



5 Actions to Promote Health Equity During the COVID-19 Pandemic

Recent reports indicate how diverse and vulnerable populations are disproportionately suffering from COVID-19. Hospitals and health systems are working to address the health equity challenges highlighted by this crisis in different ways. Below are five areas where you are making a difference in your community.

1. Educating in Ways that Resonate with Every Patient in Your Community

We applaud hospitals and health systems continuing to educate their patient base and surrounding communities on prevention, social distancing and deterring the spread of COVID-19. Some hospitals, such as UW Madison and University of Chicago, have created [public service announcements](#) educating on COVID-19 symptoms, guiding the public to test sites and sharing care options if symptoms progress. Some are reaching diverse communities by using [trusted sources of information](#) including faith community leaders. Above all, hospitals are reassuring the public that they care and continue to provide medical expertise for all persons in need of care.

2. Leveraging Community Partnerships

[SoHum Health in Garbersville, Calif.](#), [Henry Ford Health System in Detroit](#) and [Loyola University Medical Center in Chicago](#) are using their existing community partnerships to strengthen prevention efforts. Hospitals and health systems are leveraging communications channels to not only keep communities safe, but also expand their reach into underserved areas. For example, faith leaders are reinforcing the importance of staying home, despite the desire of members to congregate, food pantries can help amplify critical health and prevention information while still serving vulnerable populations, and community health workers can distribute educational materials as well as medicine, food, and other essentials to those who need them.

3. Continuing to Collect Patient Data

Pandemics are all-hands-on-deck situations. Some things fall through the cracks in favor of more pressing needs; data collection cannot be among these things that are left behind. Hospitals that stay the course on collecting [Race, Ethnicity and Language \(REaL\)](#); Sexual Orientation and Gender Identity (SOGI); and Social Determinants of Health (SDOH) data for all seeking care position their clinical care teams to make better-informed decisions. It's these hospitals that are able to connect patients with resources to address social needs and improve equity. Without these data, diverse communities might be [undercounted](#) in reporting of COVID-19's impact. For additional information and action items addressing social needs and mitigating health inequities, see [AHA's new resource](#).

4. Advocating on Efforts to Address COVID-19 Disparities

The AHA, the American Medical Association and the American Nurses Association April 16 [urged](#) the Department of Health and Human Services to mobilize its agencies to identify and address disparities in the federal response to COVID-19, including increasing the availability of testing, ensuring access to equitable treatment and disseminating timely, relevant, culturally appropriate and culturally sensitive public health information. You can share the issues covered in this letter with your federal lawmakers and urge the federal government to identify areas where disparities exist and help us immediately address these gaps.

5. Sharing What You Learn

Equity comes from lessons being shared with every community, regardless of size, demographics or geographic location. Share your pearls of wisdom, the pitfalls you experience and everything in between with your peers. AHA is helping compile these bright spots, best practices and [stories of resilience](#). Together, we can amplify great ideas for the greater good.