

## VULNERABLE POPULATIONS AND THE COVID-19 PANDEMIC

The Coronavirus Disease (COVID-19) has implications that are particularly serious for vulnerable populations and the social agencies that serve them.

At risk or vulnerable populations include people with severe chronic medical conditions and disabilities, older adults, residents of long-term care facilities, people living in crowded housing, and people experiencing homelessness. They also include otherwise healthy people who are dealing with the implications of having low-income and little in the way of accumulated savings. It is well-known that poverty weakens an individual's ability to cope with new problems piled on top of those already being dealt with. The impact of a pandemic on this population adds to already high levels of stress and in so doing compounds existing health conditions.

Vulnerable populations often depend on services and supports provided in their homes, in institutions, or in the community to maintain their health and independence. The [European Centre for Disease Prevention and Control](#) has recently emphasized that the risk of transmission of COVID-19 in social institutions with large vulnerable populations is high. Concerns expressed over the potential impact of COVID-19 for people relying on [homeless shelters](#) is certainly warranted due to crowding and the generally poor health of long-term shelter residents. Residents of [long-term care](#) facilities face similar risks.

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Successful responses to a pandemic require a focused social as well as a health care response.

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Many of the recommended responses to the pandemic, including stockpiling food, are simply not feasible for populations with limited incomes and an inability to borrow to finance emergency purchases. The solution to this particular problem also needs to recognize that tax-based measures are less

effective for vulnerable populations because of [low tax filing rates and regularity](#). Homeless populations in particular struggle with all the recommended actions including social isolation. Shelters are typically crowded with shared facilities for eating, sleeping and sanitation.

Lessons learned from [research](#) of past pandemics emphasize the need for responses specifically designed to benefit vulnerable populations. These responses need to recognize that the lack of access to financial resources, supportive care and a weak personal social safety net all contribute to a greater exposure to the health consequences of pandemics. Recommended policy responses from this research include making use of mobile clinics to better enable vulnerable populations to practice social distancing while also being able to access necessary services. Making available temporary additional financial resources to enable stockpiling of food, medical prescriptions, and other necessities is also a useful response for a population that is otherwise without the resources to do this. Also important is to increase the resources of the charities and social agencies on whom vulnerable populations rely and whose employees are at heightened risk of exposure.

Studies of previous population-wide health incidents, including the severe acute respiratory syndrome (SARS) epidemic, have highlighted the need to not only take special measures to protect vulnerable populations but also to take steps to prevent fear, stigmatization, and discrimination of some populations. A [study](#) of the SARS epidemic in the United States, for example, shows that stigmatization and fear of certain populations delayed people from seeking care and left many in the community untreated. This is something we have seen already in the form of falling numbers of customers at Chinese restaurants and Chinatown businesses. An effective response to a pandemic is multi-faceted and goes beyond health initiatives.

Finally, [research](#) has shown that many of the sources of success in the control of infectious diseases during the 19<sup>th</sup> and 20<sup>th</sup> centuries have been found to include public health practices that focused on, and were specifically designed to address, the unique needs and challenges faced by vulnerable populations. We should heed these lessons.