

Implications of Coronavirus (COVID-19) to America's Vulnerable and Marginalized Populations

Social Justice Perspective

By this time, nearly all Americans are aware that the country (and the world) is experiencing a pandemic caused by the Coronavirus (COVID-19). While [pandemics are not new to the United States](#), COVID-19 is emerging as a public health crisis that has the potential to directly or indirectly impact nearly every household in the country. There are *worst case projections* that [between 160 million and 214 million people in the United States could be infected](#) over the course of the epidemic. These same projections suggest that as many as 200,000 to 1.7 million people could die. Given possible dire results of the COVID-19 pandemic, the need for a full-scale public health mobilization to prevent the spread of the virus is an imperative at a crisis level.

It is additionally important to recognize that not only does an epidemic of such proportions pose a threat to the physical health of Americans, it will be disruptive to such areas as employment, education, voting, the 2020 Census and daily patterns of socialization. All of which present challenges to the economic and emotional well-being of children and adults alike.

For these reasons, the National Association of Social Workers (NASW) in its concern for equitable treatment of all Americans effected by natural disasters and national public health emergencies, turns its attention to America's vulnerable and marginalized populations. We know from past experiences that the impact of the COVID-9 pandemic on the general population, will be exponentially increased among those who live on the margins of our society. Therefore, it is critical that these families and individuals are not excluded from the federal and state governments' mobilization of resources to fight the spread of COVID-19 – as well as protecting them from the related social and civic disruptions that will inevitably occur as the virus spreads.

The following overview succinctly discusses several major population groups who are at high risk of exposure to or contracting coronavirus. It also identifies very important Intersectional events (the 2020 elections and the 2020 Census) that will negatively impact marginalized families and individuals if interrupted by the COVID-19 pandemic.

1. Economic Impact on Low-income Americans

Because of the breadth of the federal and state effort to prevent the spread of COVID-9, there will, without a doubt, be a significant effect on the economic stability of low-income individuals and families. This is especially true for hourly wage earners who both lack health insurance and annual and sick leave. Given that it is not beyond possibilities that large cities or even the federal government could issue a full ["sheltering in place"](#) order, the economic blow to low-income wage-earners would be devastating.

States, businesses and schools increasingly are applying ["social distancing"](#) procedures to avoid spreading the virus. But that leaves millions of low-income children at risk of missing meals provided by their schools, while hourly workers could be forced to stay home without any income — potentially spiking demand for nutrition benefits.

In response to the economic risks to which low-income and are exposed vulnerable population, the House of Representatives has passed the [Families First Coronavirus Response Act \(H.R. 6201\)](#). The

legislation set aside \$8.3 billion in immediately available funding .The provisions of the bill that is more significant to low-income and individuals and families include:

- guarantees free coronavirus testing,
- establishes paid leave,
- enhances Unemployment Insurance,
- expands food security initiatives, and
- increases federal Medicaid funding.

Though coronavirus will most certainly cause massive disruption to income stability across the country, its long-term effect on school age children is immeasurable. This is a reason that some K-12 educators have mixed feelings about closing schools, even such a move is recommended by the public health experts. For example, in New York City close to [72% of the city's public school children](#) are in free and reduced lunch programs. Nearly 30 million of all U.S. students are in subsidized lunch programs.

Food insecurity, in the event that most American schools are closed due to the coronavirus pandemic, is not only a large urban city concern. In [Wyoming public schools](#), where many of the students in free and reduced lunch programs live in remote, rural communities and travel an hour or more on a bus to get to school. Should the state's public schools close, officials will have to come up with alternatives to avoid food insecurity.

Furthermore, schools provide a safe environment for the [1.5 million U.S. children](#) who live in sub-standard housing, and in many cases, public schools provide access to medical care, dental care and related social services. A large percentage of these vulnerable children are from communities of color who already have challenges in achieving academically. These challenges will only be exacerbated if there are wholesale school closure for the remainder of the school year.

Senate Passes Coronavirus Financial Stimulus Bill

On March 24th, the senate passed a \$2 trillion financial stimulus bill [2 trillion stimulus package](#) – that the House is expected to ratify. The [rationale for such payments](#) is both to offset the loss of income to working class Americans, and to infuse billions of dollars into the economy to help businesses recover from losses of revenue due the pandemic.

How did Low- and Moderate-Income Individuals and Families Fare in Coronavirus Stimulus Package?

The bill would provide direct payments of up to \$1,200 for most individuals and \$2,400 for most married couples filing jointly with an extra \$500 for each child. The specific targeted relief for low- and moderate-income people include:

-Unemployment insurance benefits would be expanded, increasing the maximum benefit by \$600 a week for up to four months. Benefits would be available to workers who are part-time, self-employed or part of the gig economy. People who are still unemployed after state benefits end could get an additional 13 weeks of help.

-Food assistance programs would get a boost as would programs to help low-income households avoid eviction and a program to improve internet access in rural areas.

-Homeowners with federally backed mortgages would be protected from foreclosures for as long as 180 days.

-Students with federal loans could suspend payments until October.

-Students receiving Pell grants who have to drop out because of coronavirus would not be penalized.

Resources

Center for Parent Information and Resources. **Coronavirus Resources.**

<https://www.parentcenterhub.org/coronavirus-resources/>

Coalition for Human Needs: **COVID-19 Addressing The Needs Of Low-Income And Vulnerable People**

<https://www.chn.org/articles/covid-19/>

Congress.Gov. **Families First Coronavirus Response Act (H.R. 6201).**

<https://www.congress.gov/bill/116th-congress/house-bill/6201>

Food Research Action Center (FRAC): **COVID-19 Updates.** <https://frac.org/COVID-19-updates>

National Education Association: **Schools and Coronavirus:**

What You Should Know [http://neatoday.org/2020/01/06/schools-and-](http://neatoday.org/2020/01/06/schools-and-coronavirus/?_ga=2.59760548.861225840.1584893195-1539643064.1584893195)

[coronavirus/?_ga=2.59760548.861225840.1584893195-1539643064.1584893195](http://neatoday.org/2020/01/06/schools-and-coronavirus/?_ga=2.59760548.861225840.1584893195-1539643064.1584893195)

National Low-Income Housing Coalition: **Responding to Coronavirus Ensuring Housing Stability During**

A Crisis. <https://nlihc.org/responding-coronavirus>

2. Incarcerated, Detained and Justice Involved Individuals

As the nation struggles with the spread of COVID-19, public health officials and federal and state correctional leaders in the United States need to protect the health and safety incarcerated individuals. Which, by definition includes adults, detained youth, and detained immigrants.

the United States houses [nearly a quarter of the world's prison population](#). Health care in jails and prisons is adequate at best. This fact is further problematic when we realize that the nation's prisons have a large subpopulation of aging inmates. There is ample evidence, given the country's experience with tuberculosis, HIV and the ongoing hepatitis C epidemic in correctional facilities, that congregate living institutions such as jails and prisons are incubators of infectious diseases.

The current national efforts to prevent and effectively treat OVID-19 is commendable. However, for the 2.4 million adults locked up in jails and prisons – as well as the 53,000 young people [53,000 young people](#) held in juvenile detention- under judicial custody, there are limited guidelines and preparedness for managing OVID-19 in correctional facilities.

[It is recommended](#) that there be an immediate baseline assessment of the degree of preparedness in prisons and jails in the event of an OVID-19 outbreak. This includes infection control measures, access to appropriate protective gear and diagnostic kits for correction staff and those incarcerated. This can be done in partnership with local academic institutions or public health departments. Furthermore, tighter

regulations on sanitary practices including hand washing in correctional facilities should be enforced. Additionally,

- Medical and public health guidance is lacking. Transparent means of communication are critical between correctional facilities and state health departments for immediate reporting, testing and coordination of care. Using the best-available evidence, guidelines tailored to prison health providers on prevention, diagnosis, and treatment of COVID-19 should be established and widely disseminated by the Centers for Disease Control and Prevention, and National Commission on Correctional Health Care.
- Responses to reported or observed symptoms must be timely and honest, as the rate of viral transmission can lead to fatalities in an enclosed setting. Correctional employees have been [implicated in litigations](#) citing deliberate and harmful denial of medical care for incarcerated individuals. This is an opportunity to regain public trust in regard to the correctional culture of clinical passivity and deliberate indifference to the protected dignity of those under judicial custody.
- Policing patterns should not continue to remain the same. This means that they must make a concerted effort to increase diversions from arrest and incarceration. High levels of arrests and detentions during OVID-19 period only creates additional risks of spreading infections.
- Recidivism in the correctional system should be closely monitored during this period of prioritizing public safety. In addition, correctional facilities and community-based organizations should increase their commitment to continuity of health care during the transition of those released back to the community during this crucial time in our nation's history.
- Policy makers should prioritize the health and safety of corrections staff. Because they work in high risk environments, they are potential carriers of COVID-19 as they move between the community and the jails prisons.

Health disparities in correctional facilities has a long history which meant that unmet needs of incarcerated people have been ignored. We cannot allow such disparities to continue during the COVID-19 pandemic.

Prisons and Courts Receive Funding in Coronavirus Stimulus Bill

The [nation's prisons will get funding](#) and increased priority for protective gear and test kits for COVID-19, while federal courts would get more money and the ability to conduct video or telephone criminal proceedings. In addition, the bill, will provide \$100 million to the Bureau of Prisons for salaries in the federal prison system to the Department of Justice. The funds would go for correctional officer overtime, personal protective equipment and supplies and inmate medical care and supplies.

Resources

The Brennan Center for Justice: ***How Coronavirus Could Affect U.S. Jails and Prisons*** <https://www.brennancenter.org/our-work/analysis-opinion/how-coronavirus-could-affect-us-jails-and-prisons>

The Justice Roundtable: ***Justice Roundtable Recommendations for Protecting Incarcerated Youth and Adults During the COVID-19 Pandemic*** <https://justiceroundtable.org/issue/covid-19/>

The Marshall Project Coronavirus: ***Transforming Jails Across the Country***

<https://www.themarshallproject.org/2020/03/21/coronavirus-transforming-jails-across-the-country>

National Commission for Correctional Health Care: ***Coronavirus COVID-19 and the Correctional Facility***

https://www.ncchc.org/filebin/news/COVID_for_CF_HCW_3.9.20.pdf

Detained Immigrants

Nationally, there have been calling for the U.S. government to make a strong effort prevent the spread of the coronavirus in an overloaded immigration system. [Those speaking out](#) on this issue included immigration judges, attorneys and immigrant-rights advocates, and even a few federal immigration workers.

The concern for exposing detained immigrants to the virus extended to Congress when, under the leadership of Sen. Kamala Harris, 12 Democratic senators [sent a letter](#) to the head of Homeland Security, U.S. Immigration and Customs Enforcement and U.S. Customs and Border Protection to determine if the agencies had a coronavirus response plan. The senators expressed their apprehension about the rapid spread of the virus. — and that those confined to immigration detention (and staff) were particularly vulnerable to becoming infected.

At the southwest border, Border Patrol made around [593,500](#) apprehensions in the first eight months of fiscal year 2019. In all of fiscal year 2018, it made close to [396,600](#) apprehensions. [Based on recent unannounced visits](#) to border detention facilities, government investigators raised alarms about [overcrowding](#) and prolonged detentions at these centers —especially as it relates to conditions that could pose an immediate risk to the health and safety. For example, detention facilities, particularly those that are overcrowded, stymy any efforts to implement social distancing specifically immigration.

As an indication of the power of social action, Immigration and Customs Enforcement (ICE) recently announced it was curtailing immigration arrests due to concerns for spreading coronavirus in its detention facilities. ICE stated it would now shift its focus to ["public safety risks"](#).

Resources

CBS News: ***Groups ask court to order ICE to release sick, elderly immigrants at risk of coronavirus.***

<https://www.cbsnews.com/news/coronavirus-ice-lawsuit-aclu-release-sick-elderly-immigrants-at-risk/>

CBS News: ***ICE suspends family visits in detention centers amid coronavirus concerns.***

<https://www.cbsnews.com/news/ice-bans-family-visits-in-detention-centers-amid-coronavirus-concerns/>

The Guardian: ***Coronavirus inevitable in prison-like US immigration centers, doctors say.***

<https://www.theguardian.com/world/2020/mar/11/coronavirus-outbreak-us-immigration-centers>

3. Immigrant Families

Beyond the plight of detained immigrant individuals, we need to pay a great deal of attention to immigrant heads of household who may be caught up in ICE raids. Advocates have called for the establishment of an ["immigration enforcement-free zones"](#) which would allow everyone, including immigrants, to seek out medical services without fear of apprehension. Over 800 public health and human rights experts urged the government to establish these zones. Their [open letter](#) reads:

"The *COVID-19* response should not be linked to immigration enforcement in any manner. It will undermine individual and collective health if individuals do not feel safe to utilize care and respond to inquiries from public health officials... These policies should be clearly and unequivocally articulated to the public by the federal, state, and local governments."

It is clear that the Trump administration's existing immigration policies – which are widely seen as being anti-immigrant – could make the COVID-19 health crisis that much worse for immigrant families and children. It should not be surprising that the administration's [public charge rule](#), which went into effect in February 2020, has made many immigrant and mixed-status families reluctant to seek health benefits that they are legally permitted to use. The reason for the reluctance is their fear that seeking medical care may jeopardize their own immigration status or that of a family member's. Under the public charge rule, officials can deny green cards to immigrants if they currently use or *might* use government benefits. These benefits include Medicaid and other public health programs.

With that in mind, [17 U.S. attorneys general](#) have asked the Department of Human Services (DHS) to delay the public charge rule during the coronavirus outbreak. The coalition of attorneys general [take the position that](#) the current public charge rule undermines state and city health departments' efforts to contain the spread of COVID-19. The group drove home their concerns by reminding DHS that it had "...

been previously advised of the potentially devastating effects of the rule if its implementation were to coincide with the outbreak of a highly communicable disease—a scenario exactly like the one confronting our communities with the *COVID-19* public health emergency. Your agency failed to consider such legitimate concerns." The bottom line is that Immigration status – in the face of a pandemic – should never be a barrier for individuals and families to access potentially life-saving medical care. Such policies only serve to exacerbate the problem put many others at risk for COVID infection.

Resources

National Immigration Law Center: *Update on Access to Health Care for Immigrants and Their Families*. <https://www.nilc.org/issues/health-care/update-on-access-to-health-care-for-immigrants-and-their-families/>

Protecting Immigrant Families: *Supreme Court temporarily clears "Public Charge" regulation*. <https://protectingimmigrantfamilies.org/>

4. Homeless Populations

The homeless is another population that historically have been at high risk for contracting infectious diseases. Most people experiencing homelessness live in congregate living settings—including shelters,

halfway houses, encampments or abandoned buildings. In many cases, they do not have regular access to hygiene items or hot showers, leaving them at high risk for virus transmission. Consequently, the homelessness is a vulnerable group that have are likely to be exposed to COVID-19. The homeless have [a mortality rate](#) from all causes that is 5–10 times higher than that of the general population. Therefore, it is reasonable to suggest that COVID-19 infection may further contribute to their mortality disparity.

During the 1980s, at the height of the HIV/AIDS crisis, the rate of HIV infection among the homeless began to skyrocket. Epidemiological studies during that period confirmed that [HIV and homelessness frequently co-occurred](#). Relatedly, another highly communicable disease – TB- is significantly greater [among the homeless](#) than in the general population. Therefore, it goes without saying that the aggressively infectious COVID-19 poses a major health threat in homeless shelters, encampments and other congregate living environments. In California, epidemiological models project that more than [60,000 homeless people](#) could contract COVID-19 over an eight weeks period.

The **National Health Care for the Homeless Council**, which has over 30 years of experience with coordinating homeless health care on a national level, has posted a comprehensive [COVID-19 resource page](#) on its website that identifies a wide range of federal and state agencies that offer information about COVID-19 risks and services for the homeless.

Coronavirus Response Stimulus Package Includes Funding for Homelessness and Housing

Overall, the bill provides more than [\\$12 Billion in funding](#) for HUD programs, including: \$4 billion for Emergency Solutions Grants for homelessness assistance, \$5 billion in Community Development Block Grants, \$1.25 billion for the Housing Choice Voucher program, \$1 billion for project based rental assistance, \$685 million for public housing, \$300 million for tribal nations, and more. The bill also institutes a much-needed temporary moratorium on evictions and foreclosures for homeowners and renters in federally subsidized apartments and homes with federally backed mortgages.

Resources

National Health Care for the Homeless Council. **COVID-19 Resources.** <https://nhchc.org/clinical-practice/diseases-and-conditions/influenza/>

United States Interagency Council on Homelessness: **Coronavirus (COVID-19) Resources.** <https://www.usich.gov/tools-for-action/coronavirus-covid-19-resources/>

5. Older Americans- Long Term Care Facilities

Many older Americans, especially low-income individuals over 60 years of age, fit the description of being a part of a vulnerable population. While older Americans are considered to be at high-risk for coronavirus infection, those residing in long-term care facilities are at an even higher risk.

[Experts suggest that](#) the coronavirus pandemic will significantly change procedure and practices for caring for older adults. It is projected that some changes may require difficult adjustments.

However, other changes may lead to improved supportive services for vulnerable seniors. For example:

- The elimination of nursing home visits. The Centers for Medicare and Medicaid Services (CMS) announced that nursing homes, skilled nursing facilities, and assisted living facilities (ALFs) should discourage visits and screen visitors. [CMS required facilities to temporarily disallow](#) all family and other non-medical visits, except when a resident is dying.
- These changes may reduce risk of contracting COVID-19, but it will also likely lead to mental health symptoms such as depression and anxious.
- It will additionally eliminate [access for family members to monitor their relative's care](#)

According to [AARP](#) social isolation and loneliness are serious health issues. Social isolation and related conditions are such health hazards that they have been estimated to being [the equivalent of smoking 15 cigarettes a day](#). Therefore, a person 60 and older - with pre-existing severe chronic health conditions - are already at a higher mortality risk if he contracts COVID-19. If that individual is socially isolated, his risk of succumbing to the virus is significantly greater.

Resources

American Association of Retired Persons (AARP): ***How to Fight the Social Isolation of Coronavirus.*** <https://www.aarp.org/health/conditions-treatments/info-2020/coronavirus-social-isolation-loneliness.html>

American Health Care Association: ***How You Can Help Prevent the Spread of Coronavirus (COVID-19) in Long Term Care Facilities.*** https://www.ahcancal.org/facility_operations/disaster_planning/Pages/Coronavirus.aspx

Centers for Disease Control: **Resources for Clinics and Healthcare Facilities.** <https://www.cdc.gov/coronavirus/2019-ncov/healthcare-facilities/index.html>

6. Child Welfare/Foster Care

As [the spread of coronavirus](#) has been challenging to all Americans – from event cancellations to school closings – through no fault of their own, caregivers for foster youth have been left ill-prepared. For example, foster families and caregivers on short notice have had to struggle to find daycare for children impacted by school closures. Additionally, many caregivers are [reporting that they have heard very little](#) from child welfare agencies about supports, changes to visitation or what to do in case of being quarantined.

The foster care system, built on frequent [movements of children from one home to another](#) and regular in-person supervision, has been especially wracked with confusion and dread by the coronavirus crisis.

Fear of Spreading COVID-19 During Placement and Investigation Contacts

There have been cases where there is apprehension, on the part of foster care investigators of child abuse, where the worker is [fearful of spreading the virus](#) from home to home. They use creative alternatives such as trying to complete the investigation interviews at the front door -if available, over video chat- instead of going inside the home. Also, there are anecdotal evidence that some prospective foster parents are also refusing to accept new children due to fears of being exposed to coronavirus.

Closure of Child and Family Courts due to COVID- 19

Though abuse and neglect investigations and removal of children from the home of the primary care continue to occur, making final determinations of court-ordered foster care is currently delayed due to the coronavirus pandemic. This is because [courts nationwide have suspended hearings](#) - indefinitely leaving such decisions in limbo. The possible result is that child welfare agencies are forced to suspend removing children from their parents, even if there are indications of unsafe or abusive conditions for the child.

COVID-19 Disruption to Foster Care Services

Visitation and Reunification Services

Once a child has been removed from home, the main objective family reunification. Therefore, an essential part of the services plan is to sustain [continued visitation](#) while the child is in foster care. The guidelines for containing the virus has been to curtail visitation. It is recommended that alternatives such as child welfare agencies arranging for Facetime or other video options between foster homes, group homes and parents. In any event, continued visitations are such an important part of the reunification plan that agencies must become flexible in developing alternatives so that reunification services can continue.

Court Appearances

A huge looming question will be whether dependency and juvenile courts continue to function at a normal pace, or if the docket will slow down tremendously. As with the above point on visitation and reunification, it would be truly unfair to have court slowdowns delay children from being reunited with their parents.

Protecting Youth with Pre-Conditions

A high rate of youth in foster care have acute medical needs, some of which put them at increased risk of complications from coronavirus. These children need to be identified and targeted for increased

Foster Parent Employment

Many foster households work during the day, and most will continue to do so. Systems should expect that there will be a spike in the need for respite and childcare during a prolonged period where schools are not in session.

The House [“Families First” bill](#) includes an emergency paid leave benefit that would be available to foster parents who had to stay home as a result of school closure. The benefit would pay two-thirds of salary up to a maximum \$4,000 monthly benefit.

Resources

The Chronicle of Social Change. *As Coronavirus Shutdowns Grow, Resource Families Left with Little Guidance*. <https://chronicleofsocialchange.org/coronavirus/as-coronavirus-shutdowns-grow-resource-families-left-with-little-guidance/41295>

Foster Club: *The Coronavirus (Covid-19) Emergency: Information and assistance for young people in and from foster care*. <https://www.fosterclub.com//c19>

National Child Traumatic Stress Network: *Parent/Caregivers Guide to Helping Families Cope with the Coronavirus Disease 2019*. <https://www.nctsn.org/resources/parent-caregiver-guide-to-helping-families-cope-with-the-coronavirus-disease-2019>

National Youth Advocate Program: *COVID-19 Update*. <https://www.nyap.org/>

7. The 2020 Census

The [national 2020 Census has begun](#). Recently, most American households began receiving invitations to respond to the census online or by phone. Concerningly, the coronavirus pandemic will coincide with the census’s peak period of activities. The uncertainty caused by the coronavirus outbreaks will probably complicate counting every United States resident. As most of us can imagine, significant disruptions of the census-taking process would hinder the Census Bureau from obtaining accurate population data which is critical for determining congressional representation and the number of Electoral College votes for each state gets for the next 10 years. More importantly, census data are used as a determining factor for redrawing of voting districts and the share sent to states, [as much as \\$1.5 trillion a year](#), in federal funding for healthcare, schools, roads and other public services to local communities. In other words, marginalized populations whose needs are often underrepresented by the White House, Congress and some States, stand to have their voices further muted if the 2020 Census is disrupted by COVID-19.

What we currently know is that because of the coronavirus pandemic, the bureau has decided to [delay starting the early round of door-knocking](#) by census workers in college towns to April 23. The Census Bureau is also delaying its full outreach effort until early April, instead of late March. That particular aspect of the enumeration effort is designed to target people in densely population locations ranging from public transit centers to beauty shops. This is where many of the marginalized and vulnerable residents are found.

In anticipation of the potential threat that COVID-19 could pose for an accurate census, officials have set up a task force to monitor the spread of the disease. They have also stated that the Census Bureau will follow public health guidelines in training its enumeration workers.

Resources

Census Bureau. **Census Bureau Statement on Modifying 2020 Census Operations to Make Sure College Students are Counted.** <https://www.census.gov/newsroom/press-releases/2020/modifying-2020-operations-for-counting-college-students.html>

Chicago Sun Times: **Don't let coronavirus stop you from being counted in the 2020 Census.** <https://chicago.suntimes.com/2020/3/20/21185131/u-s-census-bureau-2020-coronavirus-covid-19-editorial-illinois-population>

Leadership Conference for Civil and Human Rights: **Coronavirus and Beyond: Emergency Response Depends on Accurate Census Data.** <https://civilrights.org/edfund/2020/03/19/coronavirus-and-beyond-emergency-response-depends-on-accurate-census-data/>

Wired. **Coronavirus Will Make the 2020 Census Even Trickier** <https://www.wired.com/story/coronavirus-make-2020-census-trickier/>

8. Voting Rights

For the first time since the [Spanish Flu pandemic of 1918](#), an election in the United States is jeopardized by a pandemic. As the coronavirus spreads, there are concerns about the capacity of the American electoral process and participation is not in the event that most states impose social distancing policies. Such policies would make campaign rallies, nominating conventions and in-person balloting [more difficult](#). There have been recent situations where a political convention proved to be a public health risk for the spread of a virus. In 2016, a hotel where attendees at a Republican political meeting in Ohio [quarantined in their hotel rooms](#) after an outbreak of norovirus.

Both the Democratic and Republican National Conventions are [developing contingency plans](#) for the fate of their conventions should coronavirus continue to spread in the summer of 2020. The Democratic convention, which is scheduled for July 13-16 in Milwaukee, Wisconsin. It is expected to attract more than 5,000 people. The Republican convention is slated for August 24-27 in Charlotte, North Carolina. Their conference also will have as many as 5,000 participants.

In addition to worries about the spread of Covid-19 at the national conventions of both political parties, there is apprehension about the pandemic being used as an opportunity for voter suppression proponents to compromise election integrity. The [Brennan Center for Justice](#) – one of the nation's preeminent think tank on voting rights – discusses the complication that coronavirus will likely have on the 2020 elections. In its article [How to Protect the 2020 Vote from the Coronavirus](#), authors state, "The coronavirus disease 2019 (Covid-19) presents a difficult and novel challenge to the administration of the 2020 general election. Recent election emergencies have largely been caused by catastrophic weather events, and our country has done little election planning for pandemics. Unlike a hurricane, a pandemic

does not have a discrete and relatively predictable end point. And avoiding large-scale social contact is a central feature of combating the crisis. These elements create distinct challenges for election officials on top of the significant and ongoing threats to the security of our election infrastructure”.

The Brennan Center and other national voting rights organizations fundamentally call for governmental assurance that the upcoming 2020 elections are *free, fair, accessible, and secure*. In order to achieve that imperative, there is a need to modify the country’s election procedures, flexibility in adapting to unexpected disruptions in the process due the virus, and a making significant financial and material resources available for Americans to register and vote on November 3, 2020. The following are recommendations in five categories for protecting the 2020 elections in the face of COCID-19:

- (1) polling place modification and preparation.
- (2) expanded early voting.
- (3) a universal vote-by-mail option.
- (4) voter registration modification and preparation, including expanded online registration; and
- (5) voter education and manipulation prevention.

The Brennan Center also recommends that each state government establish *an election pandemic task force* to develop best practices for implementing policy voting protection commendations in a given state. It is not widely known but each state and local election officials are required to create [emergency rules](#) in the event of unanticipated threats to election processes. The coronavirus is potentially such a threat. Therefore, officials must understand the emergency rules (and related laws) applicable to their jurisdictions in order to make appropriate adjustments to implement necessary modifications. Congress has a responsibility to establish national guidelines that ensure that every eligible American is able to vote safely, securely, and accessibly in the midst of the pandemic. In the absence of Section 5 of the Voting Rights Act, care must be taken to ensure that changes are nondiscriminatory and do not negatively impact access for communities of color.

Vote by Mail Options

Sens. Amy Klobuchar and Ron Wyden are pushing to make [vote-by-mail](#) available to every American as the coronavirus pandemic threatens to keep people at home during election season. They are proposing \$500 million of federal funding to help states prepare for possible voting disruptions caused by the coronavirus outbreak. The senators’ bill also would allow Americans to vote by mail in the event of a national emergency. The bill provides that Americans could vote by mail if 25 percent of states declared an emergency related to the coronavirus outbreak.

Stimulus Bill Has \$400 Million in Election Help for States

The U.S. economic [stimulus package to include \\$400 Million](#) to help states grapple with 2020 voting amid the coronavirus pandemic, according to two people familiar with the bill. The funds would allow states to voluntarily increase the ability to vote by mail and expand early voting and on-line registration. However, the bill does not create a national requirement for voting by mail which was proposed by Sen. Amy Klobuchar, D-Minn., and Sen. Ron Wyden, D-Ore. The \$400Million is far less than the \$4 Billion requested.

Resources

Brennan Center for Justice: ***How to Protect the 2020 Vote from the Coronavirus.***

<https://www.brennancenter.org/our-work/policy-solutions/how-protect-2020-vote-coronavirus>

CNBC: ***Senators push to let every American vote by mail as coronavirus keeps people at home.***

<https://www.cnn.com/2020/03/17/senators-push-to-expand-vote-by-mail-as-coronavirus-keeps-people-home.html>

Leadership Conference for Civil and Human Rights: ***Congress Must Appropriate \$2 Billion To Protect Voting Rights.*** <https://civilrights.org/resource/congress-must-appropriate-2-billion-to-protect-voting-rights/>

National Association of Secretaries of State: ***State Laws & Practices for the Emergency Management of Elections.*** <https://www.nass.org/sites/default/files/Election%20Cybersecurity/report-NASS-emergency-preparedness-elections-apr2017.pdf>

Summary

The emerging sentiment since America has internalized the implications of the COVID-19 pandemic appears to be (1) that nearly all of us will be directly or indirectly impacted by this national public health emergency; and (2) the COVID-19 pandemic will not disappear in the near future. It is a threat to the physical well-being of Americans, but will, with certainty, disrupt the economic and social stability of many individuals and families.

This means that vulnerable and marginalized populations are at very high risk for bearing the brunt of the pandemic. Given social work's long history of social action to help mitigate the negative impact of national public health crises on those with less resources, we are again asked to respond. With that in mind, throughout this emergency, NASW will regularly provide in-depth updates on the needs of marginalized families and individuals.