

UNIVERSITY of HOUSTON

THE INSTITUTE FOR RESEARCH ON
WOMEN, GENDER & SEXUALITY

Pandemic Gender Snapshot #2 - June 29, 2020:

Update on Houston/Harris County Covid-19 Fatalities by Gender, Race/Ethnicity & Age

With the Texas “re-opening” after the Spring 2020 Houston/Harris County Stay Home order, Covid-19 *infection rates* have risen dramatically in late June, bringing national headlines. Numbers of *Covid deaths* have also risen, though the impact of the recent infections on deaths will not be visible until several weeks on. A total of 133 new deaths were reported between June 26 and the first PanGen Snapshot, based on May 29 data.¹ Of the 361 deaths from Covid-19 reported in Houston/Harris County by June 26th, 154 were women and 207 were men, although the infection rate is roughly 50/50. This is a relatively small data set, but noteworthy. Interestingly, the gender division occurs mainly in City of Houston deaths, with 135 male and 81 female deaths reported by the Houston Health Department (62.5%*m*/37.5%*f*), and 72 male and 73 female deaths reported by Harris Health (50/50). (We’re exploring that difference and will update.)

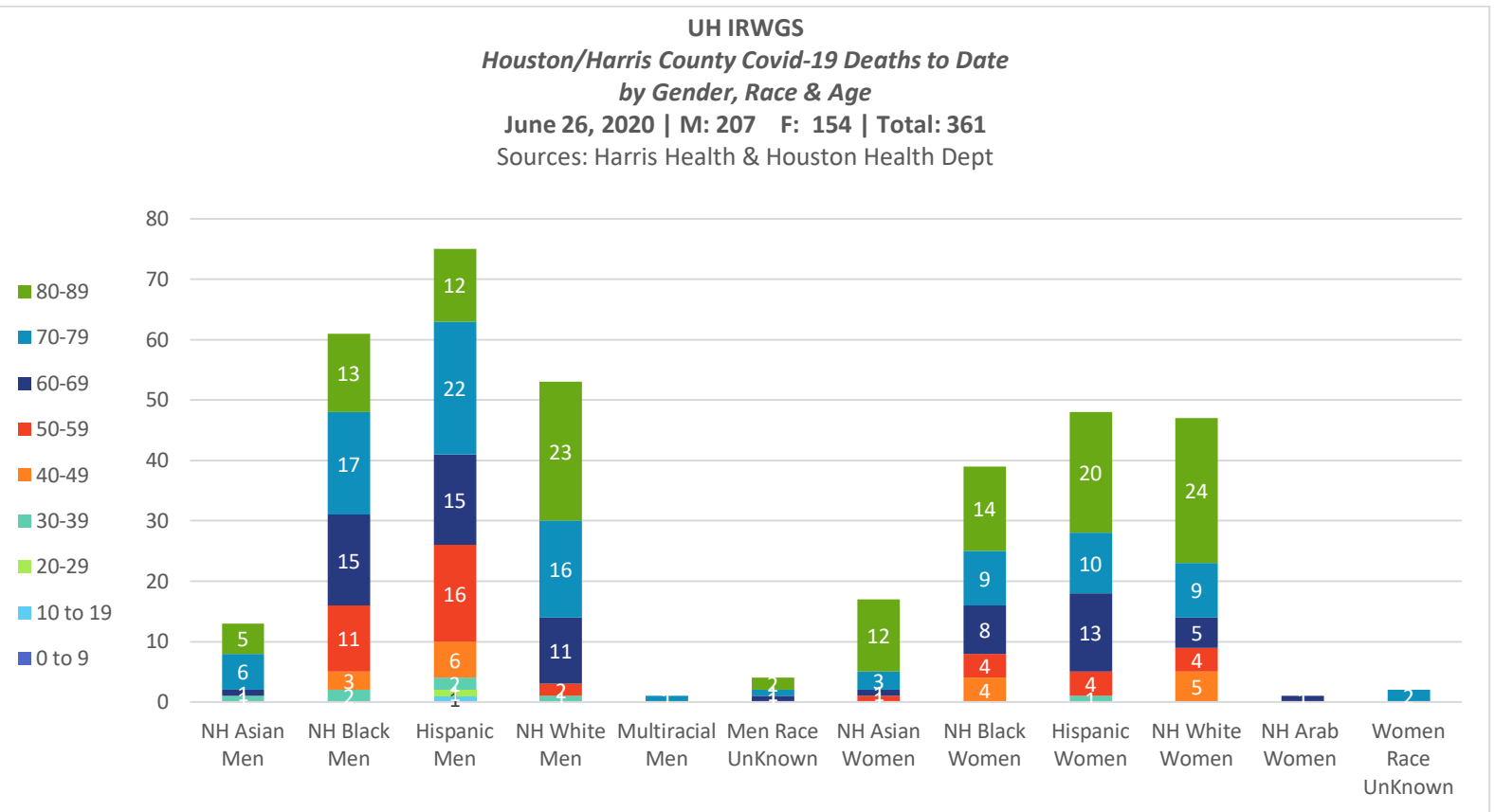


Figure 1. COH – 216 | Harris Health – 145.

¹ Covid-19 reports lag date of death, generally by a week or so, but some additions to the Covid total may be from as much as two months earlier. The 361 June 26th number does not reflect the recent surge.

Adding the two jurisdictions together, of the total deaths, 43.4% were female, and 56.6% male,² consistent with the global pattern of more male deaths, likely due to a combination of biological and behavioral factors.³

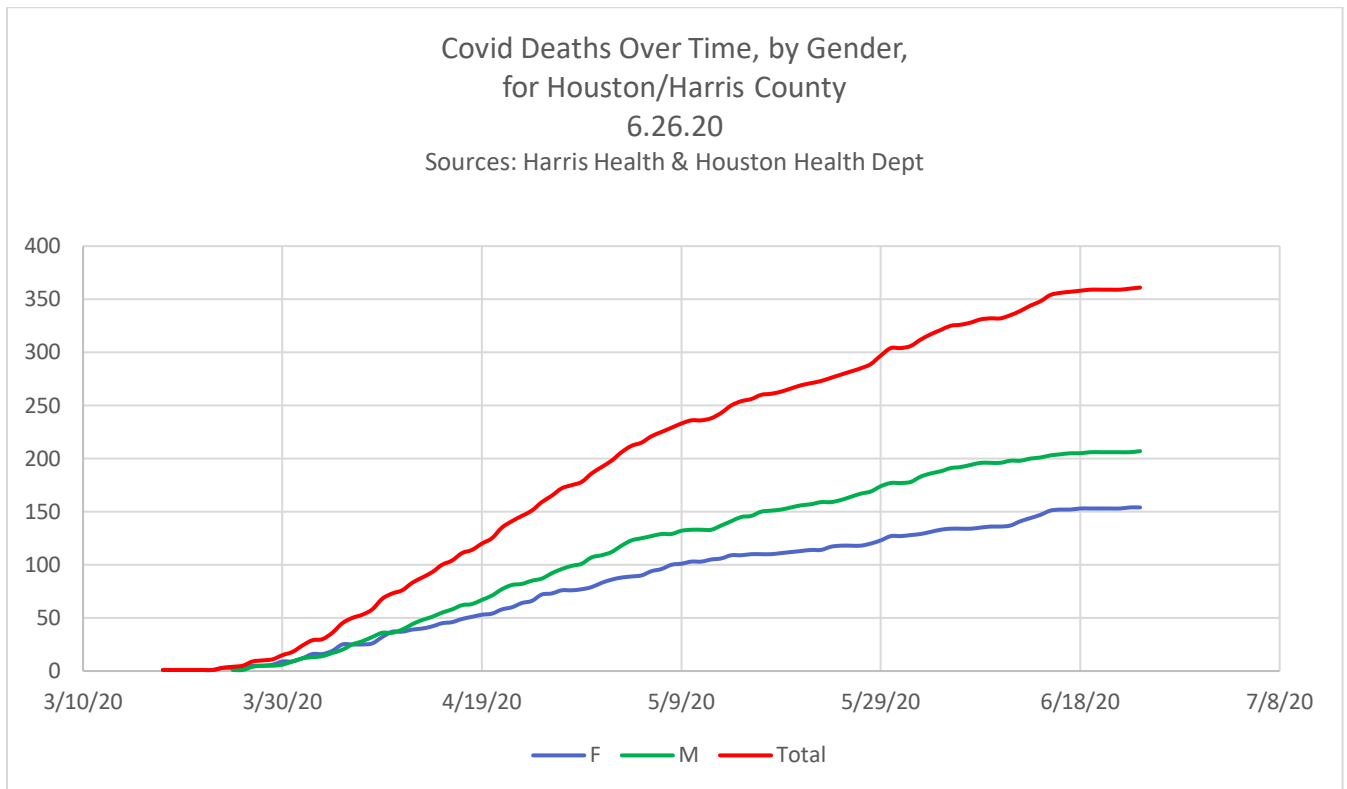


Figure 2.

*Deaths are not always documented as Covid-related immediately, so later data reports may reflect updates.

The race/ethnicity differential also continues marked. Black men (**17.7%** of Harris County adult male population) and women (**20.6%** of the county's adult female population)⁴ continue to die at rates higher than their proportions in the population, when compared to others of their same gender (African Americans overall comprise **30%** of male deaths and **26%** of female deaths here). These disparities are attributable to

² That's a slightly smaller gap than the 42.6%/57.4% split seen in our May 30 PanGen report on Covid fatalities in H/HC.

³ The [Western Journal of Emergency Medicine](#) reports that in Italy men represent 58% of Covid-19 infections & 70% of Covid-19 deaths, while Wuhan China saw a majority of infections (between 51.0 and 66.7%) among men, with a 1:1.64 female/male ratio of deaths (*WJEM* 2020;21(3): 507-509). Respiratory infections SARS (2003) and MERS (2012) also saw sex-linked differentials.

Specific cause or causes have not been determined, but some hormonal or genetic protection—from higher rates of estrogen/progesterone or from the double X chromosome—may account for higher rates of female survival. Differential rates of exposure through work outside the home & differences in health-affecting behaviors (mask wearing, handwashing, smoking, etc.) are also potential factors (April 30, 2020, [www.Five-Thirty-Eight.com](#)). See PanGenSnapshot for 5.30.20.

⁴ Harris County population analysis by race/ethnicity by UH IRWGS based on American Community Survey for 2018.

longstanding structural social and economic inequalities—including for example limited health care access, exposure in frontline jobs, underlying health conditions/co-morbidities (like obesity, diabetes, respiratory ailments, etc.), and dense housing.

Though the *number* of deaths among Hispanic men is higher than among other groups, Hispanics also comprise the biggest sector of the local male population and their *percentage* of deaths is lower than their proportion in the local population (**41.9% of adult male population / 35.9 of male deaths**). Deaths among Hispanic women are also disproportionately low (**38.9% of adult female population / 31.3% of female deaths**). The initial even lower level of deaths among Hispanic women in the May 30 report has been offset recently, which shifts the proportions among other groups of women in relation.

The percentage of male deaths represented by White men (**32.8% of adult male population / 25.6% of male deaths**) is lower than their relative presence overall and may be linked to more limited presence in frontline jobs and better healthcare access. But the percentage of female deaths represented by White women (**32.3% of adult female population / 30% of female deaths**) is close to their relative presence. Asian women (**8.2% of adult female population / 11.3% of female deaths**) have died in numbers somewhat higher than their relative presence and at higher rates than Asian men (**7.6% of adult male population / 6.4% of male deaths**), but the overall numbers are low, and the pattern may shift.

Age also significantly intersects Covid-19 deaths, as Figure 3 indicates. The majority of Covid-19 deaths globally occur among people over seventy, and that is the case here as well.

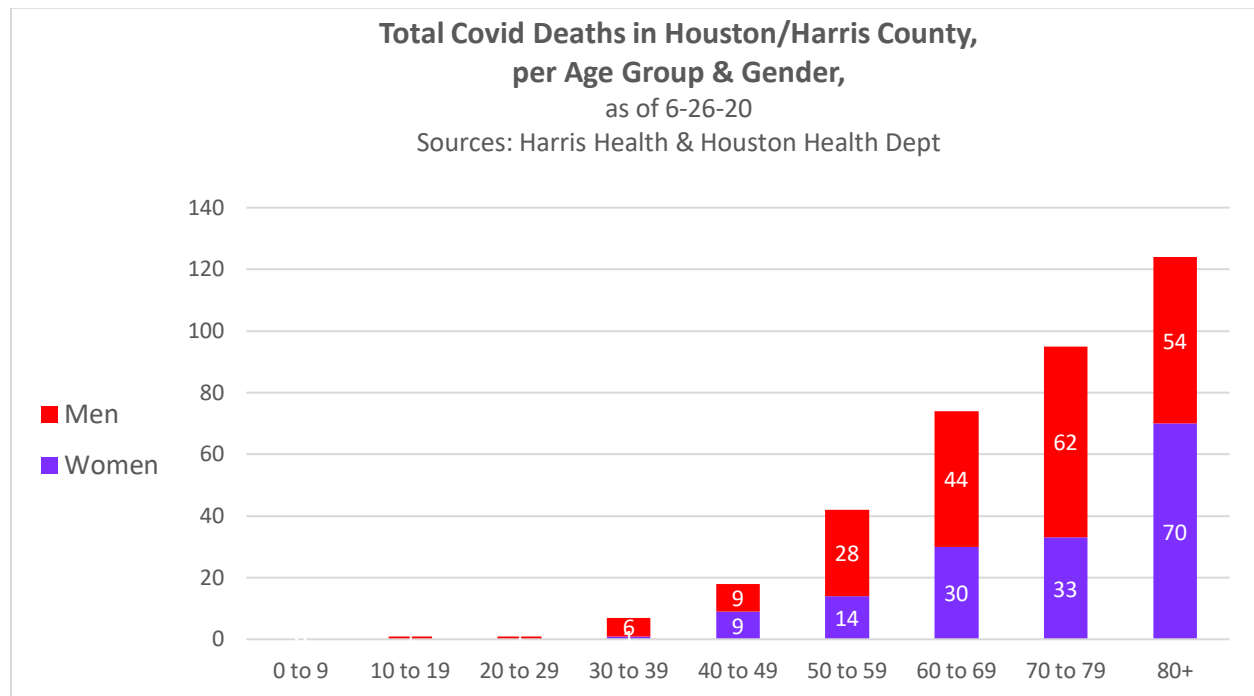


Figure 3.

Age also intersects with gender and race/ethnicity outcomes (see Figure 1). While deaths among the young are few across the board (only one child and one person in his 20s are known to have died from Covid-19 here to date [both Hispanic males]), deaths have occurred in larger numbers among Black and

Hispanic males under 60 (16/26, respectively) than among Asian and White males in that age group (1/3, respectively). And while fewer younger women are dying than younger men overall (deaths to women below 60 by race are: Black 8, Hispanic 5, Asian 1, White 9), White women are the exception here with three times as many younger deaths as among White men (9/3).

While women have died in lower numbers than men in most age bands through 70-79 (with an exception recently in the small set of fatalities among people in their 40s—see Figure 1), the dynamic reverses in the 80+ band (70 women / 54 men), likely because men represent only 37% of the population of people 80 and over in Harris County. Given that roughly twice as many women as men survive into their 80s and beyond, women's higher Covid fatalities actually are lower than their representation in the population. The same resiliency that allows women to live longer in general seems to be in play with Covid-19.

While susceptibility to Covid-19 is greater among the elderly, the numbers of deaths in each age/race-ethnicity group will also relate to which racial/ethnic groups include more elderly people. According to a UT Southwestern Medical Center study, the average life expectancies across gender and racial groups in Texas include:

- Hispanic women – 83.9 years; Hispanic men – 78.28
- White women – 80.6; White men – 75.6
- Black women – 78.0; Black men – 72.4

Lower life expectancies are directly linked to poverty and can be tracked to zip code level via the UTS website.⁵ The “Hispanic Health Paradox,” that Hispanics have longer lives in spite of high poverty rates, seems linked to high rates of immigration – and healthier food access / eating patterns in youth (and thus lower blood pressure and obesity), lower smoking rates and a tendency of healthier people to migrate. US-born Hispanics have similar obesity and other lifetime health issues linked to eating patterns as other Americans.⁶

Covid-19 has highlighted pre-existent disparities in American society linked to poverty and to the related stress, including health differences, and it has also revealed differences which may be biological (like women's longer life spans). Just as workplace exposure may be an issue for younger people, place and context of residence may also be a factor in whether a person contracts Covid-19: the virus has spread quickly in some nursing homes, for example (44% of Texas's Covid-19 deaths to date have occurred in such places),⁷ while living with a multi-generational family may also be risky for elders if younger frontline workers bring contagion home.

As noted in previous reports, the lower level of female Covid deaths contrasts to a number of other gender differentials around Covid, both national and local. These include women's higher rates of

⁵ UTSouthwestern Medical Center, “New interactive map first to show life expectancy of Texans by ZIP code, race, and gender” (Feb. 27, 2019): <https://www.utsouthwestern.edu/newsroom/articles/year-2019/life-expectancy-texas-zipcode.html>

⁶ Population Reference Bureau (prb.org), Paola Scommegna, “New Studies Link U.S. Hispanics' Longer Life Expectancy to Migration Patterns, Less Smoking” (Sept. 12, 2017): <https://www.prb.org/hispanics-life-expectancy-migration-patterns/>

⁷ To date, 44% of Texas's total Covid-19 deaths to date (more than 1000) have occurred in nursing homes, very close to the US average. “[43% of US Deaths Are Linked to Nursing Homes](#),” *New York Times* (June 27, 2020).

workplace exposure in frontline jobs (in Harris County, women make up 74% of health workers, 59% of fast food workers, 73% of pharmacists, and 69% of cashiers); expanded responsibilities for childcare and homeschooling given the shutdowns; higher levels of domestic violence; and continued lower levels of pay (see UH IRWGS [Initial Report on H/HC Gender & Sexuality Data](#), February 2020). State level efforts to reduce access to birth control and abortion may also affect women's long-term status. Researchers on workplace equity predict that women overall and single mothers in particular⁸ will see long-term career setbacks if they have to step away from jobs due to their greater responsibility for childcare and homeschooling due to pandemic school closures.⁹

While Covid-19 has demonstrated some predictable socio-economic patterns, it also seems to behave in distinctive ways as a disease, around factors like gender, age, and post-infection immunity. In the coming weeks, we'll see whether the rising infection rate in Texas, said to involve a larger segment of younger people than was the case in prior hotspots like [New York City](#) and Northern [Italy](#), leads to a [similar or different pattern and rate of fatalities](#).¹⁰

⁸ Single mothers made up 30% of women living with children under 18 in Harris County in 2018 (ACS).

⁹ Patricia Cohen and Tiffany Hsu, "[Pandemic Could Scar a Generation of Working Mothers](#)," *New York Times*, (June 3, 2020).

¹⁰ For discussion of the many issues in play, see Whet Moser's June 26, 2020, article "Why Changing COVID-19 Demographics in the US Make Death Trends Harder to Understand," at The Covid-Tracking Project blog: <https://covidtracking.com/blog/why-changing-covid-19-demographics-in-the-us-make-death-trends-harder-to>