The COVID-19 virus has had a bigger impact on people of color. The reasons are racism and lack of health and social equality. **These factors mean that minorities have a higher risk of getting the virus. The Center for Medicare and Medicaid Services says that American Indians, Alaska Natives, and Black people are 5 times more likely to die from the virus than white people. Hispanic people are 4 times more likely to die from the virus than white people who aren’t Hispanic.** People with IDD who are from minority communities may also face increased risks.
This brief looks at racial differences in the NCI the In-Person Survey (IPS) in 2018-2019. The people who were surveyed were adults with IDD. The data show differences in outcomes between Black and white respondents. These differences may make Black people with IDD more at risk during COVID-19. The information in this brief is on health, how people communicate, and where people live.

The words highlighted in blue are links to resources that can be helpful in supporting Black people with IDD during the pandemic. Just click on the highlighted words and you will go to a website with additional information.

**Health Concerns Before COVID 19**

*Black people in the survey were more likely than white people to have diabetes and high blood pressure.* The CDC says people with diabetes are at higher risk of having a worse case of the virus. People with high blood pressure may also get a worse case of the virus. Another risk factor is being overweight. Thirty-six percent of people in the survey were overweight. Black respondents were just as likely to be overweight as white people.

*Other results show that Black people are less likely than white people to get flu shots.* This could be a problem when there is a vaccine for COVID-19 in the coming months. Health care providers need make sure Black people with IDD gets shots.

IDD managers need to create programs and policies that address the risks of the virus among Black people with IDD.

- Historically, Black people have had poor access to quality healthcare.  
  [Black people with IDD have the double challenge of having a disability](#)
and being a racial minority. IDD systems need to collect data on racial and ethnic disparities in health outcomes and access. States should use this information to reduce disparities.

- Healthcare also includes mental health treatment. Black people with IDD had fewer mental health issues (except for psychotic disease). Black people in general are more likely to have experienced trauma and violence. They are less likely to get treatment from a Black therapist. The pandemic may bring new pain (uncertainty, isolation, grief, etc.) for Black people on top of the pain they’ve already experienced. Mental health providers should use culturally competent approaches that are responsive to trauma.

- Some experts say that Black people experience stress in ways that are different from the way that white people experience stress. Black people with IDD should be supported to use wellness strategies that meet their needs.

- Black people who answered the survey are less likely to get yearly flu shots. Getting vaccinated is very important during this pandemic. The Vaccinations for Children program gives money to states to vaccinate minority and low-income children. Families of kids with disabilities should be offered affordable vaccinations.

**Where People Live**

Where and how people live make people with IDD more or less at risk of infection. Black adults were less likely to say they have a place to be alone at home. They are less likely to like where they live. Lastly, they are less likely to have had at least some support in choosing their home.
• Black respondents were more likely to say they didn’t have a place to be alone in their group homes. **Given the risk of infection in groups, people in these places should know about hand washing and social distancing.**

• Black respondents were less likely to like where they lived. They were less likely to have some support in choosing their home. This means there is a need to improve person-centered planning for these people. **The HCBS Settings rule requires that the service plan gives people choices about services and providers.** The pandemic has caused solation and loneliness for many people. Liking where you live can make it easier to deal with isolation.

**How People Communicate**

The ability to communicate during a health crisis is important. First, people with IDD need to be able to let people know if they have symptoms of the virus. People with IDD need people around them who understand the ways they communicate. Then staff will be able to know how the people they support are doing during the pandemic. People who can’t communicate with words or who don’t speak English need help in hospitals and with telehealth. **The NCI IPS data indicate that Black people with IDD are more likely to have problems making themself understood.**

• People who do cannot speak English may be more isolated during this crisis. Having information on the virus in their own language would make them feel less isolated. **The CDC has created COVID-19 resources in many languages.** These resources can be adapted for use by non-English speaking people with IDD.
• People who don’t use words to speak need to be able to tell someone if they are feeling sick. Some people can benefit from augmentative and alternative communication (AAC). AAC is used by people who cannot use speech.

• Some states allow people with disabilities who are hospitalized to bring staff or family member with them. Other states have not done this yet. If people can't communicate, they need to have someone with them who understands them. There are some things that staff and family members can do to make sure that they can accompany a person in the hospital. They can call ahead and include the need for support in the person’s chart. The American’s with Disabilities Act says all hospitals should have supports for people with who can't communicate. This includes things like translation and sign language. A health care person-centered-profile can help prepare for a hospital visit.

Conclusion

NCI data before the COVID-19 pandemic show disparities in health and other outcomes experienced by Black people. These results may show challenges that Black people with IDD may experience during the pandemic compared to white people with IDD. Public IDD managers should recognize these disparities and create culturally relevant supports. This will help to close gaps in care and opportunity that have surfaced during this pandemic. Experience the effects of COVID-19 differently than white people. Public IDD managers should recognize these disparities and create culturally relevant supports. This will help to close in care and opportunity that have surfaced during the pandemic.
References


