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The novel pandemic of coronavirus disease, also known as Covid-19, has caused economic fall-out and unprecedented amounts of deaths and illnesses to the United States since its arrival in our country in January of 2020. Stay at home orders have been in effect country wide since March of 2020. The Center of Disease Control (CDC), has addressed concern for the disparities among people, often more significant in marginalized communities that are disproportionately represented by racial and ethnic minorities. Statistically, minority groups are more likely to die from Covid-19 than people of Caucasian descent. To propose a solution to the inequality that minority and ethnic communities have faced due to the novel coronavirus (Covid-19) communities of different socio-economic barriers must be addressed in a way that will provide them with realistic means to prevent, treat, and test the virus.

Currently, a practice among many communities is to provide testing at local community venues as a form of “drive-through” testing. The problem with addressing testing efforts in this manner is that oftentimes marginalized communities do not have the means or same transportation options that many others possess. To eliminate the barrier that exists for communities of disproportionate minority bases, one could suggest that similar to how the testing sites are run, door to door testing could be offered to families currently under stay at home orders to provide readily available testing. This door to door testing could be completed with the same risk as one testing the individuals that are able to transport themselves to testing sites. This would provide individuals without the ability to get to tests, access to testing. Organizations such as AmeriCorps, NCCC, FEMA, and the American Red Cross could work conjunctively with the federal government to complete this task and project that would require volunteers and individuals qualified to assist. Some of these programs are grant funded. If the federal government supplied grants to organizations willing to complete door to door testing for minority and ethnically diverse communities, it would assure the completion and implementation of such a project.

As a measure to prevent the spread in these communities, this door to door testing would be complete with information regarding the novel coronavirus disease, disposable masks for those who complete the test, hand sanitizer for each family that completes the testing, and information for the nearest hospital, clinic, or facility to treat the disease if hospitalization is required. By providing these tools to families, it is assuring those who may not have access to testing or standard preventative tools the information and resources they need to prevent the spread of the virus. This would give the ability to educate families, assess risk that may be present in a household and educate individuals that do not understand or have access to the same resources many have regarding the spread, treatment, and prevention of Covid-19.

To treat those impacted by the virus, utilizing community resources that are available would be required. Currently many schools and community facilities are shut down. Pop-up clinics to assist community members could be installed in these facilities. Many cities nationwide

to address the fear of overwhelming the healthcare system already have the resources established to utilize a treatment of this sort. To assure appropriately provided treatment, a sliding scale fee for those of low-income or no income would be used to determine the cost of any treatment within these clinics. This would prevent people from seeking treatment, to assure no burden of costly treatment would be awarded to individuals seeking help. The facilities that agree to host these clinics would be provided funding via the federal government by grants or otherwise determined legislation to prevent, treat, and test their largely minority populated communities.

Finally, as an attempt to prevent and encourage individuals to work for and join the healthcare industry and to attempt to address the gap of sufficient healthcare workers in despaired communities nationwide, one could suggest a grant for higher education to encourage individuals considering the healthcare profession to work in marginalized and socio-economically impacted communities. Similar to the TEACH grant that is offered federally to provide assistance to teachers who agree to work in low-income title 1 schools, a grant could be offered to individuals pursuing a degree in the healthcare profession if they agree to work in socio-economic and minority and racially disadvantaged hospitals and care facilities. This would replenish healthcare providers to these heavily impacted communities, and work to fill the gap that exists in the healthcare industry.

Because of the dangerous nature of the novel coronavirus (Covid-19) something must be done to assist communities of minority and racial diverse majorities. The most important thing the government can do to assist these communities is make testing more accessible, education and prevention resources readily available, and treatment affordable and accessible. This essay highlights and displays what efforts could be made by the government to assure that minority communities are given the access and ability to survive this unprecedented pandemic.