Ensuring an Inclusive COVID-19 Recovery

Food assistance, health care, and paid sick leave are essential

Nyequai Harte, Urban Institute

Research shows the need for expanded food assistance and funds for community-based and local food programs to mitigate the continuing fallout from the pandemic.

An inclusive recovery requires universal health care access, financial protection, funds for Federally Qualified Health Centers, insurance for laid-off employees, and treatment protocols that reduce bias.

Clearer guidance from the United States Department of Agriculture would ensure continued access to school meals for the most vulnerable families.

Extending the FFCRA’s temporary emergency sick-leave provision and further expanding access to paid sick leave could protect workers and promote equitable recovery.

Public health efforts that improve care for foreign-born noncitizens, address crowded housing, and protect food service workers could mitigate the impact of COVID-19 among vulnerable communities.

The COVID-19 pandemic has exposed existing racial, ethnic, and gender disparities in the United States. A full recovery from the effects of the pandemic is unlikely if the effort is not inclusive. New research confirms widespread health inequity and inadequate public policy responses in the wake of the pandemic, but it also offers actionable solutions for a more equitable response, recovery, and reopening. This analysis provides decisionmakers with the evidence needed to enact policies that address these disparities, including food security, public health practices, workplace policies, access to health care, and paid sick leave.

HELPING TIDE FAMILIES OVER

Millions of jobs being lost during the pandemic has led to sharp declines in household incomes and an increase in families struggling with food insufficiency, an impact felt most by Black and Latino households headed by single mothers. To help families through the pandemic, state and federal governments could expand food and nutrition assistance and funnel resources to local food programs.

Related study: Wide Spread Decline in Household Income during COVID-19 Pandemic Contributes to Food Insufficiency among Families

PROTECTING WORKERS’ HEALTH

Those still in the workforce face racial and ethnic inequities in virus exposure risk. Black, Native American, and Hispanic/Latinx workers are more likely than white workers to

- have jobs with greater risk of exposure to and transmission of COVID-19,
- not have health insurance, and
- have a higher risk of transmitting the virus to an older household member.

On top of public health measures like contact tracing and workplace conditions such as improved airflow, health care access is crucial to an equitable recovery. Many Black, Native American, and Hispanic/Latinx workers are likely to face the short- and long-term health effects of COVID-19 in the future. Universal health care access, financial protection, funding for Federally Qualified Health Centers, insurance for laid-off employees, treatment protocols that reduce bias and inequity, and equitable, targeted access to vaccines are essential to an inclusive recovery.

Related study: How Risk of Exposure to the Coronavirus at Work Varies by Race and Ethnicity and How to Protect the Health and Well-Being of Workers and Their Families
PROVIDING STUDENT MEALS

Millions of students lost access to free and reduced-price lunches when schools across the country closed to in-person learning because of the pandemic. In response, states have begun providing emergency nutrition benefits through the federal Pandemic Electronic Benefit Transfer (P-EBT) program, allowing eligible schoolchildren to receive temporary emergency benefits through EBT cards used to purchase food. Although the federal government authorized the program in October for the 2020–21 school year, initial implementation guidance was released in November, and updated guidance was not available to states until late January 2021. Families with children in school were particularly vulnerable during the pandemic. Although P-EBT was crucial in mitigating the loss of school meals, simpler guidance from the US Department of Agriculture would have allowed families to receive benefits sooner in the school year.


EXPANDING PAID SICK LEAVE

When employees gain access to paid sick leave, fewer of them work while sick with a contagious disease because they are more likely to stay home. Access to paid sick leave through the Families First Coronavirus Response Act (FFCRA) reduced the spread of the virus. States that gained access to paid sick leave through FFCRA saw an estimated 400 fewer daily confirmed cases of COVID-19 than before the FFCRA. The paid-leave change translates to roughly one prevented case per day per 1,300 workers who gained access to paid sick leave through FFCRA benefits. The FFCRA’s emergency sick-leave provision was an effective policy tool to flatten the curve in the short run. Keeping this temporary expansion in place and further expanding access to it would provide continued protection for workers.

Related study: COVID-19 Emergency Sick Leave Has Helped Flatten the Curve in the United States

ADDRESSING DISPARITIES

Understanding the factors that contribute to the pandemic’s disparate effects on communities of color helps inform public health responses. Community characteristics associated with higher COVID-19 rates include

- larger household sizes,
- higher shares of essential workers, and
- higher shares of foreign-born noncitizens.

Expanded access to adequate health care, housing, and worker protections would help address the uneven effects of the pandemic.

Related study: Community-Level Factors Associated with Racial and Ethnic Disparities In COVID-19 Rates in Massachusetts