SALUD URBANA EN AMÉRICA LATINA

Racial inequities in COVID-19 mortality and the contribution of residential segregation in Brazil

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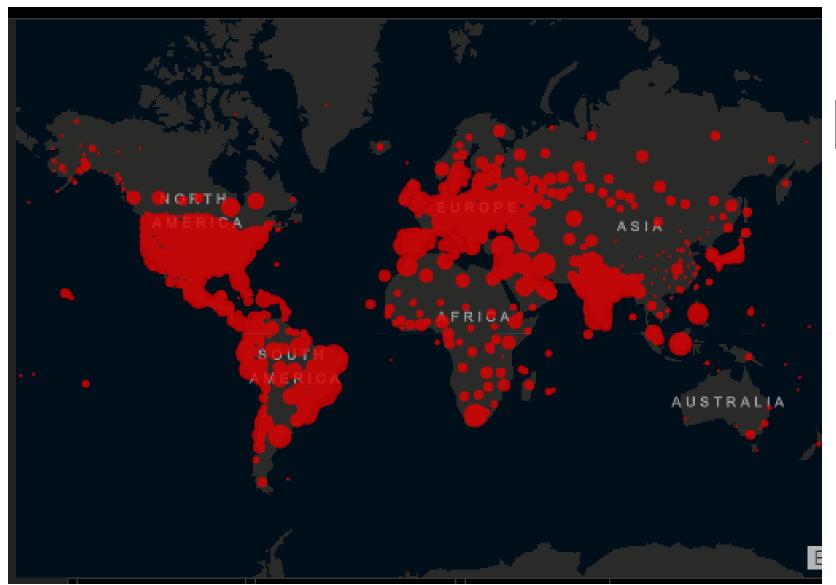
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Global map, cumulative cases



Cases and Deaths

33.691.590 | 605.304 US

30.458.251 | 400.312 India

18.687.469 | 521.952

Brazil

5.842.612 | 111.297

France



Source: COVID-19 Dashboard by the CRC - Johns Hopkins Coronavirus Research Center available at https://coronavirus.jhu.edu/map.html

Background & Rationale

- The experience of Covid-19 is not shared equally across places nor social groups (Berkowitz et al 2020)
- Brown, Black and Indigenous people represent historically marginalized social groups
- Brazilian blacks and browns have greater Covid-19 mortality than whites (Baqui et al 2020, Caldwell & Araujo 2020)
- Blacks and browns in Brazil are more likely to live in spatially segregated neighborhoods (Barber et al 2018)



Background & Rationale

People and places interact to exacerbate the vulnerability and risk of Covid19 infection and death

• Does residential segregation contribute to racial inequities in the burden of Covid-19 mortality in Brazil?



Research questions & Hypotheses

- 1. Are there differences in COVID-19 mortality by race in Brazilian cities?
- H1: Brown, Black and Indigenous people in Brazilian cities have greater COVID-19 mortality than White people
- 2. Are there differences in COVID-19 mortality by income residential segregation in Brazilian cities?
- H2: Cities with more income segregation have greater COVID-19 mortality
- 3. Does income residential segregation interact with race?
- H3: Cities with more income segregation have larger racial inequities in COVID-19 mortality



Methods

Study population

• 1,009,502 hospitalised individuals from the SIVEP-Gripe (Influenza Epidemiological Surveillance Information System) dataset (Jan 1st 2020 to Mar 8th 2021)

Exposures

- Self-declared race/skin color (SIVEP/Gripe): White, Brown (or Pardo, proxy for Black and White admixture), Black, Asian, Indigenous
- Income residential segregation Dissimilarity index (Brazilian 2010 Census), in tertiles Low, Medium, High



Methods – Dissimilarity index

• Formula:

$$\frac{1}{2} \sum_{i=1}^{n} \left| \frac{a_i}{A_T} - \frac{b_i}{B_T} \right|$$

Where:

- . n is the number of census tracts
- . A_T is the % of households with mean income <=2 minimum wages in the city
- . B_T is the % of households with mean income > 2 minimum wages in the city
- . a; and b; are their respective populations in census tract i.

 Measures evenness and indicates the % of a population group (low-income households) that would have to be relocated in order to achieve complete integration



Methods

Outcome

 COVID-19 in-hospital case fatality, from the SIVEP-Gripe dataset, available at: https://opendatasus.saude.gov.br/

Covariates

- Individual age and sex (SIVEP-Gripe)
- City-level Social environment index (Brazilian 2010 Census): Z scores of city features including the % of the pop >=25 who completed primary education or above, % of households with access to piped water, % of households with access to a sewage network, % of households with >3 people/room (Bilal et al 2021)



Methods - Statistical analysis

 We hypothesized that COVID-19 mortality varies across Brazilian cities thus a 2-level structure was used, for hospitalised individuals nested within cities (N=152)

 Mixed-effects Cox regression survival analysis was performed, Hazard ratios (HR) were estimated

Package coxme in R



Methods - Statistical analysis

- Research questions 1 and 2:
 - to examine whether race and residential segregation were associated with COVID-19 mortality, a random effect at the city level was included (Model 1, age and sex adjusted)
 - the model was additionally adjusted for SEI (Model 2) and residential segregation (Model 3)
- Research question 3:
 - an interaction term race*residential segregation was added (Model 4)
 - if the interaction term was significant (p<0.05), combined effects of race and segregation were estimated



Results



Figure 1. Flowchart for SIVEP-Gripe patients included in this study. Brazil, 2020-2021

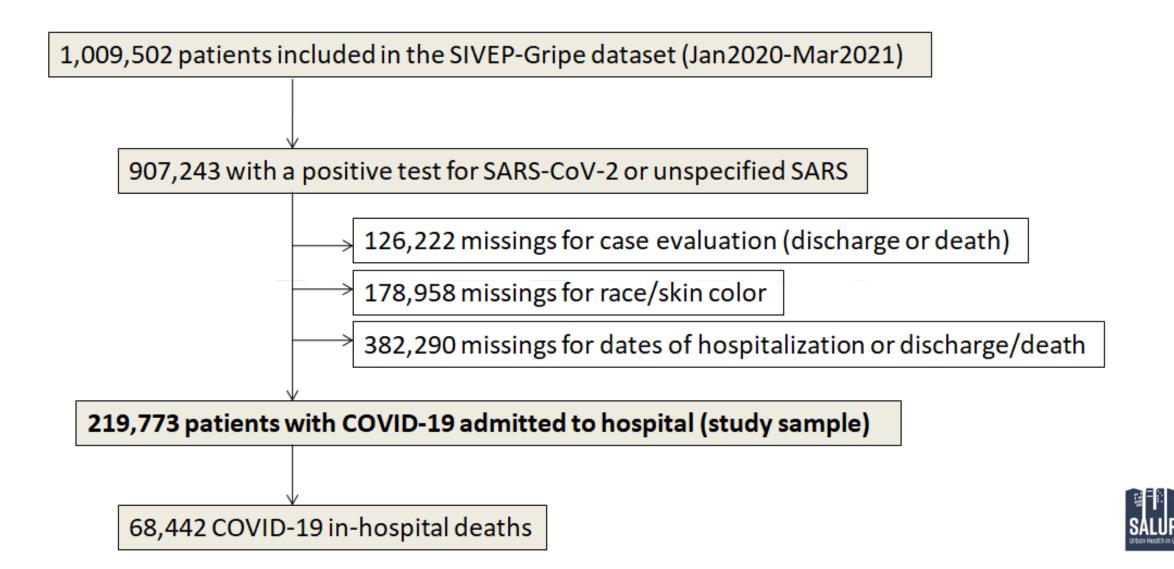




Table 1. Demographic characteristics of the sample by COVID-19 in-hospital case fatality. SIVEP-Gripe 2020-2021, Brazil. N=219,773

		COVID-19 in-hospital case fatality		
	All	Non-deaths	Deaths	p-value
Number of participants, %	219,773	151,331 (68.9)	68,442 (31.1)	-
Race/skin color, %				
White	52.2	70.7	29.3	< 0.001
Brown	39.7	67.1	32.9	
Black	6.5	64.9	35.1	
Asian	1.4	67.8	32.2	
Indigenous	0.2	76.9	23.1	
City-level residential segregation (in ter	rtiles), %			
Low	32.7	72.2	27.3	< 0.001
Medium	38.9	71.8	28.2	
High	28.4	60.5	39.5	
Sex, %				
Male	53.8	67.9	32.1	< 0.001
Female	46.2	70.0	30.0	
Age, mean	56.7	51.4	68.6	< 0.001





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		COVID-19 in-hospital case fata		atality
	All	Non-deaths	Deaths	p-value
Education, %				
No education	7.5	58.8	41.2	< 0.001
Elementary I	27.1	60.0	40.0	
Elementary II	19.1	63.8	36.2	
Secondary	31.2	72.9	27.1	
University	15.2	78.8	21.2	
Brazilian macroregions, %				
North	6.5	53.8	46.2	< 0.001
Northeast	12.9	61.7	38.3	
Central-west	4.7	72.0	28.0	
Southeast	59.2	70.4	29.6	
South	16.7	73.8	26.2	
City-level social environment index*	0.21	0.23	0.16	< 0.001
* Higher score indicates better social env	vironment .			



Figure 2. COVID-19 in-hospital case fatality rates (%) by race and residential segregation tertiles. SIVEP-Gripe 2020-2021, Brazil. N=219,773.

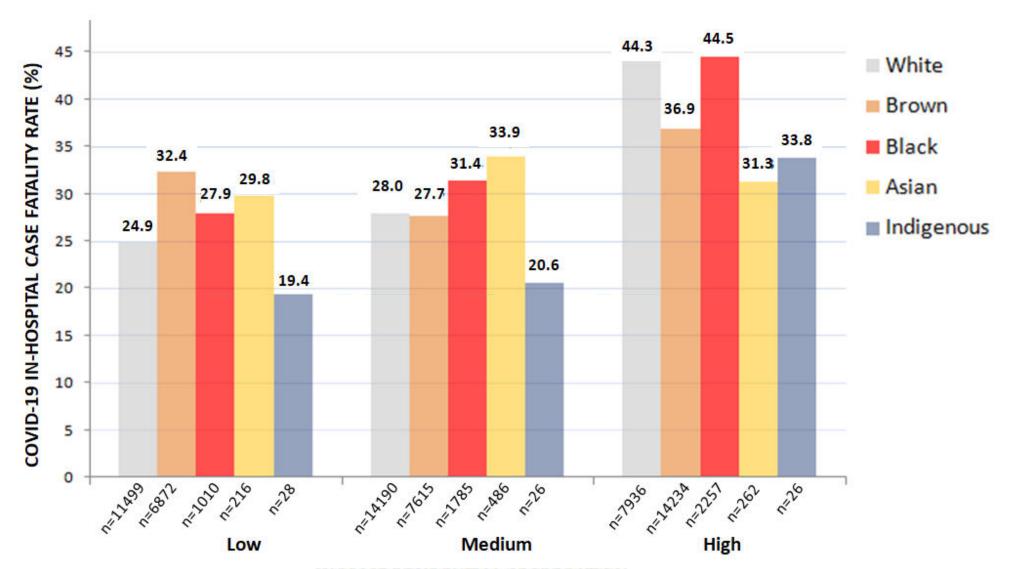






Table 3. Hazard ratios of Covid-19 in-hospital case fatality associated with race and income residential segregation. SIVEP-Gripe 2020-2021, Brazil. N=219,773.

	M1: + age and sex	M2: + Social env index	M3: + resid segreg
Individual-level			
Brown (vs White)	1.07 (1.05,1.09)	1.07 (1.05,1.09)	1.07 (1.05,1.09)
Black (vs White)	1.24 (1.21,1.28)	1.24 (1.20,1.28)	1.24 (1.20,1.28)
Asian (vs White)	0.97 (0.91,1.03)	0.97 (0.91,1.03)	0.97 (0.91,1.03)
Indigenous (vs White)	0.87 (0.70,1.09)	0.87 (0.70,1.08)	0.87 (0.70,1.08)
City-level			
Residential segregation, Medium (vs Low)			1.08 (0.94,1.24)
Residential segregation, High (vs Low)			1.18 (1.03,1.36)
Brown*Residential segregation Medium			
Black*Residential segregation Medium			
Asian*Residential segregation Medium			
Indigenous*Residential segregation Medium			
Brown*Residential segregation High			
Black*Residential segregation High			
Asian*Residential segregation High			
Indigenous*Residential segregation High			
Variance			
Random intercept	0.122	0.099	0.095





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City-level			
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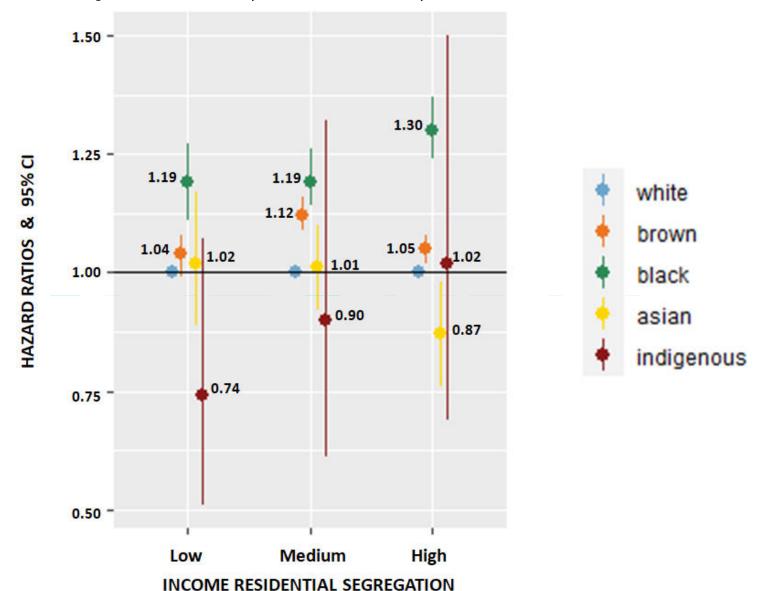


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	M1: + age and sex	M2: + Social env index	M3: + resid segreg	M4: + race*resid segreg
Individual-level				
Brown (vs White)	1.07 (1.05,1.09)	1.07 (1.05,1.09)	1.07 (1.05,1.09)	1.04 (0.99,1.08)
Black (vs White)	1.24 (1.21,1.28)	1.24 (1.20,1.28)	1.24 (1.20,1.28)	1.19 (1.11,1.27)
Asian (vs White)	0.97 (0.91,1.03)	0.97 (0.91,1.03)	0.97 (0.91,1.03)	1.02 (0.89,1.17)
Indigenous (vs White)	0.87 (0.70,1.09)	0.87 (0.70,1.08)	0.87 (0.70,1.08)	0.74 (0.51,1.07)
City-level				
Residential segregation, Medium (vs Low)			1.08 (0.94,1.24)	1.04 (0.90,1.20)
Residential segregation, High (vs Low)			1.18 (1.03,1.36)	1.18 (1.03,1.36)
Brown*Residential segregation Medium				1.09 (1.03,1.14)
Black*Residential segregation Medium				1.00 (0.93,1.09)
Asian*Residential segregation Medium				0.99 (0.84,1.16)
Indigenous*Residential segregation Medium				1.22 (0.71,2.09)
Brown*Residential segregation High				1.01 (0.96,1.06)
Black*Residential segregation High				1.09 (1.01,1.19)
Asian*Residential segregation High				0.85 (0.71,1.02)
Indigenous*Residential segregation High				1.38 (0.81,2.37)
Variance				
Random intercept	0.122	0.099	0.095	0.095



Fig 3. Combined effects of race and income segregation on COVID-19 in-hospital case fatality (HR, 95%CI). SIVEP-Gripe 2020-2021, Brazil. N=219,773.





Final remarks

- Black and Brown people admitted to hospital had risk of COVID-19 mortality 24% and 7% higher than White people, respectively
- Highly income segregated cities showed greater risk of COVID-19 in-hospital mortality
- Income residential segregation interacted with race, such that racial inequities in COVID-19 in-hospital mortality were larger in more segregated cities (for Black vs White people)



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