resources and Services Administration to assist in providing funding to minority nursing organizations who mentor nursing students and conduct events in their communities for younger minority children interested in pursuing nursing as a career.⁶

- 1. Enhancing Diversity in the workforce. (2019). Retrieved from https://www.aacnnursing.org/News-Information/Fact-Sheets/Enhancing-Diversity
- 2. Increasing Racial/Ethnic Diversity in Nursing to Reduce Health Disparities and Achieve Health Equity. (2014). Retrieved from https://www.ncbi.nlm.nih.gov/pmc/articles/PMC3863700/
- 3. 2018 National Sample Survey of Registered Nurses. (2018). Retrieved from https://bhw.hrsa.gov/sites/default/files/bhw/health-workforce-analysis/nssrn-summary-report.pdf
- 4. Passel, J.S., and Cohn, D. U.S. Population Projections: 2005-2050. (2008). Retrieved from https://www.pewresearch.org/hispanic/2008/02/11/us-population-projections-2005-2050/
- 5. Gilliss CL, Powell DL, Carter, B. Recruiting and retaining a diverse workforce in nursing: from evidence to best practices to policy. Policy Polit Nurs Pract. 2010 Nov:11(4):294-301
- 6. Let's Get Kids Excited About Nursing. (2017). Retrieved from https://minoritynurse.com/lets-get-kids-excited-about-nursing-careers/