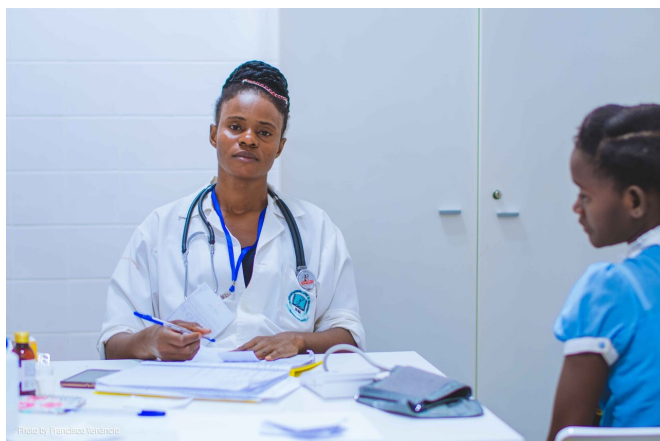


# Black healthcare workers at highest risk of contracting COVID-19

1 February 2021



Credit: Unsplash/CC0 Public Domain

A large survey of health care workers found that community and demographic factors, such as contact with a confirmed or suspected COVID-19-positive case outside the workplace and Black race, were stronger predictors of COVID-19 infection than occupational exposure. The findings are published in *Annals of Internal Medicine*.

Researchers from Emory University Medical School and Rollins School of Public Health fitted a logistic regression model to data from a cross-sectional survey of health care workers conducted from April to June 2020 within their health care system to quantify occupational, community, and demographic [risk factors](#) for SARS-CoV-2 seropositivity. The researchers found an overall SARS-CoV-2 seroprevalence of 3.8% among the health care workers after the initial surge of the epidemic. After adjusting for possible bias due to voluntary participation in testing, Black race was still a stronger predictor of infection than workplace exposure.

The researchers explain that racial disparities, now well documented in the general population, extend

to health care workers after accounting for other risk factors including job role and workplace COVID-19 exposure, underscoring the fundamental societal inequities that have become a hallmark of the COVID-19 pandemic. These disparities must be considered when examining workplace COVID-19 risk. While the authors adjusted for community risk by including ZIP code-level COVID-19 incidence in the model, they could not account for more proximal factors that may have contributed to higher risk for infection among Black [health care workers](#), including higher likelihood of exposure at home or use of public transportation.

**More information:** Julia M. Baker et al.

Quantification of Occupational and Community Risk Factors for SARS-CoV-2 Seropositivity Among Health Care Workers in a Large U.S. Health Care System, *Annals of Internal Medicine* (2021). [DOI: 10.7326/M20-7145](#)

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