

Ivangura rishingiye ku rukoba ni uburyo bwo kubangamirana bufise ingaruka ku mivukire y'abantu, uko bakura, imibereho n'imikorere yabo. Kubera iryo vangura, ababa Vermont b' Abirabure, Abasangwabuaka, n'Abantu Bazize (BIPOC) ntibaserukiwe ku bice bimwe mu buzi bumwebumwe budashobora gukorerwa muhira, busaba kuba hafi na hafi n'abantu kandi bugatanga uburenganzira buke ku mushahara mugihe c'uburwayi. Bafise amahirwe menshi yo kuba mu mazu asirwa na basekuruza canke amazu basangira nabandi kandi bakagira uburenganzira buke ku bufasha bugenerwa umuntu kugiti ciwe nk'udufukamunwa n'imiti yica imigera mu ntoke. Ubusumbane ku burenganzira n'agaciro k'ubuvuzi, indero, akazi, uburaro, amagara yo mu mutwe, n'ubufasha muvy'imibano nabwo burongereza ingorane mu buvuzi bw'indwara zidakira. 1,2 Ku bw'ivyo, aba BIPOC bo muri Vermont bagize igice c'abanyagihugu bo muri Vermont gishika kuri 6% y'abantu bose muga bakaba bari mubice vya 18% vy'abarwaye. Hafi umuntu 1 muri 5 barwaye COVID-19 muri Vermont aba ari mu ba BIPOC bo muri Vermont. Ibice vyose bigereranywa ku bantu 10,000 .

INGINGO NYAMUKURU

- **BIPOC bo muri Vermont bagereranywa ku bice 6% vy'ababa muri iyo Reta n'ibice 18% vy'abarwaye COVID-19.**
- **BIPOC bo muri Vermont bafise COVID-19 bafise ibice vyinshi vy'abari mu bitaro kandi barwaye ingwara zidakira ugereranije n'abazungu badakomoka muri Espanye bafise COVID-19.**

Muri rusangi

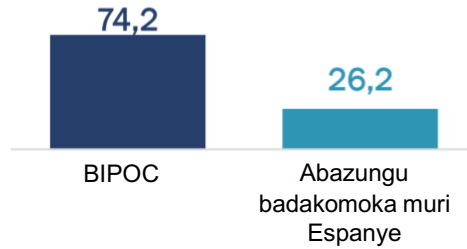
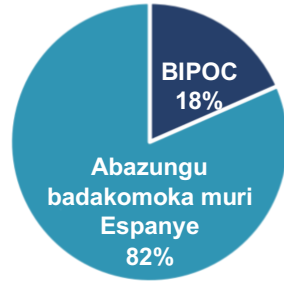
Nko muri Gitugutu itariki 31, hari abarwayi 2,024 ba COVID-19 mu baba muri Vermont na 344 (18%) muba BIPOC bo muri Vermont.* Igereranya ry'inkurikizi za COVID-19 muba BIPOC bo muri Vermont (74.2) riri hejuru cane gusumba ku bazungu badakomoka muri Espanye bo muri Vermont (26.2).† Igereranya ry'inkurikizi za COVID-19 muri Vermont riri hasi gusumba muri Reta Zunze Ubumwe, bose hamwe harimwo na BIPOC bo muri Vermont, aho kugera ubu kwanduzanya bikiri hasi. Reta Zunze Ubumwe Igereranya ry'inkurikizi za COVID-19 muba BIPOC bo muri Amerika ni 148.0.3.^{0.9} Igereranya ry'abapfa mu ba BIPOC bo muri Vermont ni 3.6%, ugereranije na 3,6% kuri bazungu badakomoka muri Espanye baba muri Vermont.

**Abarwayi ba COVID-19 muri Vermont bagwiriye mu bazungu badakomoka muri Espanye .
Naho biri uko, igereranya muba BIPOC baba muri Vermont riri hejuru cane.**

* Menya neza ko 18% vy'aba BIPOC baba muri Vermont bafise COVID-19 bari muri 1,865 bafise amakuru kuvy'urukoba/ubwoko. Hari abantu 159 batanzwe kuvy'urukoba na/canke ubwoko.

† Igereranya ry'inkurikizi ni igitigiri c'abanduye COVID-19 kugabura n'igitigiri c'abantu bose, kugwiza na 10,000.

COVID-19 mu ba BIPOC bo muri Vermont



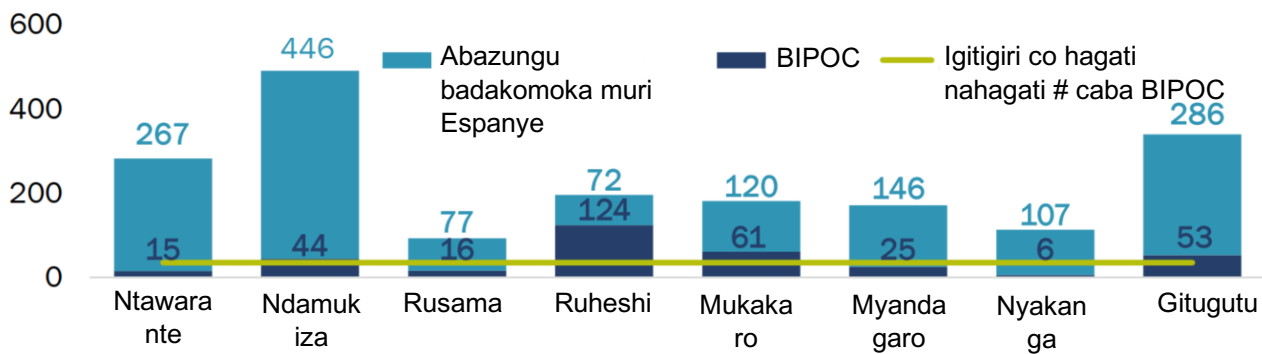
Muba BIPOC bo muri Vermont, igereranya ry'inkurikizi riri hejuru cane ku Birabure canke Abanyamerika bakomoka muri Afrika (225.7), hagakurikira abakomoka muri Aziya (61.0), n'ayandi moko (20.5), harimwo abantu basa nk'abavanze, Imvukira za Hawaii canke Abo mw'izinga rya Pacifike. Igereranya mu bakomoka muri Espanye ni 41.7.

Ihindagurika Rifatiye ku Bihe

Igitigiri c'abarwayi mungo z'aba BIPOC cari kiri hejuru muri Ruheshi, aho bashika 124. Benshi muri abo bafitanye isano batangiyeye gufatwa mu miryango iba mu mazu asigwa na basekuruza canke amazu babana bari benshi ari naho abantu bakuze bari abakozi ngombwa.

Muri Nyakanga, habonetse igitigiri gito cane c'abarwayi (6) muba BIPOC baba muri Vermont. Igitigiri co hagati na hagati c'abarwayi muba BIPOC baba muri Vermont buri kwezi ni 35.

Igitigiri c'aba BIPOC bo muri Vermont bafise COVID-19 caduze muri Ruheshi. Ufatiye kuguhinduka kw'umwanya, BIPOC baba muri Vermont babandanya gukorwako na COVID-19 kuburyo buhushanye.



Igitsina

Muba BIPOC barwaye, harimwo 157 b'igitsina gore (46%) na 183 b'igitsina gabo (53%). Igereranya ry'abagore n'abagabo risa naho ari rimwe (67.7 b'igitsina gore kuri 78.7 b'igitsina gabo).

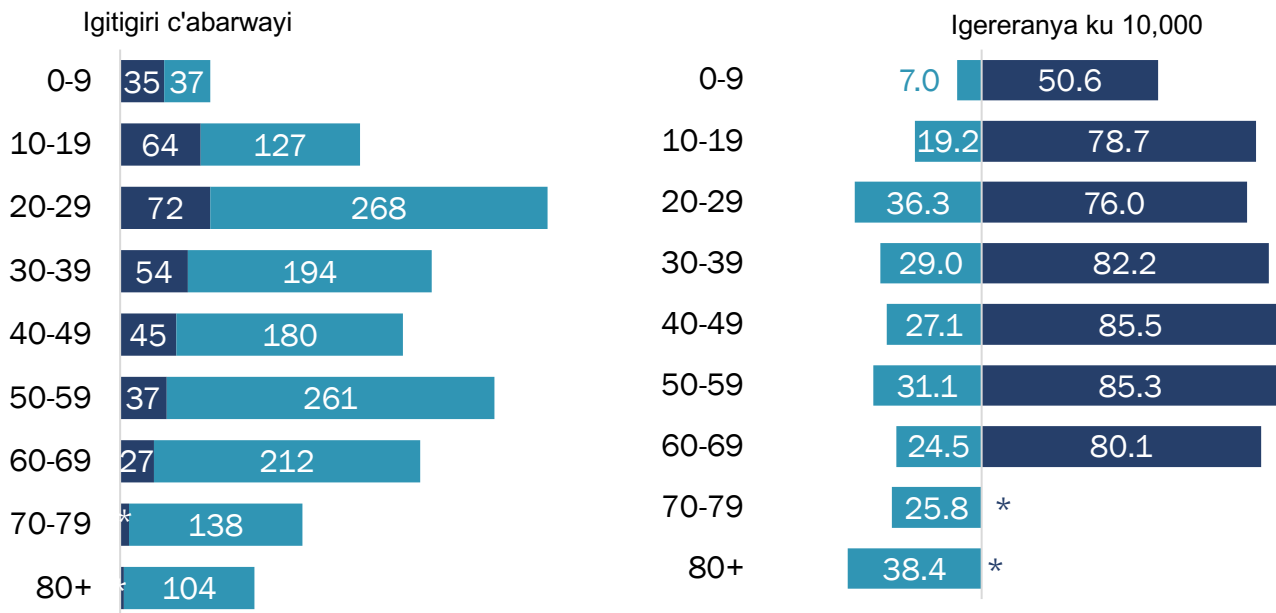
Imyaka

Igitigiri c'aba BIPOC baba muri Vermont bagwaye bigizwe nk'urwaruka ugereranije n'abarwayi babazungu badakomoka muri Espanye, bikaba bafitanye isano no kugabanuka kw'imyaka ya BIPOC

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baba muri Vermont yose . Imyaka yo hagati na hagati kubafise COVID-19 ni 33 muba BIPOC baba muri Vermont na 46 mu bazungu badakomoka muri Espanye bo muri Vermont. Hanyuma kandi, 70% baba BIPOC barwaye bafise muni y'imyaka 40. Amageranya kuba BIPOC barwaye arasa ufatiye ku mirwi y'imyaka kiretse kuva kubafise imyaka 0 gushika kuri 9, aho BIPOC bafise igereranya riri hasi ufatiye kuyindi mirwi y'imyaka . Amagereranya yose ya BIPOC afatiye ku myaka ari hejuru cane gusumba ay'abazungu badakomoka muri Espanye. Amagereranya kuba BIPOC bo muri Vermont bafise imyaka irenga 70 ntiyerekanwa kuberako ari bake.

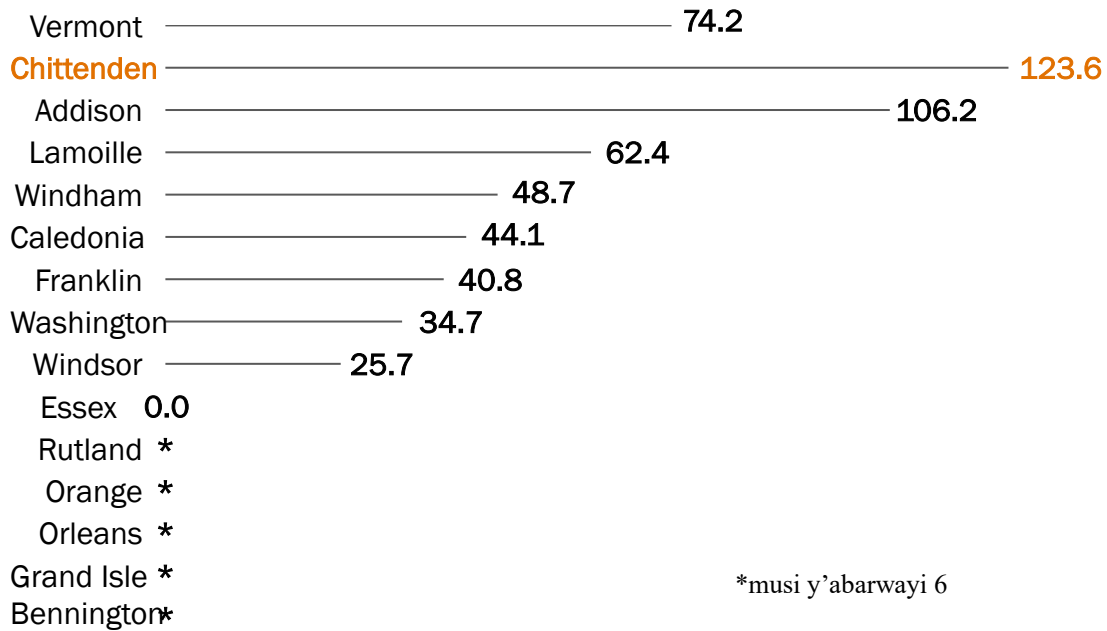
Abarwayi muba BIPOC baba muri Vermont ni abakiri bato ugereraniye na abarwayi mu b'abazungu badakomoka muri Espanye. Amagereranya kuba BIPOC baba muri Vermont arasa ufatiye ku myaka.



Komine ubamwo

Komine ya Chittenden ifise igereranya rinini ry'abarwayi ba COVID-19 mubindi bibano vy'aba BIPOC kandi ni rinini cane kuruta irya Vermont. Agace ka Addison gafise igereranya rigira kabiri, ariko, ringana n'irya Vermont mubiharuro.

Komine ya Chittenden ifise igereranya rinini rya COVID-19 muba BIPOC bari mu gihugu.



Ibiza

Hafi 6 muri 10 b'aba BIPOC barwaye bahujwe n'ikiza (59%, n=203). Abenshi mu ba BIPOC barwaye bahujwe n'ikiza kandi bari bamwe mu bagize uruhara mu kiza cateye mu kibano (n (n=128). Abandi ba BIPOC barwaye bahujwe n'ibiza mu bibanza vy'akazi (n=31), mu busho (n=11), mu mahinguriro (n=11), ahatangirwa ubufasha bwo kwitabwaho igihe kinini (n=10), canke aho kwidagadurira (n=7). Hari ubundi bwoko bw'ibiza muba BIPOC baba muri Vermont, ariko ibitigiri ni bito cane ntibishobora kwerekanwa muri uru rwandiko .

Kwegerana n'umuntu mubana Vyemejwe ko Arwaye

BIPOC baba muri Vermont bashobora gusunvya kuba bafise umuntu babana arwaye ugereranije nabazungu badakomoka muri Espanye. Hafi nk'ica gatatu (36%) c'aba BIPOC baba muri Vermont bandura COVID-19 bivuye mu migenderanire y'imiryango, aho ibice 20% gusa vy'abazungu badakomoka muri Espanye aribo bandura COVID-19 biciye mu migenderanire y'imiryango. Mu ndimbanyo, abarwayi mu kibano c'aba BIPOC bagirana imigenderanire myinshi ugereranije n'abazungu badakomoka muri Espanye (2.0 ku bantu 1.3, uko bikurikirana).[‡]

Kuja mu bitaro

[‡] Ibi vyerekana igitigiri c'abantu bigenga bitwa nk'itumanako.

COVID-19 mu ba BIPOC bo muri Vermont

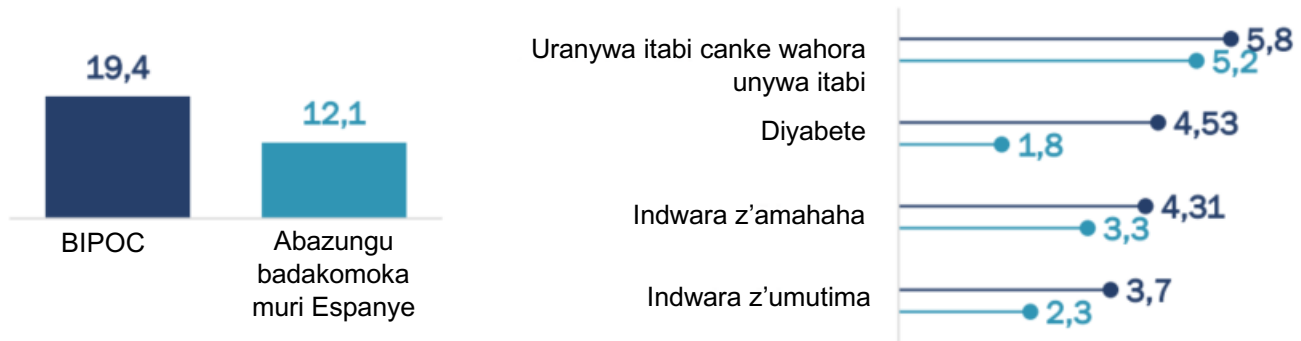
Ibice bitatu kw'ijana vy'abarwayi muba BIPOC baba muri Vermont baragiye mu bitaro barwaye COVID-19, arivyo biri munsu y'ibice 8 kw'ijana vy'abazungu badakomoka muri Espanye bagiyeye mu bitaro. Igereranya ry'abagiyeye mu bitaro ni 3.2 kuri 10,000 vy'aba BIPOC baba muri Vermont, arivyo biri hejuru cane ugereraniye n'igereranya ry'abazungu badakomoka muri Espanye (1.9). Irimbanya ry'igihe co kumara mu bitaro kuba BIPOC baba muri Vermont bafise COVID-19 ni iminsi 7, ariko ibi bifatira ku gitigiri gito kandi bishobora kudaserukira irimbanya ry'igihe co kumara mu bitaro buba BIPOC. Muri yaba BIPOC 6 baba muri Vermont baramaze kuja mu bitaro ICU.

Indwara umuntu yarasanzwe afise

BIPOC baba muri Vermont bafise COVID-19 bafise igereranya z'indwara umuntu yarasanzwe afise riri hejuru ugereraniye n'abazungu badakomoka muri Espanye bafise COVID-19, 19.4 kuri 12.1 kuri 10,000 baba muri Vermont, uko bikurikirana. Aba BIPOC baba muri Vermont bafise COVID-19 bafise amagereranya ari hejuru ya diyabete, amahaha, n'indwara z'umutima gusumvya amagereranya ku bazungu badakomoka muri Espanye baba muri Vermont.

Aba BIPOC bafise COVID-19 bafise amagereranya ari hejuru y'indwara umuntu yarasanzwe afise.

Amagereranya y'indwara umuntu yarasanzwe afise ku barwayi ba COVID-19 ku 10,000



Ingingo nyamukuru

Uburyo tubayeho, dukora, tukanakina, ibizwi nk'ivyerekana amagara yacu mu mibanire, biratandukira igice kinini mu bigaragaza amagara yacu. Ivangura rishingiye ku rukoba ryaragize ingaruka nini kw'itunganywa ry'amagara mu mibanire. Muyandi majambo, n'imbere y'ikiza ca COVID-19, si uwo ariwe wese muri Vermont yari ahise uburenganzira bumuha akarusho muvy'amagara. COVID-19 ishira ahabona ubwo busumbane. Aba BIPOC baba muri Vermont bafise uguhakwa gutandukanye bivanye n'ubushobozi buke muvy'amagara, harimwo n COVID-19. Muri Vermont, hari ibitigiri bidahuye vy'aba BIPOC baba muri Vermont bafise COVID-19, kandi ubu budasa bwarongerejwe n'ico kiza. Vyongeye, abo bantu bafise urugero runini rwo guhakwa kumvo nyinshi nko kuja mu bitaro, no kubura uburenganzira ku makuru n'uburyo bwo kwikingira no kwishira mu mwiherero canke kwiyugarana mu mutekano. Kuyandi makuru kuvy'igisata ca Vermont Kijewe Amagara kiriko kirakora kugira gikumire ubusumbane bufatiye ku rukoba n'ubwoko mu vy'amagara, nyabuna raba www.healthvermont.gov/about-us/our-vision-mission/health-equity.

Aho tubisanga:

COVID-19 mu ba BIPOC bo muri Vermont

1. [2018 Uburyo bwo gucunga imyitwarire ishobora gutera ingorane bwa Vermont\(BRFSS\)](#)
2. [2019 Ubushakashatsi ku Myitwarire Ishobora guteza ingorane y'Urwaruka](#)
3. https://covid.cdc.gov/covid-data-tracker/#cases_casesper100klast7days Amakuru yasubiwemwo Munyonyo 2, 2020.

Kuyandi makuru ajanye n'ibiharuro kuvya COVID-19 muri iyi raporo : Ibibazo vy'Ubuzima Rusangi AHS.VDHCovid19Inquiries@vermont.gov

Ku bibazo bijanye no kunganya uburenganzira kuvyo amagara: Umurwi Witaho kunganya uburenganzira kuvyo amagara , AHS.VDHHOCEquityTeam@vermont.gov

Systemic and structural racism are oppressive systems affecting the conditions in which people are born, grow, live, and work. Because of these systems, Vermonters who are Black, Indigenous, and People of Color (BIPOC) are disproportionately represented in essential frontline jobs that cannot be done at home, require closer physical contact with the public, and offer less access to paid sick time. They are more likely to be living in multi-generational housing or congregate living spaces and may have less access to personal protective equipment, such as face masks and hand sanitizer. Inequities in access to and quality of health care, education, employment, housing, mental health, and social support services also contribute to higher rates of underlying or chronic medical conditions.^{1,2} For these reasons, BIPOC Vermonters are overrepresented among COVID-19 cases in Vermont, making up 6% of the population but 18% of positive cases. Nearly 1 in every 5 COVID-19 cases in Vermont are among BIPOC Vermonters. All rates are presented as per 10,000 persons.

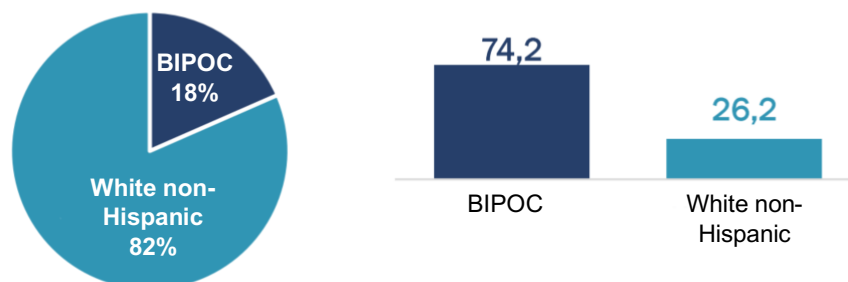
KEY POINTS

- **BIPOC Vermonters represent 6% of the State's population but 18% of COVID-19 cases.**
- **BIPOC Vermonters with COVID-19 have significantly higher hospitalization and chronic disease rates, relative to white non-Hispanic people with COVID-19.**

Overview

As of October 31, there are 2,024 COVID-19 cases among Vermont residents and 344 (18%) cases among BIPOC Vermonters.* The incidence rate of COVID-19 among BIPOC Vermonters (74.2) is significantly higher than white non-Hispanic Vermonters (26.2).† Vermont's COVID-19 incidence rate is lower than the U.S., both overall and among BIPOC Vermonters, suggesting less disease transmission in Vermont thus far. The U.S. COVID-19 incidence rate among BIPOC Americans is 148.0.³ The case fatality rate for BIPOC Vermonters is 0.9%, compared to 3.6% among white non-Hispanic Vermonters.

Most COVID-19 cases in Vermont are among white non-Hispanic people. However, the rate among BIPOC Vermonters is significantly higher.



* Please note that the 18% of BIPOC Vermont residents with COVID-19 is among the 1,865 with complete race/ ethnicity information. There are 159 people missing race and/or ethnicity.

† Incidence rate is the number of COVID-19 infections divided by the total population, then multiplied by 10,000.

COVID-19 Among BIPOC Vermonters

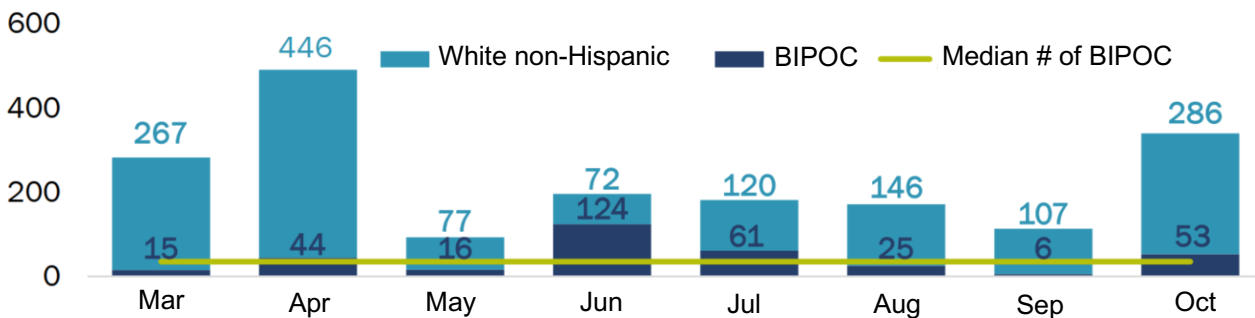
Among BIPOC Vermonters, incidence rates are highest for Black or African Americans (225.7), followed by Asians (61.0), and other races (20.5), which includes people who identify as more than one race, Native Hawaiian or Pacific Islander. The rate among Hispanic people is 41.7.

Trends Over Time

The number of cases within BIPOC communities was highest in June, when there were 124 cases. Many of these cases were associated with a single community outbreak that primarily affected families living in multi-generational or crowded housing and where adults were essential workers.

In September, we saw the lowest number of cases (6) among BIPOC Vermonters. The median number of cases among BIPOC Vermonters each month is 35.

The number of BIPOC Vermonters with COVID-19 peaked in June. Over time, BIPOC Vermonters continue to be disproportionately impacted by COVID-19.



Sex

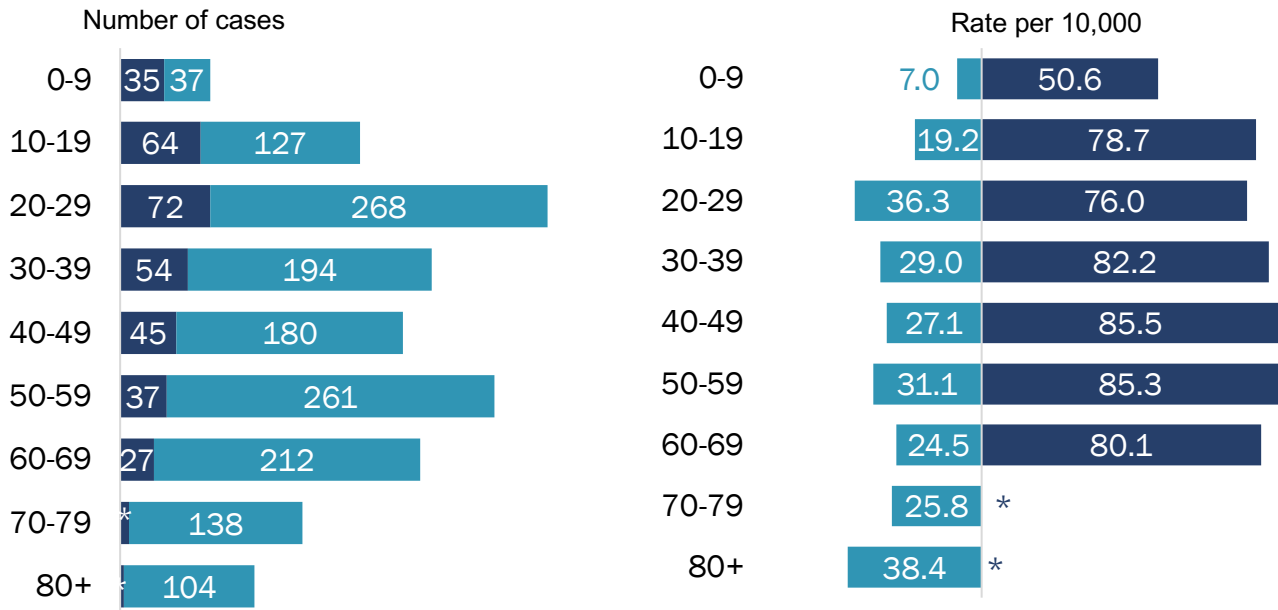
Among BIPOC cases, there are 157 females (46%) and 183 males (53%). Rates for males and females are statistically similar (67.7 females versus 78.7 males).

Age

Cases among BIPOC Vermonters tend to be younger compared to white non-Hispanic cases, which is correlated with the age breakdown of all BIPOC Vermonters. The average age of those with COVID-19 is 33 among BIPOC Vermonters and 46 among white non-Hispanic Vermonters. Furthermore, 70% of BIPOC cases are under the age of 40. Rates for BIPOC cases are similar across age groups, with the exception of 0 to 9-year-olds, where BIPOC have a lower rate than most of the other age groups. All of the BIPOC rates by age are significantly higher than white non-Hispanic rates. Rates for BIPOC Vermonters over the age of 70 are not shown due to small numbers.

COVID-19 Among BIPOC Vermonters

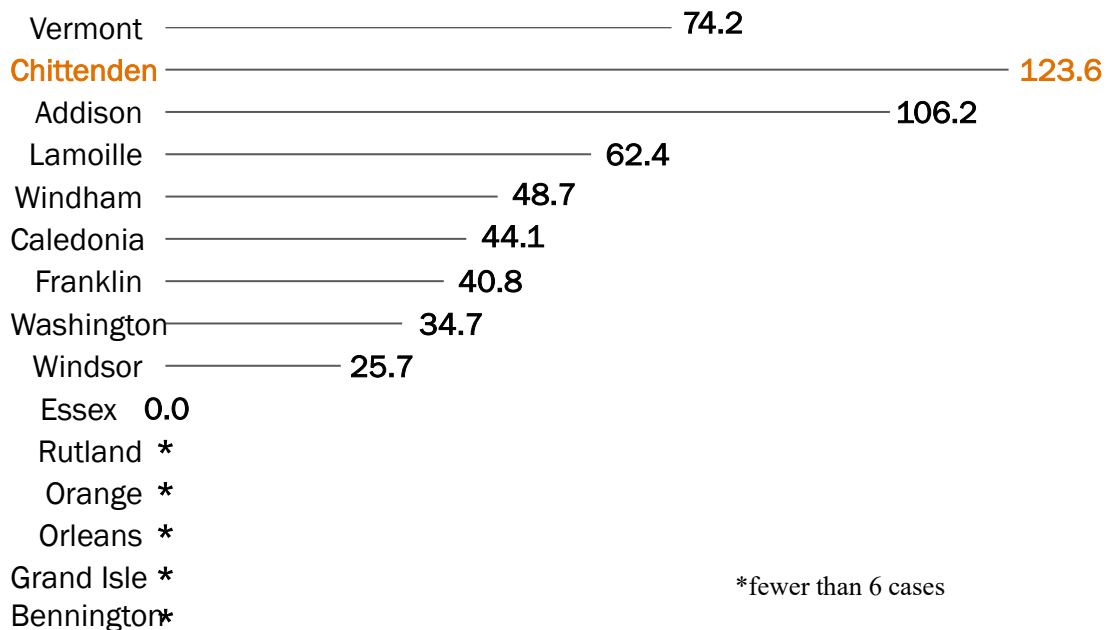
Cases among BIPOC Vermonters are younger relative to white non-Hispanic cases. Rates for BIPOC Vermonters are similar by age.



County of Residence

Chittenden County has the highest rate of COVID-19 among BIPOC communities and is significantly higher than the Vermont rate. Addison County has the second highest rate, however, is statistically similar to the Vermont rate.

Chittenden County has the highest rate of COVID-19 among BIPOC in the state.



Outbreaks

Nearly 6 in 10 BIPOC cases are associated with an outbreak (59%, n=203). Most BIPOC cases associated with an outbreak were part of a community outbreak (n=128). Other BIPOC cases are associated with outbreaks in a workplace (n=31), correctional facility (n=11), manufacturing facility (n=11), long-term care facility (n=10), or a recreational facility (n=7). There are additional outbreak types among BIPOC Vermonters, but numbers are too small to be shown in this brief.

Household Contact with a Confirmed Case

BIPOC Vermonters are significantly more likely to have had household contact with a case compared to white non-Hispanic people. Just more than a third (36%) of BIPOC Vermonters get COVID-19 through household contact, where only 20% of white non-Hispanic people get COVID-19 through household contact. On average, cases in the BIPOC community have slightly more close contacts compared to white non-Hispanic people (2.0 versus 1.3 people, respectively).[‡]

Hospitalization

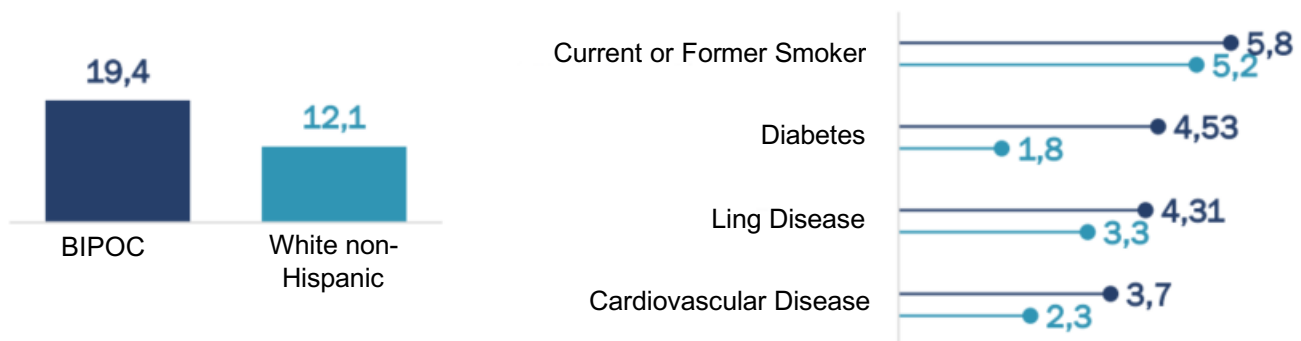
Three percent of cases among BIPOC Vermonters have been hospitalized for COVID-19, which is less than the 8 percent of white non-Hispanic people who have been hospitalized. The hospitalization rate is 3.2 per 10,000 BIPOC Vermonters, which is significantly higher than the white non-Hispanic rate (1.9). The average length of hospitalization for BIPOC Vermonters with COVID-19 is 7 days, however this is based on small numbers and may not be representative of the average hospitalization length for BIPOC people. Fewer than 6 BIPOC Vermonters have been hospitalized in the ICU.

Pre-existing Conditions

BIPOC Vermonters with COVID-19 have a significantly higher rate of pre-existing conditions compared to white non-Hispanic Vermonters with COVID-19, 19.4 versus 12.1 per 10,000 Vermonters, respectively. BIPOC Vermonters with COVID-19 have significantly higher rates of diabetes, lung, and cardiovascular disease than rates among white non-Hispanic Vermonters.

BIPOC people with COVID-19 have higher rates of pre-existing conditions.

Rates of pre-existing conditions among COVID-19 cases per 10,000



[‡] This represents the number of individual people named as contacts.

Key Takeaways

The conditions in which we live, work, and play, known as the social determinants of health, affect a wide range of health outcomes. Systems of structural oppression and racism greatly impact social determinants of health. In other words, even before the COVID-19 pandemic, not everyone in Vermont had equal access to the conditions that favor health. COVID-19 shines a light on these inequities. BIPOC Vermonters are at disproportionate risk for poor health outcomes, including COVID-19. In Vermont, there is a disproportionate number of BIPOC Vermonters with COVID-19, and this disparity has been consistent throughout the pandemic. In addition, this population is at higher risk for more serious outcomes, such as hospitalization, and may lack access to information and resources to prevent the spread and to isolate or quarantine safely. For more information on what the Vermont Department of Health is doing to mitigate racial and ethnic health disparities, please visit www.healthvermont.gov/about-us/our-vision-mission/health-equity.

References:

1. [2018 Vermont Behavioral Risk Factor Surveillance System \(BRFSS\)](#)
2. [2019 Youth Risk Behavior Survey](#)
3. https://covid.cdc.gov/covid-data-tracker/#cases_casesper100klast7days Data retrieved November 2, 2020.

For more information about COVID-19 data in this report: Public Health Inquiries
AHS.VDHCovid19Inquiries@vermont.gov

For questions about health equity: Health Equity Team, AHS.VDHHOCEquityTeam@vermont.gov