

ADDRESSING THE UNIQUE NEEDS OF IMMIGRANT AND LIMITED-ENGLISH-PROFICIENT COMMUNITIES DURING THE COVID-19 PANDEMIC

ABOUT THE SURVEY

In June 2020, we surveyed immigrant community leaders and other stakeholders working directly with immigrant communities and those with LEP across Pennsylvania. Respondents completed a 24-question survey, with both closed- and open-ended questions. The survey was available in three languages, and more than 100 individuals completed it.

Respondents worked across a wide variety of sectors, with human services, health care and advocacy being the most common. Eighty-four percent indicated that they were involved in some aspect of the COVID-19 pandemic response. The majority of respondents served populations who were undocumented, refugees, and/or uninsured, and altogether, the 108 survey respondents served clients representing over 50 different language communities.

Members of immigrant communities and those with limited English proficiency (LEP) face many risks that make them more vulnerable to health and social consequences of the COVID-19 pandemic. These include overrepresentation in essential workplaces, as well as a range of issues we have explored in other work relating to children, such as difficulty accessing health care in their preferred language, higher rates of certain chronic diseases and gaps in insurance coverage.

While we continue to *lack data* on the precise impact of the COVID-19 pandemic on immigrant/LEP communities, analyses of small specialized datasets and anecdotal observations have brought to light significant disparities in risk of exposure to COVID-19, *utilization of testing* and *quality of care*, *incidence of disease* and *deaths*.

To better understand the perspectives of immigrant/LEP populations, as part of a *collaborative organized by Pennsylvania's Department of Health*, PolicyLab and community partners distributed an online survey in June 2020 to Pennsylvania stakeholders working with these communities. The survey asked respondents to identify major needs and barriers faced by these communities during the pandemic, as well as their sources of strength and resilience, and to weigh in on possible solutions.

While the survey focused on Pennsylvania, the results are relevant to states and communities across the country. The survey results are available in a *white paper*. In this brief, we build off of the findings to offer the following recommendations to public health practitioners and policymakers. Taken together, these recommendations would serve to protect the health and well-being of immigrant/LEP communities, improve health care delivery in these communities and build a foundation to address future public health crises in an equitable manner.



COVID-19 Vaccine Distribution

Many of the lessons learned and strategies recommended through the survey are also highly relevant to considerations surrounding COVID-19 vaccination and should be considered carefully in plans for vaccine outreach, messaging and distribution. Language access, partnership with community stakeholders, confidentiality of health data, and ensuring that populations feel safe from immigration authorities when receiving vaccines will be critical.

RECOMMENDATIONS



Ensure language access in all aspects of the pandemic response and improve data collection

- Survey respondents indicated many barriers related to language access when receiving services, particularly for languages that are less commonly spoken, as well as challenges in accessing accurate, up-to-date translated information. This highlights the importance of expanding available language translation services in places where individuals receive care and social services. Information hubs, like websites, should include up-to-date guidance and resources in a wider array of languages, including languages and dialects spoken less commonly.
- Furthermore, to understand the current situation, public health stakeholders need to collect information on preferred language in testing, case investigation and hospitalization data in order to address disparities. While the U.S. Department of Health and Human Services *issued guidance* [requiring COVID-19 testing labs to report race and a variety of other demographic characteristics](#), preferred language was not among these.



Support trusted community leaders

- Survey respondents described many strengths and sources of resilience within immigrant/LEP communities, including strong social networks and community ties, and close relationships to existing service organizations. This aligns with previous PolicyLab research among Bhutanese refugees, which showed that many members of the community *rely heavily on informal networks* [for information and help](#).
- Community organizations should be treated as partners in decision-making and not simply as a means of information-sharing. Immigrant/LEP community leaders and organizations have already gained the trust of their communities, understand these populations well and are best positioned to leverage their strengths. For instance, public health stakeholders should ask what a community's needs are rather than assume they already know, recognize the value of non-traditional resources and skills, and ensure that community leaders can provide meaningful input into decisions about programmatic development and resource allocation.



Ensure workplace safety

- Numerous survey respondents described high levels of workplace exposure to COVID-19 for the populations that they serve. National data indicate that many of these communities are overrepresented in *essential industries* [including health care](#).
- *Recent PolicyLab research* [among Bhutanese and Burmese refugees nationwide indicates higher risk of COVID-19 infection among those working in essential industries](#). This work makes clear the need for larger studies that include Asian immigrant subgroups, as well as immediate attention to protecting immigrant essential workers during the pandemic.
- It is critically important that workplace safety protocols (e.g., the provision of PPE) are investigated and followed. Efforts should also be undertaken to ensure that workers know their rights in terms of safety protocols, reporting of unsafe conditions and job security.

COMMUNITY VOICES

To highlight the voices of leaders within these immigrant and LEP communities, we're including their direct thoughts on these issues from the survey results.

"There is a lack of information about how to access services and how to protect one self and family members that is in the preferred languages."

"Language access is everything!"

"Having those strong networking relationships in the community has been a great resource to respond to the pandemic."

"The best practice would be to empower the community-based nonprofit organization already working with the various populations to provide needed services."

"They need workplace protections to prevent the spread in the first place and to allow proper quarantining or isolation practices when necessary."

"Protecting all workers feels very, very important both for [workers] and for re-opening."



Provide livelihood support

- Survey respondents described that many immigrant/LEP community members suffered job loss or other loss of income due to the pandemic. When families lack livelihood support, they may have little choice but to continue working even while sick or when workplaces are unsafe, which can contribute to increased risk of COVID-19 infection and transmission.
- Federal *pandemic relief bills* addressed some of these challenges for many U.S. citizens, but most immigrants and their family members were ineligible. The *public charge rule* and its “chilling effect” also likely dissuaded families from seeking help from social services when needed. Though various COVID-19-related health services were declared exempt from the public charge rule, immigrants may still be afraid to access them and *may also avoid other forms of assistance*, such as Supplemental Nutrition Assistance Program (SNAP) benefits or public insurance programs. Similarly, even if the public charge rule is reversed, a robust communications and outreach strategy would be needed to ensure community members are aware of any changes.
- While some policymakers may be reluctant to offer supports to non-U.S. citizens, including undocumented individuals, leaving out these vulnerable populations endangers the health of all.

“Many of these folks are undocumented and so not eligible for any government COVID-related assistance, which makes it very difficult for them to choose to stop working when they get sick or exposed.”

“What we really need is access to MORE testing and resources, as well as financial resources for undocumented immigrants who lose employment or housing due to COVID.”



Ensure the confidentiality of immigration status information

- Fear of immigration authorities can prevent people from seeking and accessing services and cause adverse health outcomes. It is essential to protect information related to immigration status, including in case investigation, contact tracing and access to health care. Immigrants should also be informed of how their information is being protected and not shared with immigration enforcement officials, so that they can feel safe seeking out care and participating in public health efforts such as contact tracing.

“It is of utmost importance that our undocumented population know they are safe from Immigration and Customs Enforcement while getting the help and support needed during the pandemic.”

[VISIT BITLY.COM/ADDRESSING-IMMIGRANT-COVID-NEEDS](https://www.bitly.com/addressing-immigrant-covid-needs)

for a full list of references.

The mission of PolicyLab at Children’s Hospital of Philadelphia (CHOP) is to achieve optimal child health and well-being by informing program and policy changes through interdisciplinary research. PolicyLab is a Center of Emphasis within the Children’s Hospital of Philadelphia Research Institute, one of the largest pediatric research institutes in the country.

PolicyLab

Children’s Hospital of Philadelphia
2716 South Street
Roberts Center for Pediatric Research,
10th Floor
Philadelphia, PA 19146

P 267-426-5300 | F 267-426-0380

PolicyLab@chop.edu
policylab.chop.edu

@PolicyLabCHOP