



**NEW YORK CITY DEPARTMENT OF  
HEALTH AND MENTAL HYGIENE**  
Ashwin Vasan, MD, PhD  
*Commissioner*

**Testimony**

of

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Before the

**New York City Council**

**Committees on Health, Hospital, Immigration and Subcommittee on COVID-19 Recovery**

on

**“The Impact of the COVID-19 Pandemic on the Health of Immigrant New Yorkers”**

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Virtually  
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Good morning, Chairs Schulman, Hanif, Narcisse and Moya, and members of the committees. I am Dr. Torian Easterling, First Deputy Commissioner and Chief Equity Officer of the New York City Department of Health and Mental Hygiene (DOHMH). Thank you for the opportunity to testify today and provide an update on the City's efforts to protect and ensure immigrant New Yorker's health and wellness during this pandemic. I would also like to thank my colleagues who are testifying and answering questions with me today, MOIA Commissioner, Manuel Castro, and Dr. Jonathan Jimenez, Acting Executive Director of NYC Care, from Health + Hospitals.

It has been a long, challenging two years, as we are all deeply aware. Thank you for your partnership in helping us get critical information and resources to New Yorkers over the last two years. We stand ready to continue working with you to slow the spread of COVID-19, particularly as we are seeing an increase in cases citywide.

We have come so far – over 6.4 million New Yorkers are fully vaccinated – that's 78% of all residents, and as of today, over 88% of adults and over 58% of 5-17 year-olds. But we know there is more to be done. For example, only 45% of adult New Yorkers have received an additional dose of the vaccine – something ALL eligible New Yorkers should do right now. And if you're immunocompromised or over the age of 50 years old, and it's been at least four months since you had your last dose, you should go get a second booster shot as well! And we know that while we have made major gains in terms of building trust and fighting misinformation in communities – particularly communities of color and immigrant communities – this is a long, often slow process, as we work to combat decades of structural racism and mistrust of and lack of access to government and health care services.

As we are all here to discuss, the health of immigrant New Yorkers is of great importance to us as an agency and as a City. New York has long been a place that welcomes people from all over the world to join our vibrant communities. But we also know - as Commissioner Castro discussed - this pandemic taken an immense toll on BIPOC communities and immigrant communities. It is essential that we ensure health resources - for COVID-19 and beyond - are widely available and accessible for these New Yorkers. Providing care and resources to and setting public health policy that advances the health of immigrant New Yorkers – regardless of immigration status – is a driving tenet of our work at the Health Department.

As Commissioner Castro outlines, data shows that immigrants are disproportionately uninsured and have less access to regular care. These unacceptable realities are mitigated in part by our strong public health care system and our shared commitment with the Council to supporting partnerships with community-based organizations that build awareness about the availability and safety of using health services in the city. Yet we also know we have much work to do to continue to close these gaps in coverage and care.

To this end, a core focus of our historic COVID-19 vaccination campaign has been equity – and we are continually working hand-in-hand with the City's Taskforce on Racial Inclusion and Equity (TRIE) to address the inequities we have seen in vaccine uptake. From the start, we have deployed an equity strategy that ensured access to and confidence in vaccines by locating City vaccine sites, engagement, and media in communities that need it most – with a focus on the 33 Taskforce neighborhoods. To add more color to the gains and achievements we have made in our vaccination campaign—Latino New Yorkers have the third highest vaccination coverage at 72%, behind Asian/Native Hawaiian or other Pacific Islanders and Native American/Alaskan native New Yorkers. Adult Black New Yorkers are nearly 66% fully vaccinated and we are making strides in increasing vaccination coverage among Black children.

This is remarkable progress, but we are not done. The Health Department, and I personally, am committed to further closing the gap for neighborhoods that have been hardest hit by the COVID-19 pandemic.

All of this work would have been impossible, if we had not taken a whole of society approach- activating agencies across the city, including NYC Health + Hospitals (H+H) and MOIA. Even more important, were the scores of community based and faith-based organization partners who performed street outreach, canvassed neighborhoods, helped with town halls and so much more. CBO partnerships across 33 TRIE neighborhoods provided education opportunities in over twenty languages including indigenous languages. Each week our Public Health Corps partners reach over 100,000 New Yorkers through in-person education to build vaccine confidence and to provide navigation support to access services.

In order to deploy these critical response efforts, we need sufficient resources from our federal counterparts. Our allies in the federal government have warned us that reimbursements for testing and vaccination of uninsured New Yorkers will stop without another COVID-19 supplemental appropriation. As we know, many of the undocumented immigrants in the city are uninsured—while New York’s safety net is strong and we will continue to provide care to anyone regardless of immigration status or insurance coverage, these cuts could have a devastating effect on the health of immigrant communities. Additionally, the federal government has further warned that the supply of vaccines, treatments, and testing is going to be impacted without this funding as well. The downstream impact of reduced federal COVID funding for uninsured people could be felt imminently. And this will most acutely harm BIPOC New Yorkers. We need your help advocating to the federal government.

Finally, I want to mention the importance of New Yorkers – including immigrant New Yorkers – returning to regular preventive care. We know that the pandemic has caused many New Yorkers to overlook their routine health care such as, cancer screenings and annual primary care visits. We need to ensure that people are returning to primary care and continuing a holistic approach to their wellness. Also, as Commissioner Castro mentioned, NYC care is H+H’s health care access program, which guarantees low-cost to no-cost services to New Yorkers who don’t otherwise qualify or cannot afford health insurance.

I look forward to your questions, and I hope that we can have a fruitful discussion that centers equity, access, and wellness for our immigrant New Yorkers. I want to thank the Chairs for holding this hearing today and for being committed champions in the effort to prioritize the health of this community. Thank you for your partnership throughout these challenging years. I am happy to answer your questions.