

BARHII COVID-19 Response

Addendum: Model Ordinances and Response Efforts

The goal of this document is to provide sample regional and State-wide response efforts to COVID-19 that may serve as models for enacting similar ordinances/strategic plans. The issue areas reflect the COVID-19 Policy Slate that is attached.



Model COVID-19 Actions and Response Efforts		
Model Response Area	Origin (Jurisdiction or Community Partner)	Source Link
Moratoriums on Evictions, Foreclosures, Rent Increase	<ol style="list-style-type: none"> 1. Sant Mateo County Board of Supervisors 2. BARHII Model Memo: Housing & Health in light of COVID-19 	<ol style="list-style-type: none"> 1. https://sanmateocounty.legistar.com/LegislationDetail.aspx?ID=4400070&GUID=4F6ADDC2-E4C2-43C4-AC0F-7A19CECD1325 2. See attached
Equitable Response Recommendations	Health Impact Partners: List of Partner Grassroots Organizations demands	https://transformativespaces.org/2020/03/04/demands-from-grassroots-organizers-concerning-covid-19/?fbclid=IwAR0o46bBJ8h6KUObRHk6Mw_i gWul5t7UQPAeYHs_KWFD6fnPEtLMa0yuWjk
Minimum Cleaning/Hygiene Standards in areas with high need	San Francisco Department of Public Health	https://www.sfdph.org/dph/alerts/files/COVID%E2%80%90Minimum-Environmental-Cleaning-Standards.pdf
Emergency Childcare Spaces for Front-Line responders and Essential Workers	San Francisco Department of Public Health	https://sf.gov/information/san-francisco-converts-rec-facilities-emergency-child-care-centers
Emergency Economic Support Strategy for Small Businesses & Gig Workers <ul style="list-style-type: none"> • Loans and Moratoriums • Policy Solutions 	<ol style="list-style-type: none"> 1. Los Angeles County 2. Small Business Majority 	<ol style="list-style-type: none"> 1. http://healthyla.org/emergency-action-proposal-for-the-city-of-la/ 2. https://smallbusinessmajority.org/policy-agenda/covid-19
The Health Case for Protecting Low-Wage Workers during Pandemics	BARHII Statement on Low-Wage worker health and call for Paid Sick Days	See attached
Health Equity Consideration Guidelines for Messaging	<ol style="list-style-type: none"> 1. Contra Costa County 2. Public Health Alliance 	See Messaging Resources document

A CALL TO ACTION: COVID-19, HOUSING INSTABILITY, AND HEALTH

March 23, 2020

COVID-19 – A Public Health Emergency

Coronavirus Disease 2019 (COVID-19) is a respiratory illness caused by a novel virus that is spreading rapidly across the globe. Currently, there are over 33,000 cases in the United States^{[\[i\]](#)}. Globally, over 12,000 deaths have been attributed to the illness since it emerged three months ago^{[\[ii\]](#)}.

In the Bay Area, efforts to respond to the virus are increasing rapidly. On March 17, six Bay Area counties announced “shelter in place” orders for all residents, directing approximately 6.7 million people to stay in their homes to curb the spread of the virus. Governor Newsom subsequently expanded “shelter-in-place” rules statewide and has issued executive orders calling for, among other things, maintaining “social distancing” of six feet per person during essential travel outside the home.

Housing Instability and Health under COVID-19

Ensuring housing stability is essential to protect the health of Bay Area residents as the region responds to and recovers from the COVID-19 crisis. Loss of stable housing—through eviction, foreclosure, natural disaster, or other causes—poses numerous significant health risks, both for the individuals directly affected and for the larger population.

Loss of housing disrupts a family’s ability to “shelter in place” and practice “social distancing,” which increases the likelihood of disease transmission. For example, renters who lose their housing must travel to seek out alternative housing arrangements or may stay with friends and family in overcrowded conditions. Similarly, those facing eviction may need to attend an eviction court to participate in proceedings. These actions increase potential for exposure and conflict with recommended “social distancing” practices.

Loss of housing is also a leading contributor to homelessness. People experiencing homelessness face increased barriers to staying healthy during this pandemic^[iii]. For example, many people experiencing homelessness live in environments that are conducive to a disease epidemic, including lack of regular access to basic hygiene supplies and showering facilities, all of which could facilitate virus transmission. They also face serious health issues due to their inability to isolate, quarantine, and recover. The homeless population is also disproportionately older—in California, roughly half are 50 years and older—and live with chronic underlying health conditions, which are critical risk factors for contracting COVID-19 and suffering more severe outcomes.^[iv] Governor Newsom has estimated that 60,000 homeless Californians could contract COVID-19 over the next eight weeks^[v].

Research shows that housing insecurity can impact health in many other ways. This includes:

- Families forced to make unhealthy trade-offs between paying for housing and investing in medical care, nutrition, and other basic needs.
- Unsafe housing conditions, including exposure to lead-based paint, mold, pests, lack of heating, and other conditions that lead to chronic illness.
- Mental health impacts including higher rates of depression.
- Impacts on children, including behavioral problems, educational delays, low birth weights, and other ongoing health conditions such as asthma.
- Health effects of long commutes to job centers, including lower rates of physical activity, lower cardio-respiratory fitness, and higher Body Mass Index, stress, and blood pressure^[vi].

The Bay Area's Housing Crisis and COVID-19

The Bay Area is experiencing a severe housing affordability crisis that has impacted the health and well-being of our residents. Housing costs here are the highest in the nation^[vii]. In Alameda County, a family of three must earn on average \$111,600 to afford a two-bedroom apartment^[viii]. Across the region, 34,000 people are estimated to be homeless^[ix]. High housing costs effectively double the real poverty rate in the Bay Area^[x]. The region needs over 235,000 new affordable rental homes to house its current population^[xi].

These impacts are particularly acute for people of color. Past policies, such as redlining, along with more recent policies, such as discriminatory lending practices, have pushed people of color disproportionately into high housing cost burdens and unhealthy housing conditions. For example, today, African American families in the Bay Area are nearly five times more likely to pay half their income on housing than whites^[xii]. Additionally, undocumented immigrants, seniors, people with disabilities, and people with a conviction history face few options for housing that meets their needs.

The COVID-19 pandemic further complicates this crisis, raising the stakes for those facing housing instability, and exacerbating systemic inequities in housing and health. The pandemic has led to a loss of income for many Bay Area residents, disproportionately impacting low-income residents struggling with high housing costs. A recent national poll found 18% of the adults surveyed had already been laid off or had their work hours reduced^[xiii]. On March 18, Governor Newsom reported that California received 80,000 unemployment applications in one day alone, up from roughly 2,000 a day prior to the outbreak^[xiv]. Many residents, including independent contractors and sole proprietors, do not qualify for the temporary partial wage replacement provided by California's unemployment program. The recent shuttering of businesses across the state also impacts those who had been seeking employment or looking to increase their work prior to the pandemic. Faced with these compounding factors, many low-income workers will not be able to pay for housing and other expenses required to maintain their health. Likewise, the pressure to work while sick and to work in unsafe circumstances to preserve income will be considerable, increasing the potential for virus transmission.

Emergency Action Needed to Increase Housing Stability and Preserve Health

To protect public health, the response to the COVID-19 pandemic should include robust emergency measures to ensure housing stability for low-income individuals and people experiencing or in danger of homelessness. This should include measures to suspend evictions, support the ability of low-income individuals to afford housing, and establish safe housing for the homeless. Together, through immediate action at the local, regional, state, and national level, we can ensure stable housing to provide a foundation of health of all residents in this time of crisis.

For more information, contact BARHII's Matt Vander Sluis at mvandersluis@barhii.org or (707) 628-3324.

^[i] <https://www.cdc.gov/coronavirus/2019-ncov/cases-updates/cases-in-us.html>

^[ii] <https://www.who.int/emergencies/diseases/novel-coronavirus-2019/events-as-they-happen>

^[iii] <https://www.thelancet.com/action/showPdf?pii=S2468-2667%2820%2930053-0>

^[iv] <https://www.scientificamerican.com/article/coronavirus-poses-unique-threat-to-u-s-homeless-population1/>

^[v] <https://www.mercurynews.com/2020/03/19/coronavirus-could-infect-more-than-60000-homeless-in-california-governor-says/>

^[vi] <http://barhii.org/wp-content/uploads/2016/02/BARHII-displacement-brief.pdf>

^[vii] https://reports.nlihc.org/sites/default/files/or/OOR_2019.pdf

^[viii] <https://1p08d91kd0c03rlxhmhtydpr-wpengine.netdna-ssl.com/wp-content/uploads/2019/10/WhoCanAffordRent2019.pdf>

^[ix] <https://www.kqed.org/news/11764548/10-answers-to-your-questions-about-homelessness-in-san-francisco>

^[x] https://1p08d91kd0c03rlxhmhtydpr-wpengine.netdna-ssl.com/wp-content/uploads/2019/12/CHPC_HNR_2019_Bay-Area.pdf

^[xi] https://1p08d91kd0c03rlxhmhtydpr-wpengine.netdna-ssl.com/wp-content/uploads/2019/12/CHPC_HNR_2019_Bay-Area.pdf

^[xii] http://barhii.org/wp-content/uploads/2018/09/Housing_Stability_and_Family_Health.pdf

^[xiii] <https://www.latimes.com/business/story/2020-03-19/coronavirus-layoffs-california>

^[xiv] <https://www.ocregister.com/2020/03/19/coronavirus-pushes-california-unemployment-claims-to-80000-in-a-day/>

COVID-19: Protecting Low-Income Workers and Health

Coronavirus Disease 2019 (COVID-19) Health Impacts

COVID-19 is a respiratory illness caused by a novel virus that is spreading rapidly across the globe. Currently, there are over 44,000 cases in the United Statesⁱ. Globally, over 15,000 deaths have been attributed to the illness since it emerged a little over three months agoⁱⁱ.

In the Bay Area, efforts to respond to the virus are increasing rapidly. On Monday, the County of Alameda joined Contra Costa, Marin, San Francisco, San Mateo, Santa Clara counties with the City of Berkeley on a legal order directing a total of approximately 6.7 million residents to shelter at home for three weeks beginning March 17. Governor Newsom has also instituted executive orders calling for, among other things, cancelling events where “social distancing” of six feet per person cannot be achieved and expanding “shelter-in-place” rules statewide.

In addition to the urgent need for individuals to take public health precautions, social distancing and shelter-in-place measures require that federal, state, and local governments take action to address the systemic barriers for vulnerable populations to accessing the resources they need to comply. The COVID-19 pandemic reveals at an unprecedented scope and scale inequities at the root of wide differences in population health outcomes—differences that are by and large determined by social, economic, and environmental factors.

COVID-19 Impacts on Low-Income Workers

Low-income workers face significant challenges to protecting themselves and others from COVID-19, yet they also make up the ranks of the many essential workers whose work stocking grocery stores, cleaning facilities, picking up garbage, and providing other necessary services allows everyone else to shelter at home safely.

The pandemic has led to a loss of income for many Bay Area residents, disproportionately impacting low-income residents struggling with high housing costs. A recent national poll found 18% of the adults surveyed had already been laid off or had their work hours reducedⁱⁱⁱ. On March 18th, Governor Newsom reported that California received 80,000 unemployment applications in one day alone, up from roughly 2,000 a day prior to the outbreak^{iv}. Many residents, including independent contractors and sole proprietors, do not qualify for the temporary partial wage replacement provided by the program. The recent shuttering of businesses across the state also impacts those who had been seeking work or seeking to increase their work prior to the pandemic. Faced with these compounding factors, many low-income workers will not be able to pay

for housing and other expenses required to maintain their health. Likewise, the pressure to work while sick and to work in unsafe circumstances to preserve income will be considerable, increasing the potential for virus transmission.

There are significant health consequences of low wages and poverty, and public health science has established massive and growing evidence documenting the association of income, especially very low-income, with poor health outcomes on many measures and dimensions of health, from mortality to the occurrence and management of chronic disease and mental health issues. Bay Area adults living under 200 percent of the federal poverty level have a higher percentage of diagnosed diabetes, high blood pressure, and mental health issues compared to those living over 200 percent FPL. The impact of a higher, cumulative disease burden in low-income populations contributes to a shortened life expectancy. A 2014 report from the Bay Area Regional Health Inequities Initiative (BARHII) indicates that, on average, a child who is born and lives in a census tract with more than 30 percent of individuals living in poverty can expect to live seven years less than a child born in a census tract with fewer than 10 percent of people living in poverty.^v

Paid Sick Leave and Income Inequality: Lessons Learned from Previous Pandemics

There has been more than a decade of wage stagnation and erosion for the great majority of American workers.^{vi} Income inequality has been rising in the Bay Area at a higher rate than California overall. Alongside the Bay Area's severe housing affordability crisis, these conditions mean that basic necessities have become more and more unaffordable for low-income people. The increase in wage inequality is significant for many reasons; one reason in particular is because studies of populations with high and rising income inequality are associated with lower life expectancy, higher rates of infant mortality, obesity, mental illness, homicide, and other measures compared to populations with a more equitable income distribution.^{viii}

Policies aimed at increasing the economic security of low-wage workers and families living in poverty, including minimum wage policies, public benefit programs, tax credits, and job-creation policies, are important protection considerations to implement and enforce, in light of the pandemic's rapidly spreading impacts. An example of pertinent policies for immediate action is Paid Sick Leave. Paid Sick Leave days reduce costly and avoidable hospital use and emergency room use. Nationally, among workers with health insurance, those without paid sick days were about 20% more likely to use the emergency room each year.^{vii} Additionally, lack of paid sick leave has been shown to have substantial adverse consequences during times of epidemics and pandemics. During the 2009–2010 H1N1 pandemic, 7 million of the total infected individuals and 1,500 deaths were attributed to the fact that employees did not stay home from work to recover.^{ix} Currently, the Centers for Disease Control (CDC) indicates that the incubation period of MERS-CoV viruses, of which COVID-19 is one, falls anywhere between 2-14 days.^x Meanwhile, only yesterday (3/23/2020), the White House issued a statement asking anyone leaving Corona-stricken N.Y.C to self-quarantine for 14 days.^{xi} To protect public health, the response to COVID-19 should include robust protections for low-wage workers including expanding Paid Sick Leave to

cover the 14-day (80 hour) period at a minimum. If we are able to learn from our history in such turbulent and uncertain times, and act quickly on policies and guidelines that were formed at the heels of pandemics, we may be able to protect our most vulnerable before the consequences spread as fast as the pandemic has.

References

ⁱ <https://www.cdc.gov/coronavirus/2019-ncov/cases-updates/cases-in-us.html>

ⁱⁱ <https://www.who.int/emergencies/diseases/novel-coronavirus-2019/events-as-they-happen>

ⁱⁱⁱ <https://www.latimes.com/business/story/2020-03-19/coronavirus-layoffs-california>

^{iv} <https://www.ocregister.com/2020/03/19/coronavirus-pushes-california-unemployment-claims-to-80000-in-a-day/>

^v BARHII http://barhii.org/download/publications/barhii_2014_minimum_wage_health.pdf

^{vii} <https://humanimpact.org/wp-content/uploads/2017/09/NH-Reduce-Emergency-Room-Visits.pdf>

^{viii} Calif. Office of Health Equity, 2014; Barr, 2014; Wilkinson & Pickett, 2009

^{ix} <https://www.apha.org/policies-and-advocacy/public-health-policy-statements/policy-database/2014/07/16/11/05/support-for-paid-sick-leave-and-family-leave-policies>

^x <https://www.cdc.gov/coronavirus/2019-ncov/community/guidance-business-response.html>

^{xi} <https://nypost.com/2020/03/24/people-leaving-nyc-metro-area-urged-to-self-quarantine-for-14-days/>

^{vii} <https://humanimpact.org/wp-content/uploads/2018/10/Paid-Sick-Days-Fact-Sheet.pdf>

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