

## HOOKS INSTITUTE POLICY PAPERS

# Race in the Time of COVID-19

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The Benjamin L. Hooks  
Institute for Social Change

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Professor, Department of Social Work, The University of Memphis

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Associate Director, Benjamin L. Hooks Institute for Social Change, The University of Memphis

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Executive Director, Benjamin L. Hooks Institute for Social Change, The University of Memphis



# FOREWORD

As the world confronted the pandemic unleashed by COVID-19, new language emerged. “Social distance” transformed from Georg Simmel’s concept referring to social relationships between racial, gender, and economic groups to the 6-foot physical distance vital for stopping the virus spread. Concepts like “isolation” and “quarantine” took on new meaning. People grew comfortable with medical terms like “asymptomatic” or “incubation period.”

Yet, even as we faced an unprecedented and deadly global test, tragically familiar and stubbornly persistent disparities were amplified by the encounter with the pandemic. Alongside the new vocabulary, familiar concepts reasserted their relevance in phrases like “racial inequality,” “housing insecurity,” and “health disparities.” While these societal failures have always demanded action, the crucible of the pandemic has even more directly made them matters of life and death.

The COVID-19 pandemic has affected everyone, but it has certainly not affected everyone equally. Preexisting conditions in our nation’s communities have ensured that those already most vulnerable to depressed economic, educational, and health conditions were impacted the most. In the healthcare field, “social determinants of health” has emerged in recent years as a powerful way of connecting disparities in health to social inequities that exacerbate those disparities. In Memphis and Shelby County, as elsewhere, the roots of the unequal impact of COVID-19 can be found in inequalities that long predate the outbreak of the disease. Our community’s social determinants of health have amplified the effects of the pandemic on our most vulnerable neighbors.

This issue of the Hooks Institute Policy Papers addresses the varied ways COVID-19 has magnified and worsened racial and socioeconomic disparities in Shelby County and other communities. Beginning with housing, educational, and employment effects, and concluding with health disparities and the impact of COVID-19 mortality disparities on the preservation of wealth, each writer connects preexisting social circumstances to the travails of the pandemic. Offering a wide range of expertise, the papers recommend short-term interventions to the acute crises brought on by the pandemic and long-term preventative changes to address the underlying social deficiencies.

In “COVID-19 and Evictions in Memphis,” Andrew Guthrie, Courtnee Melton-Fant, and Katherine Lambert-Pennington provide staggering spatial representations of social marginalization and economic vulnerability in Shelby County, focusing on susceptibility to evictions. They note the ways in which the pandemic amplified housing insecurity but observe that the pandemic did not create that crisis; rather, it merely pushed those already struggling over the edge. They further note that with the removal of pandemic-related protections, evictions are likely to increase the deterioration of circumstances for the county’s most economically vulnerable, a group made up disproportionately of African Americans.

In “Race & COVID-19: Illuminating Inequities in Education,” Cardell Orrin and Kelsey Jirikils highlight how the pandemic more clearly revealed the vast disparities in resources available to students throughout Shelby County. Of note, as school moved to virtual learning, disparities in access to technology ensured that some students would have difficulty in even accessing education at all. Further, despite increased needs due to the social isolation and trauma of the pandemic, students were unable to access mental health services that would have strengthened their ability to get the most out of schooling.

Elena Delavega and Gregory M. Blumenthal build on these themes in “COVID-19 and Work: Employment Disparities Magnified,” where they quantify the ways in which the pandemic’s work disruptions fell most harshly on the most vulnerable, again, a group made up disproportionately of racial and ethnic minorities. The pandemic



exposed a divide in who could work from home (and thus maintain employment, health care, and oversee children in virtual school) and who could not. The authors critique the fact that workers deemed “essential” in terms of providing services for the more privileged were not provided protections and salaries consistent with such “essential” status.

In “The Power of Will - And Its Limits,” Daniel Kiel provides a slightly different perspective by examining the emergency policy responses to the pandemic’s most urgent social needs. A moratorium on evictions, free provision of technology for students, and expanded unemployment benefits were not new ideas when the pandemic arrived, but it took the shocks of COVID-19 to make them viable policy options. To Kiel, this demonstrated that solutions to longstanding social problems are possible, but only where there is sufficient public will and need, something that will be difficult to maintain as the pandemic subsides, but that is no less urgent.

Turning more directly to the health impacts of COVID-19, Albert Mosley discusses the social determinants of health in the age of the pandemic in “Through a Glass Darkly: Musings on the Harsh Realities of COVID-19.” Highlighting racial disparities in hospitalizations, mortalities, and vaccination rates, Mosley laments that such distressing statistics were entirely predictable given this community’s history with systemic racism which has perpetuated economic and educational disparities. In addition to baring shortcomings within the healthcare system, COVID-19 provided a harsh mirror to the broader community on the topic of providing wellness, the most basic of human needs.

Finally, in “Life After Death: COVID-19’s Impact on the Wealth of African American Families,” Daphene McFerren describes the deterioration of wealth that results when individuals pass away without a will or proper direction as to how to distribute their estate, a problem made tragically more vital during the pandemic. Urging more attention to estate planning in the African American community, McFerren pushes for greater access to legal resources and a shift in community attitudes in order to stop the massive racial gap in net worth from growing even larger due to a loss of intergenerational wealth.

Cumulatively, these papers examine the ways in which the COVID-19 pandemic augmented some of society’s most obstinate problems and each display how these problems are interconnected. While the pandemic has brought much suffering and further social division, it has also provided an undeniable perspective on the urgency of these lingering social problems. The recommendations here provide a starting point for meaningful discussions and effective treatment.

**Daphene McFerren, JD**

Executive Director, Benjamin L. Hooks Institute for Social Change  
The University of Memphis

**Elena Delavega, PhD**

Professor, Department of Social Work  
The University of Memphis

**Daniel Kiel, JD**

Associate Director, Benjamin L. Hooks Institute for Social Change  
FedEx Professor of Law, Cecil C. Humphreys School of Law  
The University of Memphis

Editors

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# COVID-19 AND EVICTIONS IN MEMPHIS

## **Andrew Guthrie, PhD**

Assistant Professor, City and Regional Planning  
The University of Memphis

## **Courtnee Melton-Fant, PhD**

Assistant Professor, Division of Health Systems Management  
The University of Memphis

## **Katherine Lambert-Pennington, PhD**

Associate Professor, Department of Anthropology  
The University of Memphis

### **Introduction**

The COVID-19 pandemic has exacerbated existing racial inequalities in employment, financial security, and health access, and the economic repercussions have been disproportionately shouldered by women (Jin et al. 2021). Nationally and locally, Black, Latinx, and Asian people have higher rates of COVID-19 morbidity and mortality compared to White people (Lopez, Hart, & Katz, 2021). Structural racism – the intersecting and reinforcing policies, systems, and institutions that create advantages and disadvantages based on race (Bailey & Moon, 2020) - have resulted in racial disparities. Nowhere is this more evident than in the housing sector. The pandemic amplified housing insecurity, as millions of people lost income, jobs and dealt with COVID related health challenges and deaths.

Housing insecurity, lack of access to safe, affordable, and stable housing, disproportionately impacts communities of color. Black and Latino families have lower rates of homeownership, live in more segregated neighborhoods, pay more for housing, and have been at greater risk of foreclosure than White homeowners. Further, Black and Latinx households are more likely to be renters than White households; they also face evictions at a much higher rate (Greenberg et al., 2016). Given income and job loss, Benfer et al. (2020) estimate that 30-40 million renters are at risk of eviction. To help mitigate this risk and stem the likelihood of COVID transmission (Nande et al., 2021; Jowers et al., 2021), the federal government imposed a national moratorium on evictions recommended by the Center for Disease Control (CDC) and provided \$25 billion dollars to states and local governments to fund emergency rental assistance.

Research has shown that the national moratorium on eviction hearings and decisions was effective in slowing evictions and allowed households to use financial resources to meet immediate needs (An et al., 2021). However, as the economy slowly recovers, and enhanced federal unemployment benefits end, the long-term impact of the pandemic on housing security is likely to be devastating. While data is not fully available, two key indicators of housing affordability- income and the proportion of income to rent cost, often referred to as cost-burden- serve as important determinants of a household's risk for eviction. Additionally, racial disparities in housing security and employment in essential worker roles, and vulnerability to COVID-related job loss are crucial to understanding what policy steps would be most effective to address the impending housing crisis in Memphis. Manifestations of structural racism that are particularly relevant for Memphis include racial residential segregation, the proliferation of



housing insecurity in Black neighborhoods, and the overrepresentation of Black and Latinx workers in the service industry.

### Early Indications of Pandemic Effects

With one of the highest rates in the nation, evictions in Memphis have been an acute problem for years. Despite a state eviction moratorium in the spring and summer of 2020 and the CDC order, which was extended until October 3, 2021, eviction filings in Memphis have continued. Over eighteen thousand evictions have been filed since the start of the pandemic and are continuing at a rate of between 200 and 300 per week (Princeton University, 2021).

Systematic analysis of the effects of COVID-19 on the housing sector is complicated by the ongoing, dynamic nature of the pandemic and the 1- to 2-year time lag in availability of most sources of social data at the fine geographic scales needed to fully understand the social and spatial dynamics at play in Memphis. In particular, the lack of unemployment data at less than county scale obscures a crucial link in the chain of events most likely to lead to an eviction as a result of COVID: pandemic-related job loss leading to an inability to make rent. In the interest of providing as much timely information to policymakers and the public as possible, proxy measures—such as residential locations of workers in sectors especially likely to experience job loss—can approximate unavailable data.

### Data

The table below shows specific measures of COVID’s implications for housing in Memphis, as well as definitions of each measure and data sources. These measures consider vulnerability to eviction directly via pre-pandemic housing unaffordability and susceptibility to job loss as well as in a context of structural inequality and historic marginalization.

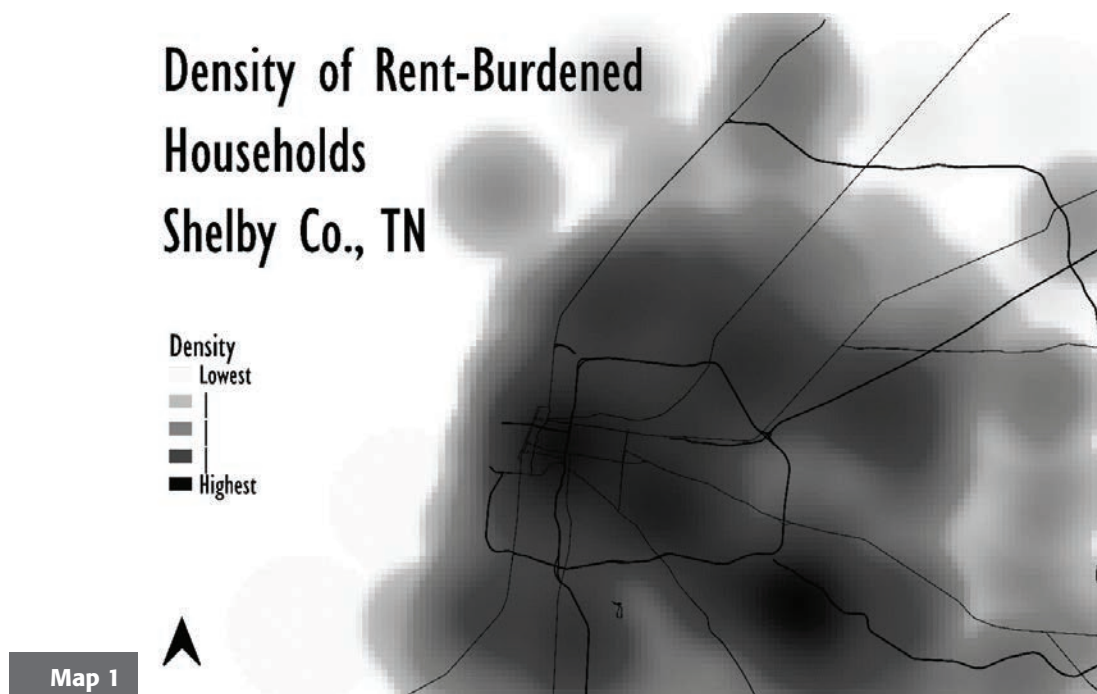
Measure	Description	Source
Rent-Burdened Households	% of households paying >30% of monthly income in rent	American Community Survey (2015-2019)
Black Residents	% of population who self-ID as “Black or African American”.	American Community Survey (2015-2019)
Service Workers	Number of workers in the Retail Trade, Accommodation and Food Service and Arts, Entertainment and Recreation sectors	Longitudinal Employer and Household Dynamics (LEHD) Database (2018)
Evictions	Number of legal evictions recorded by the county. Expressed both as a count and as the ratio of evictions to rental households	Shelby County Housing Court (via Innovate Memphis); American Community Survey

### Geospatial Analysis

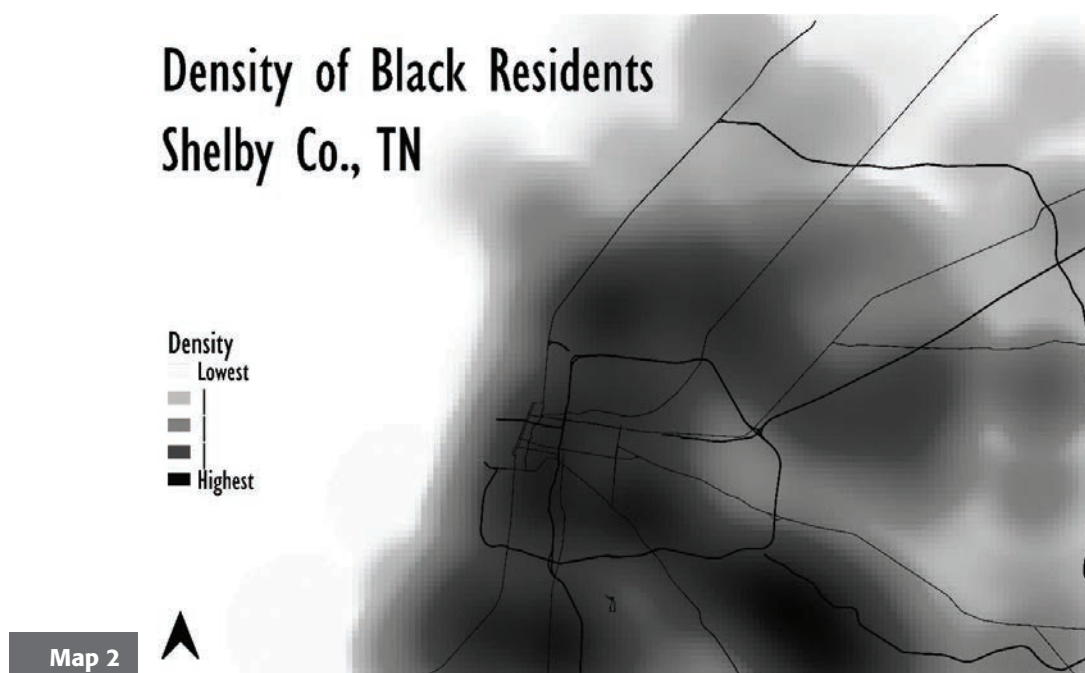
Although this data is preliminary, strong spatial relationships exist in Memphis between key measures of social marginalization and economic vulnerability and the prevalence of evictions in 2020. The following four maps show these measures as densities. Density maps allow us to explore where in the city the greatest numbers of people experience eviction, housing insecurity and other social factors which increase vulnerability to both. For each map, we select a social condition to explore—i.e. paying more than 30% of one’s household income in rent, being a service worker before the pandemic or being evicted—count the number of times that condition occurs within a quarter-mile grid, and use a heat-map algorithm to smooth the result into continuous gradients based on surrounding squares’ values. All five maps use a quintile scale, with the darkest gray squares showing areas in the



80<sup>th</sup> percentile or above, next darkest the 60<sup>th</sup>-80<sup>th</sup> percentile, etc. This mapping approach allows us to see patterns of social disparities from one neighborhood to another while also focusing on neighborhoods with relatively the most intense housing injustices.



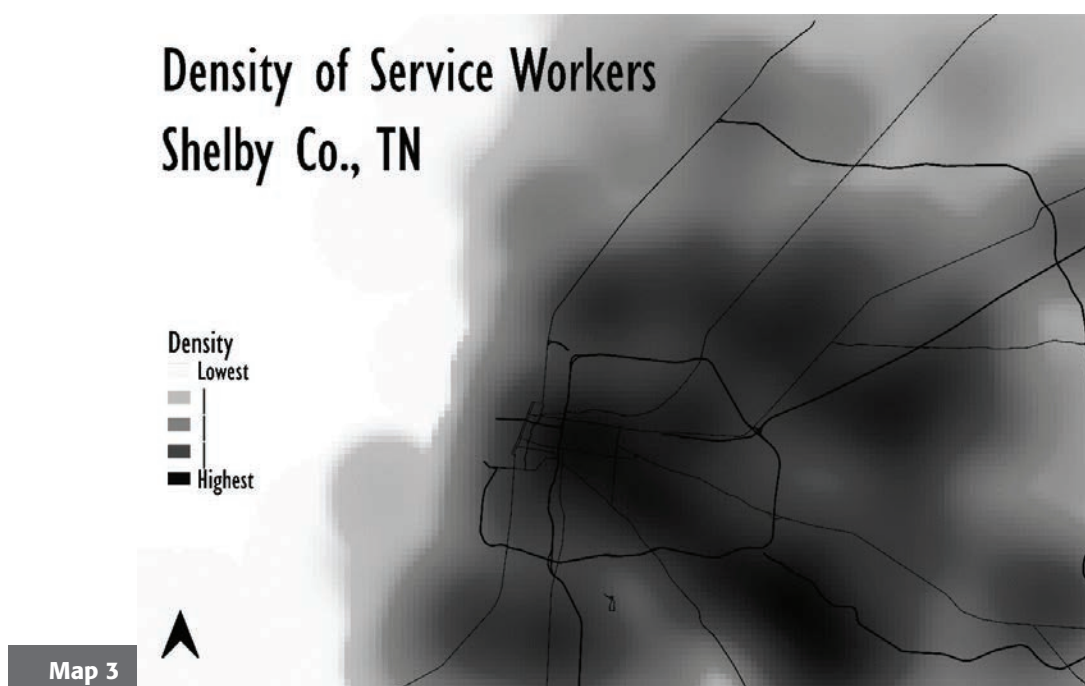
The first map shows concentration of rent-burdened households, defined as renter households that pay more than 30% of their monthly income in rent. Though some degree of rent burden is common throughout the region, the greatest concentrations are within and just north of the Interstate 40-240 loop as well as in the angle between Poplar and Lamar Avenues. Note that this map shows spatial patterns of rent burden from *before the pandemic began* and does not account for any increases in rates of rent burden due to job loss.





The second map (page 6) shows concentrations of Black residents. Memphis is a racially segregated city, as can be seen by how tightly concentrated the Black population is, compared even with the rent-burdened population. (i.e., Memphis is still a highly spatially segregated city, with the vulnerabilities of rent burden and service-industry employment compounded by historic disinvestment and structural racism). Note, however, that concentrations of Black residents do follow the most intense concentrations of rent burdened households quite closely.

The third map (below) shows concentrations of where workers in the retail, sales, hospitality, food service and entertainment industries lived before the pandemic. County-level data indicate workers in these sectors were disproportionately likely to have suffered job loss. Note again the general similarity with the preceding maps, with the degree of concentration falling between Black residents and rent-burdened households. In particular, the spatial relationship between workers likely to have lost jobs and households already facing unaffordable rents beforehand shows the susceptibility of their neighborhoods to an economic and health shock like COVID.



The final two maps (page 8) show concentrations of evictions, both in absolute terms (for consistency with the preceding maps) and weighted by the number of renter households in each census block group (for consistency with standard measures in the housing field). Eviction densities do not show all the housing precarity or injustice in a neighborhood, but they do represent a rapidly-available, geographically precise measure of *extreme* housing injustice due to legal filing requirements. Though the scale of the (upper) absolute map is somewhat dominated by a single, intense cluster of evictions to the southwest, the overall spatial pattern is both stark and by this point familiar, tracking those of Black residents and service workers especially closely. The most intense areas of the (lower) weighted eviction density map show a largely similar shape to those of the absolute map, but do not stand out as strongly from their surroundings, likely due to smaller numbers of renter households in wealthier and/or suburban areas. It is important to note, however, that this final map shows evictions are a problem county-wide and may only appear not to be in outlying areas due to lower densities of renters.



## Density of Evictions (Unweighted) Shelby Co., TN

Density  
Lowest  
Highest

Map 4



## Density of Evictions Weighted by Renter Households Shelby Co., TN

Density  
Lowest  
Highest

Map 5



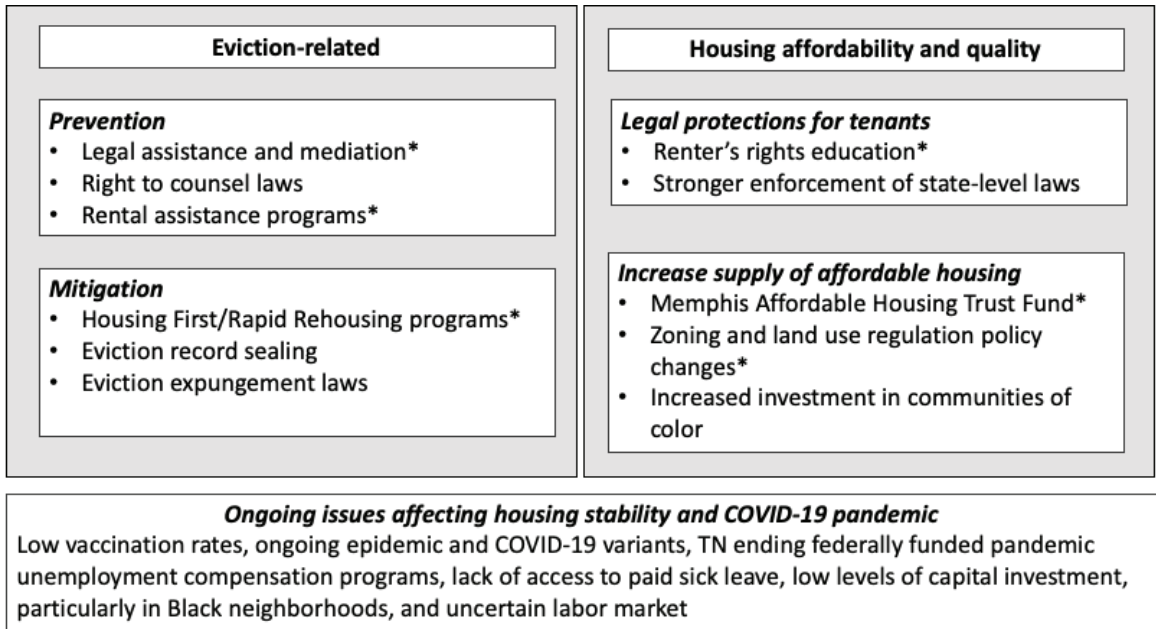
We can see from these maps that the highest rates of evictions in Shelby County have a strong spatial relationship to long-standing patterns of structural inequality—particularly in the case of the unweighted map. However, the weighted map shows us that evictions are a problem throughout Shelby County *in the context of an individual renter household's likelihood of being evicted*, though it is crucial to note that patterns of structural inequality still appear in the weighted map, even accounting for inter-neighborhood differences in numbers of renters. In other words, though a robust policy response is required throughout the county, special focus must be placed on neighborhoods affected by structural racial and economic inequality. Finally, the close spatial correspondence between eviction rates and pre-COVID rent burden shows that evictions are both an acute problem and a chronic one: the pandemic did not create a crisis where there was none before; in large part it seems to have pushed



households who were already struggling over the edge. Understanding this does not change the need for rapid, emergency assistance to Memphians facing eviction, but it does also call for a longer-term policy response to ongoing issues of housing unaffordability and insecure tenure.

The COVID-19 pandemic exacerbated the existing housing crisis in Memphis, but the full effect of housing insecurity on eviction rates and neighborhood stability have yet to be fully revealed. The ongoing housing crisis in Memphis and the COVID-19 pandemic require multifaceted policy solutions that not only respond to immediate needs but also address the larger housing affordability issues in the city. While policy interventions are needed at all levels of government, we focus our recommendations on state and local level policies that are most relevant to the Memphis context. As shown in Figure 1, Memphis is already implementing eviction prevention and mitigation policies and working to increase housing stability.

**Figure 1. Policy levers for improving housing stability**



*\* Denotes policies and programs that are currently being utilized in Memphis*

### Recommendations

- Increase outreach and education about the Emergency Rental Assistance Program (ERA)**  
 The Emergency Rental Assistance Program (ERA), funded through the CARES Act and administered in Memphis by United Housing, provides eviction settlement funds to households who have suffered a financial loss due to COVID-19 and live on less than 80% of their county’s median income. A total of 1,320 Shelby County residents received rental assistance in June. Though data are only available at the state level, the Census Bureau’s most recent Household Pulse Survey estimates 84,447 Tennessee households fear being evicted in the next two months. Proportional to population, Shelby County’s share of that total would be 11,593—over ten times the number currently being helped—even ignoring our high rates of poverty and structural inequality. Though funding is available to help significantly more households, difficulties in applying and obtaining cooperation from landlords have reduced numbers served.
  - Providing additional community outreach and education about the program and direct assistance in applying as well as encouraging landlords to participate as strongly as permitted by law are important steps to ensure Memphians who could be helped are not needlessly evicted.
  - In addition, though CARES Act funds are limited to renters making less than 80% of the Area Median Income (AMI), roughly 15% of households earning 81-100% AMI in Shelby County make

more than that, but not enough to afford a median rental cost (National Low Income Housing Coalition, 2021). These households may face additional risk of eviction due to the “benefit cliff” coming at an income low enough to still render most housing unaffordable. Other options should be explored for providing assistance to households facing eviction who fall outside CARES Act eligibility requirements, as a means of funding unmet needs while, crucially, holding those renter households most in need harmless.

- ***Provide sustainable infrastructure and funding for the Eviction Settlement Program (ESP)***

The ESP is currently being funded with federal CARES Act dollars to provide tenants with legal assistance and mediation when they are behind on their rent. This program relies on volunteer attorneys and mediators and could provide more assistance to tenants if they had more resources. The services provided by the ESP are critical for preventing evictions and preserving affordable housing (Benfer et al, 2020, Sabbeth 2018).

- ***Enact laws at the state and local level to prevent evictions and lessen the negative downstream effects***

- Tenants who are represented by attorneys are less likely to be evicted (Sabbeth, 2018), but Tennesseans do not have a right to counsel in eviction cases because eviction proceedings are civil actions, not criminal matters. Right to counsel laws can ensure that tenants have representation during eviction proceedings.
- Having an eviction or eviction filing on one’s record makes it more difficult to find housing because many landlords do not want to rent to them. Eviction record sealing and eviction expungement laws can improve tenants’ access to housing following an eviction or eviction filing (Fleurant, 2020).

- ***Increase investment in historically underserved communities that were disproportionately affected by both COVID-19 and housing instability***

Memphis needs an estimated 30,000 affordable housing units (Innovate Memphis, 2020) and is using multiple levers to address this gap including the establishment of the Memphis Affordable Housing Trust Fund (MAHTF) and the Memphis 3.0 Plan to guide investment and land use regulation in the creation of healthy affordable communities. However:

- The MAHTF is underfunded compared to peer cities and funding for 2021 was not included in the budget because of COVID-19 (BLDG Memphis, 2020).
- Memphis has comparatively low capital investment that is segregated by race and poverty (Theodos et al, 2021). The Memphis 3.0 plan is the city’s comprehensive approach to equitably develop and invest in the city. Time will tell if the plan will be able to overcome historical and longstanding patterns of disinvestment and policy that have contributed to the current housing crisis.

- ***Stronger enforcement of existing laws***

In addition to affordability issues, many Memphians live in substandard housing conditions that are harmful to their health. Like many other states, Tennessee has laws requiring landlords to maintain their properties and provide habitable conditions for tenants. Yet, these laws are not always enforced, and tenants may not be aware of these laws (Sabbeth, 2018). Enforcing these laws is necessary for increasing the supply of affordable, healthy housing and keeping tenants in their homes.

- ***Increase vaccination access and uptake in structurally vulnerable communities***

Recent research has shown that neighborhoods with higher eviction filing rates have lower vaccination rates indicating that the higher risk of evictions and of contracting and passing COVID-19 are spatially concentrated. Place-based interventions, tailored to the specific concerns and desires of these communities, are needed.





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# RACE & COVID-19: ILLUMINATING INEQUITIES IN EDUCATION IN SHELBY COUNTY, TENNESSEE SCHOOLS

**Cardell Orrin, BSE**

Executive Director  
Stand for Children Tennessee

**Kelsey Jirikils BS**

Educator  
Freedom Preparatory Academy

During a planning period in 2019, I heard school administrators discussing a 7th grader who was exhibiting early signs of a seizure. With no nurse or medical professional, the principal subbed for algebra while the algebra teacher, who fortunately happened to have EMT training, monitored the student. Luckily, the student was fine, but this experience highlighted a glaring issue: our school wasn't equipped to give students the care they needed.

One of the authors worked at a Title 1 School in Memphis whose student population consisted of over 90% students of color and over 90% low-income students. From school segregation through the 1960s, to White flight in the 1970s, to district secession in 2014, racial disparities existed in Memphis long before COVID-19 (Kiel, 2008). However, the pandemic highlighted that many of the issues in Memphis schools that disproportionately affect students of color can be solved when people in positions of power decide to prioritize them.

Access to technology was an issue in Memphis before the pandemic. In 2019, all six of the municipal districts, which primarily served White students, had either fully implemented or were in the process of implementing a 1:1 initiative (1 device for every student) (Pignolet, 2019). Shelby County Schools (SCS), which primarily serves students of color, lagged behind. While Superintendent Ray proposed a 1:1 initiative soon after he became superintendent, there was not enough support for the proposal to pass with the required funding. As of the fall of 2019, the district had settled on piloting a 1:1 initiative in only nine high schools and making plans to phase the initiative to other schools over six years (Pignolet, 2019). Compared to their White peers, students in SCS were years behind in having access to technology and in learning critical computer skills that would prepare them for post-secondary success.

The pandemic pushed SCS to accelerate their timeline and pushed us as a community to reconsider what was possible. By August of 2020, SCS brokered deals with HP and Microsoft to secure tablets and laptops for Pre-K through 12th graders. These deals were made possible through an influx of money from the CARES Act and other federal funds, the City of Memphis, and other revenue streams identified by Superintendent Joris Ray's administration (Jaglois, 2020). Of particular note is the five million dollars invested by the City of Memphis. The City relinquished responsibility for funding education in the 2014 fiscal year when their court-ordered mandate was removed with the historic merger of Memphis City Schools and Shelby County Schools (Powell, 2021). While suburban municipalities have significantly increased their direct contributions to education, Memphis is now the only city in Shelby County that does not contribute to K-12 education (Powell, 2021). COVID didn't create the funding disparity between Memphis and other municipalities; rather, COVID showed us that disparity is a choice. COVID showed us that if the city to invest in public education, then the city can make it happen.



Furthermore, COVID highlighted that education is a community issue. Prior to COVID, teachers were an easy scapegoat for all things wrong in education. COVID showed us that, even if a teacher was doing everything right, if the student and their family didn't have access to stable housing, food, health care, affordable childcare, and a livable income, we can't expect learning to happen at its highest level. Due to historic inequities, many low-income families and families of color felt the brunt of the economic downturn and were thus faced with unemployment and housing insecurity (Mitropoulos, 2021). This may have caused some students to start taking on adult responsibilities such as entering the workforce to provide for their families or caring for younger siblings in near fulltime capacities (Mitropoulos, 2021). On top of this, many were dealing with pandemic-related isolation and grief without the support of mental health care. These factors manifested in a substantial rise in chronic absence during the pandemic, particularly for students of color (Mitropoulos, 2021).

It is naive for us to think that a student can come to school and be fully successful while dealing with food insecurity, or working for 20+ hours a week out of necessity, or watching their parents stress about finding work and affordable housing. If we care about the children in our community getting a quality education, then we need to create conditions that ensure each student can be physically and mentally present to receive an education. That means making housing security a priority, making childcare affordable, making sure single parents can support their families without children needing to work to make household ends meet. COVID showed us, in an intensified state, that when we ignore the interconnectedness of these issues, we do a disservice to children, families, and our community's future. The COVID pandemic has also shown us that when we put our collective commitment and resources (local, state, and federal) towards addressing challenging situations, we can identify solutions and put them in place.

The pandemic has laid bare that as a society, we have been failing to support the holistic needs of our students, especially those from economically disadvantaged backgrounds and students of color. In the classroom, we were allowing young people with the greatest needs to fall behind their peers in access to technology, mental health supports, and resources to support their academic achievement. Outside the classroom, we were failing to establish systems to support their families with access to housing, food, and extended financial resources. COVID didn't cause these issues, but the pandemic has made them more apparent. During this pandemic, we have identified resources to support student education, mental health, housing, food access, and financial payments for families. It has been made readily clear that if we want to effect change, we can make that happen and the only thing stopping us is the will and courage.

### **Recommendations**

The pandemic has laid bare that as a society, we have been failing to support the holistic needs of our students, especially those from economically disadvantaged backgrounds and students of color. While ambitious and requiring national and local support, the following policy recommendations would alleviate the crisis children and families face:

- A guaranteed minimum income for poor families which would help address housing and food insecurities;
- Universal health care for children and adults;
- Increase equitable funding to schools with the purpose of improving compensation to attract and retain more highly qualified educators and support staff within schools, along with resources targeted to literacy, social-emotional supports, and high school success.
- Expand community schools that identify needs and connect students and their families to the resources and opportunities that will support them to thrive in education and life. This includes the recognition that these are not just school and district responsibilities and should involve investments and resources from local, state, and federal governments and agencies.
- Permanent funding to bridge the ongoing digital divide for under-resourced families that will continue in the future even after the end of the COVID-19 pandemic.





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# COVID-19 AND WORK: EMPLOYMENT DISPARITIES MAGNIFIED

**Elena Delavega, PhD, MSW**

Professor, School of Social Work  
The University of Memphis

**Gregory M. Blumenthal, PhD**

Principal, GMBS Consulting  
Memphis, Tennessee

## Introduction

COVID-19, the disease caused by the novel coronavirus that emerged at the end of 2019 resulted in the closures of businesses and workplaces, causing enormous disruptions to work and to the economy, (Rothan & Byrareddy, 2020; Sorhabi et al., 2020), particularly to the most vulnerable in society including minorities, who often bear the brunt of poverty and exclusionary policies (Reeves & Rothwell, 2020; Weible et al., 2020; Wright & Merritt, 2020). Racial minorities experienced the worst of the pandemic early on (CDC, 2020). COVID-19 was a great game changer, but in many ways it was not. Existing disparities were only magnified.

## COVID-19 and Employment/Unemployment

The pandemic did not affect everyone equally. Existing problems brought by social policies that advantage certain groups while excluding others were magnified by the pandemic (Long et al., 2020). Income inequality is associated with worse outcomes from the pandemic, but income inequality was not brought on by the pandemic; it is a preexisting condition (Graham, 2021).

### *Privileged Workers: Working from Home*

Those workers who were able to work from home digitally were able to retain their incomes, health insurance, and housing (Long et al., 2020). People who were able to work from home were also impacted a lot less by school closures and lack of childcare, as they were able to stay home and watch their children (Gould & Shierholz, 2020)

### *Essential Workers*

People in the service and hospitality industries were affected in the worst ways (Long et al., 2020). People in the service industry, particularly those in the lowest strata and with low to no power did not have the opportunity to protect themselves by working from home, by practicing social distancing, or by having the necessary personal protective equipment (PPE) (Glover, et al., 2020; Miller, et al., 2020; Van Drie & Reeves, 2020). These workers were not only not able to avoid work and social distance, but they were additionally burdened by school and childcare center closures (Gould & Shierholz, 2020). African American are disproportionately affected by these burdens (Yancy, 2020).

Essential workers such as grocery and warehouse workers and truck drivers were called “essential” because they provided services that allowed people who were able to work from home and isolate to continue to receive what they needed to support life (US. DHS, 2020). However, essential workers were not essential in the sense that they should survive or receive adequate compensation or protections – essential workers are in fact expendable



workers. These workers have no choice because while the death rate from the virus may be between 2% and 10%, the death rate from starvation is 100%.

### ***Workers Who Lost Their Jobs***

Many people lost their jobs, particularly when restaurants closed and people cancelled vacations (Long, et al., 2020). People in precarious situations suffered the worst job losses, but others were furloughed, which meant they received no salary during the period (Graham, 2021). For a worker who depends on his or her salary for survival, the income loss was devastating. People who lost their jobs or were furloughed lost their healthcare also. (Graham, 2021).

Nationally, job losses between May 2019 and May 2020 were most acute on an absolute basis among restaurant, janitorial, and secretarial workers, and on a percentage basis among tourism, entertainment, and hairstyling workers. There were actually strong increases in employment among computer programmers (absolute increase) and telemarketers (percentage increase). (BLS, 2020a, 2021a) Note that the increases were among occupations with high work-from-home potential while the decreases were among occupations with required physical attendance.

## **Memphis Poverty and Job Distribution**

Minorities in Memphis tend to have the highest poverty rates and to be concentrated in service jobs that were most likely to either disappear due to the drop in demand or to require the worker to continue to expose himself/herself to the virus with no protection. In Shelby County, roughly 21% of Blacks and 26% of Hispanics work in service jobs, while only 13% of Whites do. (US. Census Bureau, 2020a, 2020b, 2020c). Roughly 23% of Whites and 23% of Blacks work in office jobs, while only 113% of Hispanics do. Roughly 5% of Whites and 6% of Blacks work in agricultural jobs, while 30% of Hispanics do. Roughly 50% of Whites work in managerial or professional jobs, while only 25% of Blacks and 15% of Hispanics do.

In the Memphis metropolitan area, job losses between May 2019 and May 2020 were most acute on an absolute basis among restaurant, janitorial, and secretarial workers, and on a percentage basis among agricultural workers. There were strong increases in employment among nonprofit social service workers and legal service workers. (BLS, 2020b, 2021b). As seen nationally, the increases were among occupations with high work-from-home potential while the decreases were among occupations with required physical attendance. As seen above, jobs which employ Blacks and Hispanics were disproportionately lost, while jobs which employ Whites were disproportionately gained.

## **The K-Shaped Recovery**

People in low wage jobs were hit hardest, and many of those jobs may not have recovered because workers moved to different jobs or different regions (Begley et al., 2021). In Tennessee, according to Opportunity Insights (2021), at the height of the pandemic crisis on April 17, 2020, the unemployment rate was for low-income workers minus 29.2%, for middle-income workers minus 15.6%, and for high income workers minus 7.2% what these had been in January 2020. The huge drops did not last long, however, and by June 30, 2020 things had stabilized somewhat, with the unemployment rate for low-income workers at minus 10.7%, for middle-income workers minus 4.9%, and for high income workers plus 0.9% January 2020 levels. The situation has not improved much for low-income workers since then. When compared to January 2020, on May 5, 2021, high-income workers had gained 13.1% in employment, middle-income workers had gained 3.0%, but low-income workers were still 10.1% below where they had been before the crisis, or roughly in the same situation as in June 2020.

The same is true in Shelby County, with the difference that both low-income and middle-income workers have had much difficulty recovering. During the worst moment of the pandemic crisis on April 17, 2020, the unemployment





rate was for low-income workers minus 23.2%, for middle-income workers minus 11.8%, and for high income workers minus 8.8% what these had been in January 2020 (Opportunity Insights, 2021) The huge drops did not last long, however, and by June 30, 2020 things had stabilized somewhat, with the unemployment rate for low-income workers at minus 9.5%, for middle-income workers minus 7.8%, and for high income workers plus 0.3% January 2020 levels. (Opportunity Insights, 2021). The situation has not improved much for low-income workers since then. When compared to January 2020, on May 5, 2021, high-income workers had gained 11.5% in employment, but middle-income workers were still 6.4% and low-income workers were still 10.1% below where they had been before the crisis, or roughly in the same situation as in June 2020 (Opportunity Insights, 2021)

## **Plantation System: Policy Choices and Implications**

### ***Tennessee Cutting Federal Benefits***

The state of Tennessee has refused extended unemployment benefits for workers affected due to the pandemic (Tennessee Office of the Governor, 2021). State officials explicitly stated that they feel that these unemployment benefits, none of which exceed or even meet poverty level, are considered to be larger than the income that workers have any right to expect (Sher & Flessner, 2021). To reiterate, the official position of the state of Tennessee is that workers have no right to be paid enough to avoid starvation for themselves and their families. The line between this and slavery is so thin as to be rendered meaningless.

### ***Exploitive System***

No one is exempt from economic shocks and labor market failures. COVID-19 threatened all people equally, but the effects of the pandemic were not felt equally by all. Those who had precarious jobs and no protections suffered the worst. (Graham, 2021). In addition to the exploitation suffered by vulnerable workers, the current system abuses small businesses to the benefit of megacorporations. It provides capital and trained, healthy employees to Wall Street at the expense of Main Street. Small Black businesses get strangled under this abusive system.

## **Recommendations**

### ***Support for Workers***

- Income - To pay a worker less than it costs to feed, clothe, and house the worker is abusive. Unfortunately, it is just one example of the abusonormativity (the normalization of abusive behavior) of American society. This must change. Workers are humans and merit a living wage.<sup>1</sup>
- Jobless benefits - When a worker, through no fault of their own, cannot obtain work for which they are qualified, they should be sustained and given the skills necessary to obtain work. Our failure to do so is another example of American abusonormativity.
- Universal healthcare - The difference between humanity and animals is that we do not leave our sick behind to die in the wilderness. Our failure to do so is yet another example of American abusonormativity. Universal healthcare is a necessity to maintain a productive society.
- Childcare - It is often said that the lives of our babies are of primary societal importance until they are born, at which point they become expendable. This is still another example of American abusonormativity. Parents should either be financially supported in raising their children themselves or with outside assistance.
- Internet - The means of participating in our government and, increasingly, the education of our children, are dependent upon access to the internet. Otherwise, we are applying a new poll tax and destroying public education by making these resources available only to those with excess resources. This is more American abusonormativity.



## Support for Small Business

Small businesses are the backbone of America, providing almost half of all private jobs, accounting for almost two-thirds (2/3) of all job growth, and representing over 40% of US GDP (US Census, 2018). These businesses have been among the hardest hit by the pandemic (Bartik et al., 2020). Over half of them had less than 2 weeks of cash on hand when the pandemic hit, and many experienced significant difficulties in obtaining CARES funding.

The answers to rebuild these businesses are obvious:

- Capital - If banks and other lenders cannot or will not provide capital under relaxed criteria and low interest rates, the government must step in as the lender of last resort. If the government is the lender, fair employment practices and living wages should be rigorously enforced.
- Training - Well-trained employees do not appear out of thin air. Small businesses rarely have the resources to train employees from the ground up. Our education system, in particular our community college system, must have the resources to undertake this training on a large scale and at minimal cost to the trainees and small businesses.
- Universal healthcare - Small businesses often lack the resources to provide quality health insurance to their employees. This results in expensive turnover and places small businesses at a competitive disadvantage against large private and public employers who can afford to negotiate better rates with insurers.

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# THE POWER OF WILL - AND ITS LIMITS

**Daniel Kiel, JD**

FedEx Professor of Law  
Cecil C. Humphreys School of Law  
The University of Memphis

Moments of crisis force a reexamination of priorities that has the power to open new possibilities. What had seemed a bad idea or not worth the effort in a moment of tranquility can become essential. Crises, such as the Great Depression or World War II, generate a will that had not existed and, when channeled toward common goals, that will can make the impossible possible.

As detailed in this volume, the COVID-19 pandemic has been a crisis that has amplified disparities that have long plagued our society. In health and schools, housing and the workforce, the pandemic further exposed the vulnerabilities keeping so many from reaching their potential or even from finding basic stability. These gaps have existed for years and have been tolerated as merely a cost of a system that delivered national prosperity, however unevenly spread. There had been no will to comprehensively address housing and employment instability, gaps in the infrastructure of technology or the delivery of health care. The pandemic made addressing some of these longstanding problems more imperative.

All of a sudden, an evicted family that needed to search for new housing in the midst of the pandemic became a potential spreader of the virus. In a wrecked and uncertain economy, a worker who'd lost their job faced the possibility of months without any income, with impacts felt within the most vulnerable families and in the economy at large. What to do about children who would be attending school virtually, but whose homes did not have reliable access to the internet? Before the pandemic, such lack of connectivity might have seemed merely an inconvenience, a barrier to effective communication or robust research; in the midst of the pandemic, it became a barrier to participating in school at all (Camera, 2020).

In response, many discovered a new will to strengthen the safety net for the most vulnerable in our midst. Policies that had seemed out of reach entered the realm of the possible due to the pandemic. Most notably, the federal government instituted a widespread moratorium on evictions (Ramsey Mason, 2020) and increased financial assistance to the unemployed (Alcala Kovalski & Sheiner, 2020). Other anti-poverty measures that had been fringe ideas, such as direct payments to individuals, families, and businesses (Edmonson, 2020) and forbearance of student loans (Rowan, 2021), became realities. Local governments, too, addressed needs exposed by the pandemic. Here in Memphis, the Shelby County government created relief funds for various categories of affected workers (Dries, 2021) and the Shelby County Schools worked to ensure wi-fi connectivity to students in need (Holguin, 2020). Having redefined the possible in the throes of the pandemic, policymakers have begun to consider how some of these measures can survive into the post-pandemic world, tightening the social safety net.

The power of more focused will was also evident in the response to the murder of George Floyd. The vulnerability of African Americans in encounters with law enforcement was certainly not a new or unknown phenomenon. However, activists protesting the dehumanizing, even lethal, treatment were often stymied in efforts to build support to enact more effective policies to reduce the number of such encounters and increase accountability when they did occur. Floyd's murder, along with contemporaneous killings of others, such as Breonna Taylor and Ahmaud Arbery, decreased the tolerance for inaction. Symbolically, there was a move from a world in which Colin Kaepernick was vilified for a solitary and silent protest during the national anthem in 2016 to a world in which





entire sports leagues were supporting players in declaring Black Lives Matter in 2020. On a policy level, ideas for criminal justice reform that had been moving glacially or had stalled, such as eliminating chokeholds (Kindy et al., 2020), reexamining immunity for police officers (Gipson, 2021), and reconsideration of police involvement in non-violent circumstances (Thompson, 2020), found more favorable reception within many levels of government.

The reforms made possible in the pandemic or in the wake of George Floyd's murder were neither perfect nor complete, but they revealed a shift in the universe of possible policy change to address the needs of the most vulnerable in our society. Introduced in a moment of crisis, they have revealed that the failure to consider such policies in more stable moments is due to a lack of collective will rather than to some inherent impossibility. The pandemic has revealed a new category of what is possible, if only we can muster the will to pursue it.

However, the pandemic has also revealed challenges to doing so. After all, will can be fleeting. As the focus of crisis dissolves, addressing the vulnerabilities it revealed can seem less imperative. Further, new enthusiasm for once-impossible policies can also have the effect of intensifying enthusiasm for opposition. Both of these limits on the power of will have emerged as the pandemic lingers.

While there has been talk of continuing many of the pandemic-related reforms, particularly those involving strengthening the safety net, those suggestions have been met primarily with concerns about costs. This presents a test as the urgency of the pandemic subsides. Having seen the benefits of a stronger safety net, will policymakers maintain the will to leave them in place? Or, absent a crisis at hand, will they be tempted to make cuts that shift the costs back onto vulnerable individuals and families? Similarly, translating the anger from the summer of 2020 into a sustainable effort to address criminal justice will require maintaining the will generated in a passionate moment through the tedium of policymaking.

Doing so becomes an even greater challenge because as an emergency pushes the bounds of potential policy change, opponents of that change strengthen their resistance. This was evident in the backlash against 2020's Black Lives Matter movements – in the moment, resistance often took the form of criticism of the protesters, but as the work shifts to policymaking, those pushing for greater law enforcement accountability will do so in the face of fierce opposition. The opposition to extending the pandemic safety net or expanding health benefits is likely to be less emotional, but no less organized. Indeed, the politicization of the pandemic more broadly, seen in resistance to health directives, mask mandates, and vaccines, demonstrates the depth of the challenge ahead. Such resistance presents a true test of will.

The COVID-19 pandemic has altered so much about the way we see the world and it is unlikely that we can ever return to the world that existed before such a formative societal experience. Amidst the trauma, however, we have been pushed to find new solutions to long-existing problems. The pandemic created a space to reimagine what is possible and revealed that old excuses for not taking action to assist the most vulnerable could be removed so long as there was a will to do so. Having now seen how policies *can* provide stability within our community, the challenge is ensuring that such policies *will* continue to do so.

## Recommendations

- **Research:** Study the effectiveness of pandemic-related responses to persistent social problems, such as housing instability, employment instability, disparate access to technology, and reduction in bail, to demonstrate the impacts of these policies and their value even outside the context of the pandemic. Collect both qualitative and quantitative data.
- **Organize:** Build coalitions of individuals, community groups, and institutions to support efforts to pursue extension and expansion of successful pandemic-related policies addressing persistent social problems.
- **Advocate:** Identify policymakers at all levels of government willing to lead in extending and expanding successful pandemic-related policies addressing persistent social problems; prepare to respond to



criticisms of such extensions or expansions from unsympathetic individuals, groups, institutions, or policymakers.

- **Persist:** Prepare for long-term work in preserving successful efforts as immediate urgency wanes, attention shifts, and work evolves to more tedious efforts to build and implement policies.

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# THROUGH A GLASS DARKLY: MUSINGS ON THE HARSH REALITIES OF COVID-19

## SOCIAL DETERMINANTS OF HEALTH IN THE AGE OF PANDEMIC

**Albert Mosley, EdD**

Senior Vice President and Chief Integration Officer  
Methodist Le Bonheur Healthcare

COVID-19 has impacted everyone. But it has not impacted everyone *equally*. Understanding “how” and “why” this pandemic is having such an unequal range of effects among different communities, racial demographics, and socio-economic groups is urgent work for anyone committed to fairness, equity and justice in our society.

### **The Disproportionate Impact of COVID-19**

The entire Mid-South has suffered from COVID-19. But a disproportionate amount of heartache has been felt in African American and Hispanic communities. For example, internal data compiled from Methodist Le Bonheur Healthcare (MLH) from the beginning of the COVID-19 pandemic to September 2021 shows that African Americans comprise about 62% of all deaths from COVID-19 in the MLH system, even though they make up less than 49% of the population in our four-county primary service area (Jacobson, 2021).

Data from the same period demonstrates that the median difference in age at time of death between Black and White patients is nine years, and the difference is 17.5 years between Hispanic and White patients (Jacobson, 2021). Among mortalities from COVID-19, African American and Hispanic people are more likely to be under the age of 50 when compared to mortalities among Whites (13.8% and 29.2% among African Americans and Hispanics, respectively, compared to 5.2% of Whites) (Jacobson, 2021).

More recent data continues to support these disturbing trends. Data from August and September 2021 demonstrates that while the median age of those hospitalized for COVID-19 is similar between Black and White patients (54 and 55, respectively), Hispanic patients are, on average, a full decade younger (Jacobson, 2021). During the same period, 63% of patients admitted to MLH for COVID-19 were Black— again, a significantly higher percentage than their population size in the MLH service area (Jacobson, 2021).

### **Vaccinations**

Vaccinations paint an even bleaker picture. Nationally, recent data from the Kaiser Family Foundation (Naduga et al., 2021) shows that African Americans have received smaller shares of vaccinations compared to their shares of cases, deaths, and the total population in more than half of the states reporting relevant data, including the state of Tennessee. Overall, across the 43 states with available data, the percentage of Whites who have received at least one COVID-19 vaccine dose was 1.2 times higher than the rate for African Americans, and 1.1 times higher than the rate for Hispanics (Naduga et al., 2021).

Local vaccination efforts also reflect these trends. According to data provided by the Shelby County Health Department (2021), approximately 164,000 Black adults in Shelby County have received at least one dose of a



COVID-19 vaccine, or 43.1% of the total Black adult population in the county, compared with 51.8% of the White adult population.

Internal data from MLH shows a slightly better, yet still alarming, vaccination rate by race. Within our service area, MLH has distributed almost 24,000 vaccines, including 14,665 to our employees and 9,248 through community vaccination events. The total rate of vaccinations (including community members and internal MLH employees) among Black and White people is approximately equal, with White people receiving 44% of vaccines distributed, and Black people at 45%. Removing our internal employees from the count, the rates are even more encouraging: 46% of community vaccinations distributed went to Black people, while 37% were for White people. The total numbers are still only a portion of the community need, yet these rates demonstrate that MLH's targeted outreach to minority communities is having a positive impact on vaccination rates.

### **A Looming Disaster in Memphis**

All these distressing statistics were entirely predictable. For far too long, health inequities have persisted and undermined the fabric of society. More than highlighting a new problem, COVID-19 has held up a harsh mirror into the inequities and injustices that have always existed.

For example, Black women in Memphis are three times more likely to die from breast cancer than White women (Hartig, 2018), and while Black people comprise 52% of the population in Shelby County, they account for 70% of deaths from diabetes (Brantley, 2018). According to the Community Health Needs Assessment (2019) produced by MLH in collaboration with other community healthcare systems, Black people in our service area die from heart disease, stroke, and lower respiratory diseases at a much higher rate than Whites. Similarly, the preterm birth rate for Shelby County is 2.2 times worse than Tennessee, and Black children have a rate of premature births that is much higher than Whites, as well as a death rate that is almost 3 times greater than White people in the county (Methodist LeBonheur Healthcare, 2019).

Predictably, minority communities also have higher rates of premature death. In 2019 the YPLL (years of potential life lost before age 75 per 100,000 population, adjusted for age) for the Tennessee statewide population was 9,300, and was 10,300 in Shelby County. The YPLL for White people in Shelby County was below both of those averages, at 7,700 or 26% below the county average. However, the YPLL for Black people in the county was 24% above average at 12,800 (Givens et al., 2019).

The question remains: how do health experts encourage more members of the African American community to receive the COVID vaccine? The struggle to regain trust in the African American community by medical professionals is deep, due to systemic racism and a lack of providers who resemble members of the community. And even for those who decide to take the vaccine, they must contend with the challenges of geographic access and transportation barriers (Laurencin, 2021).

Our challenge now is to avoid wincing away from the mirror that COVID-19 held up. Policymakers, healthcare officials and the public should use the experiences of this pandemic to take a long, hard look at who we are as a society. Perhaps more importantly, we must consider who we want to be when it comes to providing support for that most basic of human needs: to be alive and well.

### **The Challenge of our Time**

The source fuel for almost all inequality is our nation's long and tragic history of systemic racism and the residual impacts that remain today. Income inequality, education inequality, and yes, health inequality, cannot be narrowed until we come to terms with both the overt and covert forms of discrimination.





We are at a critical moment for our country, our region and our community. COVID-19 has put the issue of inequity in a stark and unflinching spotlight. It is now time to address inequity in health by understanding and addressing the failures of our healthcare systems as well as the inter-connectedness and the inter-dependency of social determinants that prevent individuals from getting the care they need.

## Recommendations

### *Solutions within Healthcare*

We can look for solutions within the healthcare system itself. We need to build a healthcare delivery model designed more around prevention and early intervention. Doing so will lower overall healthcare costs while achieving better health outcomes for at-risk populations. Unfortunately, the current model emphasizes medical *procedures* and medical *treatment*. A better system is where early intervention is incentivized. For example, managing a diabetic case early and preventing escalation is far better for the patient and less expensive for the healthcare system than treating late-stage diabetes. Our work here at MLH in the chronic disease education and self-management space is proof positive that *an ounce of prevention is better than a pound of care*. This is a paradigm shift in how we think of our healthcare infrastructure. It goes well beyond the progress that has been made in getting more people insured, and shifts instead to how healthcare economics should work and how “value” should be re-defined and rewarded.

### *Solutions within the Community*

It is not surprising that most of the solutions to reducing the health disparities will be found outside the four walls of a medical clinic or hospital. That is because the physical health of a person is not determined in isolation. Health is closely dependent on a myriad of socio-economic variables such as living wages, adequate housing, personal safety, nutrition and education. These are the social determinants of health. They are the non-biological factors that have an enormous impact on the overall health of an individual. In fact, the factors of someone’s race, place, and economic condition are more determinative of one’s health than genes or heredity.

Health care systems like MLH are focusing more and more on these social determinants and finding ways to intercede through partnerships in the community. We are now evaluating patients for the social determinant variables, so we can begin to address those factors. We ask our patients about conditions at home and then connect them to community partners that can help fill gaps.

One example of this focus of social factors is the “Food Pharmacy” that MLH is creating at its flagship campus – Methodist University Hospital. It is an idea to address the terrible reality that many patients discharged from the hospital return to communities and neighborhoods that are food deserts, and where it is virtually impossible for them to access healthy food options. Through our Food Pharmacy, and in partnership with Cardinal Health and the Mid-South Food Bank, diabetic and/or pre-diabetic patients who screen food-insecure will leave the hospital with enough food to feed a family of four for at least three days.

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# LIFE AFTER DEATH: COVID-19'S IMPACT ON THE WEALTH OF AFRICAN AMERICAN FAMILIES

**Daphene R. McFerren, JD**

Executive Director

Benjamin L. Hooks Institute for Social Change  
The University of Memphis

The late entertainers, actor Chadwick Boseman of the famed movie *Black Panther*, the musician Prince, actor John Singleton, and Rapper Nipsy Hussle, all had in common great talent and the unfortunate fact that they all died without a will (Epperson & Fox, 2020; Bernard, 2010; Ross, 2019). Aretha Franklin, the Queen of Soul, died leaving no valid will, but rather three handwritten “wills,” including one will found under the cushions of her couch (Sisario & Friess, 2019). By dying without properly executed and updated estate documents, these stars have left behind chaos for family members and business partners – and the courts - to sort through to determine the rightful heirs to the stars’ property.

The stars are like the rest of us more than we think. African Americans and much of the American public has done no estate planning. Because we are in the throes of the COVID-19 pandemic, it remains to be determined the havoc caused to the estates of African Americans who died from COVID-19. Nevertheless, it is highly probable that the harm will be consequential. African Americans comprise 12.4% of the population of the United States (U.S. Bureau of the Census, 2021), and 13.9% of those dying from COVID-19 have been African Americans even though they represent only 11.9% of all cases (CDC, 2021). Clearly, African Americans are overrepresented among those dying.

While COVID-19 has increased general awareness of the need for proper estate planning documents, those who have such documents remain low. Although some racial and ethnic groups have done better than others, no group has bragging rights. In 2021, only 33% of all adults have a will (Cobb, 2021). This is down from 42% of people who stated they had a will or other estate document in 2017 (Cobb, 2021). Approximately 1/3 of African Americans and Hispanics have a will (Cobb, 2021). The good news is that the percentage of African Americans and Hispanics who are completing wills is trending up. According to Caring.com, African Americans with wills “increased by 6.2% (from 25.9% to 27.5%)” and Hispanics with wills “increased by 12% (from 28.2% to 31.6%)” (Cobb, 2021). For the same period, Whites with wills remained unchanged (Cobb, 2021).

Good estate planning must include a valid will, and should include a durable power of attorney, which allows a person to have someone manage their financial, personal, or business affairs. It should also include a living will, which provides instructions to family and medical staff on the level of medical care the person should receive at the end of life. For example, a person may object to being resuscitated or being placed on life support if there is no hope of recovery (Tenn. Code § 32-2-102 (will); Tenn. Code Ann. SS 34-6-101-112 (durable power of attorney); Tenn. Code § 32-11-104 (living will)). Preservation of wealth is essential to creating intergenerational wealth. In the absence of a will, the deceased person’s estate is distributed according to the laws of succession of the deceased’s state of residence. Attorney fees, court costs, and other fees (for example the appointment of an executor to conduct an inventory of the estate and oversee its distribution) often result in substantial costs, which, when paid from the deceased person’s estate, far too often leaves very little for the beneficiaries, if not requiring the sale of the property to cover these expenses (Chatman, 2019).



According to the Brookings Institution, a long, persistent, and entrenched history of discrimination has depressed African Americans ability to accumulate wealth. McIntosh et al., states that

Efforts by Black Americans to build wealth can be traced back throughout American history. But these efforts have been impeded in a host of ways, beginning with 246 years of chattel slavery and followed by Congressional mismanagement of the Freedman's Savings Bank (which left 61,144 depositors with losses of nearly \$3 million in 1874), the violent massacre decimating Tulsa's Greenwood District in 1921 (a population of 10,000 that thrived as the epicenter of African American business and culture, commonly referred to as "Black Wall Street"), and discriminatory policies throughout the 20th century including the Jim Crow Era's "Black Codes" strictly limiting opportunity in many southern states, the GI bill, the New Deal's Fair Labor Standards Act's exemption of domestic agricultural and service occupations, and redlining. Wealth was taken from these communities before it had the opportunity to grow (McIntosh et al., 2020).

Compounding this history are contemporary factors that impact African American economic mobility including lack of access to quality schools (Startz, 2020), predatory lending practices (Sarra & Wade, 2020), and mass incarceration of African Americans (Alexander, 2011). This history has shaped African American net worth: "[a]t \$171,000, the net worth of a typical white family is nearly ten times greater than that of a Black family (\$17,150) in 2016" (McIntosh et al., 2020). If things remain as they are the median net worth of African Americans is projected to be zero (0) by 2053 (Asante-Muhammad et al., 2017).

African Americans failure to engage in estate planning may not only be an issue of access to legal resources, but it may also be family and financial perspectives developed over time in response to discrimination. Thus, "[t]he failure of African Americans to prepare wills is likely attributable to distrust of government, a belief that their children will ultimately inherit the land and reluctance to cause division within the family" (Copeland, 2015).

A will distributes real property (land and houses) and personal property (anything not real property (jewelry, antiques, furniture, cars, etc.)) to those individuals to whom the Testator (the person who creates the will) chooses (In Tennessee, any person over the age of 18 can execute a will. Tenn. Code Ann. §§ 32-1-102). If one dies without a will, one's real and personal property are divided among one's closest living heirs under the laws of succession of the state of residence of the descendant. The person to whom one might want to receive one's property may not get it, and the relative one might have the least confidence in may end up with it. Additionally, dying without a will increases the cost of distributing the assets of the estate. The Probate Court must appoint an executor, determine the lawful heirs to the estate, and then distribute the assets to the heirs. This is a costly and often lengthy process that reduces, if not eliminates, assets available to distribute to the heirs of the deceased.

Many problems can arise from "heir" property, property inherited from a person who dies without a will. Disputes among heirs about how the land should be divided may result in a partition suit (Copeland, 2015). A major reason for the loss of African American owned real property is due to partition sales, which may ultimately lead to a court-ordered transfer of property in the event heirs are unable to agree to a division of land (Copeland, 2015). Such "sales generally benefit developers and land speculators who purchase property at low prices and either resell or develop the land for sale at significantly higher prices" (Copeland, 2015). Even if the heirs agree not to partition the land, the heirs still will be unable to obtain a mortgage on the property (for maintenance or improvement, educational, and other reasons) because the heirs do not own it (Copeland, 2015).

When possible, wills, durable power of attorneys, living wills, and other estate documents should be created by an attorney, generally one specializing in trusts and estates. While online websites for estate planning proliferate, consumers should read the reviews for these websites and should ensure that the estate documents on the website are specific to laws of the state where the user resides (Epperson & Fox, 2020).





While African American face historical discrimination that continues to impact their ability to accumulate wealth, African Americans can stop the tide of loss to their heirs, thereby protecting whatever wealth they have, by having a valid will. This way, they shift the historical paradigm to support wealth accumulation among future generations of African Americans.

## Recommendations

According to Caring.com the number one reason people state they do not have a will is because they do not know where to get one (Cobb, 2021). The second is that they *think* they do not have enough assets to make a will (Cobb, 2021). This demonstrates that public education about estate planning is badly needed.

- Partnerships among pro bono attorneys and law school clinics with churches, community groups, and others are necessary to bridge this knowledge gap.
- Public Service Announcements (PSAs) on radio and television explaining the need for estate planning can also help bridge the knowledge gap on estate planning with the goal of reducing the number of individuals and families without a will.
- State and local bar associations should develop community outreach efforts to connect African Americans and others in underserved communities with legal assistance for estate planning. A sliding fee scale for payment of attorneys based on the income the client would help to make access to estate planning more affordable.

Banks should play a role in estate planning. Pamphlets describing why estate planning is critical should be available in bank branches. Banks can also inform customers that they can place beneficiary designations on their accounts making the account payable to a person(s) upon the account holder's death. Secondly, banks can inquire of customers if they have other estate documents in place that will allow others to carry out the customer financial affairs should the customer die.

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## NOTES



## NOTES










# THE BENJAMIN L. HOOKS INSTITUTE FOR SOCIAL CHANGE


[memphis.edu/benhooks](http://memphis.edu/benhooks)

[bhi@memphis.edu](mailto:bhi@memphis.edu) | 901.678.3974

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