

Detroit on the Frontline in Battle to End COVID-19 Pandemic

By Abayomi Azikiwe

Global Research, April 09, 2020

Region: <u>USA</u>

Theme: Poverty & Social Inequality,

Science and Medicine

More than 2,000 people working in the healthcare industry have reportedly tested positive for COVID-19 in the Detroit metropolitan area sending further tremors through the already heavily-shaken region which has been identified as a major "hotspot" in the pandemic.

A spokesperson for Beaumont Hospital system said on April 6 that 1,500 of their employees have symptoms consistent with COVID-19. These numbers include 500 nurses.

At Sinai-Grace Hospital, a group of nurses staged a sit-in demanding that additional staff be hired and assigned to their shift. The nurses emphasized that there was not enough personnel to address the needs of the patients.

These nurses were then told to go home. Another nurse two weeks earlier was terminated by Sinai-Grace for raising the same concerns in a social media post.

Henry Ford Hospital announced on April 8 that over 700 of its 31,000 employees had tested positive for COVID-19. 718 patients battling the virus are being treated in the five Henry Ford Hospital campuses across Detroit and its suburbs.



With these two healthcare systems combined, Beaumont and Henry Ford, is where in excess of 2,000 employees have come down with COVID-19. The situation has created much anxiety and anger among workers in the hospital systems.

Nurses at Beaumont Hospital issued a statement during the week of April 6 demanding additional personal protective equipment (PPE), additional pay, free and regular testing, and screening, housing allowances and the hiring of additional staff. A <u>Facebook page</u> group has sprung up in support of these workers called "Stand with Beaumont Nurses."

The Facebook page has 1,300 members stating in its mission that: "Beaumont nurses need our help. Nurses at all eight Beaumont hospitals are working without adequate personal protective equipment (PPE). They are short staffed due to illness and hospital mismanagement, so they are being forced to work long hours and in situations that might not fit their skill sets. They are putting their families and communities at risk because of their exposure to COVID-19 at work. If they speak out about these issues, they risk losing their jobs."

Three nurses from the Detroit area have already died from the virus. Others within public safety, emergency medical services and public transportation have also been sickened and died.

Department of Transportation (DDOT) bus driver Jason Hargrove became the face of the plight of municipal workers in late March when he posted a video on Facebook complaining about a passenger coughing on the bus without covering up their face. Within a week the Amalgamated Transit Union Local 26 member was dead from COVID-19.

Hargrove on his post said: "It was about 8 or 9 people on the bus and she stood there and coughed and never covered up her mouth. We out here as public workers trying to do our job, trying to make an honest living, trying to care of our families, but for you to get on the bus and stand on the bus and cough several times without covering your mouth — and you know that we are in the middle of a pandemic — that lets me know that some folks don't care."

The DDOT driver left behind a wife and three children. His widow has spoken to ABC News where she recounted the daily distress Hargrove experienced working under the conditions prevalent in the city as the pandemic unfolded.

A rapid rise in COVID-19 cases in Detroit and other areas throughout Michigan has laid bare the social consequences of years of impoverishment, the lack of universal healthcare and dangerous working conditions. The termination of water services and the lack of adequate food outlets have compounded with the high incidences of cardiovascular disease, diabetes and other ailments which impact African Americans making the virus a serious threat to the health and well-being of the entire region.

African Americans Disproportionately Affected by Pandemic

As of early April, the United States has the largest number of COVID-19 cases in the world where municipalities such as New York City, Detroit, Chicago, New Orleans, Washington, D.C. and Baltimore have been the source of a large number of the 395,000 cases resulting in 12, 800 deaths. The Center for Disease Control and Prevention (CDC) has been documenting the number cases and deaths on a daily basis.

Internationally there were 1,357,000 cases reported as of April 8 while nearly 80,000 have died. COVID-19 cases have been reported in 212 countries.

Within these statistics the number of African Americans contracting and succumbing to the virus has prompted alarm among community and public leaders locally, statewide and nationally. In almost every city and state where COVID-19 has surfaced on a significant level, African Americans have been disproportionately impacted.

Cases by Race

Race	Percentage of Overall Cases by Race	Percentage of Deceased Cases by Race
American Indian or Alaska Native	<1%	<1%
Asian/Pacific Islander	1%	1%
Black or African American	33%	40%
Caucasian	23%	29%
Multiple Races	2%	1%
Other	3%	3%
Unknown	37%	25%

Totals may not add to 100% due to rounding

According to a report published on April 7 by <u>Vox.com</u>, it says:

"As of Tuesday, Black people made up 33 percent of cases in Michigan and 40 percent of deaths, despite being just 14 percent of the state's population. In Milwaukee County, Wisconsin, where Black people represent 26 percent of the population, they made up almost half of the county's 945 cases and 81 percent of its 27 deaths, according to a ProPublica report. In Illinois, Black people made up 42 percent of fatalities but make up only 14.6 percent of the state's population. In Chicago, the data is even graver: Black people represented 68 percent of the city's fatalities and more than 50 percent of cases but only make up 30 percent of the city's total population."

On April 7 the State of Michigan reported more than 5,500 cases of the virus in Detroit with an official death total of 222. These figures may represent an underreporting of cases due to the difficulty people had with testing during the early weeks of the pandemic in the city. Some people have died of symptoms suspected to be COVID-19 prior to being tested. Rapid testing kits have been introduced to Detroit and a trial study of the prescription drug hydroxychloroquine is being conducted at Henry Ford Hospital.

Much controversy has surrounded the medication utilized to treat malaria, rheumatoid arthritis and lupus. Some physicians have suggested that patients suffering from COVID-19 have shown positive results after treatment while others point out that more research is needed. President Donald Trump has championed the medication in several White House Coronavirus Task force briefings. Many African Americans are weary of utilizing the patient population in Detroit as an experimental group for testing the drug.

At present drive thru testing facilities are busy every day at the State Fairground and Beaumont Hospital. In the state of Michigan figures released on April 8 said that there were over 20,000 COVID-19 cases and nearly 1,000 deaths.

The southern city of New Orleans has too been a major focal point for the spread of the

disease. A pattern of disparate impact is reinforced in the Louisiana city where large numbers of African Americans reside.

Statistics related to comorbidities are also quite revealing. The above-mentioned article from Vox.com notes: "This is also backed up by data released in Louisiana on Monday (April 6). In the state, the leading underlying medical conditions in patients who tested positive for coronavirus are hypertension (66.4 percent), diabetes (43.52 percent), chronic kidney disease (25.1 percent), and obesity (24.7 percent)."

Chicago Mayor Lori Lightfoot spoke to various national media outlets on the crisis inside this Midwestern city of 2.7 million people. Over 50 percent of cases in Chicago are among African Americans while 72 percent of the people killed are from the same demographic.

University of Chicago Medical School faculty member Dr. Monica Peek who studies racial disparities in healthcare said that many of the people considered essential workers in the service industry are African Americans. African Americans, who are more likely to have underlying health conditions, are still expected to come to work.

Dr. Peek <u>said</u> of the situation: "When the city puts out orders for people to shelter in place ... the grocery stores are open ... public transit is still open. And the people that are working in those jobs are primarily or disproportionately racial or ethnic minorities."

Community Response in Detroit

Streets are largely empty in Detroit due to the state of emergency declared by Michigan Governor Gretchin Whitmer on March 12 which has been reinforced by a "state at home" order. Even in grocery stores and pharmacies, managers are limiting the number of people who can enter the establishment.

Lines formed outside of several supermarkets in the Midtown District where customers lined up six feet apart waiting to enter the front doors. The normally bustling restaurants, bars, schools, colleges and universities, churches, mosques and other religious institutions remained closed to public gatherings. Some restaurants have shifted to carry-out and delivery only service requiring far fewer workers.



There is strong solidarity with healthcare workers, bus drivers, grocery store employees and other essential workers expressed through signs and banners located on street corners around the Detroit Medical Center and other hospitals. Many bus drivers remain on the job while a high rate of absenteeism is being reported.

The Moratorium NOW! Coalition, a community organization concerned with local, national and international issues, has been holding its regular weekly meetings via conference calls since March 16. Discussions have centered-around the need to guarantee services for the people suffering from the pandemic and threatened by its very existence.

Governor Whitmer in a recent press conference requested volunteers in the medical field from around the U.S. to come to Detroit and assist with pandemic relief. Moratorium NOW! Coalition has told the governor to request the cooperation of Cuban medical personnel. This would be a direct challenge to the six decades-long blockade and an enormous benefit to the healthcare system in the state which is reaching near capacity in regard to hospital space, equipment along with the shortages of personnel and equipment.

Moratorium NOW! Coalition has established a sub-committee to demand Cuban medical relief to Detroit and other areas throughout the state. The Cuba Caravan will be holding a joint event online with Moratorium NOW! Coalition in commemoration of May Day, where there will be a review on the current state of the blockade and U.S.-Cuba relations.

*

Note to readers: please click the share buttons above or below. Forward this article to your email lists. Crosspost on your blog site, internet forums. etc.

Abayomi Azikiwe is the editor of Pan-African News Wire. He is a frequent contributor to Global Research.

The original source of this article is Global Research Copyright © Abayomi Azikiwe, Global Research, 2020

Comment on Global Research Articles on our Facebook page

Become a Member of Global Research

Articles by: Abayomi Azikiwe

Disclaimer: The contents of this article are of sole responsibility of the author(s). The Centre for Research on Globalization will not be responsible for any inaccurate or incorrect statement in this article. The Centre of Research on Globalization grants permission to cross-post Global Research articles on community internet sites as long the source and copyright are acknowledged together with a hyperlink to the original Global Research article. For publication of Global Research articles in print or other forms including commercial internet sites, contact: publications@globalresearch.ca

www.globalresearch.ca contains copyrighted material the use of which has not always been specifically authorized by the copyright owner. We are making such material available to our readers under the provisions of "fair use" in an effort to advance a better understanding of political, economic and social issues. The material on this site is distributed without profit to those who have expressed a prior interest in receiving it for research and educational purposes. If you wish to use copyrighted material for purposes other than "fair use" you must request permission from the copyright owner.

For media inquiries: publications@globalresearch.ca