COVID-19 Continues to Endanger the Health of New York’s Children

As New York grapples with the devastating and far-reaching impacts of the COVID-19 pandemic, Children’s Defense Fund – New York (CDF-NY) is deeply alarmed by our State’s burden of multisystem inflammatory syndrome in children (MIS-C). A potentially fatal pediatric inflammatory disease linked to COVID-19, MIS-C can occur in children and youth of all ages and shares certain symptoms with Kawasaki disease and toxic shock syndrome, including body inflammation, rash, persistent high fever, upset stomach and cardiac dysfunction.¹ MIS-C cases have been identified in 37 states since early March, with 342 cases and six deaths reported to the Centers for Disease Control and Prevention (CDC) since mid-May.² New York State has borne approximately 70 percent of the national burden of MIS-C cases, thus far reporting nearly 240 MIS-C cases statewide and two deaths. 95 percent of young New Yorkers with MIS-C have tested positive for COVID-19.³

New York’s Black and Hispanic children and youth are being most affected by MIS-C

Mirroring the disparate impacts of the novel coronavirus on minorities nationally as well as in our State, children and youth of color currently account for the majority of New York’s MIS-C cases. Black and African American children and youth, in particular, comprise nearly one-third of our State’s MIS-C cases,⁴ despite making up only about 19 percent of New Yorkers under the age of 21 (Figure 1).⁵ White children and youth, in contrast, comprise two-thirds of New Yorkers under the age of 21⁶ yet only account for 21 percent of our State’s MIS-C cases.⁷

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⁴ New York State Department of Health, “Childhood Inflammatory Disease Related to COVID-19.”
⁶ United States Census Bureau, “Annual State Resident Population Estimates for 6 Race Groups (5 Race Alone Groups and Two or More Races) by Age, Sex and Hispanic Origin: April 1, 2010 to July 1, 2019.”
⁷ New York State Department of Health, “Childhood Inflammatory Disease Related to COVID-19.”
In New York City, the epicenter of COVID-19 in our State, comparable racial and ethnic disparities are accompanied by geographic ones – nearly two-thirds of the City’s MIS-C cases have occurred in the Bronx and Brooklyn, boroughs that are home to large numbers of minority residents (Figure 2). These trends clearly do not exist in a vacuum. The health and wellbeing of our State’s Black and Hispanic children is closely linked to that of their families, who have disproportionately suffered coronavirus-fueled mortality, morbidity, unemployment, loss of health insurance and food insecurity. Black and Hispanic children in New York are also more likely than White children to live in substandard housing and polluted communities, increasing their risk of childhood lead poisoning and other environmental diseases that render them susceptible to COVID-19 complications. A lack of information on both the virus’ long-term impacts and the effects of repeated COVID-19 exposure on young immune systems only amplify our concerns.

CDF-NY recognizes that the racial and geographic disparities present in COVID-19 and MIS-C reflect the deep-rooted inequities and systemic racism that have long plagued our Nation and our State, and must therefore be addressed through system-wide changes. However, immediate action must be taken to protect New York’s most vulnerable children and youth as our counties and schools reopen and as an alarming number of states see surges in their coronavirus cases.

Addressing the disproportionate impact of MIS-C on New York’s Black and Hispanic children and youth is more critical than ever before. Priorities include:

- Distributing face masks, New York State Clean hand sanitizer and antibacterial hand soap to all New Yorkers, and particularly to families unable to afford these products
- Prioritizing COVID-19 testing for Black and Hispanic children and youth statewide displaying MIS-C symptoms
- Continuing to release citywide and statewide data on the racial and ethnic breakdown of children and youth contracting COVID-19 and MIS-C in a timely manner
- Utilizing community food pick-up locations and COVID-19 testing sites as hubs for dissemination of information about MIS-C symptoms
- Ensuring that children and youth obtain well-child visits and scheduled vaccinations when possible to maintain their overall health through such efforts as statewide adoption of mobile vaccine vans and drive-through vaccine clinics

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