

OPINION

# Why are so many black Americans dying of COVID-19? | Expert Opinion

by Carmen E. Guerra and Karen Glanz, For the Inquirer, Updated: April 14, 2020



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### Editor's Note

News about the coronavirus is changing quickly. The latest information can be found at [inquirer.com/coronavirus](https://www.inquirer.com/coronavirus)

Across the United States — from New York and Los Angeles, to Detroit and New Orleans — black Americans are dying from COVID-19 at [disproportionately higher rates](#) than their white counterparts.

[In Philadelphia, the data are less clear](#), since the race of many people who have died from COVID-19 remains “unknown.” But if the data from other large cities hold true in our city — where 41 percent of residents are African American — the emerging recognition of disparities is clear. And it demands our immediate attention.



The valid point has been made that African Americans have greater burdens of comorbidities, such as asthma, diabetes, obesity and heart disease, which are associated with poorer health outcomes. However, the story here is more complex. In order to understand why so many African Americans are dying, it's important to see the reasons why they are more likely to contract COVID-19 in the first place. There are many.

African Americans are less likely to have jobs that allow them to work from home. According to the [Economic Policy Institute](#), less than one in five black workers is able to do so. African Americans also have the [lowest car ownership](#) of all racial and ethnic groups in the U.S., leaving them to use public transportation and exposing them to a greater number of individuals in closed, small spaces. Many black workers do not have paid sick leave or time off. In addition, black Americans are also more likely to live in overcrowded settings, making social distancing or self-isolating recommendations difficult to impossible to follow. Moreover, study after study has shown that black Americans disproportionately lack access to health care when compared to white patients.

There are also communication and cultural factors that make African Americans in our city more susceptible to the coronavirus. For example, in the early days of the pandemic, there was false information spread widely on social media suggesting that black individuals were immune to the disease, which could have led to a false sense of security. Several news stories have also indicated that black people are afraid to wear masks for fear of racial profiling. And there is a viral video of an Illinois security guard escorting two black men out of a Walmart while holding his gun, because they would not remove their masks inside the store.

To mitigate the toll that coronavirus is currently taking on black Americans, we need to advocate for safer working conditions that include provision of personal protective equipment (PPE), social distancing, and temperature checks of employees and the people they serve. We need to reach out to neighborhood and faith community leaders to educate and encourage preventive practices. We should also increase access to COVID-19 therapeutic trials for patients who have comorbidities who require hospitalization and critical care, as well as access to a vaccine once this is available.

Most importantly, we need to solve the challenges that black citizens face: how to self-isolate in a crowded home? How to obtain testing in the face of other family and work demands?

This pandemic has shined a bright light on the social and health disparities that affect black individuals in non-pandemic times. In the time of COVID, we need to address these disparities with even more urgency.

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