Warnings About Long COVID in the Black Community

A new report, “The State of Black America and COVID-19,” brings attention to health inequities, achievements and the work to be done.

April 5, 2022 By Trent Straube

During the first week of this year, African Americans were hospitalized due to COVID-19 at twice the rate of Americans overall. Specifically, 32 out of 100,000 Americans were hospitalized that week, but when the data were broken down by race, that number doubled to 64 out of 100,000 for Black Americans, according to findings by the Centers for Disease Control and Prevention presented in a new report titled “The State of Black America and COVID-19.”

“This was the highest weekly rate of any race and ethnicity at any point during the pandemic,” the report states. “This is more than double the highest weekly rate (26 per 100,000) seen in January 2021.”

The report offers a two-year assessment on the pandemic as it relates to African Americans; it was sponsored by the Black Coalition Against COVID, the Morehouse School of Medicine and the Yale University School of Medicine. It underscores the health inequities experienced by African Americans as well as the achievements made during the COVID-19 pandemic while warning about future challenges, such as long COVID, and offering steps that will lead to an equitable recovery for all Americans.

By race, COVID-19 hospitalization rates (per 100,000) in the first week of January 2022 broke down as follows:

- Overall: 31.8
- White: 23.3
- Black: 63.6

- Latino: 28.2
- Asian/Pacific Islander: 14.1
- American Indian/Alaska Native: 39.4

The statistic is but one of many that highlight the prevalence of racial and ethnic health inequities in the United States. The report notes that in the early months of the COVID-19 epidemic, Black Americans experienced the highest rates of infection, hospitalization and death. The implications reverberated throughout the community, affecting financial status and family stability. For example, between April 2020 and June 2021, 1 in 310 Black children lost a parent or caregiver, the report notes, compared with 1 in 738 white children.

“The severity of COVID-19 among Black Americans was the predictable result of structural and societal realities, not differences in genetic predisposition,” the report notes, adding that, for example, more Black Americans were essential workers and lived in intergenerational homes, in dense neighborhoods or in prison—all of which increase a person’s risk for exposure to COVID-19.

One bit of good news is that the vaccination rate for Black Americans increased and is now close to that of white people: As of January 2022, 80% of eligible Black Americans have received two doses of the vaccine compared with 83% of white Americans.

Regarding long COVID—a collection of wide-ranging symptoms that persist long after the initial infection—the report writes:

> There is anticipation of racial and ethnic disparities in long COVID given the higher burden of COVID-19 infection among Black Americans. There is already evidence of disparities in diagnosis and access to treatment, which suggests increased likelihood of future disparities.…
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> Solutions are needed to increase equitable and affordable access to long COVID care and supportive resources. Efforts are also needed to ensure inclusion of Black Americans in long COVID trials, treatment programs and registries given the systematic biases that led to increased burden of infection and decreased access to the testing that can often be required as proof of prior primary infection.

Cover of “The State of Black America and COVID-19,” released March 29, 2022BlackCoalitionAgainstCOVID.org

Examples of the actionable steps spelled out in the report include:

- We recommend that federal and local governments establish funding mechanisms that will facilitate the sustainable community infrastructures necessary to address the complex array of health and medically relevant social challenges. Specifically, we must confront the reality that Black medical, faith, and community-based organizations and local coalitions have traditionally been hampered by inadequate, episodic, and unstable funding.

- We recommend that local departments of public health provide the race and other demographic data and assessments necessary to identify high target priorities.

- We recommend that Black fraternal, social, faith-based, and civic philanthropic organizations be funded to continue to advocate for up-to-date COVID-19 booster vaccination of the Black American community nationwide, with a special emphasis on pediatric vaccination.

- We recommend the immediate expansion of the Black nursing workforce through enhanced recruitment in junior and senior high schools, fair admission policies into schools of nursing, and tuition support, especially for students interested in public health nursing, school nursing, and mental health services.

“The work ahead will be more challenging than ever and requires well designed, adequately funded, and strategically coordinated efforts at the national, regional, state, and local levels,” concludes the report, which you can read online and download. “The time is now to recognize health equity is the work of everyone and for each one of us to do our part on the journey.”

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