COVID-19: Addressing Discrimination and Racism
Equity Subcommittee: Local Health Department Support Guidance

In response to a rise in reports of racism and discrimination against API communities as a result of the COVID-19 outbreak, the Public Health Alliance of Southern California (Alliance) convened the Equity Subcommittee on Addressing Discrimination and Racism to help support local health departments in advancing a welcoming and inclusive framework within their own jurisdictions and across Southern California. As both fear and misinformation about COVID-19 continue to grow, health departments and community members are reporting increased incidences of physical, verbal, social and economic discrimination against Asian Pacific Islander (API) communities. Chinese American and other API communities have already begun to face attacks on individuals linked to fears about the virus[1,2]. Local health departments have a critical role to play in actively rejecting and preventing discrimination and racism and working to promote the health and safety of all people living in our communities.

The Alliance subcommittee, with input from Berkeley Media Studies Group, developed a set of rapid response guidelines to be considered for implementation by your Department. Below are initial guidelines and practices Departments can adopt internally:

1) Review Internal Departmental Communication Materials:

    1) Photos/Images: Consider the types of photos being used to communicate stories, messaging and advice about the coronavirus. Avoid using photos of individuals that could further reinforce discrimination or bias against individuals impacted by racism and xenophobia (in this case, API communities).

    2) Written Materials: Ensure all *internal* and *external* messaging regarding the coronavirus reiterates your Department's commitment to creating a welcome and inclusive place for all staff and community members to seek guidance and obtain health support and information. Consider sending proactive communications to Department staff and community members with factual, scientifically based information, and actions they can take to protect themselves and their loved ones, and a clear rejection of racism and discrimination.

    3) Work to translate all external communications into your Department's threshold languages, as well as the most common languages spoken by API communities in your jurisdiction (e.g. Chinese, Tagalog, Khmer, Vietnamese, Japanese, etc.).

    4) Activate your internal public health workforce as ambassadors to reject discrimination and racism within their own Departments and communities. Send a department-wide email with tools and resources that will help internal staff to counteract and prevent racism and discrimination at the workplace and with their own family and friends.

    5) Avoid using language that may trigger a "fear-based" response; for example, language that emphasizes fear reduction. Focus on delivering facts and coherent, concise information about the coronavirus and steps individuals and families can take to keep themselves and their loved ones healthy and safe.

[1] "What's spreading faster than coronavirus in the US? Racist assaults and ignorant attacks against Asians", CNN (Feb. 21, 2020), https://www.cnn.com/2020/02/20/us/coronavirus-racist-attacks-against-asian-americans/index.html.
[2] "Fear of coronavirus fuels racist sentiment targeting Asians", Los Angeles Times (Feb. 03, 2020), https://www.latimes.com/california/story/2020-02-03/fear-panic-around-the-coronavirus-fuels-racist-sentiment.

2) Draft external talking points for Department staff and elected officials that incorporate a "welcoming and inclusive" framework and emphasizes the community pride that exists in your jurisdictions. Some potential examples from our partners at Berkeley Media Studies Group are included below:

   A. For an elected official using the Affirm, Counter, Transform approach from Race Forward/Center for Social Inclusion to tackle racism (https://www.centerforsocialinclusion.org/talking-race-toolkit/):
      - Just like all of you, the health of my family and friends is one of the most precious things to me and I know we all want to ensure those around us are safe.
      - And yet, allowing fear to divide us and targeting members of our own greater community doesn't put us on a path to safety. We've heard reports of residents of our Chinatown facing a loss of business and in some cases, outright attacks. We know what creates a healthier [X county/city], and this is not it.
      - I've seen us come together before--as a community, as neighbors--to support each other, to support both our families and our greater community, and we are always stronger when we work together. And I know we can do this now as we work to ensure the health of our communities and all of our neighbors.
      - [This is where they could add specific actions--shop at local businesses, encouraging bystanders to speak out, supporting policies that improve overall health, as well as individual precautions--washing your hands etc.].

   B. Below are a few examples tailored for a Health Director (and/or Health Officer):
      - As the Department Director for X county/city, one question everyone is asking me is: what can we do to stay healthy? And we have a lot of tips on handwashing, staying home when we are sick, and other things we will share. But I want to talk about one of the things that is the most important: coming together and working together as a community to reject racism and xenophobia when we see or hear it.
      - We are all in this together and we are stronger when we've worked together. I've seen our communities come together many times before to take on challenging issues. And I've seen times when we let fear divide us, and that is what we are seeing now in some areas of our county. We know from a public health perspective that coming together, working with our neighbors instead of against them, and remembering we are all part of X county is the only surefire way to build healthy communities.
      - This has been and will also be how we approach our work at X health department. We serve the entire county--everyone. And we care about everyone in the county. We will work to address the challenges facing us now. But we need you with us, working together as neighbors, as a community. We are stronger together.

3) Draft a press release emphasizing your Department's commitment to delivering consistent, accurate information backed by science, while working to fight discrimination and stigma. Emphasize your Department's shared values of unity, trust, understanding and inclusiveness (a joint press release from the City of San Francisco and an op-ed from Long Beach Health Department Director Kelly Colopy, are included as samples for consideration). In addition:
   1) Consider releasing a joint press release with neighboring health departments or aligned City/County partners (as per the San Francisco joint press release).
   2) Emphasize both unity and a strong rejection of racism and discrimination throughout the press release (i.e. language that emphasizes that unity improves health, while racism and discrimination hurts health)
   3) If your Department has a strong relationship with certain media channels, consider asking media partners to join with you in rejecting racism and discrimination. Ask media partners to avoid images and messaging that reinforce negative stereotypes and prejudices associated with the coronavirus outbreak (this will especially pertain to photos/images being used in their own news stories)

4) Consistently and repeatedly post strong statements via your Department's various social media channels that emphasize your Department's commitment to rejecting racism and xenophobia during this outbreak and to encourage other members of your community to stand up to racism and xenophobia when they see or hear it in their community.

A few strong social media samples from other Health Departments are included in the PowerPoint slides below. Incorporate language that emphasizes the community pride of your City/County (as per the San Francisco example) or reinforces the fact that etiology, not ethnicity or race, determines our risk factors for a contagious disease (as per the Washtenaw County example). In addition, we recommend the following when preparing messages for social media:

1) Implement a social media strategy that provides repeated and consistent messaging to reject racism and xenophobia. As fear continues to grow, so, too, will racism and discrimination.
2) Target social media channels where your Department has the strongest presence and where people are most likely to look for news and updates, e.g., Facebook, Twitter, etc.
3) Consider reaching out through alternative social media channels where members of your community also receive news and updates, e.g., NextDoor, public school system messaging, WeChat, etc.

5) Review your Departmental communications plan and guidance. Ensure that any communication team meetings include appropriate staff with equity responsibilities for your Department. Ensure whenever possible that equity staff have the opportunity to review COVID-19 communication materials to ensure the correct framing, language and images are incorporated into any internal and external messaging.

***Overall tip from our partners at Berkeley Media Studies Group*:** It can be helpful to look at any talking points, press releases, handouts, etc. to ensure they have the 3 components of a message. A tip on values--you can include them in titles and subheadings of brochures or reports, inserting language about being a county/city that welcomes everyone, or where everyone belongs, or supports the health of all community members. The 3 components are:

- **What's the problem?** People are hearing a lot about the problem in the news, so you may not always need to spend a lot of time talking about the problem. Also, it's a potential opportunity to reframe from a very narrow definition of the problem (e.g. the spread of coronavirus) to a broader definition that could include that people are using fear to divide us, or that we've created systems that block some people from access to the very things needed to keep our communities healthy, like paid sick leave, etc.
- **Why does it matter (values)?** This is not a restatement of the problem or data. It's the values--why we get up each day and do this work. Unity, interconnectedness, dignity, justice, etc. It doesn't have to be these words, but the message should evoke values, such as "we are in this together." Using the word "our" conveys interconnection, e.g. our neighbors, our community.
- **What's the solution?** This may be more traditional advice on handwashing, etc. but it's also an opportunity to have a specific solution, which could be calling on people to speak out if they are a bystander, supported paid sick leave, ensuring people have access to healthcare, etc.

<u>Further Areas for Consideration: Rejecting Discrimination for Vulnerable Populations:</u>

People who are elderly or living with chronic illnesses: We are seeing more and more calls to also be cognizant of how we talk about people living with chronic illness. For example, in attempts to deescalate fear, people are hearing statements encouraging folks not to panic because COVID-19 is dangerous mostly for people who are elderly or with chronic diseases, which can be otherizing and imply that people who are elderly or living with chronic illnesses are expendable.

People who are unhoused: We are seeing some media using language like "ticking timebombs" to describe what might happen if an outbreak occurs in an area where many people who are unhoused are living. Equating encampments with disease and fear is also something we should be very cautious about and instead seek ways to showcase the system. We've created systems that deny people basic access to healthcare, clean water, and other sanitation needs and we are now faced with the limits and dangers of our own systems that we've created. The systems are the problem, not the people, so our language should reflect that whenever possible.

Sample Materials Included:
1) San Francisco Joint Press Release
2) Long Beach Health Director Kelly Colopy Op-Ed
3) Sample social media statements

For further questions or suggestions please contact:
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Phone: 619.436.4654

Additional Resources:

1) From Berkeley Media Studies Group:

- **A worksheet for writing messages:** http://www.bmsg.org/wp-content/uploads/2015/10/bmsg_message_development_worksheet.pdf
- **A sample interview with a reporter--**it's not about infectious diseases, but it shows two versions of an interview with a reporter--one that doesn't go well, and one where the spokesperson stays on message even when the reporter asks questions that might divert them. It could be a helpful reminder for anyone speaking to the media: http://www.bmsg.org/resources/publications/what-surrounds-us-shapes-us-making-the-case-for-environmental-change/

2) Statement from RaceForward:
https://www.raceforward.org/press/statements/race-forward-statement-coronavirus-emergency-official-response-and-its-impacts?fbclid=IwAR3rYUajOC4XfuR-4Ol2cSQjy6rhzd6TaDAqV9TLL2csCyWznMhvce9u-wg

3) From Public Health Awakened:

- In addition to washing our hands and taking other precautions, it's critical that we practice self-care to deal with the stress and anxiety. It can be as simple as small things throughout your day like deep breaths, a hot shower, sleep, tea, or connecting with a friend.
- We're also reading up on some of the US's legacy of anti-Asian public health and immigration policies. We can do better by learning from our own history.

FOR IMMEDIATE RELEASE:
February 6, 2020
Contact: Department of Emergency Management, 415-558-2712

***** JOINT STATEMENT *****

San Francisco Calls on the Community to Reject Xenophobia and Discrimination

The novel (new) coronavirus has been declared a global health emergency and a national health emergency in the United States. This is a serious and rapidly developing situation, affecting thousands of people worldwide.

The virus originated in Wuhan, China and has spread to several countries including the United States. A person's risk for the illness is based on their travel history, or the travel history of someone they have had close contact with. There is no racial, ethnic or cultural basis for the disease. Yet, we know that discrimination and xenophobia already are surfacing. Members of the Asian Pacific Islander community, especially the Chinese community, have been subjected to discrimination and exclusion, in Asia, Europe, Australia and the United States.

News media are reporting from around the world stories of hostility and discrimination toward Chinese customers and students, and insults hurled in person and on social media. This is unacceptable and harmful. Fear is a deadly epidemic.

We know that racial, ethnic and cultural discrimination cause bad health outcomes. In the case of an emerging illness, stigma about the illness makes people less likely to come forward, to seek help or ask questions. That makes it harder to fight the disease and preserve community health.

The best way for all San Franciscans to stay healthy and prevent the spread of disease is to practice consistent hand washing, cough or sneeze into your sleeve, stay home if you are sick, and get a flu shot. Masks do not prevent illness, but can be helpful for sick people to wear, so that they do not spread germs to others.

San Francisco commercial corridors are all open for business. The City encourages residents and visitors to continue to celebrate Lunar New Year activities with our communities by shopping, dining and supporting our small businesses.

Let's come together with compassion and unity during this stressful time. It's good for your health.

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Kelly Colopy, Director of Long Beach Health and Human Services. Courtesy photo.

24 HOURS AGO

Opinion: Support and kindness can help prevent and prepare for the potential of COVID-19 entering our community

Kelly Colopy

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People Post is a space for opinion pieces, letters to the editor and guest submissions from members of the Long Beach community. The following is an op-ed submitted by Long Beach Health Director Kelly Colopy, and does not necessarily reflect the views of the Long Beach Post.

As COVID-19 progresses here in the United States and we see more cases in surrounding communities, I feel it necessary to reach out to our community in this way.

I don't want to bombard you with more numbers or information on travel restrictions, or even talk so much about what you *should* be doing from a hygiene perspective to stop the spread of virus (though please, please, please wash your hands – often – and in warm water for at least 20 seconds). You can find all that information on our website at www.longbeach.gov/COVID19. Bookmark this site and check it frequently. It's the first place you'll find local, up-to-date information, and it links you to other important sites like the Centers for Disease Control. Please check those sites out for *real* information as we've already heard a few rumors circulating. Also, if you use social media, you can follow #COVID19LongBeach. We will be transparently and openly sharing information on what we are doing here in Long Beach to aggressively monitor the situation and prepare for the possibility of local transmission.

What I want to talk about is something that we should all be talking about more as it relates to the health of our community: support and kindness.

Rest assured that our Health and Human Services Department and local healthcare professionals are working with community members every single day to help identify their ailments and ease fears. These health professionals have dedicated their lives to helping all of us. Trust and believe that they want to do right by you, and if they think you are at risk from COVID-19, they will do everything they can to confirm it, care for you and contain it. We don't have any confirmed cases here in Long Beach, but should that change, we are prepared.

So while our healthcare network is hard at work, one of the most important things you can do for the health of our community is support each other. If you have family and friends that are elderly or may have underlying respiratory conditions, give them a call and check in. If they are sick and experiencing fever, cough and shortness of breath, help them reach out to their primary care physician.

And let's not forget our neighbors. Many of us have neighbors that are elderly or have disabilities that affect mobility, and sometimes they live alone. Do the same for them. Supporting each other, even when it's over the phone or on text or video chat, goes a long way to bolster mental health and put each other at ease.

Secondly, practice kindness. As your City Health and Human Services Director, you may think that I wouldn't be offering kindness as part of the solution, however, it is one of the key factors in not spreading fear; Fear leads to misinformation and confusion, neither of which are helpful. Be kind to each other. There has been quite a bit of stigma put on community members, who are perfectly healthy, that may be from a certain country, or traveled from a certain country or even just look a certain way. This stigma is not helpful for the health of our community and only does damage.

Should you be taking COVID-19 seriously? Absolutely. It takes all of us to stop the spread of virus, whether it be the flu or COVID-19. It's also going to take all of us to stop the spread of misinformation. This is critical. If you don't know the answer to something, go to our website at www.longbeach.gov/COVID19. The answer will likely be there. If you can't find the answer, ask your healthcare provider. Or even direct message us on social media at @LBHealthDept. We will respond. And when we give you the answer, help us spread the facts!

Thank you, Long Beach, for working together to be a part of the solution.

[For a direct link to the op-ed: https://lbpost.com/news/commentary/opinion-support-and-kindness-can-help-prevent-and-prepare-for-the-potential-of-covid-19-entering-our-community]

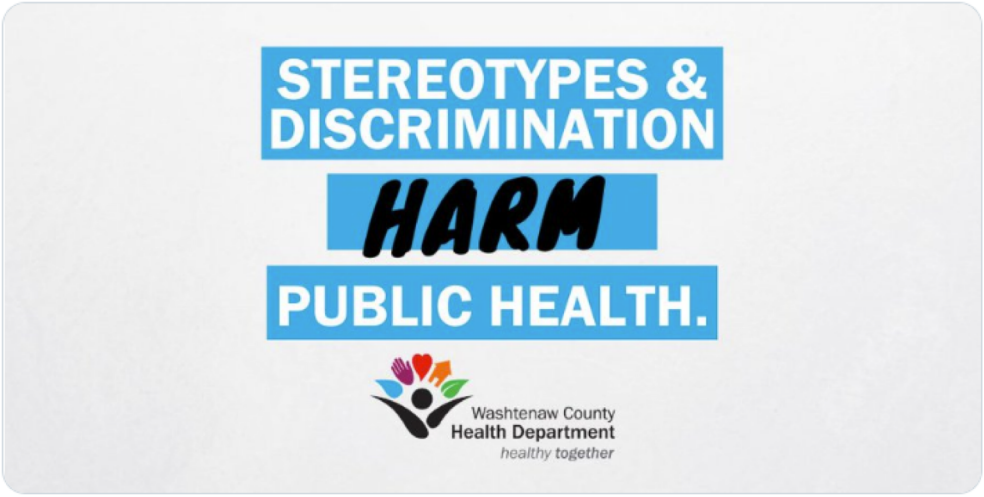
SFDPH
@SF_DPH

Our risk for the #novelCoronavirus depends on travel history, not on race, ethnicity or culture. We are the Bay Area and we stand up to xenophobia and racism on all fronts.

Fears of the coronavirus translate to discrimination, xenophobia
Lyft fires a driver after a passenger said he wouldn't unlock the door until her white companion approached. Other tales of ignorance and cruelty abound as th...
sfchronicle.com

Washtenaw County Health Department
@wcpublichealth

Let's fight this new public health concern with compassion and science, not fear and discrimination. You CANNOT tell if someone has a risk of spreading novel coronavirus by what they look like.



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