How did local health infrastructure and socio-political factors within different states and counties in the United States affect the disparities in COVID-19 outcomes, and what lessons can be learned for more targeted public health preparedness and response strategies in future pandemics?*

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First sentence. Second sentence. Third sentence. Fourth sentence.

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^{*}Code and data are available at: https://github.com/hannahyu07/US-Covid-Analysis.git

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1 Introduction

This reproduction was performed after a replication on the Social Science Reproduction platform: link here

2 Data

2.1 Source

The datasets utilized throughout this paper was obtained from the original paper (Nuzzo and Ledesma 2023).

2.2 Methodology

R (R Core Team 2022) was the language and environment used for the bulk of this analysis, alongside tidyverse (Wickham et al. 2019), sf (Pebesma 2018), readx1 (Wickham and Bryan 2023), knitr (Xie 2014), janitor (Firke 2023), lubridate (Grolemund and Wickham 2011), dplyr (Wickham et al. 2023), data.table (Barrett et al. 2024), RColorBrewer (Neuwirth 2022), ggpubr (Kassambara 2023), ggplot2 (Wickham 2016), here (Müller 2020), and scales (Wickham, Pedersen, and Seidel 2023).

2.3 Data Measurement

2.4 Data cleaning

3 Results

Our results are summarized in Figure 1.

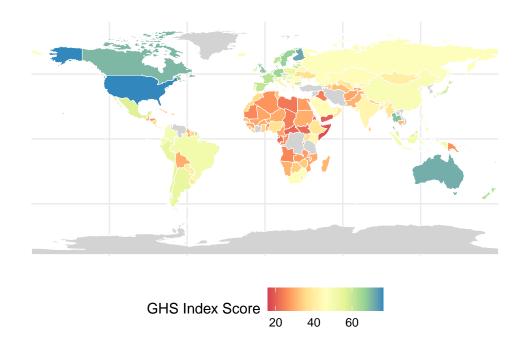


Figure 1: Global Health Security Index Scores by Country

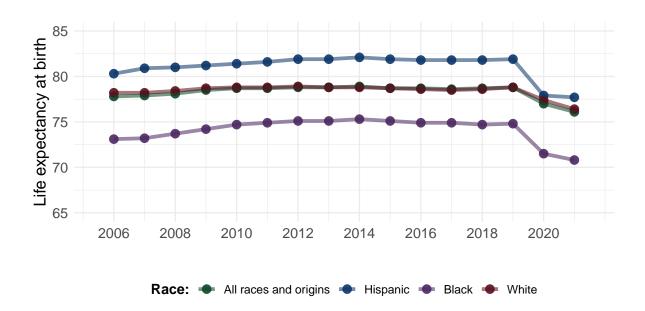


Figure 2: Estimates of Life Expectancy at Birth, by Race 2006-2021

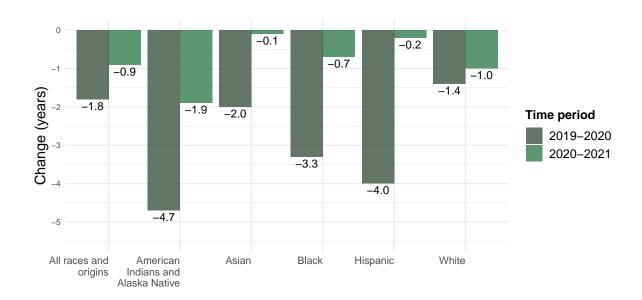
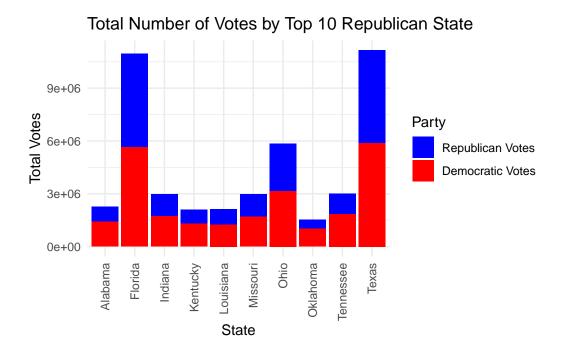


Figure 3: Change in Life Expectancy at Birth from the Previous Year



4 Discussion

This begs the question as to why we are seeing these results. There isn't exactly a single answer to this question, however we can certainly point out some considerable factors to this result.

4.1 Influence of political polarization on adherence to health guidelines.

Political polarization has significantly impacted the adherence to health guidelines during the COVID-19 pandemic. The divergence in political ideologies has translated into differing attitudes towards health directives, including mask mandates, social distancing, and vaccination uptake. Various studies and our own results have shown that areas with higher support for one political party exhibited distinct behaviors and compliance levels with health recommendations, which directly correlated with COVID-19 case rates and mortality. An news article from ABC News (Diab and Kumar 2023) shows that the top states with the highest COVID-19 deaths are Arizona, and Washington with 581 deaths and 526 deaths respectively per 100,000 people. According to 2020 presidential voting data published by CNN, we have both states having the electoral vote of democrat with Washington wining by 58% (2020 Election Results by State, Washington 2020) and Arizona winning by 49.4% (2020 Election Results by State, Arizona 2020). Another news article by ContagionLive (Parkinson 2023) also makes the claim of both Arizona and Washington having the highest COVID-19 mortality. This polarization has not only influenced individual behavior but also shaped state and local health policies, further entrenching the disparities in health outcomes. The adherence to health guidelines are evident in the varied health outcomes observed across the United States. Regions with lower compliance to health directives, often influenced by political leanings, have experienced higher rates of COVID-19 transmission, hospitalizations, and deaths. The disparities in vaccine uptake, driven by political affiliations, have further exacerbated these outcomes, leaving certain communities more vulnerable to the virus and its variants. In order to mitigate the influence of political polarization on public health, it is imperative to depoliticize health guidelines and focus on evidence-based approaches to disease prevention and control. Building trust in health institutions and promoting bipartisan support for public health measures are essential steps towards achieving higher compliance and better health outcomes. Engaging trusted community leaders and utilizing targeted communication strategies can also help bridge the divide and encourage adherence to health guidelines.

4.2 Impact of government transparency and consistent communication on public trust.

The politicization of health guidelines and mixed messages from political and health leaders during the COVID-19 pandemic have significantly undermined the effectiveness of public

health messaging, leading to confusion, skepticism, and eroded trust among the public. Initially, inconsistencies in recommendations, such as on mask usage, challenged the principle of clear, consistent, and science-based communication essential for an effective public health response. Moreover, the transparency of government actions and decision-making processes is crucial in building and maintaining public trust, especially during health crises. The level of public trust was greatly affected by the openness and accuracy with which governments, at all levels, communicated about the evolving situation, the reasoning behind guidelines, and the measures taken to combat the virus, emphasizing the importance of transparent reporting of data related to case counts, hospitalizations, vaccine distribution, and side effects. Furthermore, consistent communication from public health officials and government leaders is key to ensuring adherence to health guidelines, where inconsistencies, such as changes in mask-wearing guidelines without clear explanations, have led to public confusion. The direct correlation between government transparency, consistent communication, and public behavior is self-evident, with populations receiving clear and transparent information being more likely to adhere to guidelines, participate in testing and tracing efforts, and accept vaccination. Drawing lessons from the pandemic, strategies for improving government transparency and communication in future health emergencies should include establishing centralized information hubs, ensuring regular and predictable communication from health authorities, engaging community leaders in information dissemination, and harnessing digital platforms and social media to amplify public health messages, thus reinforcing public trust and compliance.

- 4.3 Role of social vulnerabilities and healthcare access disparities in pandemic impact.
- 4.4 Strategies for improving real-time data collection and sharing for public health decisions.
- 4.5 Weaknesses and next steps

Weaknesses and next steps should also be included.

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