

Disproportionate effects of COVID-19 on socially vulnerable communities

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In a research letter published in *The Journal of General Internal Medicine* on COVID-19, Ishani Ganguli, MD, MPH, a physician researcher in the Division of General Internal Medicine and Primary

Care at Brigham and Women's Hospital and colleagues Rohan Khazanchi (University of Nebraska Medical Center student) and Evan Beiter (Harvard Medical School student) analyzed COVID-19 case and death rates at the county level looking at what factors contributed to risk. Using data compiled by The New York Times from health agency reports, the authors found that COVID-19 has disproportionately affected socially vulnerable communities, especially minority and non-English speaking ones. The team based its evaluation on the CDC's validated Social Vulnerability Index.

The findings emphasize the need for standardized collection of sociodemographic characteristics and targeted interventions, the authors conclude. Key points are outlined below:

- Risk was driven by minority status and English language proficiency in both rural and urban counties.
- Compared with those in the least vulnerable counties, people in the most vulnerable counties had 1.63-fold greater risk of COVID-19 diagnosis and 1.73-fold greater risk of death.
- When considering only race, ethnicity and English language proficiency variables, people in the most vulnerable counties had 4.94-fold and 4.74-fold greater risks of COVID-19 diagnosis and death, respectively.
- In urban areas, poverty, unemployment, crowded housing, and vehicle access were also associated with increased COVID-19 diagnosis and death.

More information: Rohan Khazanchi et al, County-Level Association of Social Vulnerability with COVID-19 Cases and Deaths in the USA, *Journal of General Internal Medicine* (2020). [DOI: 10.1007/s11606-020-05882-3](https://doi.org/10.1007/s11606-020-05882-3)

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