

Research team finds racial disparities in COVID-19 death rates have diminished in Connecticut

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In the United States, COVID-19 has disproportionately affected Black and Hispanic populations, with those groups experiencing higher

COVID-19-related death rates than non-Hispanic white Americans. But a new Yale-led analysis of these disparities in Connecticut found that they have decreased over the course of the pandemic, with mortality rate disparities narrowing substantially by the end of 2021.

The findings were published April 15 in the *Journal of Epidemiology and Community Health*.

For the study, the research team examined Connecticut COVID-19-related deaths reported between March 1, 2020 and Dec. 13, 2021 based on data from the Connecticut Electronic Disease Surveillance System. They divided that time period into three shorter segments, each encompassing a large epidemic wave, and compared [death rates](#) of Hispanic, non-Hispanic Black, and non-Hispanic white individuals not living in congregate settings.

"In this study, we were interested in mortality disparities in the general community," said Margaret Lind, a postdoctoral fellow at the Yale School of Public Health and co-first author of the study. "So in this analysis, we removed people living in congregate settings, such as long-term care facilities, because their racial distribution differs from that of the general state community and they house a greater proportion of higher-risk individuals."

In the first period, which spanned March 1, 2020 to Aug. 25, 2020, both Hispanic and non-Hispanic Black groups had significantly higher death rates than non-Hispanic white people. The researchers used a measure called population-months, which takes into account both the state population of each group as well as the length of the time period analyzed. It allows death rates to be compared across time and in proportion to population. In the first time period, the age-adjusted mortality rate for the non-Hispanic white population was 5.7 deaths for every 100,000 population-months, whereas, for the Hispanic and non-

Hispanic Black populations, the rates were 21.9 and 29.3 deaths per 100,000 population-months, respectively.

But those disparities waned through the second period (Aug. 26, 2020 to July 12, 2021) and the third (July 13, 2021 to Dec. 13, 2021).

"There was a clear reduction in the disparities during the second period," said Lind. "And by the third period, there was not a significant difference between the death rates of non-Hispanic Black and non-Hispanic white individuals."

In the third period, age-adjusted mortality rates for non-Hispanic white and non-Hispanic Black populations were 4.2 and 5.3 deaths per 100,000 population-months, respectively. The mortality rate among the Hispanic population (8.2 deaths per 100,000 population-months) was still higher than that of the white population. "But it was meaningfully lower than in the previous two periods," said Lind.

The findings show that overcoming racial and [ethnic disparities](#) in COVID-19 [health outcomes](#) is achievable, said the researchers.

Lind and her colleagues did not investigate what might be driving this effect, but Connecticut took several measures to reduce these disparities throughout the pandemic. Those efforts included increasing access to COVID-19 testing, making vaccines accessible, and improving [outreach](#) and effective communication about the virus.

"These are three drivers that we think likely led to the reduction," said Lind. "More research is needed to determine which public health interventions have had the greatest impact and that information may help address remaining inequities."

More information: Olivia Schultes et al, Closing the health inequity

gap during the pandemic: COVID-19 mortality among racial and ethnic groups in Connecticut, March 2020 to December 2021, *Journal of Epidemiology and Community Health* (2022). [DOI: 10.1136/jech-2022-218975](https://doi.org/10.1136/jech-2022-218975)

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