The Ohio Department of Health sat down with Anthony Armstrong, M.D., MPH, FACOG, president of the Ohio State Medical Association, to discuss COVID-19 and minority health. Dr. Armstrong has shared his expertise on this important topic.

Q: The information at this point is largely anecdotal across the country but it appears the COVID-19 fatality rate is disproportionately impacting the African-American and Latino communities. Why do you believe this may be the case?

A: As you said, the information is largely anecdotal but from the start of this crisis, before coronavirus took hold in the United States and before it became global pandemic, there was a myth among many in the African-American community, in particular, that Black people could not get this virus or, worse, die from it. I’m sure that mentality exists in Ohio and it has to change.

Q: With April being Minority Health Month, where might that myth or mentality be rooted?

A: Dating back many generations in our country, many African-Americans have always held a general distrust of the medical system and a distrust that medical professionals had their best interest and best health in mind. That mentality is rooted in our country’s prior history of racial inequality. However, without question, things are better now but these are myths and long-held beliefs that have not fully subsided.

Q: Should individual states, or the federal government – in particular, the Centers for Disease Control & Prevention (CDC) – track COVID-19 data according to race and ethnicity?

A: Absolutely. Because if this virus is truly spreading disproportionately among minority communities across the country then it is likely true here in Ohio, as well. We need this data to better understand how the virus spreads and to develop more effective strategies to mitigate the spread while we continue to develop effective ways to treat this disease for those who are already sick or will become sick. It’s clear, we’ve seen significant spikes in cities with higher minority concentrations – New York, Detroit, New Orleans, and Chicago. And Ohio, as we know, also has large American cities with higher concentrations of minorities which could warrant our attention.
Q: We know that this virus has a more devastating impact on individuals with other underlying conditions. Could that be a factor in what we are seeing the minority communities?

A: Yes, to the point that I addressed earlier. African-Americans, for example, have higher rates of diabetes, asthma, high blood pressure and other public health ailments and statistically we are less likely to regularly see or be under the care of a physician. African-Americans live with these public health conditions for a longer period before getting medical care, which could exacerbate our overall care. What we know about COVID-19 is that if your body is already weakened by other severe medical concerns then this virus is likely to have a more devastating impact on you.

Q: If there was concern before about seeing a doctor, it’s likely heightened during this pandemic. How can we be sure minorities and others are still seeking medical care?

A: One thing we are learning to use more where I work, and I know this is true for physicians across Ohio, is telehealth. This allows us to consult with our patients face-to-face via computer, laptops or smartphones. And if you do not have video capabilities, then you need to know that we can still provide effective care via a telephone call. What are your symptoms? How are you feeling? What is your prior medical history? These are all questions that can be answered via telehealth and help us as physicians provide a necessary level of care. Telehealth has the potential of remaining a significant part of the medical delivery system long after we have defeated COVID-19.

Q: What is the message we must convey to the minority communities?

A: The message is no different than what you and Gov. DeWine have effectively and appropriately communicated for more than a month. Without a vaccine or known cure, our most effective strategy is to win the war against the spread of the virus which buys healthcare professionals and medical scientists more time to work on effective treatments and cures that will save lives. I implore all Ohioans – regardless of your race or ethnicity – to adhere to the ‘Stay-At-Home’ and social distancing orders and if you are traveling to Ohio from outside our state, please be courteous and self-quarantine for at least 14-days before interacting with others.

Might I add, I also believe that we in the medical profession can also do more to be sure that we make our services more accessible and inviting. We have to look for ways to make healthcare more accessible to everyone, especially those who the most vulnerable among us. We know that early intervention of care can significantly lower the chances of chronic medical care later.

Q: Thank you, Dr. Armstrong. That is an especially strong message given that our friends in Michigan are experiencing an outbreak and strain on their healthcare system in Detroit. Detroit is very close to your city of Toledo. What concerns do you have about what is occurring in Detroit?

A. You are correct, our proximity to Detroit is a concern. I have colleagues and friends in the medical profession who work both in Ohio and Michigan or live in one state and work in the other. Our proximity to Detroit means it is a normal, daily occurrence for people to straddle the line and go back and forth between
the two cities, two states. My message would be as I stated before: Please respect our ‘Stay-At-Home’ and social distancing orders and please self-quarantine. Let’s all assume that we have the virus and must act in ways so not to infect our dearest loved ones.

Q: And while we as physicians and healthcare professionals are doing what we always trained to do, this pandemic has been hard for you and your colleagues, as well, hasn’t it?

A: Yes and thank you for that question. If you work in the medical profession then you trained and gained experience for just these types of moments. But, like the people we care for and our neighbors, we, too, have families. We’re employers, so we employ individuals who depend on jobs we provide for their livelihood. Those of us who have still been able to see patients during this crisis worry everyday about being infected and then unknowingly bringing it home to our families.

As president of the Ohio State Medical Association, I’ve assured that we remain a resource for physicians across Ohio, providing regular updates and information about ways to help medical professionals stay safe and still be able to provide high-quality care for our patients.

Q: Final thoughts?

A: Just to reiterate the messages that have already been encouraged. Practice good hygiene. Stay home. If you have to go out, practice social distancing. Be kind to one another. This is a significant challenge for healthcare but it is not insurmountable. I truly believe that most Ohioans are adhering to these rules and guidelines and are truly making a difference in our efforts as medical professionals to combat this virus.

And, finally, I want to send a special thank you and gratitude of appreciation to all of my physician colleagues, nurses, and other medical professionals on the frontlines of this pandemic.

For additional information, visit coronavirus.ohio.gov.

For answers to your COVID-19 questions, call 1-833-4-ASK-ODH (1-833-427-5634).

If you or a loved one are experiencing anxiety related to the coronavirus pandemic, help is available. Call the Disaster Distress Helpline at 1-800-985-5990 (1-800-846-8517 TTY); connect with a trained counselor through the Ohio Crisis Text Line by texting the keyword “4HOPE” to 741 741; or call the Ohio Department of Mental Health and Addiction Services help line at 1-877-275-6364 to find resources in your community.
Protect yourself and others from COVID-19 by taking these precautions.

For additional information call 1-833-4-ASK-ODH or visit coronavirus.ohio.gov.

**PREVENTION**

- STAY HOME
- PRACTICE SOCIAL DISTANCING
- GET ADEQUATE SLEEP AND EAT WELL-BALANCED MEALS
- WASH HANDS OFTEN WITH WATER AND SOAP (20 SECONDS OR LONGER)
- DRY HANDS WITH A CLEAN TOWEL OR AIR DRY YOUR HANDS
- COVER YOUR MOUTH WITH A TISSUE OR SLEEVE WHEN COUGHING OR SNEEZING
- AVOID TOUCHING YOUR EYES, NOSE, OR MOUTH WITH UNWASHED HANDS OR AFTER TOUCHING SURFACES
- CLEAN AND DISINFECT "HIGH-TOUCH" SURFACES OFTEN
- CALL BEFORE VISITING YOUR DOCTOR
- PRACTICE GOOD HYGIENE HABITS