

Testimony of Frankie Miranda, President and CEO, Hispanic Federation  
House Select Subcommittee on the Coronavirus Crisis  
July 1, 2021

Chairman Clyburn, my name is Frankie Miranda and I am the President and CEO of the Hispanic Federation. On behalf of the national network of more than 300 Latino community-based nonprofits we serve and represent, thank you for the opportunity to again address you and the distinguished members of the House Select Subcommittee on the Coronavirus Crisis.

The last time that I came before you in February the nation was deep in the grips of a winter surge of COVID-19. A new Biden Administration was just getting its bearings in Washington and implementing plans for confronting a pandemic that had upended lives and livelihoods in every community, state, region and town in America. The good news back then was that a mass national vaccine rollout was underway, and it was being led by a robust federal administration committed to protecting all Americans by using science-based strategies of containment and control.

Much has changed since those grim winter days thanks to the progress and success of our nation's vaccination program. New infections have been declining in most states for months. Hospitalizations are down. And mercifully, the number of deaths caused by the virus is finally slowing with some state Health Departments happily reporting that, for the first time in more than a year, no new COVID-19 related deaths have been registered. While we have turned a corner in many key respects, we still have an incredible amount of work to do to protect the health and well-being of all Americans, especially those from communities who

have fared the worst effects of this pandemic and remain extremely vulnerable to its future spread.

In the Latino and immigrant communities that I represent as President of the Hispanic Federation, that work is more urgent and more complicated than in perhaps any other community in the United States. When I last came before this Committee, I mentioned that this deadly disease had wreaked havoc and left a trail of destruction through the very heart of our towns and *barrios*. Latinos have been infected, hospitalized, and died from the virus at up to four times the rate of other communities in nearly every state in America. In our nation's major cities – New York City, Chicago, Houston and Los Angeles – Latinos are the group with the highest rates of cases and deaths. Hispanic workers and households have also been disproportionately harmed financially, and continue to endure the most significant loss of wages and wealth since the start of the pandemic.

In my more than twenty years of service to the Latino community, I have never seen a crisis more serious and more far-reaching than the one created by the coronavirus. To be clear, what has happened in the Latino communities of the United States during this pandemic is a national tragedy. Let me repeat that, a national tragedy.

We have spent the better part of a year listening to public health professionals and physicians warn us about how the coronavirus feeds off the underlying conditions of patients. While that is true, the bigger truth lies in the fact that the coronavirus has fed off the underlying conditions of our nation.

Historical, persistent and systemic barriers and inequities in health care, housing, education and the labor market has served as an accelerant for COVID-19 to spread like wildfire throughout our nation's Latino communities. Sadly, our Black and Native American brothers

and sisters confront these same inequities and experience this shared reality. Our communities are underserved by medical professionals, overburdened by preventable diseases, limited by a lack of health insurance, and confronted by a host of structural factors that undermine access to care.<sup>1</sup> These issues are not new; they are embedded into the daily lives of Latinos across the United States and have been for generations.

As I mentioned in my testimony in February of this year, there are numerous ways in which these issues have informed how the COVID-19 epidemic has been experienced in our communities. Here are a few examples:

- Latinos are more likely to work in dangerous essential occupations where they are more at risk of infection by the coronavirus.
- Latinos' lower educational attainment rates means that our community is disproportionately represented in industries with less stability, lower wages, and where the lack of labor protections, such as paid sick days, means that sick workers go to work because if they don't they can't afford basic necessities such as food and shelter.
- Latinos are disproportionately more likely to live in substandard housing or to live in overcrowded housing conditions that promote the spread of the coronavirus.<sup>2</sup>
- Latinos account for the largest share of the nation's undocumented immigrant population and as such our communities are home to millions of men, women, and

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<sup>1</sup> A story earlier this year in the *New York Times* captures the noxious combination of poverty and neglect that defines so much of the health care experiences in Latinos in the United States. See Fink, S., & Kosofsky, I. (2021, February 08). Dying of COVID in a 'SEPARATE And UNEQUAL' L.A. Hospital. Retrieved February 14, 2021, from <https://www.nytimes.com/2021/02/08/us/covid-los-angeles.html>

<sup>2</sup> The list of four examples is drawn from "Health equity considerations and racial and ethnic minority groups." (n.d.). Retrieved February 14, 2021, from <https://www.cdc.gov/coronavirus/2019-ncov/community/health-equity/race-ethnicity.html#print>

children who avoid medical care. The reasons for this are various but include inability to pay for care, worries about compromising their future immigration status by accessing publicly-funded health care, and fear of being targeted for enforcement actions by immigration authorities.<sup>3</sup>

These realities cut across lines of geography and politics and are all too common for majorities of Latinos in Red States and Blue States. What is also true is that these factors — along with some others — not only influenced the course of the virus in our community during the darkest months of the pandemic but also seem to be having an effect on the course of vaccination. Our nation has been able to develop a COVID-19 vaccine in record time but its distribution of that vaccine, especially in the Latino community, has been uneven and insufficient.

Data compiled by the Kaiser Family Foundation shows that through mid-June, the percentage of Latinos vaccinated in many states was much lower than their share of the state's total population and often much lower than the share of persons infected with COVID-19 in that state. For example, in the state of California, Latinos account for just 29 percent of vaccinated persons despite accounting for 40 percent of the state's total population and 63 percent of all COVID cases. In Texas, Latinos account for just 34 percent of vaccinated persons despite accounting for 40 percent of the state's total population and

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<sup>3</sup> Sara A. Quandt, Natalie J. LaMonto, Dana C. Mora, Jennifer W. Talton, Paul J. Laurienti, Thomas A. Arcury. (2021) COVID-19 Pandemic Among Immigrant Latinx Farmworker and Non-farmworker Families: A Rural–Urban Comparison of Economic, Educational, Healthcare, and Immigration Concerns. *NEW SOLUTIONS: A Journal of Environmental and Occupational Health Policy* 20, 104829112199246.

51 percent of all COVID cases. These striking disparities are also evident in states as diverse as Oregon, Colorado, Arizona, New Mexico, Illinois, North Carolina and Florida. <sup>4</sup>

What explains this disconnect between the pace of infection and pace of vaccination in the Latino community? The question is simple; the answers, unfortunately, are not. When I appeared before you in February, I suggested a few important steps that Congress could take to make this vaccination process as successful as possible for our community. These included:

- Lowering barriers to access vaccines by making it easier for people to find vaccination locations and register for vaccinations, creating more vaccination sites, including mobile vaccination stations, and conducting door-to-door outreach in our communities to offer vaccines.
- Public education efforts to inform our communities about vaccine access and how vaccinations are free and available to everyone irrespective of financial ability or immigration status.
- Engaging with Latino community-based organizations, including Latino-led Federally Qualified Health Centers, as partners in a national vaccination campaign.

Thanks in large part to the work of this Committee, the Biden Administration, and state and local governments, some of those suggestions are now guiding vaccination efforts across the country. It is easier today to get a vaccine than it was just a few months ago. Between March

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<sup>4</sup> Nambi Ndugga, Olivia Pham, Latoya Hill, Samantha Artiga, and Noah Parker, "Latest Data on COVID-19 Vaccinations by Race/Ethnicity." Kaiser Family Foundation, June 23, 2021 <https://www.kff.org/coronavirus-covid-19/issue-brief/latest-data-on-covid-19-vaccinations-race-ethnicity/> [Accessed June 26, 2021]

and June, the share of vaccinations going to Latinos increased.<sup>5</sup> And, as the Kaiser Family Foundation reports, “the share of vaccinations going to Hispanic people increased by at least 10 percentage points in five states, including California (19% to 29%), New Jersey (6% to 16%), Florida (17% to 29%), Nevada (13% to 25%), and Texas (23% to 34%).”

This is good news, but it is also not enough given the devastating toll that COVID-19 has taken on our community. We need more help, immediately, and this Congress and this Committee are in the best position to deliver that help. Here’s how.

- *Continue and Expand Education Efforts About the Safety and Effectiveness of Vaccines:*

Like so many other communities, Latinos have been bombarded by misinformation and disinformation regarding the COVID-19 vaccines.<sup>6</sup> There is little doubt that some Latinos have been affected by these campaigns and, as a result, have shown a reluctance to get vaccinated. However, Latinos are still much more likely than their non-Hispanic White and Black counterparts to say that they want the vaccine. The Kaiser survey published last month found that 33 percent of Latino adults said they would be vaccinated as soon as possible compared to just 17 percent of Black adults and 16 percent of White adults. In other words, our community is overwhelmingly committed to getting vaccinated, despite misinformation and disinformation campaigns. If the federal government were to work with local government and nonprofit

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<sup>5</sup> Ibid.

<sup>6</sup> Jessica Guynn and Coral Murphy Marcos. “COVID-19 Crisis: Vaccine Conspiracy Theories, Hoaxes in Spanish Targeting Hispanic Community Breed Fear, Hesitancy.” *USA Today*, Gannett Satellite Information Network, 17 Mar. 2021, [www.usatoday.com/story/tech/2021/03/16/facebook-whatsapp-covid-vaccine-misinformation-spanish-hispanic-hesitancy/4711556001/](http://www.usatoday.com/story/tech/2021/03/16/facebook-whatsapp-covid-vaccine-misinformation-spanish-hispanic-hesitancy/4711556001/). [Accessed June 26, 2021]

counterparts, we have little doubt that we can build on and grow Latino enthusiasm about vaccinations.

- *Redouble Efforts to Increase Access to Vaccines, Especially Targeting Undocumented*

*Immigrants:* Even though recent data show that vaccination rates among Latinos are increasing, there are still some significant challenges to getting more people in our communities vaccinated. We have heard repeatedly from our network of Latino community-based organizations, many of which are working on the frontlines to vaccinate Latinos in their neighborhoods, that financial and immigration-related concerns are the major factors driving Latino vaccine hesitancy. They include the following:

- Concerns that they might miss work in order to get vaccinated or that they might miss work because the vaccine might make them feel sick the next day
- Concern that they have to pay a fee to get vaccinated
- Concern that they would be required to submit a social security number or other type of government-issued identification in order to get vaccinated

None of these issues is insurmountable but they require a concerted government response coming from the federal government. The Biden Administration and its partners here in Congress can enact measures to protect workers who are concerned about losing pay or their jobs because they are getting vaccinated and they can make it clear to uninsured and undocumented Latinos that vaccinations are free of charge anywhere and everywhere in our nation, and that there are no immigration-related consequences to getting a vaccine shot. The government must be explicit in letting undocumented immigrants know that no immigration enforcement actions will take place at vaccination sites and that information

collected by health departments will not be used to target undocumented immigrants and their families.

- *Work with Latino Community-Based Organizations to Meet Unvaccinated Latinos Where They Are:* Latinos have expressed concern about getting vaccines from organizations they can trust. In this way, the Latino nonprofit sector is a powerful partner to federal vaccination efforts. I know through the work of the Hispanic Federation, that Latino community-based organizations are already doing vital work on vaccination. Our Latino VIDA Vaccination Initiative has been providing support to amazing frontline service organizations such as CHIRLA in Los Angeles, Urban Health Plan in New York City, El Centro de Corazón in Houston, Conexión Americas in Nashville, Tennessee, Latino Community Association in Bend, Oregon, and Centro Campesino in Homestead, Florida. In fact, we are funding organizations in 32 states and Puerto Rico to leverage their grassroots connections so that people can get vaccinated where they live, work, and play. The result, Latinos have been willing to get vaccinated because these organizations, with long-established records in the community, are trusted institutions.

These are just some of the many ways that this Committee can help accelerate the vaccination process. What is clear to us – and what we hope is evident to every member of this Committee – is that no fair and effective recovery from this pandemic can avoid the Latino dimensions of this crisis. A just recovery will depend on the way we prioritize resources and policies to improve the safety, health and well-being of Latino communities.

Recent reports about the surge in coronavirus variants have lent new urgency to our national campaign to get every American vaccinated. As many states and cities reopen and as fatigue settles into our communities, vaccinations are our single greatest weapon against the



virus. Chairman Clyburn, as you have said so powerfully, “we must ensure that the communities hardest hit by the virus have equitable access to the vaccine and are being vaccinated at equitable rates.” We must use every resource at our disposal to make sure that happens. The lives and future of our most vulnerable communities hang in the balance.