

Written Testimony

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Senate Health Committee & Special Committee on Pandemic Emergency Response
The Long Haul: Preparing for the Impacts of Long COVID

I appreciate the opportunity to speak today about long COVID, a topic I have been researching before there was even a name to put to the symptoms. As you have heard here today, it is important to understand that not everyone has the privilege or opportunity to be able to return to life as usual. There are Californians who are suffering.

My name is Dr. Jennifer Chevinsky and I am a double-boarded preventive medicine and lifestyle medicine physician serving as a Deputy Public Health Officer for Riverside County, where we have had more than 6300 COVID-19 related deaths. I oversee the Division of Infectious Disease, Community Health Planning & Equity and serve as the Medical Advisor for our local COVID-19 response. I am speaking also on behalf of the California Conference of Local Health Officers and the County Health Executives Association of California.

Before joining Riverside County 6 months ago, I worked at the CDC as an Epidemic Intelligence Service Officer, where I was deployed to the Late Sequelae or Post-COVID Condition Unit. In this role, I wrote the CDC's interim guidance for healthcare providers evaluating and caring for patients with post COVID conditions – with feedback from Body Politic, Survivor Corps, and the Patient Led Research Collaborative. I have also authored multiple publications on post-COVID conditions, or long COVID, and helped inform the decision to consider long COVID as a disability and to create an ICD code for post-COVID conditions.

While at times COVID-19 is looked at as a virus that people either survive or die from, there is a lot that falls in between. Data has shown that there are widespread impacts to physical health, mental health, and quality of life. And, while it was once thought that COVID-19 was primarily a disease of the lungs, we have come to learn that the effects of COVID-19 are much more widespread.

People can experience a vast number of different kinds of symptoms, as have been described throughout this hearing. Many of these symptoms can be difficult to describe and studies suggest that long COVID may be more common in women, and so it becomes even more important for us to pause and listen to these experiences and take them seriously, as historically we know that women, particularly women of color, have unfortunately experienced medical racism and sexism, where their symptoms have been dismissed.

Importantly, just as there have been disparities in COVID-19 cases, it is anticipated that similar disparities have and will exist for long COVID. This means that our communities of color are likely to experience (1) historical and current disparities not related to COVID-19, (2) disparities related to acute COVID-19, and then on top of that, (3) also the additional burden of long COVID.

Some of the key activities that health departments have done and will continue to do in order to prevent long COVID include the same activities that help prevent COVID-19. Throughout the pandemic, health departments have been on the front lines to provide vaccination, testing, novel therapeutics as

well as guidance on masking, isolation, quarantine, ventilation, and handwashing. We know that these strategies work and we strive to provide these programs and this guidance, centering equity in our mission. Many of these aspects are found and highlighted in California's SMARTER plan.

Other activities that county health departments can and have done involve their roles as expert conveners of community partners and resources:

- They can use their communications platforms to
 - Share information about long COVID on their website, either directly or by linking to the CDPH website
 - Post information on their social media platforms
 - Share information about
 - Local post-COVID care clinics
 - Disability benefits, and
 - Recommendations on flexible work and school policies

With some of this groundwork that has been done, health departments can help share and bring this information to their trusted community-based organizations, faith-based organizations, schools, employers, and others. Local health departments are great at convening groups, connecting the dots, sharing information, and partnering with the community.

Some of the more specific initiatives that we have partnered on in Riverside County include:

- Conducting post-covid follow up calls – tens of thousands of calls - to learn about the long-term experiences that our residents have, after testing positive for COVID-19
- Partnering with members of our African American Collaborative on building support groups with trauma informed approaches
- Hosting training sessions on long COVID for our promotores and community health workers who have been integral trusted messengers throughout the COVID-19 response, reaching our Latinx community, including migrant and agricultural workers

And actually, in our county we have personally felt the effects of long COVID, as one of our promotores has experienced ongoing effects of long COVID, such that she hasn't been able to go back out in the fields and continue doing the great community work she has so much passion for. This ripple effect can be felt throughout the community.

We must continue to build in strategies around Long COVID into our recovery plans, centering equity at the core of these strategies. We must learn from the lessons of past post-viral conditions – like the experiences from post-polio or West Nile Virus – as well as from communities that have long suffered with conditions that are often downplayed, like those experiencing ME/CFS and MCAS.

More studies are needed, and it will likely take time before centers of excellence are established, but in the meantime, we need to help those who are suffering now. **With your support - for our staff and programs - we can prevent new COVID-19 cases now and we can share current best practices and resources now.** Your continued support with planning and budgeting for services can help us grow these initiatives and achieve these goals not only for the community, but **with** the community. California has and should continue to take the lead, putting the needs of Californians at the forefront. Thank you for your time.

Citations:

General information:

- Riverside County Post-COVID Treatment: <https://www.rivcoph.org/coronavirus/Treatment/post-covid-treatment-options>
- CDPH Post-COVID Conditions: <https://www.cdph.ca.gov/Programs/CID/DCDC/Pages/COVID-19/Post-COVID.aspx>
- CDC Post-COVID Conditions: <https://www.cdc.gov/coronavirus/2019-ncov/long-term-effects/index.html>
- Long COVID as a disability: <https://www.hhs.gov/civil-rights/for-providers/civil-rights-covid19/guidance-long-covid-disability/index.html>

My Work on CDC Interim Guidance on Evaluating and Caring for Post-COVID Conditions:

- Key points: [Key Points | Evaluating and Caring for Patients with Post-COVID Conditions | CDC](#)
- Background: [Background | Evaluating and Caring for Patients with Post-COVID Conditions | CDC](#)
- General Clinical Considerations: [General Clinical Considerations | Evaluating and Caring for Patients with Post-COVID Conditions | CDC](#)
- Patient History and Physical Examination: [Patient History and Physical Examination | Evaluating and Caring for Patients with Post-COVID Conditions | CDC](#)
- Assessment and Testing: [Assessment and Testing | Evaluating and Caring for Patients with Post-COVID Conditions | CDC](#)
- Management: [Management | Evaluating and Caring for Patients with Post-COVID Conditions | CDC](#)
- Public Health Recommendations: [Public Health Recommendations | Evaluating and Caring for Patients with Post-COVID Conditions | CDC](#)
- Future Directions and Resources: [Future Directions and Resources | Evaluating and Caring for Patients with Post-COVID Conditions | CDC](#)
- CDC COCA Webinar Slides: Evaluating and Caring for Patients with Post-COVID Conditions: [Post-COVID COCA CDC slides.pptx](#)

My Selected Publications on Post-COVID Conditions:

- [Studying the post-COVID-19 condition: research challenges, strategies, and importance of Core Outcome Set development - PubMed \(nih.gov\)](#)
- [Prevalence of Select New Symptoms and Conditions Among Persons Aged Younger Than 20 Years and 20 Years or Older at 31 to 150 Days After Testing Positive or Negative for SARS-CoV-2 - PubMed \(nih.gov\)](#)
- [Long-Term Symptoms Among Adults Tested for SARS-CoV-2 - United States, January 2020-April 2021 - PubMed \(nih.gov\)](#)
- [Outcomes Among Patients Referred to Outpatient Rehabilitation Clinics After COVID-19 diagnosis - United States, January 2020-March 2021 - PubMed \(nih.gov\)](#)
- [Late Conditions Diagnosed 1-4 Months Following an Initial Coronavirus Disease 2019 \(COVID-19\) Encounter: A Matched-Cohort Study Using Inpatient and Outpatient Administrative Data-United States, 1 March-30 June 2020 - PubMed \(nih.gov\)](#)