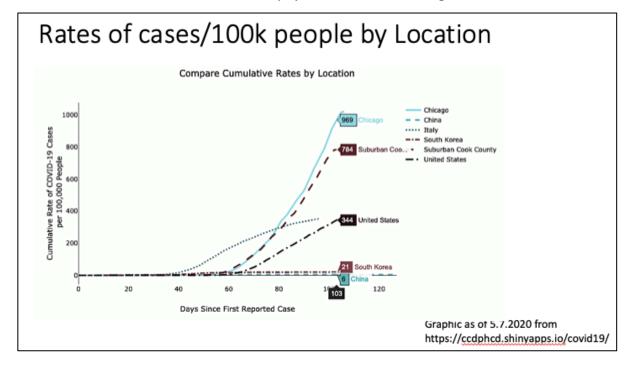


The weekly CCDPH Partner Webex Covid-19 Video Conference takes place Thursdays at 4:00 p.m. To be added to the invitation list please email ccdph.covid19@cookcountyhhs.org. The virtual meeting can be joined via telephone or Webex link online, and are hosted by CCDPH Co-Directors Drs. Kiran Joshi and Rachel Rubin. Recordings of the video conferences are available at www.cookcountypublichealth.org.

What is the situation?

- a. As of this afternoon, there are 52,918 cases in Illinois, with 2,355 deaths. In suburban Cook County, we have 15,022 cases and 713 deaths. We cannot stress enough how important it is to continue social distancing and staying home when you are able we will save lives.
- b. The next two slides are from the CCDPH web page https://ccdphcd.shinyapps.io/covid19/. This slide shows the dashed brown line for suburban Cook County... the cumulative rate of covid19 cases in Cook County is about 784 per 100,000 people. That is more than two times the cumulative rate for the United states as a whole, which is 344 per 100,000. Our CCDPH current data continues to show the impact of structural racism, along with the other systemic ways that resources people need to protect themselves from Covid-19 infection are systematically distributed unfairly. The rates for Black and Latinx communities in our jurisdiction are 897 per 100,000 people and 817 cases per 100,000 people, respectively. The rate of covid-19 confirmed cases for Asia people is 457 per 100,000. The African American rate is about three times higher than the white rate. The Latinx rate is more than 2.5 times higher. To reduce and eliminate this structural racism, we must pay attention to the living conditions of essential workers.







Inequities in Rates of Covid-19 Cases by Race/Ethnicity in Suburban Cook County COVID-19 Cases by Race/Ethnicity in Suburban Cook County, IL

Non-Hispanic White 302

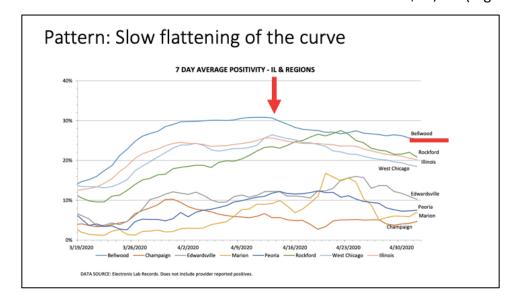
Non-Hispanic Black 897

Non-Hispanic Asian 457

Hispanic/Latino 817

Graphic as of 5.7.2020 from https://ccdphcd.shinyapps.io/covid19/

c. The Chicago Metropolitan Agency for Planning, or CMAP, reports that essential workers are disproportionately low income and people of color. In suburban Cook County essential workers live in greater concentrations in the south, southwest, and west suburbs Essential workers also disproportionately live in lower-income communities, with almost 60 percent living in census tracts with a median household income below \$70,500 (regional median).









- d. What is the pattern of this data: As we reported last week, the data continues to point, slowly, to a flattening of the curve. We are seeing decreasing percent positive tests, a slow reduction in hospitalizations, and deaths are flat. Our overall rate is probably decreasing slightly.
- e. A working group of nonprofits including Ladder Up, the Economic Awareness Council, New America, Heartland Alliance, and Woodstock Institute have launched a website to help individuals access their economic impact payment and to help the unbanked as well. Consumers can visit www.getmypaymentil.org to access clear information about how they can receive their payments and get their checks cashed if they do not have a bank.
- f. If you Need Help Buying Food for Your School Age Children Apply for P-EBT SNAP Benefits. Families with children who are eligible for free and reduced lunch when in school can receive for Pandemic EBT This is a special benefit that can help you buy food for your school age children 3 to 17 years old and 18 to 22 years old (in high school), who would receive National School Lunch Program free or reduced-priced meals when schools are in session. If you currently receive SNAP benefits, you DO NOT need to apply for P-EBT benefits. You are automatically eligible to receive these benefits. Your additional P-EBT benefits will be loaded into your Illinois LINK EBT account along with your regular SNAP benefits.



- Apply for Pandemic EBT SNAP Benefits
- https://abe.illinois.gov/abe/access/
- Buy food for your school-age children 3-17 and 18-22 years of age (high school)
- If your child(ren) is eligible to receive free/reduced price lunch when school is in session
- g. Governor Pritzker announced Illinois' 5-phase plan to reopen the state. The plan notes that mitigation and social distancing measures have been effective so far, but modeling shows that there would be a rapid surge in new cases if all of these measures are immediately lifted.







Restore Illinois' safe and deliberate path forward to reopen the economy, guided by public health and data, to keep Illinoisans as safe as possible. The Plan uses key public health metrics to reopen the state's economy on a regional basis:

Restore Illinois: 5 Phases

Phase 1 Rapid Spread	Phase 2 Flattening	Phase 3 Recovery	Phase 4 Revitalization	Phase 5 Illinois Restored
Strict stay at home and social distancing guidelines are put in place, and only	Non-essential retail stores reopen for curb-side pickup and delivery.	Manufacturing, offices, retail, barbershops and salons can reopen to the public with capacity	Gatherings of 50 people or fewer are allowed, restaurants and bars reopen, travel	The economy fully reopens with safety precautions continuing
essential businesses remain open.	Illinoisans are directed to wear a face covering	and other limits and safety precautions.	resumes, child care and schools reopen under quidance from the	Conventions, festivals and large events are permitted, and all
Every region has experienced this phase once already and could	when outside the home and can begin enjoying additional outdoor	Gatherings of 10 people or fewer are allowed.	Illinois Department of Public Health.	businesses, schools and places of recreation can open
return to it if mitigation efforts are unsuccessful.	activities like golf, boating & fishing while practicing social distancing.	Face coverings and social distancing are the norm.	Face coverings and social distancing are the norm.	with new safety guidance and procedures.

Restore Illinois: Metrics & Milestones

New case growth slows

Surge hospital capacity

10,000 tests per day statewide

Testing for any symptomatic health care workers and first responders Case positivity rate and hospital capacity benchmarks met

> Testing for patients, health care workers and at-risk residents

Begin contact tracing and monitoring within 24 hours of diagnosis Case positivity rate and hospital capacity benchmarks met

> Testing available in region regardless of symptoms or risk factors

Contact tracing within 24 hours of diagnosis for more than 90% of cases

Post-pandemic:

Vaccine, effective and widely available treatment, or the elimination of new cases over a sustained period of time through herd immunity or other factors







Restore Illinois: Health Regions



First, regions move through five **clear phases** in order to move forward in a safe and deliberate manner. This gives businesses and families more clarity on next steps. Second: The plan uses key **health metrics** like positive Covid test rates, and hospital capacity. The Illinois Dept of Public Health will use these metrics to assess whether it is safe for a region to move forward. Third, the **regional approach** recognizes that Covid-19 has distinct impacts on different regions of the state. The 4 regions of Illinois are NORTHEAST; NORTH CENTRAL; CENTRAL; and SOUTHERN. The regions will move through each phase together. Forth, we can have a safe **reopening** based on the health metrics. As the health metrics tell us it is safe to move forward, regions will gradually reopen non-essential businesses, allow employees to begin returning to work, expand outdoor recreation, and increase the sizes of gatherings.

What is CCDPH doing?

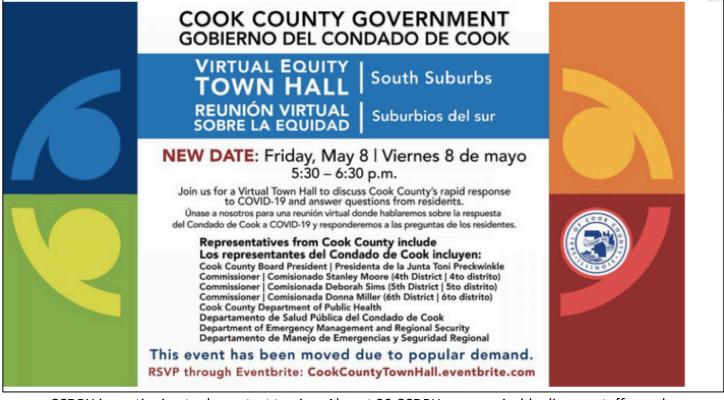
- a. Our Covid-19 Phone bank is receiving about 100 calls a day, We also respond to voice mails and email messages.
- b. We continue to participate in the South-Southwest Comprehensive Strategic Partnership working to address COVID19 in the Southland of Cook County.
- c. Cook County Department of Public Health Co-Director Dr. Rachel Rubin will be joining Cook County President Preckwinkle's AARP Tele-town hall on Monday, May 11 at 6:30pm.
- d. Cook County Department of Public Health Kiran Joshi will be joining Cook Count President Toni Preckwinkle, and Commissioners Stanley Moore, Deborah Sims, and Donna Miller for a virtual town hall meeting on equity. That will be taking place tomorrow, Friday May 8th from 5:30 pm to 6:30 pm.







Please RSVP at <u>CookCountyTownHall.eventbrite.com</u> to participate. We will be describing our Covid-19 rapid response and answering questions from residents.



- e. CCDPH is continuing to do contact tracing. Almost 30 CCDPH communicable disease staff members and resident physicians are conducting case investigations and contact tracing, prioritizing cases from congregate settings like nursing homes and other long- term care living facilities. Many more contact tracers will be needed: Based on our current volume of cases, we think we will need between 200-400 investigators.
- f. We are beginning work in partnership with Project Hope, a non-profit volunteer organization of healthcare workers, the Chicago Department of Public Health and the Illinois Department of Public Health to implement a technical mentorship program designed to provide more intensive on-site support to long term care facilities in under-resourced areas of suburban Cook County and the city of Chicago. Teams of Project HOPE healthcare experts will be deployed to 10 LTCFs in the suburbs and 10 LTCFs in Chicago to investigate outbreaks and provide critically needed infection prevention and control guidance.
- g. Please join the next school health webinar organized by CCDPH which takes place this coming Tuesday, May 12th, and continues for the following two Tuesdays. The webinars are at 1:00 p.m. You can register at tinyurl.com/SchoolsCookC.





School Health Webinar Series Continuing Register at https://tinyurl.com/SchoolsCookC.

- May 12: There's no place like home, the importance of physical activity
- · May 19: Narcan in the high school setting
- May 26: Effects of increased social media use on mental health

Webinars start at 1PM, and are recorded.

Dr. Joshi welcomed and introduced Fernando De Maio, who described April 21 analysis of covid 19 inequities in Illinois by Harvard University epidemiologists Jarvis T. Chen and Nancy Krieger [Available at https://cdn1.sph.harvard.edu/wp-content/uploads/sites/1266/2020/04/HCPDS Volume-19 No 1 20 covid19 RevealingUnequalBurden HCPDSWorkingPaper 04212020-1.pdf]. Dr. De Maio was born in Buenos Aires, Argentina. His research and teaching interests lie primarily within medical sociology and social epidemiology, with a focus on the concept of structural violence and the social determinants of health. His work has been guided by the notion of 'radical statistics' – the idea that statistical analysis can be used to not just describe the world, but to change it. Fernando teaches at DePaul University, and is working with the Center for Health Equity of the American Medical Association.







Discussion of Chen and Krieger's HCPDS working paper

Fernando De Majo, PhD

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Director, Health Equity Research and Data Use Center for Health Equity, American Medical Association

Department of Sociology DePaul University

5/7/2020

Cook County Department of Public Health, COVID-19 Partner Meeting

HARVARD CENTER FOR POPULATION AND DEVELOPMENT STUDIES

Working Paper Series

Revealing the unequal burden of COVID-19 by income, race/ethnicity, and household crowding: US county vs. ZIP code analyses

Jarvis T. Chen, ScD¹, Nancy Krieger, PhD²

April 21, 2020

HCPDS Working Paper Volume 19, Number 1

The views expressed in this paper are those of the author(s) and do not necessarily reflect those of

Premise

- "No national, state, or local public health monitoring data in the US currently exist regarding the unequal economic and social burden of COVID-19."
- We argue that these simple descriptive analyses of inequities are vital
 to identifying the communities who are experiencing the most
 serious impacts of the pandemic and to holding government leaders
 and policy makers accountable for directing resources to those in
 need." (p 13-14)







Data

- National analysis: reported COVID-19 deaths (source: Johns Hopkins and USA Facts)
- Illinois analysis: ZIP-code tabulation area (ZCTA) level data on confirmed cases from IDPH.
- 4 Area-Based Socioeconomic Measures (ABSMs)
 - · % of persons below poverty
 - · Index of concentration at the extremes (race + income)
 - · % overcrowding
 - · % population of color

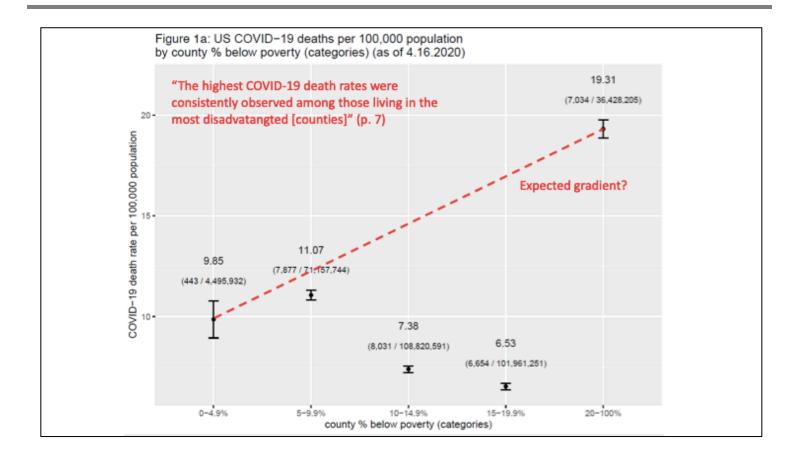
National Findings

- "The highest COVID-19 death rates were consistently observed among those living in the most disadvantaged versus most advantaged counties..."
- "However, socioeconomic gradients were not always monotomic..."
 (p. 7) [i.e., gradients were not always linear]



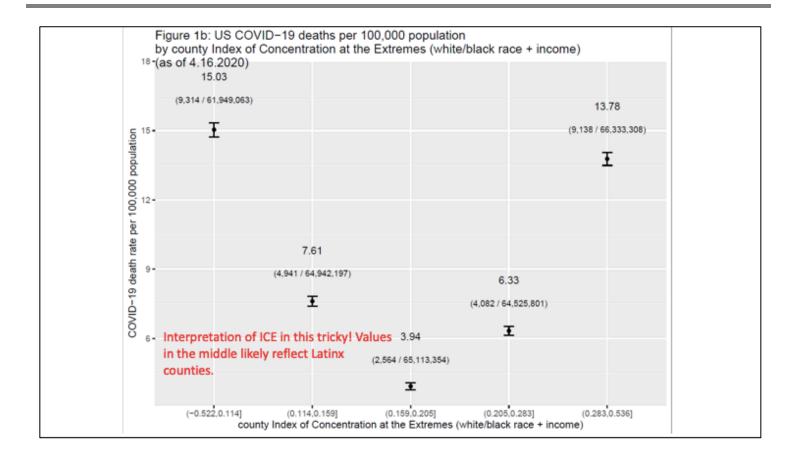






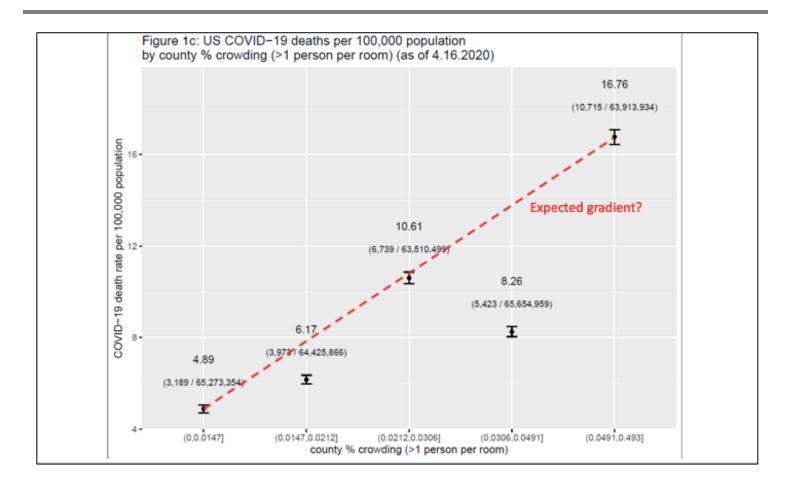






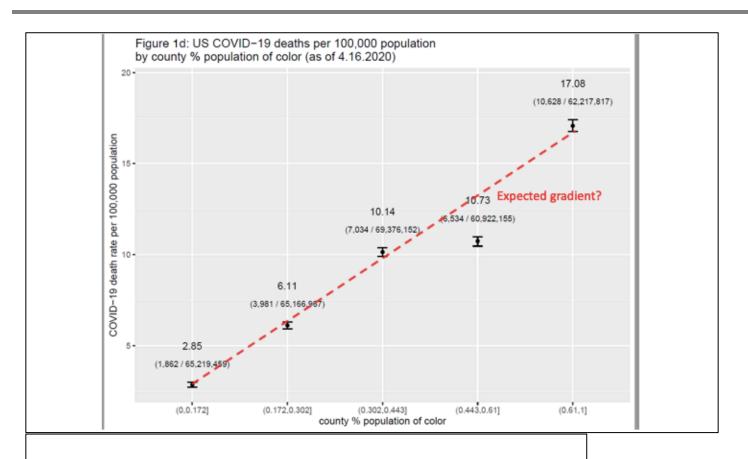












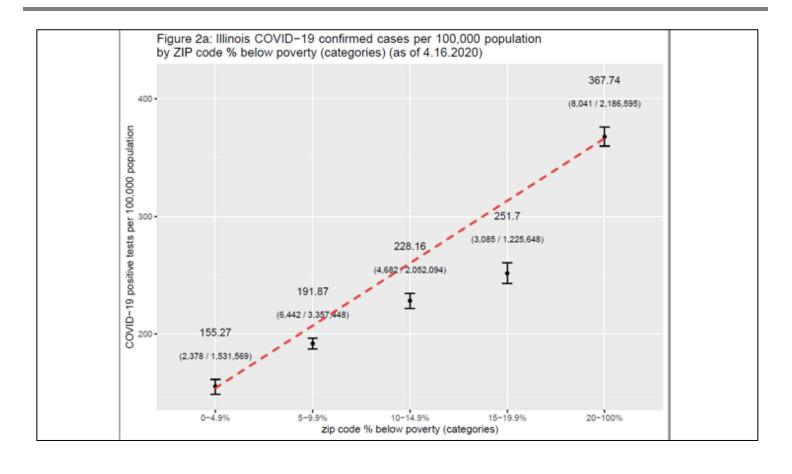
Illinois Findings

 There are "consistent and monotonic socioeconomic gradients in cumulative incidence of COVID-19 disagnoses for all ABSMs using finer resolution ZCTA-level data in Illinois" (p. 7-8)



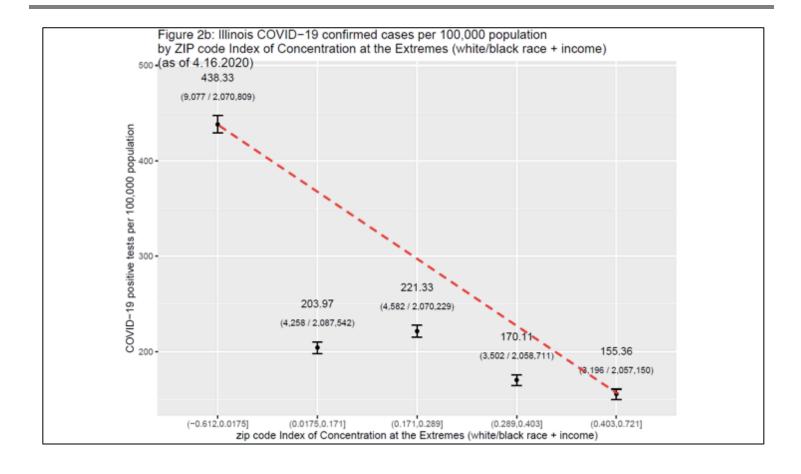






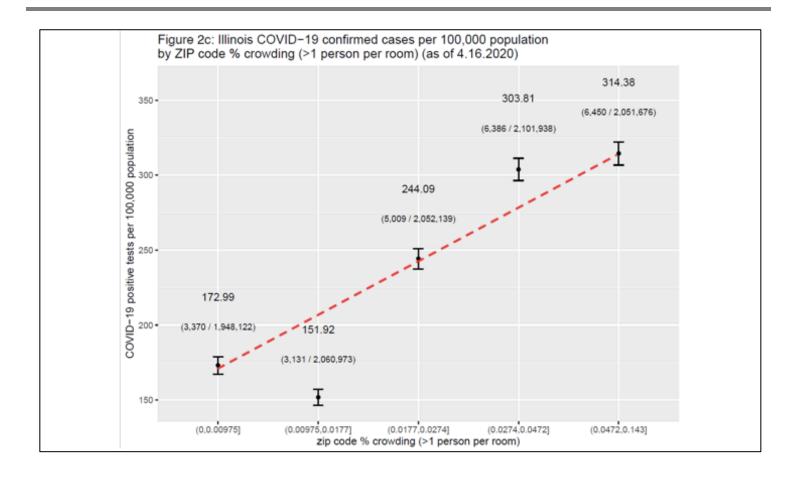






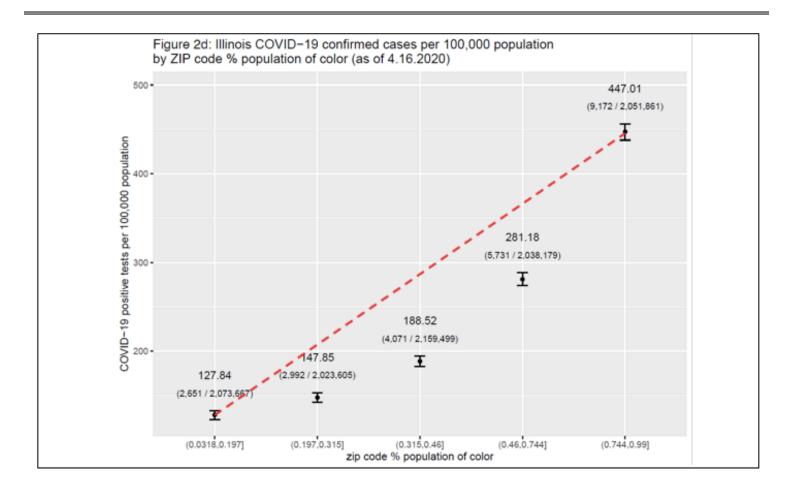
















Takeaways

- "Linkage of available COVID-19 surveillance data to ABSMs at the county and ZIP code levels reveals a substantially unequal burden of COVID-19 outcomes experienced by people living in the most disadvantaged counties and ZCTAs by socioeconomic and sociodemographic characteristics." (p. 9)
- "analyzing inequities in COVID-19 outcomes at finer levels of geographic aggregation is
 feasible and can provide important information about the unequal spread and impact of
 COVID-19 within counties and cities. As with the county-level death analysis, the results
 suggest that areas with higher rates of poverty, crowded housing, and populations of
 color are being disproportionately affected." (p. 11)

Chen and Krieger's recommendations for public health departments

- This is a "well-validated, robust, and cost-effective methodology by which public health departments can enhance their reporting of disparities in COVID-19 outcomes."
- "We recommend that state and local public health departments adopt reporting of COVID-19 outcomes minimally by ZCTA-level characteristics, which we consider preferable to county-level reporting"
- "We additionally recommend that, whenever possible, public health departments report summary statistics by race/ethnicity, gender, and age within strata of ZCTAlevel ABSMs in order to paint a fuller picture of the extent of inequities in COVID-19 outcomes." (p. 12)



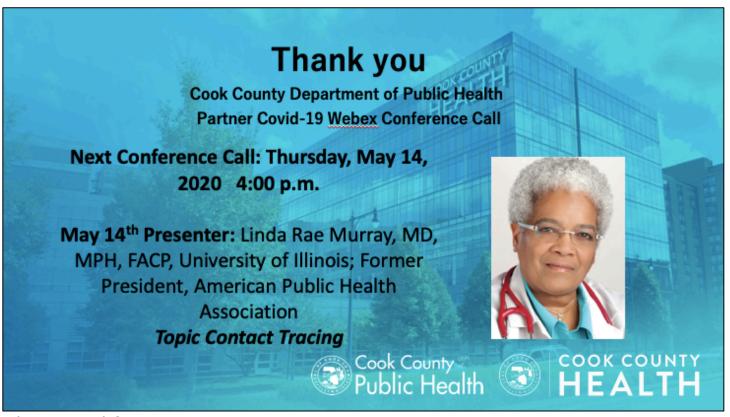












What you can do?

- 1. Our web page cookcountypublichealth.org for the latest data, and fact sheets, and an updated list of answers to frequently asked questions.
- 2. Call the CCDPH COVID-19 Hotline at 708-633-3319, M-F 9a-4p
- 3. Our Main phone number is 708-633-4000. Healthcare providers, hospitals, assisted living and long-term care facilities can follow the prompts to make reports 24/7.
- 4. Please let CCDPH know what topics you would like covered in future calls. What do you like and what can we improve? Email us at ccdph.covid19@cookcountyhhs.org
- 5. Follow us on Facebook and Twitter
- 6. Text ALERTCOOK (one-word) to 888-777 for text alerts

Continue to practice physical distancing ('social distancing'), hand washing, stay at home if you can, take protective measures at work if you have to go out to work; stay at home if you feel sick; and be safe.



