

COVID-19 HEALTHCARE PROVIDER UPDATE

MAY 22, 2020

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Our understanding of COVID-19 is evolving rapidly. This presentation is based on our knowledge as of May 22, 2020, 9 AM

OUTLINE



WHERE WE ARE NOW



SURVEILLANCE AND CLINICAL UPDATES



MULTISYSTEM INFLAMMATORY SYNDROME IN CHILDREN (MIS-C) UPDATE



UNDERLYING STRUCTURAL INEQUITIES AND IMPACT OF COVID-19 ON PREGNANCY & SEXUAL AND REPRODUCTIVE HEALTH IN NYC



QUESTIONS AND DISCUSSION

WHERE WE ARE NOW

- The COVID-19 pandemic continues worldwide
- Suppression has been achieved in some areas, but the outbreak is accelerating in others
- Since the first confirmed case of COVID-19 in NYC, over 21,000 deaths have been attributed to the disease
- Following a peak in early to mid-April, daily case counts, hospitalizations, and deaths have been declining
- This suggests that mitigation measures, including physical distancing, are working
- These measures must be maintained as we prepare to transition to suppression measures

CUMULATIVE CASES AND DEATHS, WORLDWIDE

5/21/20

>5,040,000 cases

>329,000 deaths



Johns Hopkins University. COVID-19 dashboard: cumulative confirmed cases.

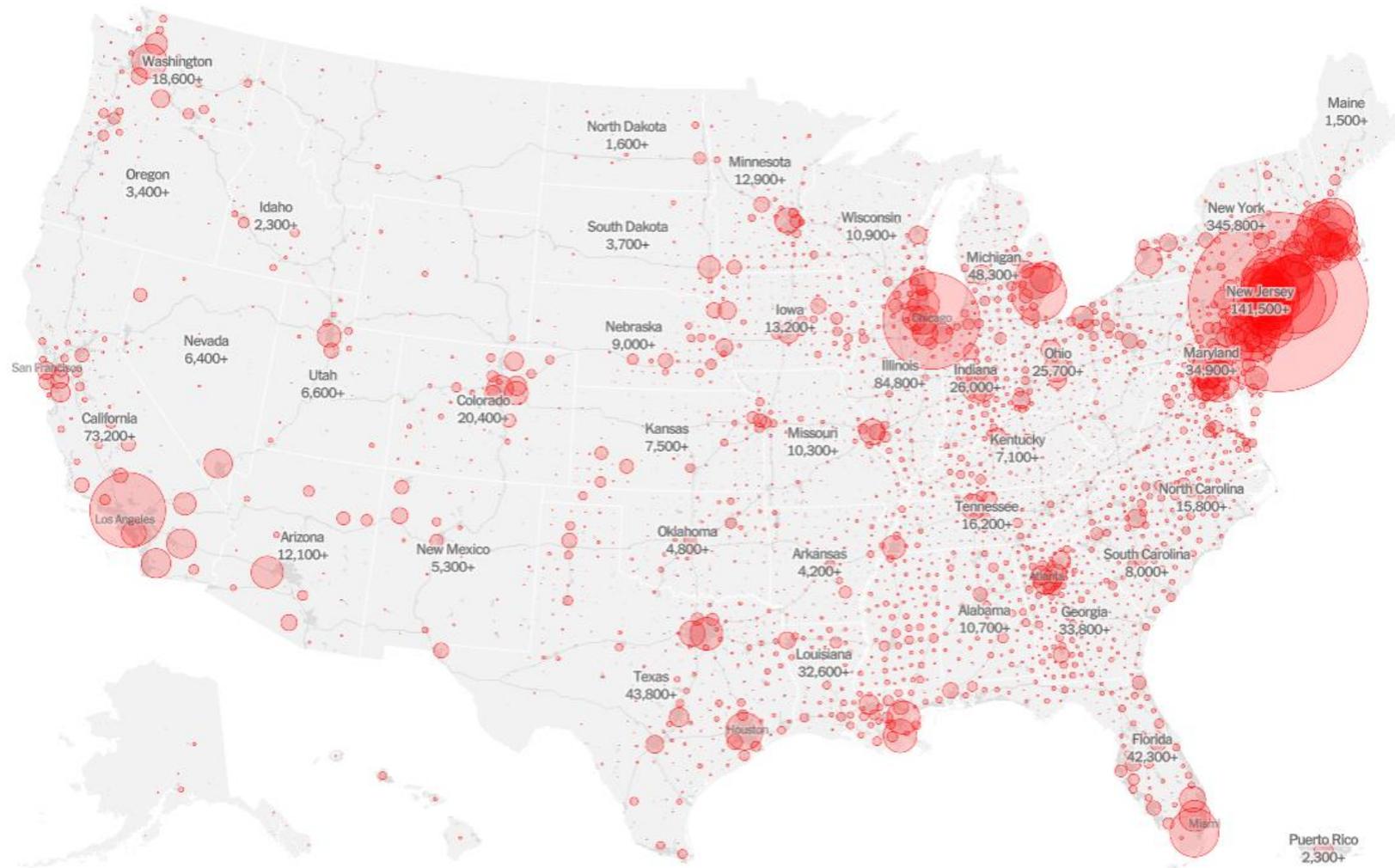
<https://www.arcgis.com/apps/opsdashboard/index.html#/bda7594740fd40299423467b48e9ecf6>

CUMULATIVE CASES AND DEATHS, U.S.

5/21/20

>1,500,000 cases
(~30% of confirmed global cases)

>94,000 deaths
(~30% of reported global deaths)



New York Times. Coronavirus in the U.S.: latest map and case count.

<https://www.nytimes.com/interactive/2020/us/coronavirus-us-cases.html>

CURRENT
STATUS OF
OUTBREAK,
NYC
5/21/20

Laboratory-confirmed cases	192,8403
Hospitalizations	50,770
Deaths	
Confirmed	16,232
Probable	4,771

NYC Health Department. COVID-19: data. Updated daily.
<https://www1.nyc.gov/site/doh/covid/covid-19-data.page>

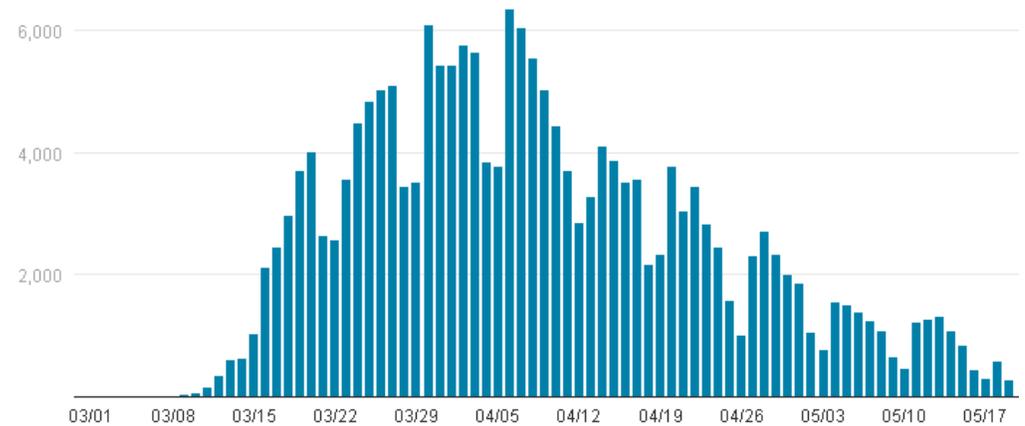
COVID-19 CASES, NYC

3/3/20 – 5/21/20

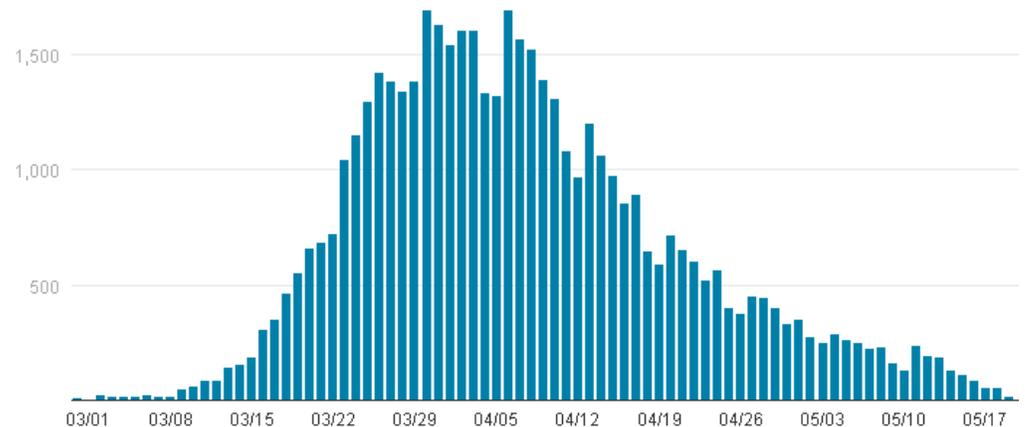
Shows number of COVID-19 cases, hospitalizations, and deaths based on a daily analysis since March 3

Deaths lag 1-2 weeks after hospitalizations

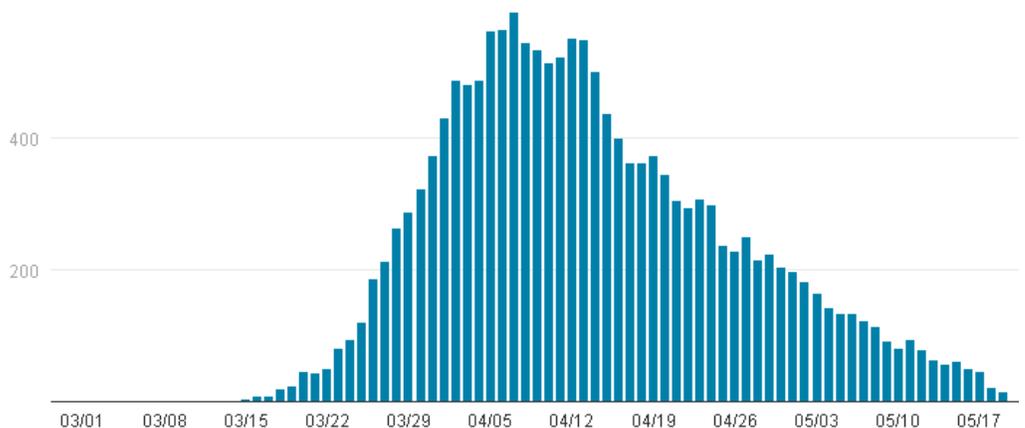
CASES



HOSPITALIZATIONS



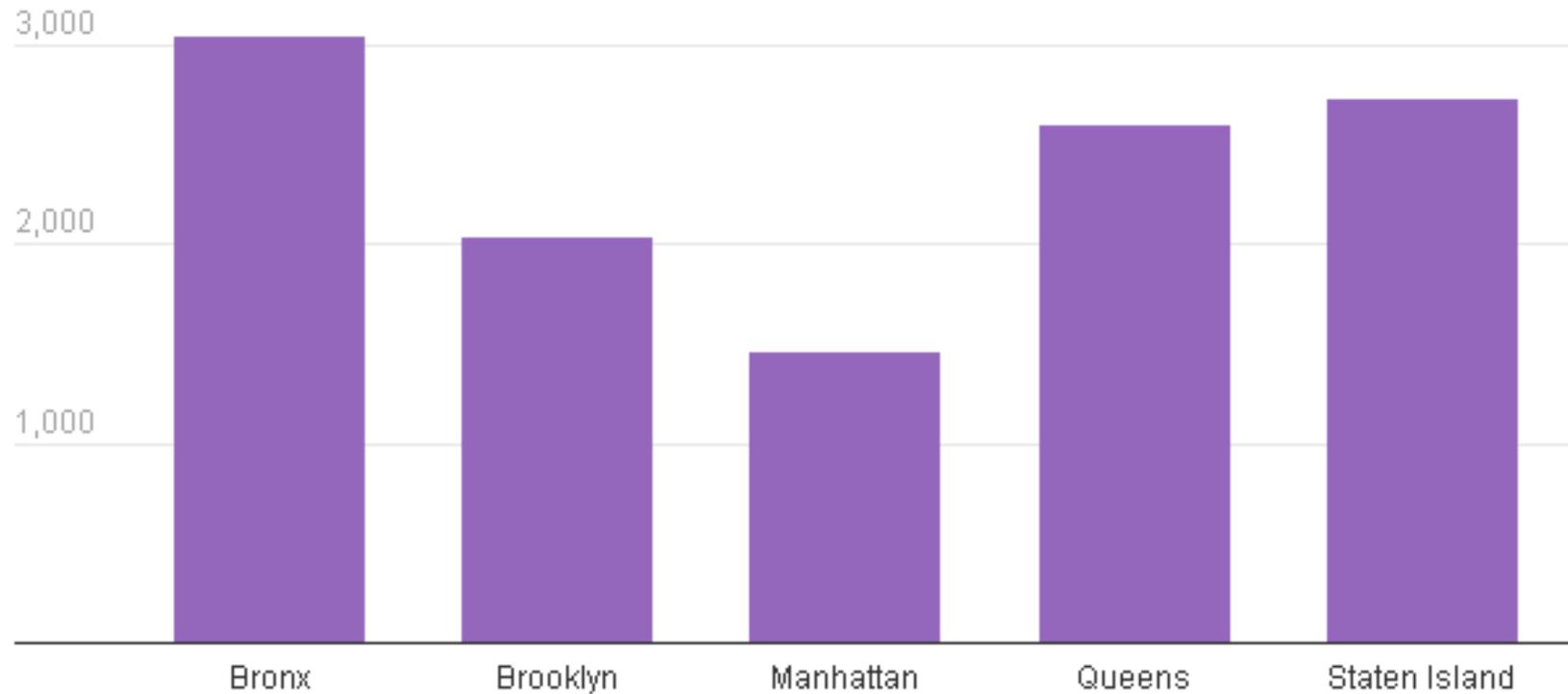
DEATHS



DATE

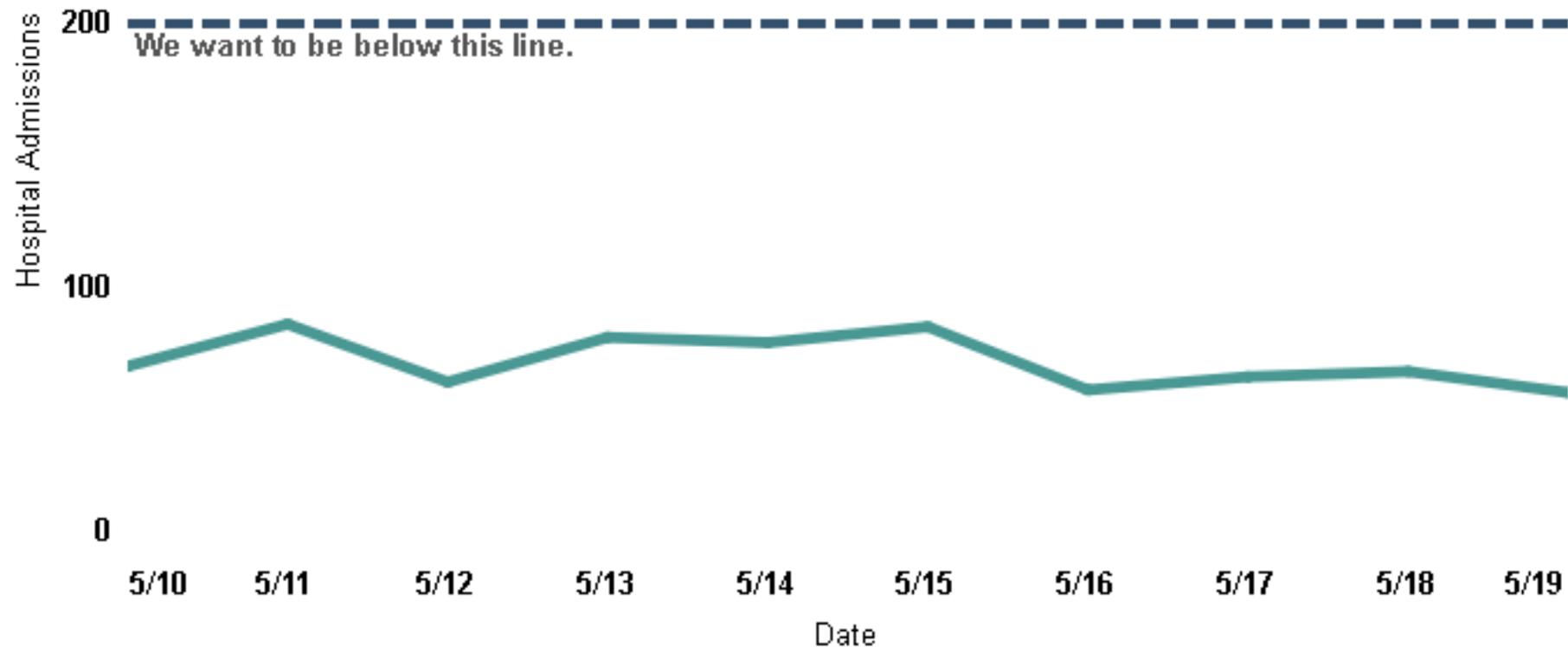
COVID-19 RATES BY BOROUGH, NYC 5/21/20

Shows number of positive cases
per 100,000 people in each
borough



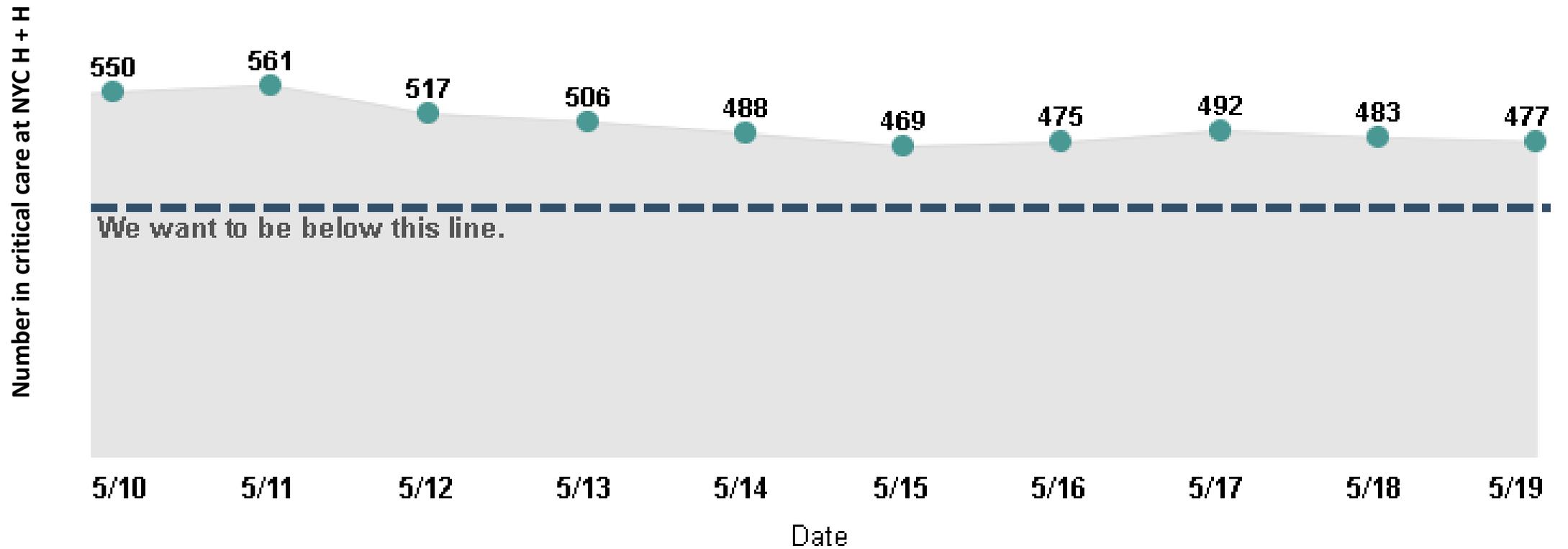
NYC Health Department. COVID-19: data. Updated daily.
<https://www1.nyc.gov/site/doh/covid/covid-19-data.page>

MILESTONE: PEOPLE ADMITTED TO NYC HOSPITALS FOR COVID-19-LIKE ILLNESS



MILESTONE: This chart may indicate when COVID-19's spread is slowing by showing 10 consecutive days when the daily number of people admitted to NYC hospitals for influenza-like illness and pneumonia is less than 200. That would be double the average for prior years in the city.

MILESTONE: PEOPLE IN CRITICAL CARE ACROSS NYC HEALTH + HOSPITALS



MILESTONE: This chart may indicate when critical care volume is at sustainable levels by showing 10 consecutive days when the daily number of people in critical care at NYC Health + Hospitals is less than 375.

UPDATED NYC HEALTH DEPARTMENT DATA PAGE

FEATURES

- Features include:
 - Interactive map of rates and counts of cases, deaths, and positive tests by ZIP code
 - Tests conducted daily and percent of people with positive test results
 - Detailed information on cases, hospitalizations, and deaths by borough of residence, age, sex and race/ethnicity, and neighborhood poverty level
- Public and providers can search to find information specific to their neighborhood and demographic profile
- Visual display of disproportionate impact of COVID-19 on communities of color and low-income communities
 - Black and Latino New Yorkers dying around twice the rate of their White counterparts when adjusted for age

<https://www1.nyc.gov/site/doh/covid/covid-19-data.page>

COVID-19: Data

Coronavirus Disease 2019
(COVID-19)

Summary

Deaths

Boroughs

Milestones

Archive

Symptoms and What to
Do When Sick

Prevention and Groups at
Higher Risk

Coping and Emotional
Well-being

[Data](#)

Information for Providers

Summary

The data presented on these pages reflect the most recent information the Health Department has collected about people who have tested positive for COVID-19 in NYC. In March, April and early May, we had discouraged people with mild and moderate symptoms from being tested, so our data primarily represent people with more severe illness.

Unless otherwise noted, all of the below information was collected by the NYC Health Department. The data on these pages will be updated daily. All data are preliminary and subject to change.

- [Download case data and technical notes on Github.](#)
- [See maps showing the City's response to COVID-19 by ZIP code.](#)

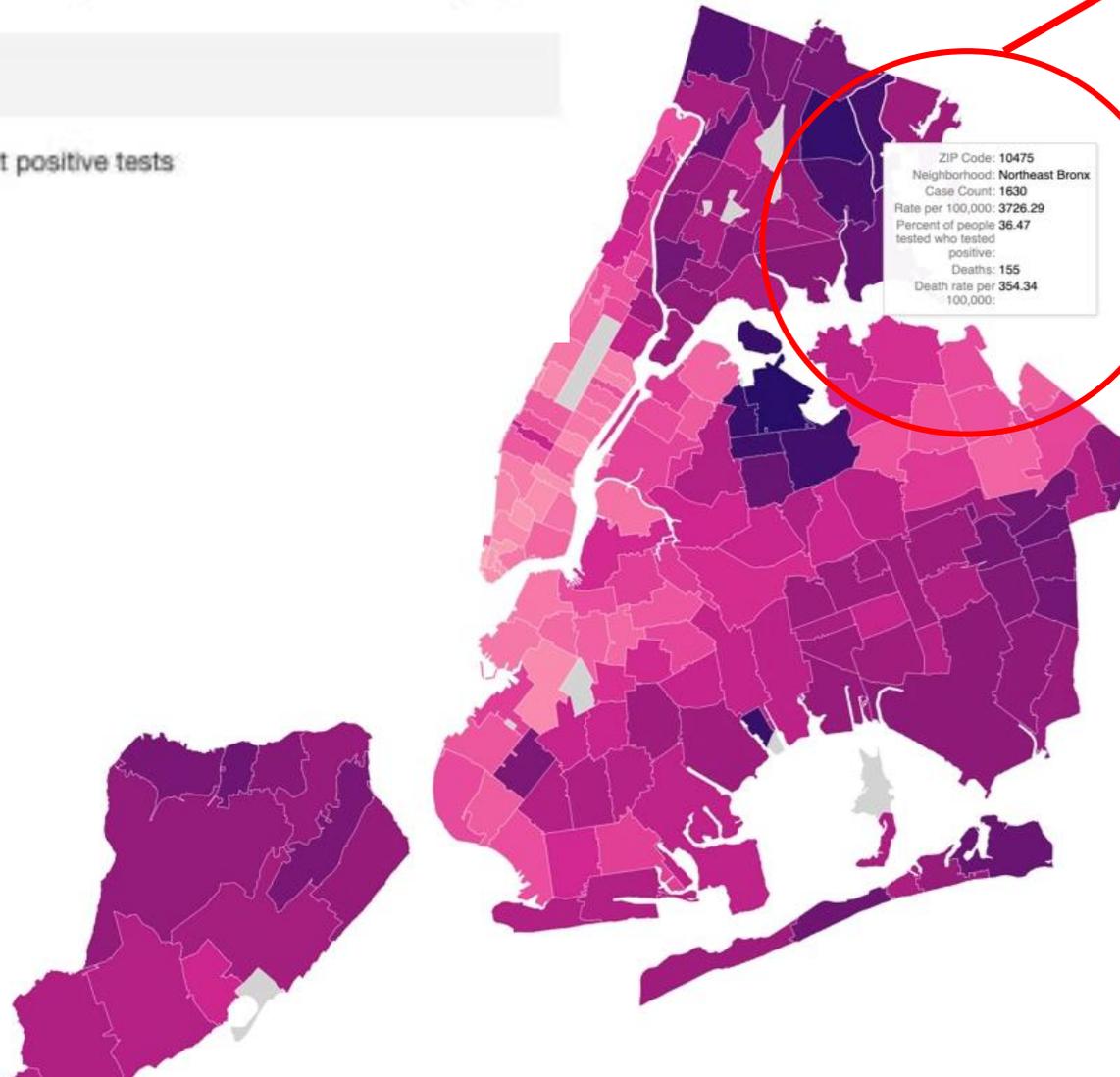
COVID-19 Data by ZIP Code of Residence

The below map and table provide confirmed case rates, case counts, death rates, death counts, and the percent of people tested with a positive result.

The number of reported confirmed cases per ZIP code may be affected by that area's population size, access to health care and access to testing. For example, an area with a low total case number but a high percent of positive cases could reflect more people with mild symptoms not getting tested.

View as: Map Table

- Case rate Death rate Percent positive tests
 Case count Death count



ZIP Code: 10475
Neighborhood: Northeast Bronx
Case Count: 1630
Rate per 100,000: 3726.29
Percent of people tested who tested positive: 36.47
Deaths: 155
Death rate per 100,000: 354.34

ZIP Code: **10475**

Neighborhood: **Northeast Bronx**

Case Count: **1630**

Rate per 100,000: **3726.29**

Percent of people tested who tested positive: **36.47**

Deaths: **155**

Death rate per 100,000: **354.34**



COVID-19: Data

Coronavirus Disease 2019 (COVID-19)

Symptoms and What to Do When Sick

Prevention and Groups at Higher Risk

Coping and Emotional Well-being

[Data](#)

Information for Providers

Community and Business

Summary

Deaths

Boroughs

Milestones

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Details on Deaths

The different types of reported deaths are as follows:

- **Confirmed deaths:** People who had laboratory-confirmed COVID-19.
- **Probable deaths:** Cause of death reported as COVID-19 or equivalent, but no positive laboratory test.

Due to delays in lab results, some deaths initially reported as probable may be changed to confirmed.

- [Download case data and technical notes on Github.](#)

Daily Reported Death Totals

New York City's first confirmed COVID-19 death was reported on March 11.

Information for Providers

Community and Business

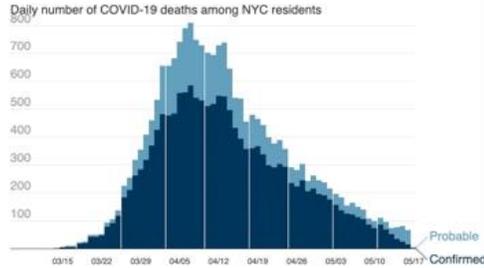
Posters and Flyers

Share Print

Daily Reported Death Totals

New York City's first confirmed COVID-19 death was reported on March 11.

Due to delays in reporting, recent data are incomplete.



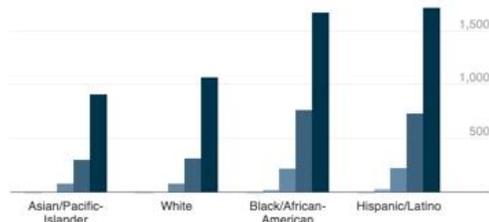
Get the data · Created with Datawrapper

Confirmed Deaths

Show by: Race/ethnicity Borough Underlying conditions

Death rates per 100,000 people

0-17 18-44 45-64 65-74 75+



Get the data · Created with Datawrapper

Data on people identified as other categories, including Native American/Alaska Native or multi-racial, are not provided here. The Hispanic/Latino category includes people of any race. Race and ethnicity information is most complete for people who are hospitalized or have died. There are much less demographic data currently available for non-hospitalized cases.

Confirmed and Probable Death Totals

Demographic data on probable deaths are incomplete, as some records do not include this information yet.

Show by: Age Sex Race/ethnicity Location of Death Borough

	Confirmed	Probable
75+	7,776	2,379
65-74	3,990	932
45-64	3,575	934
18-44	629	124
0-17	10	4
Unknown	3	1
Data pending	0	449

Get the data · Created with Datawrapper

Confirmed and Probable Death Totals

Demographic data on probable deaths are incomplete, as some records do not include this information yet.

Show by:

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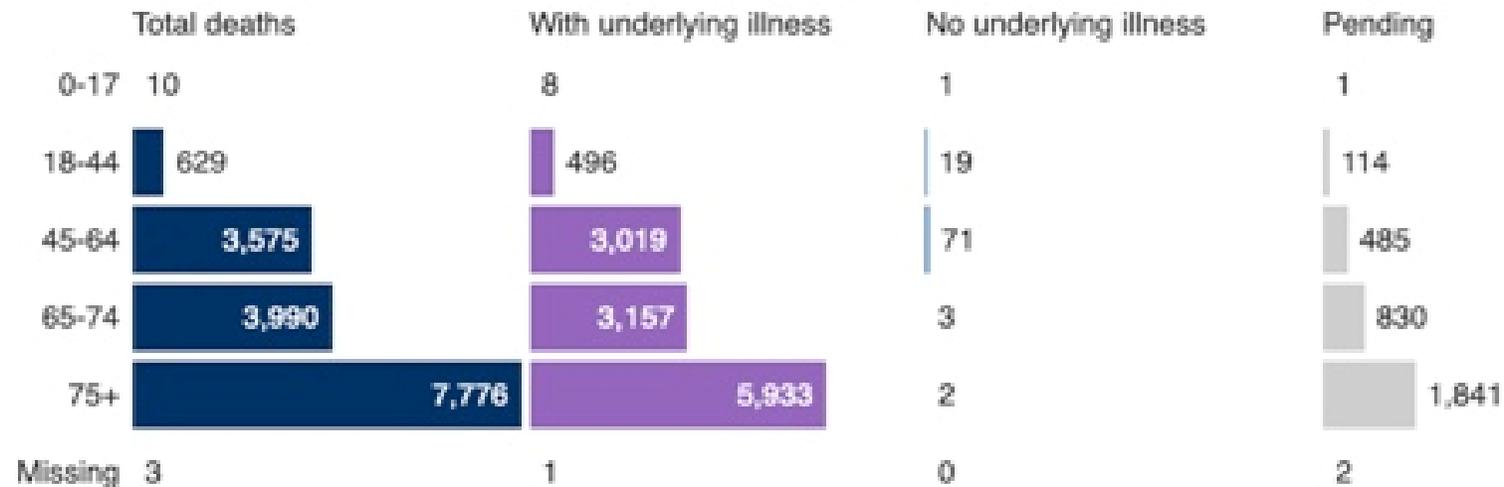
Confirmed Deaths

Show by:

Race/ethnicity Borough Underlying conditions

Underlying conditions can include lung disease, asthma, heart disease, a weakened immune system, obesity, diabetes, kidney disease, liver disease and cancer.

Deaths, by age and presence of underlying conditions



Due to ongoing investigations, the presence of underlying conditions has not been determined for all patients confirmed to have died from COVID-19.

[Get the data](#) · Created with [Datawrapper](#)

UPDATED NYC DATA PAGE

FEATURES

- Data can be used to better target efforts to areas and populations that are highly impacted
- Additional online resource that are now available show New York City's response to COVID-19 by zip code
- Maps include information on testing, supplies, telehealth, food, education, outreach, and support

<https://www1.nyc.gov/site/coronavirus/index.page>

[Information on coronavirus](#)
[Agency service suspensions/reductions](#)
[Report a social distancing violation](#)

NYC Coronavirus 311 Search all NYC.gov websites

NYC COVID-19 Citywide Information Portal
[Kreyòl Ayisyen](#) | [Translate](#) | [Text-Size](#)

[Resources for NYers](#) | [Resources for Businesses & Non-profits](#) | [Ways to Help](#) |

Find the latest guidance from the NYC Health Department ▶

Resources for New Yorkers

Find support for food, employment, health insurance, housing, and more

Resources for businesses and non-profits

Find assistance for businesses and organizations

Ways to help

Donate, volunteer, or partner to support the City's response to COVID-19

Self-report symptoms and self-isolation status

What You Need to Know About COVID-19

NYC: Stay at home

- Only go outside for essential tasks. Those tasks include working for an essential business, getting groceries and supplies, or securing necessary medical care. If you must go outside, keep at least six feet of distance between yourself and others, and wear a face covering.
- Wash your hands with soap and water often, for at least 20 seconds every time, or use an alcohol-based hand sanitizer.

[NYC Health Department: coronavirus disease 2019 \(COVID-19\)](#)

[Report a social distancing violation](#)

What to do if you are sick

COVID-19 Response Map
 as of May 18, 2020

The maps below show New York City's response to COVID-19 by zip code. Expand maps to full screen with the button at top right, or use the button below that to toggle layers on and off. This page will be updated weekly.

Get the latest information on COVID-19 at nyc.gov/coronavirus.

Testing, Supplies, and Telehealth

Testing Sites

Type

- H+H Community Clinic
- H+H Hospital
- CityMD
- One Medical (Appt. Only)

PPE Distribution

Total PPE Distributed

- > 1,000,000 - 1,550,000
- > 750,000 - 1,000,000

The City has taken unprecedented measures to protect New Yorkers from the spread of COVID-19, including our vulnerable populations and heroic frontline workers.

These actions include surging more than 50 million pieces of Personal Protective Equipment (PPE) and almost 2,500 contracted and volunteer staff to hospitals, nursing homes, and other care facilities. The City is also providing new resources to support NYCHA's 400,000 residents, including access to free testing and masks for all residents, and free tablets and internet service for seniors. Additionally, the City is currently distributing 7 million face coverings through various agency partners to providers and their clients. The City is rapidly working to ramp up its citywide testing capacity at community testing sites operated by NYC Health + Hospitals and through partnerships with OneMedical and CityMD to bring more than 100 new walk-in sites online, and is hiring 2,500 contact tracers to help trace, isolate, and support individuals who test positive. NYC H+H has also completed over 120,000 tele-visits, providing continuity of care while accepting new patients at a time when many medical practices cannot.

Click on the [map](#) to see PPE distribution and testing sites near you.

Pick up a Face Covering

Help Now NYC

<https://www1.nyc.gov/site/coronavirus/index.page>

MULTISYSTEM
INFLAMMATORY
SYNDROME IN
CHILDREN
(MIS-C)

Julia Schillinger, MD, MSc

Senior Director of STI Surveillance, Epidemiology,
and Special Projects
NYC Department of Health and Mental Hygiene

Slides will be posted on the Health Department COVID-19 provider page: on.nyc.gov/covid19provider

BACKGROUND AND COMMON SYMPTOMS

- Temporally associated with COVID-19 infection
- Serious illness with some of the clinical features of Kawasaki Disease and Toxic Shock Syndrome
- Fever lasting several days, along with other symptoms, including:
 - Abdominal pain
 - Diarrhea
 - Vomiting
 - Conjunctivitis
 - Rash
 - Irritability or sluggishness
 - Lymphadenopathy
- Breadth of symptoms still being defined
- Many positive for SARS-CoV-2 antibody, some for virus (rRT-PCR)
 - Suggests illness mediated by immune response rather than direct viral injury

NYC HEALTH DEPARTMENT RESPONSE

- Investigating all reports from providers to determine which are cases
- Provider education and outreach regarding identification, local epidemiology, and reporting
 - PICUs, hospitals, providers
- Public education and outreach
 - Fact sheet aimed at parents/caregivers:
<https://www1.nyc.gov/assets/doh/downloads/pdf/imm/covid-19-pmis.pdf>
 - Letters with DOE to parents; letters to REC childcare centers
 - Developing media campaign
- Coordinating with CDC

**NYC MIS-C
REPORTING
REQUIREMENTS
(ALIGNED WITH NYS)^{1,2}**

ANY INDIVIDUAL AGED <21 YEARS WHO MEETS CLINICAL + GENERAL LABORATORY CRITERIA AND DOES NOT HAVE AN ALTERNATE DIAGNOSIS

CLINICAL CRITERIA (ALL 3 REQUIRED):

1. ≥ 1 day of subjective or measured fever ($\geq 100.4^{\circ}$ F/ 38° C)
2. Hospitalization
3. Either:
 - ≥ 1 of the following:
 - Hypotension or shock (cardiogenic or vasogenic)
 - Features of severe cardiac illness (including myocarditis, pericarditis, or valvulitis, significantly elevated troponin/pro-BNP, or coronary artery abnormalities)
 - Other severe end-organ involvement including neurological or renal disease (excluding severe respiratory disease alone)

OR

- ≥ 2 of the following:
 - Maculopapular rash
 - Bilateral non-purulent conjunctivitis
 - Mucocutaneous inflammatory signs (mouth, hands, or feet)
 - Acute GI symptoms (diarrhea, vomiting, or abdominal pain)

NYC MIS-C
REPORTING
REQUIREMENTS
(ALIGNED WITH NYS)^{1,2}

ANY INDIVIDUAL AGED <21 YEARS WHO MEETS CLINICAL + GENERAL LABORATORY CRITERIA AND DOES NOT HAVE AN ALTERNATE DIAGNOSIS

GENERAL LABORATORY CRITERIA:

≥ 2 of the following:

- Neutrophilia
- Lymphopenia
- Thrombocytopenia
- Hypoalbuminemia
- Elevated C-reactive protein (CRP)
- Elevated erythrocyte sedimentation rate (ESR)
- Elevated fibrinogen
- Elevated D-dimer
- Elevated ferritin
- Elevated lactic acid dehydrogenase
- Elevated interleukin 6 (IL-6)
- Elevated procalcitonin

MIS-C REPORTS TO NYC HEALTH DEPARTMENT

- As reports are received by the NYC Health Department, an investigation is initiated
- If the patient meets the CDC MIS-C case definition,³ the patient is counted as a case
- As of May 21, of the 180 reports, 90 have met CDC case criteria for MIS-C
 - 30 did not meet criteria
 - 60 still under investigation
- 1 death reported

NYC MIS-C CASES

Characteristic	Number of Cases N=90	%
Age		
0-4	25	28
5-9	36	40
10-14	20	22
15-21	9	10
Sex		
Female	41	46
Male	49	54

NYC MIS-C CASES

Characteristic	Number of Cases N=90	%
Borough		
Bronx	31	34
Brooklyn	21	23
Manhattan	11	12
Queens	26	29
Staten Island	1	1
Race/Ethnicity		
Asian	6	7
Black/African American	24	27
Hispanic/Latino	21	23
White	16	18
Other/Multiracial	10	11
Unknown	13	14

MIS-C DIAGNOSIS AND TREATMENT

- Immediately refer suspected cases to specialist in pediatric infectious disease, rheumatology, and critical care, as indicated
 - Providers should conduct molecular and serologic testing for SARS-CoV-2 for all suspected cases
- Early diagnosis and treatment of patients who meet full or partial criteria for KD is critical to prevent end-organ damage and other long-term complications
 - Patients who meet full criteria for KD should be treated with intravenous immunoglobulin and aspirin

REPORTING MIS-C TO NYC HEALTH DEPARTMENT

- Call the Provider Access Line: **(866) 692-3641** to report any patient who meets criteria for MIS-C
- Report all suspected cases, regardless of laboratory evidence of SARS-CoV-2 infection
- Consider MIS-C in any pediatric death with evidence of SARS-CoV-2 infection
- Reporting to NYC required by NYS Sanitary Code and NYC Health Code and is in addition to reporting required to New York State via the Health Electronic Response Data System (HERDS) or otherwise

MIS-C REFERENCES

1. NYS Health Advisory: NY State Health Alert issued 5/13/2020:
https://health.ny.gov/press/releases/2020/docs/2020-05-13_health_advisory.pdf
2. NYC Health Department. Health alert #16: updated reporting for multisystem inflammatory syndrome in children associated with COVID-19. May 18, 2020.
<https://www1.nyc.gov/assets/doh/downloads/pdf/han/advisory/2020/covid-19-providers-mis-c.pdf>
3. CDC Health Advisory: Multisystem Inflammatory Syndrome in Children (MIS-C) Associated with Coronavirus Disease 2019 (COVID-19). Issued 5/14/2020.
<https://emergency.cdc.gov/han/2020/han00432.asp>

UNDERLYING
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PREGNANCY &
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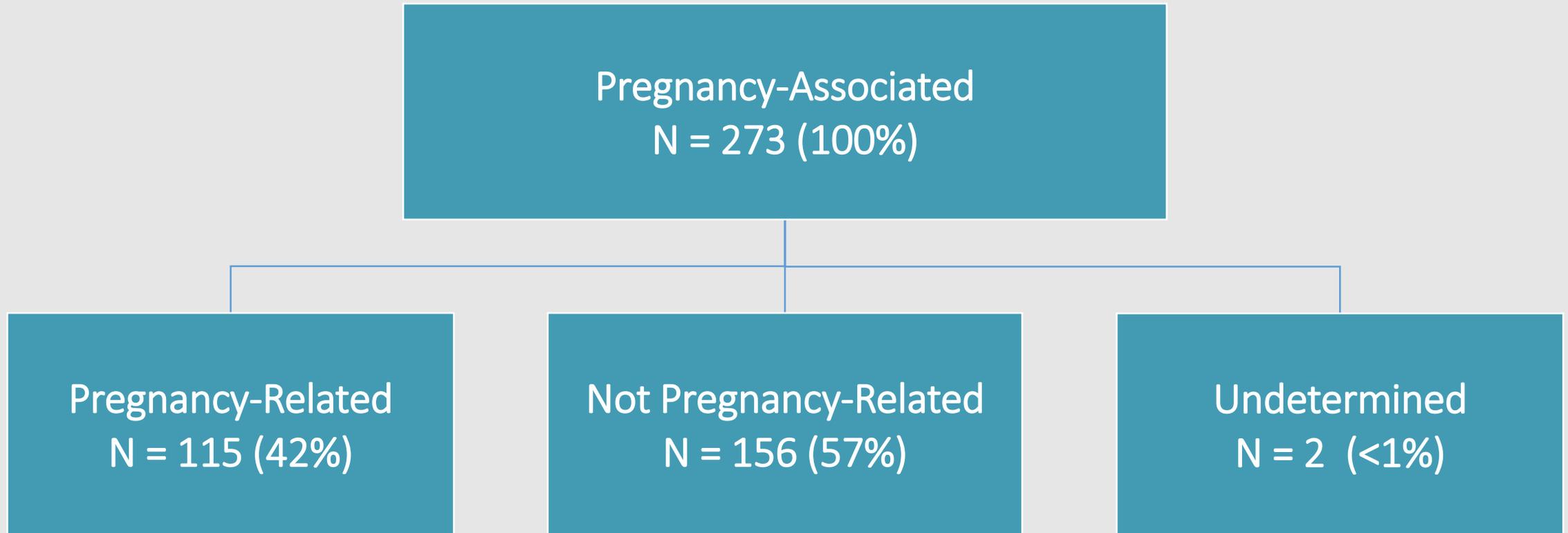
Assistant Commissioner

Bureau of Maternal, Infant and Reproductive Health

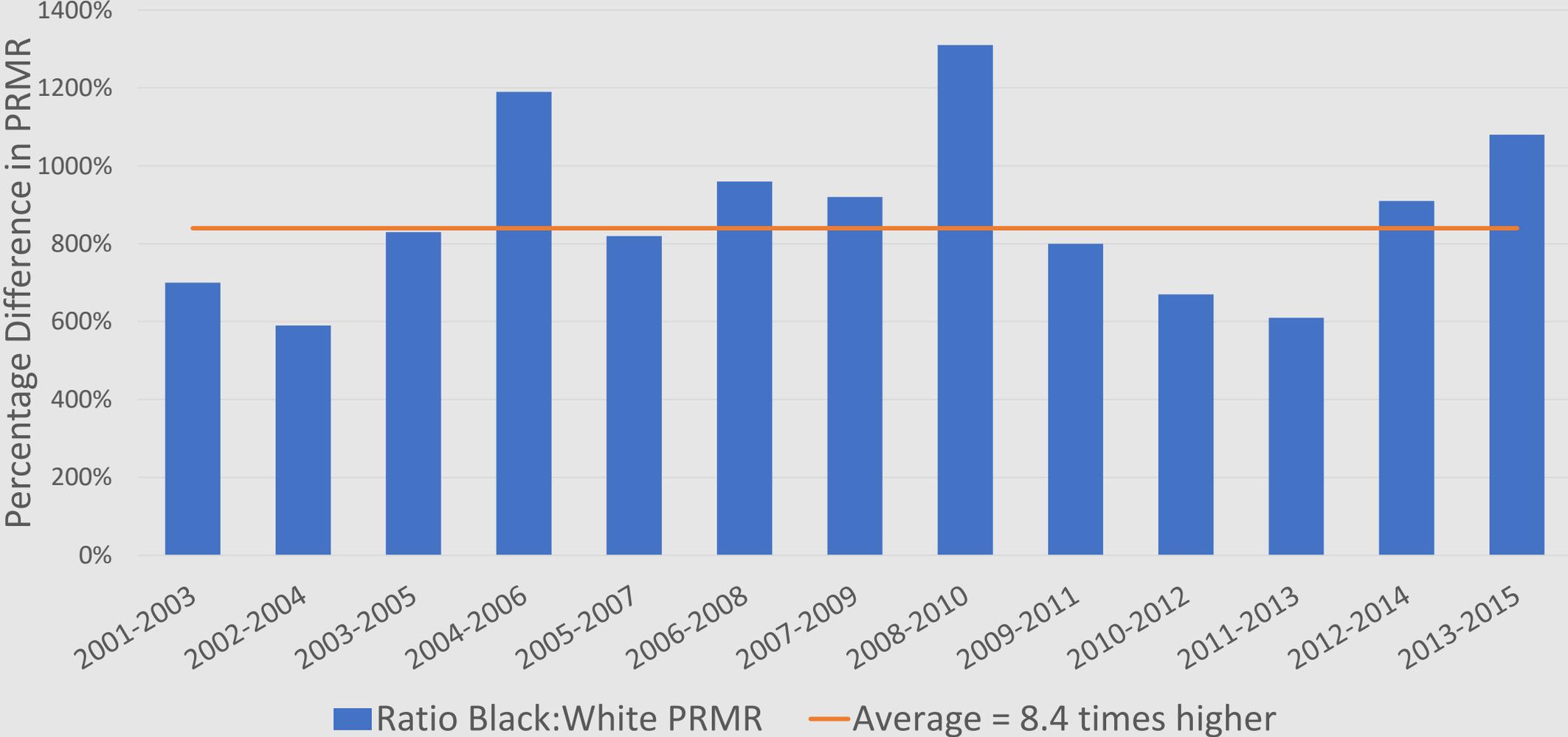
dkaplan@health.nyc.gov



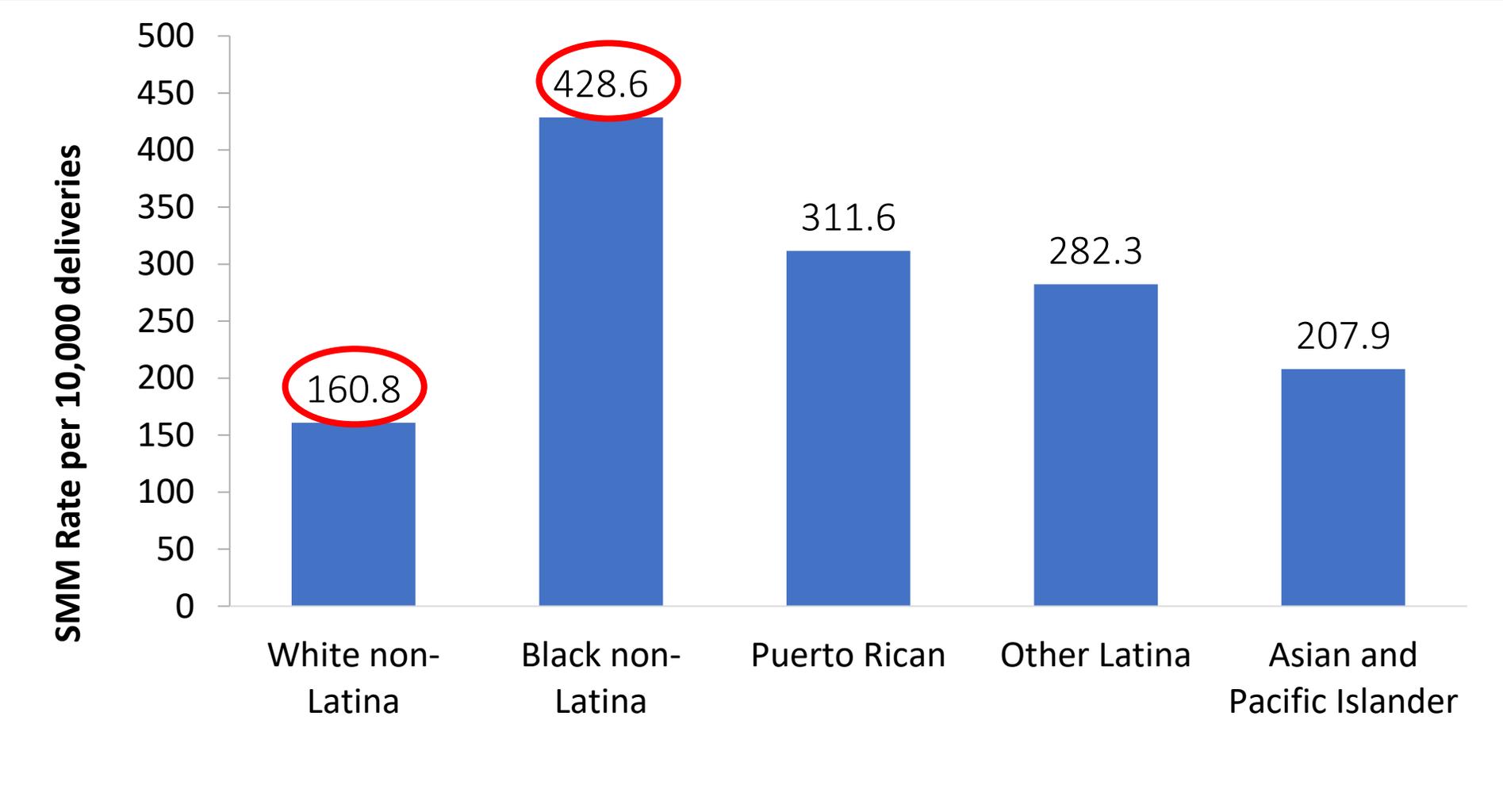
PREGNANCY-ASSOCIATED MORTALITY IN NYC 2011-2015



BLACK-WHITE DISPARITY IN PREGNANCY-RELATED MORTALITY RATE (PRMR) IN NYC, 2001-2015

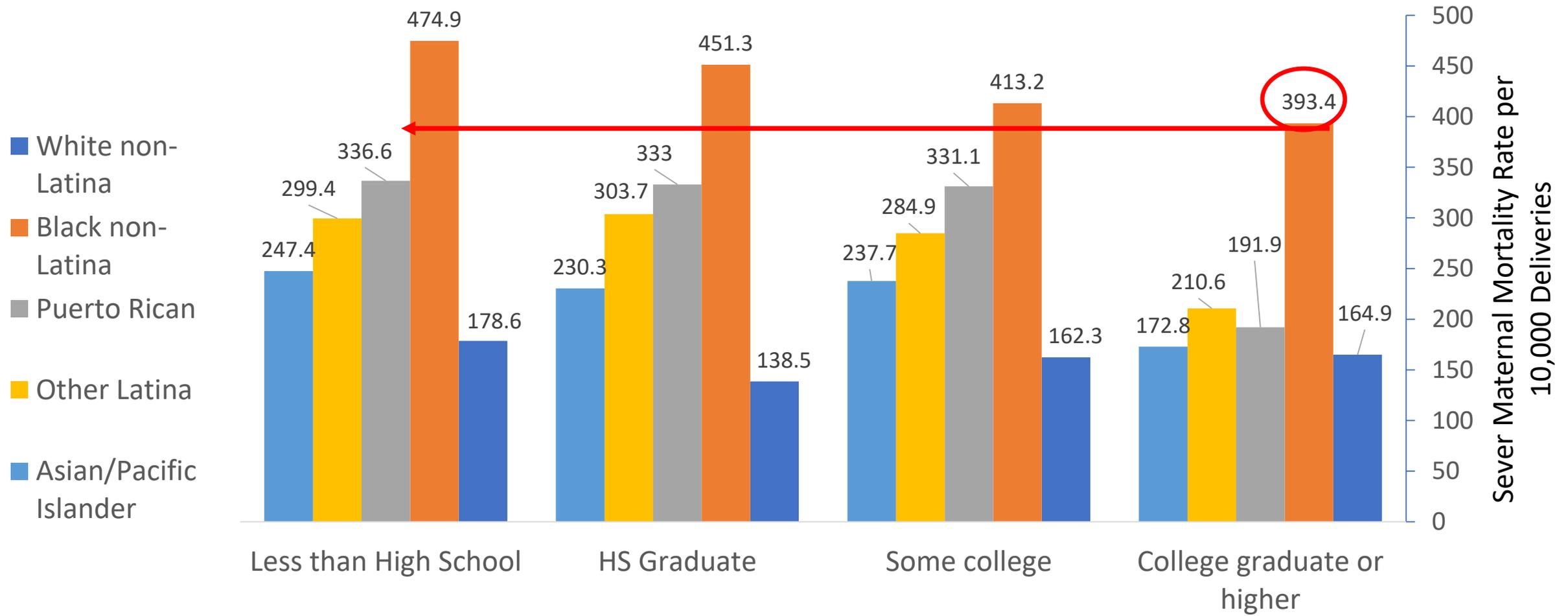


BLACK AND LATINA WOMEN MUCH MORE LIKELY TO EXPERIENCE SEVERE MATERNAL MORBIDITY THAN WHITE WOMEN



Source: NYC DOHMH (2019) Report to City Council

BLACK WOMEN WITH A COLLEGE DEGREE HAVE HIGHER RATES OF SEVERE MATERNAL MORTALITY THAN WOMEN OF ALL OTHER RACE/ETHNICITIES WITHOUT A HIGH SCHOOL EDUCATION



Source: NYC DOHMH (2019) Report to City Council

WHAT IS DRIVING THE INEQUITY IN MATERNAL MORTALITY AND MORBIDITY?

RACISM (structural, institutional and policy level, discrimination, exclusion, segregation, interpersonal)

GENDER OPPRESSION (misogyny, sexism, toxic masculinity, discrimination)



Poor Housing – Lower Incomes – Increased Exposure to Violence and Trauma – High Stress Levels – Poor Access to Quality Foods -
Unemployment – Poor Access to Resources – Increased Risk of
Incarceration – Police Profiling – Disrespectful Care

COVID-19
EXACERBATES
EXISTING
INEQUITIES:

IMPACT ON
PREGNANCY
OUTCOMES &
FAMILIES WITH
NEWBORNS

- Families receiving WIC are having difficulty finding infant formula
- Shortages of essential supplies including diapers and cribs
- Limited access to postpartum services including doulas and lactation support
- Heightened stress, which increases the risk of poor birth outcomes, especially for Black and Brown women

COVID-19
EXACERBATES
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FAMILIES WITH
NEWBORNS

- NYC Health Department and Harvard T. H. Chan School of Public Health Published *Severe Sociopolitical Stressors and Preterm Births in New York City* (October 2018)
 - Found increased rates of preterm birth among Latina women associated with 2016 presidential election
 - Severe stressors, including economic and social threats and interpersonal violence can lead to preterm births
- Similar finding post 9/11

Krieger N, Huynh M, Li W, Waterman PD, Van Wye G. Severe sociopolitical stressors and preterm births in New York City: 1 September 2015 to 31 August 2017. *J Epidemiol Community Health*. 2018;72(12):1147-1152.

NYC HEALTH DEPARTMENT RESPONSE: COVID-19 PERINATAL TASK FORCE

Purpose

Support the public health and clinical response to COVID-19's impact on pregnant and postpartum people/families.

Promote

Promote the best possible birthing experience and birth outcomes for people giving birth during the COVID-19 pandemic.

Protect

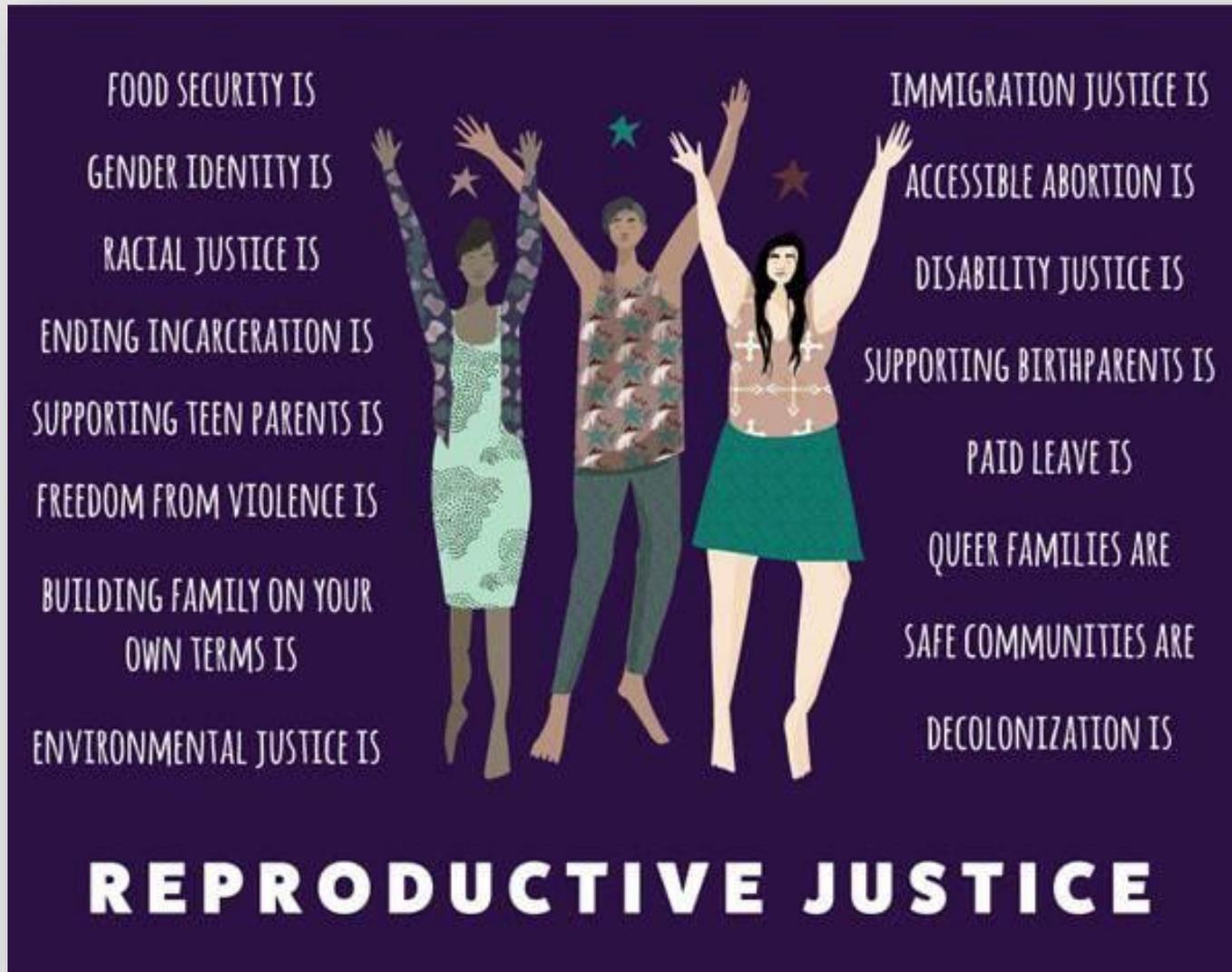
Protect/ mitigate risk of COVID-19 for people giving birth and their newborns/families and providers.

Preserve

Preserve hospital personnel and beds for COVID-19 response by reducing use by people who do not require hospital care during prenatal care or childbirth.

PERINATAL TASK
FORCE
DOCUMENTS ON
NYC HEALTH
DEPARTMENT
WEBSITE

- Guidance for People Who are Pregnant, Breastfeeding or Caring for Newborns
<https://www1.nyc.gov/assets/doh/downloads/pdf/imm/covid-19-guidance-for-pregnant-people.pdf>
- Infant Feeding During the COVID-19 Pandemic
<https://www1.nyc.gov/assets/doh/downloads/pdf/imm/covid-19-infant-feeding.pdf>
- Recommendations for Doulas
<https://www1.nyc.gov/assets/doh/downloads/pdf/imm/covid-19-recommendations-for-doulas.pdf>
- COVID-19 Guide to Virtual Doula Support
<https://www1.nyc.gov/assets/doh/downloads/pdf/imm/covid-19-virtual-doula-support.pdf>
- Preparing Doula Clients for Unforeseen Circumstances
<https://www1.nyc.gov/assets/doh/downloads/pdf/imm/covid-19-preparing-doula-clients-unforeseen-circumstances.pdf>



When all people have the social, political, and economic power and resources to make healthy decisions about our gender, bodies and sexuality for ourselves, our families and our communities.

Forward Together (2018), retrieved from:
<https://forwardtogether.org/what-is-reproductive-justice/>

Source: [Megan Smith, digital art, Repeal Hyde Art Project \(2016\)](#)

RESPECTFUL CARE AT BIRTH – AN ESSENTIAL PART OF THE WORK

- NYC Standards for Respectful Care at Birth
 - Developed in partnership with the Sexual and Reproductive Justice Community Engagement Group
 - Launched December 2018
 - Promotes the **human right** to safe, respectful, and quality maternity care
 - Birth Justice Champions and Defenders
- Partnering with hospitals and communities to invest in, increase awareness, and advocate for respectful, quality maternity care

NEW YORK CITY STANDARDS FOR
RESPECTFUL CARE at BIRTH

You have a human right to respectful, safe and quality care during your birthing experience.

- EDUCATION**
You deserve to ask for and receive simple information that you can easily understand about your health care, health care provider and birthing experience options.
- INFORMED CONSENT**
You deserve to know and make your own decisions about all of your medical procedures. This is called “informed consent” and is a legal right.
- DECISION-MAKING**
You deserve to decide what happens with your body and to make decisions for your baby.
- QUALITY OF CARE**
You deserve the highest-quality health care.
- SUPPORT**
You deserve to receive support during pregnancy, labor and childbirth, as well as after childbirth.
- DIGNITY AND NONDISCRIMINATION**
You deserve to be treated with dignity and respect during pregnancy, labor and childbirth, as well as after childbirth – no matter what.

Search “SRJ” at [nyc.gov](https://www.nyc.gov)

SEXUAL AND REPRODUCTIVE HEALTH:

PROMOTING AND ASSURING ACCESS DURING A PANDEMIC

- Sex During COVID-19*
 - Sex Positive
 - Harm Reduction Approach
 - Safety and Consent
- Sexual and Reproductive Health Provider Directory**
 - Access to full spectrum of sexual and reproductive health services including contraception, condoms and abortion

*<https://www1.nyc.gov/assets/doh/downloads/pdf/imm/covid-sex-guidance.pdf>

**<https://www1.nyc.gov/site/doh/covid/covid-19-businesses-and-facilities.page>

(listed separately by borough)

NYC NURSE- FAMILY PARTNERSHIP (NYC NFP)



- Evidence-based nurse home visiting program proven over 40+ years to improve the lives of low-income first-time parents. NFP nurses support clients to:
 - Have healthy pregnancies and healthy babies
 - Become knowledgeable and nurturing parents
 - Reach education and employment goals
 - Provide their children with the best possible start in life
- NFP nurses are conducting visits using telehealth during the COVID-19 emergency

NYC NURSE- FAMILY PARTNERSHIP (NYC NFP):

HOW TO REFER



- Referral Criteria:
 - Low-income first-time parent
 - Must enroll before 29 weeks gestation
 - Lives in NYC
- Three teams work specifically with teens in foster care, and women and teens in shelters or who are involved with the criminal justice system
- Call 311 or send referral to nycnfp@health.nyc.gov

INTIMATE PARTNER VIOLENCE (IPV)

- Intimate Partner Violence (IPV) is real or threatened aggression committed by a current or former partner
- Multiple forms
 - **Verbal abuse** including name-calling and insulting or humiliating someone
 - **Coercive behaviors** to threaten, monitor, or control
 - **Physical violence** including hitting, slapping, shoving, choking, kicking, shaking, or otherwise physically harming someone
 - **During COVID-19 pandemic**, intentional exposure of a partner to the virus, obstructing access to care, and control over child custody*
- Occurs across different life stages and delivers lasting, accumulating negative health impacts; in extreme cases premature death results

INTIMATE PARTNER VIOLENCE (IPV)

- Heavy health toll, particularly on women of color
- COVID-19 challenges include grief, economic struggle, and mounting physical and mental health concerns
- These challenges are exacerbated for New Yorkers who are confined to homes where intimate partner violence already existed or where ignited by COVID-19
- People who are oppressed or marginalized face elevated risk of IPV – e.g., sexual minorities, immigrants, and women of color

INTIMATE PARTNER VIOLENCE (IPV)

NYC IPV SERVICES



- Information and resources for people experiencing dating, domestic, gender-based, or family violence, including elder abuse
 - Visit www.nyc.gov/NYCHOPE
 - 24/7 Domestic Violence Hotline at 1-800-621-HOPE (1-800-621-4673) or TTY 1-866-604-5350
- Mayor's Office to End Domestic and Gender-based Violence
 - Normally operates out of City's Family Justice Centers but while buildings are temporarily closed due to the COVID-19 outbreak services and support for survivors are available by phone
 - Refer to the website for more information
 - <https://www1.nyc.gov/site/ocdv/get-help/covid-19-update.page>
 - Call volume is high; callers may have to await a returned call
- NYC Resources for Emotional Support or Mental Health Services
 - NYC WELL (24 hrs/day, 7 days/week, 365 days/year)
 - Phone: 1-888-NYC-WELL (1-888-692-9355) or Text "WELL" to 65173

THANK YOU!



RESOURCES ON COVID-19

NYC Health Department:

- Provider page: on.nyc.gov/covid19provider
- Data page: on.nyc.gov/covid19data
- Weekly webinars: Fridays, 2 PM (sign up on provider page)
- Dear Colleague COVID-19 newsletters (sign up for *City Health Information* subscription at: nyc.gov/health/register)
- NYC Health Alert Network (sign up at <https://www1.nyc.gov/site/doh/providers/resources/health-alert-network.page>)
- Provider Access Line: **866-692-3641**

Other sources:

- CDC: <https://www.cdc.gov/coronavirus/2019-ncov/index.html>
- Vital Strategies/Resolve to Save Lives: <https://www.vitalstrategies.org/covid>
- ASTHO: <https://www.astho.org/COVID-19>
- NACCHO: <https://www.naccho.org/programs/our-covid-19-response>

QUESTIONS?
