

### COVID-19 AND THE INTERSECTION OF RACE, ETHNICITY, AND SEXUAL MINORITY STATUS.

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The COVID-19 virus has caused millions of deaths and impaired physical and mental health and social disconnection for countless persons around the world; concomitantly, the pandemic has exposed and exacerbated the pervasive effects of racism and stigma experienced by Black, Indigenous, or People of Color (BIPOC) and other marginalized/stigmatized groups. This study adopts an intersectional perspective examining multiple marginalized identities (i.e., the combination of LGBTQ and BIPOC status) and COVID-19 pandemic health stressors. We report on data from an online survey (conducted between Aug 10 and Oct. 10, 2020) focusing on current experiences and future planning during the COVID-19 pandemic in Canada. LGBTQ respondents (n=415) indicated significantly higher levels of depression, loneliness, sadness, and isolation in comparison to heterosexuals (n=3916). Heterosexual white respondents (n=3446) reported significantly higher levels of acceptance in their community and reported greater happiness but also higher rates of feeling of isolation than heterosexual BIPOC heterosexuals (n=470) who reported significantly higher rates of feeling judged/shamed by others than the heterosexual white respondents. In contrast to our expectations, white LGBTQ respondents (n=366) reported significantly more depression, loneliness, anxiety, and sadness than their BIPOC LGBTQ peers (n=49). These findings are interpreted as reflecting a complex mix of the effects of marginalization (as experienced by LGBTQ persons in general), and privilege and relative deprivation (as experienced by heterosexual and LGBTQ white persons) along with resilience and the moderated expectations and experiences of BIPOC LGBTQ persons.

### FACTORS RELATED TO COVID-19 VACCINE UPTAKE IN BLACK AMERICAN COMMUNITIES

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Black/African Americans represent 13% of the population, yet account for more than 24% of COVID-19 deaths. Emerging evidence indicates that Black Americans are receiving COVID-19 vaccines at lower rates than whites. However, there is minimal information about why vaccination rates are lower. To address this gap, we examined the effects of the COVID-19 pandemic among Black Americans, with an emphasis on understanding trust and vaccine uptake.

Data were collected between July and September 2020 using 8 virtual focus groups in Detroit, MI and San Francisco Bay Area, CA with 33 older Black Americans and 11 caregivers of older Black Americans with cognitive impairment. Inductive/deductive content analysis was used to identify themes. The first theme pointed to a sense of feeling abandoned by healthcare providers and the government at local and state levels, which exacerbated uncertainty and fear about the vaccine and in general. The second theme emphasized a sense of deep distrust towards healthcare providers and the government, especially during the pandemic. The third theme pointed to a reluctance in receiving the vaccine because of distrust of pharmaceutical companies and the government, as well as misinformation and the rapid speed of vaccine development. These findings suggest that underlying systemic issues need to be addressed immediately to accelerate vaccine uptake among older Black Americans. New initiatives are needed to foster trust and address abandonment by healthcare and government systems. In addition, public health campaigns with reliable information about the COVID-19 vaccine are needed.

### MEETING NEEDS OF DIVERSE OLDER ADULTS AND CAREGIVERS DURING PUBLIC HEALTH EMERGENCIES: WHAT CAN WE LEARN FROM COVID-19?

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With support from the CDC Foundation and technical assistance from the Centers for Disease Control and Prevention, NORC at the University of Chicago conducted studies to examine the needs and concerns of older adults and unpaid caregivers during COVID-19, including their trusted sources of COVID-19 information and available public health interventions. Methods included a nationally representative survey of 1,030 adults aged 50+ years using computer-assisted telephone and web interviewing; online focus groups with older adults and caregivers in Spanish and English; a survey and interviews with stakeholder organizations; secondary analysis of U.S. caregiver surveys; analysis of public social media posts; and searches of peer-reviewed and grey literature in Spanish and English to identify interventions. Results suggest that needs and concerns differed among older adult subpopulations, including racial and ethnic minority populations, people with lower incomes, rural and tribal populations, people with limited English proficiency, and people with disabilities as well as caregivers. Older adults perceived news media, the internet, and healthcare providers as important resources for COVID-19 information, although trusted sources varied by race and ethnicity, urbanicity, and income. Findings suggested the need to increase awareness of existing public health interventions and resources to support older adults and caregivers during public health emergencies