



**Testimony of Hayley Gorenberg, Legal Director of
New York Lawyers for the Public Interest**

**To the New York City Council Committee on
Oversight and Investigations, Convened April 30, 2020**

Regarding the Impact of COVID-19 on New York City's Communities of Color

The pandemic may have shocked us, but once it arrived, disparate devastation in communities of color did not. This oversight hearing on the impact of COVID-19 in New York City's communities of color should help light the way forward toward addressing manifest racial injustice. I'm Hayley Gorenberg, Legal Director of New York Lawyers for the Public Interest, and on behalf of our multidisciplinary, community-driven civil rights organization, today I address (1) medical access, (2) health disparities, especially tied to environmental justice, and (3) resources for young people in Black and brown communities.

IMPROVING MEDICAL ACCESS

With a virus that can particularly harm and kill people with underlying medical conditions, getting accurate medical information and being able to convey a medical history can influence whether you live or die. What gets in the way?

Aware of misinformation – sometimes well-intentioned, but still false – circulating in immigrant communities, our Health Justice Program started streaming and recording medical and legal information on Facebook live in Spanish,¹ and we know we've already reached several thousand households. We have partnered with the New York Immigration Coalition, featuring NYLPI's UndocuCare project, covering public charge, and including Spanish-speaking doctors drawn from NYLPI's Medical Providers Network.² We make sure

¹ Our initial event responded to community need expressed in Sunset Park.

² NYLPI continues to match doctors from our Medical Providers Network to support individual immigrant detention cases, including as part of applications to release people with underlying conditions that place them particularly at-risk for serious COVID-19

to include information relevant to people who are essential workers, who can't stay home every day.

I second Dr. Ford from the first panel about lessons from the HIV epidemic and the need to address medical misinformation and mistrust in Black communities, rooted in generations of racist medical exploitation. Also, believe Black women. Accounts of worsening illness and death after health concerns of Black women were reportedly discounted are circulating widely – and they undermine effective access to healthcare. **NYLPI recommends the City amplify the voices of trusted, reliable speakers in communities of color, to keep high-quality information in wide circulation. Affirmatively message and train throughout City systems to address any implicit bias potentially infusing responses to reports of COVID-related symptoms.**

Addressing more access issues and building on Council Member Carlina Rivera's question to the first panel, **ensure availability of interpreters**, including sign language interpreters. If we don't have them on-site, video conferencing is next-best. New designs for masks with windows for lip-reading are an innovation that should last beyond the pandemic. Pro Publica, The City and the New York Times are covering lack of translation and interpretation, with a doctor explaining, "It takes 10 minutes of sitting on the phone to get an interpreter, and that's valuable time when you're inundated" – and concluding that "the patients that are most mainstream get the best care."³ While it's permissible to use non-professionals like family members in emergencies, now, when people are more likely to show up solo for medical care or to be separated from family, in order to reduce exposure of or through others who aren't patients, it's even more important to have interpreters available.

disease and death. In response to the pandemic we have expanded to offer medical advocacy for people in New York jails on criminal charges. More than 4000 medical providers have joined our open letter to ICE (with Doctors for Camp Closure) calling for release of people from detention (available at <https://nylpi.org/nylpis-medical-provider-network-allies-send-open-letter-to-i-c-e-advocating-for-the-release-of-people-from-immigration-detention-to-help-stop-spread-of-covid-19/>), and our April 28, 2020 report, *Still Detained and Denied* (available at <https://nylpi.org/new-report-finds-worsening-crisis-of-inadequate-medical-care-in-immigration-detention-and-immediate-covid-19-threat/>), includes case study material and medical analysis about the virtual impossibility of protecting people from COVID-19 in immigration detention.

³ Joshua Kaplan, *Hospitals Leave Some Patients Who Don't Speak English Without Proper Care*, ProPublica, republished by The City at <https://thecity.nyc/2020/04/patients-who-dont-speak-english-often-struggle-at-hospitals.html>; Emma Goldberg, *When Coronavirus Care Gets Lost in Translation*, <https://www.nytimes.com/2020/04/17/health/covid-coronavirus-medical-translators.html>.

Critically connected to getting lifesaving care, NYLPI and our Deaf Justice Coalition partners thank the City for continuing its commitment to **meet the June 2020 deadline for making Text-to-911⁴ available**, which will make emergency services available for people who are Deaf and Hard of Hearing, as well as for people in situations where it's dangerous to speak – for example, if they are targets of domestic violence, documented on the rise while people are confined in their homes.

We want to keep and grow what works: Telemedicine could become a prime example. It's supposed to be more widely available during the pandemic, to cut exposure and risk. **Telemedicine can allow more people access more easily, not just because we're "on pause," but because it's a good modality for many people with disabilities.** More telemedicine options could provide access for people with disabilities to improve their healthcare ongoing. At the same time, we have received reports of confusion around how to use telemedicine and concerns about language availability. **Investigating and troubleshooting effective access to telemedicine could promote health for communities of color.** (NYLPI is rolling these issues into our longstanding Medical Access roundtable working group.)

Improving health care access is just one component of helping address key disparities – which means more people from communities disproportionately affected, primarily communities of color, will survive. Those health disparities, especially those disparities underlying conditions tied to environmental injustice or environmental racism, are the focus of my next section.

COMBATING UNDERLYING HEALTH DISPARITIES

Heart disease. Asthma. Diabetes. Many of the serious health conditions that create vulnerability to COVID-19's most deadly turns tie to systemic environmental racism. One of my NYLPI colleagues is presenting simultaneously with today's hearing at a panel with *Campaign for a Healthy Bronx* headlined to drive it home: "Environmental Racism, Inequality and Poverty [were] Killing the Bronx Well Before COVID-19."

Bluntly, our first question in the face of the pandemic was, "How will our communities get screwed?" Our analysis of the guidelines and underlying health disparities led to the conclusion, "Our communities have already been 'pre-screwed'" – by racism. With this hearing, let's get going and "unscrew": Unscrew these disparities, unscrew the

⁴ *New NYLPI Report: Pandemic Underscores City Deadline for Text-to-911 Emergency Services*, available at <https://nylpi.org/new-nylpi-report-pandemic-underscores-city-deadline-for-text-to-911-emergency-services/>.

disproportionate damage, unscrew the deadly outcomes. This is by no means a hopeless situation. There are things we can do.

Take one example: our urban air pollution. As Harvard's school of public health just published, and mounting evidence shows, dangerous fine particles labeled PM2.5 amp the deadliness of COVID-19. Pollution is down for the moment. Let's seize the opportunity for real progress. Highlighting a few specific ways forward:

Create Renewable Rikers.⁵ Renewable Rikers would convert the City's notorious criminal institutional hellhole and COVID-19 danger into a cutting-edge urban engine for environmental energy progress. Renewable Rikers can clear the air and give good green jobs to communities of color most damaged by mass incarceration – and now by COVID-19.

Eliminate diesel school buses. When school is running, the City's diesel buses are running, pouring pollution into the air we breathe. With school bus depots concentrated in communities of color, more buses and idling buses churn out fine particulate matter and deal a double or triple whammy to low-income communities of color clobbered by COVID-19. NYLPI is now partnering to pursue electric buses, which will give us cleaner air in communities of color with so many bus hubs, and cleaner air throughout the City. We also highlight a synergy with disability justice: Electric school buses would particularly benefit students with disabilities, who ride our school buses at high rates and are disproportionately students of color, as rates of disabilities are disproportionately high in communities of color. That intersectionality of race and disability carries through our analysis.

And while we're clearing the air outside, let's remember the air quality inside, where we're spending a lot of time these days. **Robustly enforcing Local Law 55 will combat dangerous mold, reducing the impact of asthma and allergies**, particularly for heavily affected low-income communities of color. Better breathing can link to better survivability in the age of COVID-19.

EXPANDING RESOURCES FOR YOUNG PEOPLE AND ADDRESSING LACK OF EQUAL ACCESS TO RESOURCES CONNECTED TO OUR SCHOOLS

On a gray day inside our zoom rooms, it may not feel like summer is around the corner – but it is. We are not alone in our deep dismay at the City's cutting the Summer Youth Employment Program for tens of thousands of young people. We've axed

⁵ See, for example, <https://council.nyc.gov/press/2020/03/12/1874/> and <https://nylpi.org/op-ed-the-energy-behind-the-renewable-rikers-vision/>.

the nation's largest youth employment program, connecting NYC youth between the ages of 14 and 24 with career exploration opportunities and paid work experience each summer. Participants have the opportunity to explore their interests and career pathways, develop workplace skills and engage in learning experiences that help in developing their social, civic and leadership skills. By participating in structured project and work-based opportunities, NYC youth are better prepared for careers of the future.⁶

Understanding that many previously used SYEP sites have shut down, we ask, **“What are the creative alternatives that will allow us to invest in our young people, this summer and beyond?” More innovative partnerships? More remote-work placements that could boost the City’s recovery, as well as provide good opportunities for young people’s growth?** At NYLPI we’ve committed to taking more summer interns, not fewer. It will take creative supervision. It will take resources. And it will be worth it. Part of what we seek to do is contribute to a professional pipeline for young people of color. We need creative investment in young people who rely on these opportunities.

And when we get back to school, that creative investment must continue, throughout any budget difficulties. NYLPI’s race discrimination case focused on lack of equitable access for Black and Latinx students to public school interscholastic sports through the Public Schools Athletic League seeks to level the playing field so that these Black and Latinx students have fair access to teams and funding. The Fair Play coalition we’re part of is campaigning online, underscoring how the palpable lack of teams for *everyone* right now should motivate understanding of the problem – and **propel approaches that yield fairness, not more racial inequity, when our students go back to school.** Interscholastic sports promote physical and mental health. They teach teamwork and leadership. And they can tie to college opportunities. It’s about much more than playing games. The choices we make now can promote health and well-being for young people and create a healthier city for us all.

Two last notes on school-related well-being for students of color: NYLPI has a deeply rooted program working with families who have students with special education needs. As the school system lurched into remote learning, we started calling each of our clients to connect with them about their remote schooling needs. One point coming across about disparities for communities of color: **our families have not gotten clear and specific messages, nor have they gotten effective service, to get tech like iPads for their kids.** City surveying was understood as posing deadlines our clients thought they missed. We’re addressing lots of confusion for these families. Meanwhile, on my own City parenting list,

⁶ <https://www1.nyc.gov/site/dycd/services/jobs-internships/summer-youth-employment-program-syep.page>

which I would say is a list of mixed privilege, there's a very active thread called "unsolicited iPads," with many families wondering why they got an iPad in the mail, while others are beside themselves because their children don't have the tech they need. **The DOE phone line to try and address the problem is widely regarded as unusable, including by DOE staff. Can we fix this now?**

Our education team is now embarking on a larger round of calls. Given the high needs of these students, we were ready to explore therapeutic and educational concerns – but my social worker colleague told me yesterday about her recent call that blew right by special ed, because the mother with whom she was speaking needed food – and was afraid to leave her apartment due to family vulnerabilities. Language access may have been a piece of the puzzle. We are again addressing misinformation, and **we suggest the City take additional measures to make sure multilingual messaging about the NYC Food Delivery Assistance program (including information on culturally significant specifics like the availability of halal meals) really penetrates in communities with high need.** Doing so will help ensure the program actually hits home for individuals who need emergency meals because for medical reasons they can't leave home to get food, have no one to bring them food, and can't afford grocery delivery. I hope that this information helps address earlier questions from Council Member Rivera and adds to the points raised in the first panel about food insecurity and quality, and the concept of food as medicine.

Our entire team at New York Lawyers for the Public Interest thanks Speaker Corey Johnson and thanks Chair Ritchie Torres for this vital conversation.

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Since 1976 New York Lawyers for the Public Interest (NYLPI) has been a leading civil rights and legal services advocate for New Yorkers opposing marginalization on the basis of race, poverty, disability, and immigration status. Our community-driven work integrates the power of individual legal services, impact litigation, and comprehensive organizing and policy campaigns. Guided by the priorities of our communities, we strive to create equal access to health care, achieve equality of opportunity and self-determination for people with disabilities, ensure immigrant opportunity, strengthen local nonprofits, and secure environmental justice for low-income communities of color. For more information, please visit www.nylpi.org.