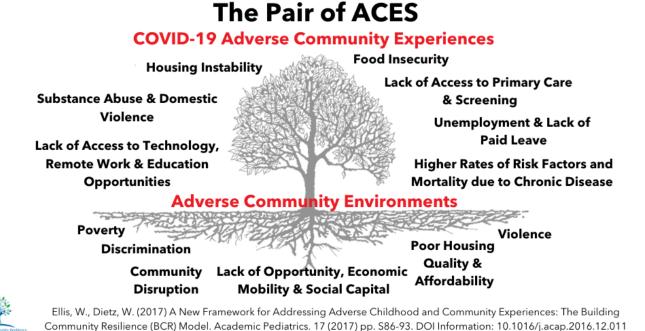
## COVID-19: What's equity got to do with it?

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## By Wendy Ellis

It took less than two months for a virus undetectable to the naked eye to lay bare what lies in plain sight — exposing long-standing inequities, driven by social policies that have created disparities in access to resources. These disparities result in the concentration of poverty and negative health outcomes based on access to supports and buffers that promote health, wealth and prosperity.

Predictably, COVID-19's disproportionate impact can be measured along the country's most fragile fault line — race and poverty. Early <u>reports</u> from across the country demonstrate that the COVID-19 pandemic has had an immediate and dramatic impact on communities shaped by historic patterns

of racial segregation. Communities where social policies, such as <u>redlining</u>, set in place patterns of poverty, limited access to quality education, and affordable health care. In <u>Chicago</u>, while making up only about 30 percent of the city's population, African Americans have accounted for 68 percent of all COVID-19 related deaths. In Washington D.C., African-American residents account for 45 percent of the city's population but nearly 60 percent of the city's COVID-19 fatalities. The trend is similar everywhere cases are tracked by race. Communities across the country with high chronic disease burdens, such as diabetes, high blood pressure, asthma and obesity — diseases which are tied to racial health disparities — are more <u>vulnerable</u> to serious complications related to COVID-19.

Public policies implemented over the past 400 years, designed with either the explicit intent of racial oppression or willfully ignorant of disparate impacts, have produced negative place-based and class-based outcomes. And as a pandemic sweeps the nation, resulting in the nearly instantaneous loss of millions of jobs and growing — this historical record of inequity is no longer a concern for some people; it is a necessary concern for all.

Many essential workers, including grocery store employees, sanitation workers, and construction workers reside in low-income communities and do not have the privilege of working from home or practicing physical distancing. The irony of our lowest paid workers finally being recognized as 'essential' — bearing the highest risk for the lowest return — is yet another expression of the nation's unrelenting inequity. For many others, home might not be a <u>safe place</u> to shelter, if a <u>home</u> is available at all.

For the past five years, the <u>Building Community Resilience Networks and Collaborative</u> has worked across sectors to address and prevent childhood adversity by fostering equity to promote resilience. Today, our partners are responding to a global pandemic that threatens the health and wellbeing of

the communities we serve. Pre-existing inequities that drive chronic adversity are only exacerbated in the face of school closings and the shutdown of businesses that support hourly workers. Economic uncertainty coupled with the disruption of life as we know it upends the sense of safety and stability for caregivers and our children.

We think about adversity at both the individual and community level through the lens of the <u>Pair of ACEs</u>: a tree planted in soil steeped in systemic inequities, robbing it of nutrients necessary to support a thriving community. If adverse community environments are the roots of inequity and adverse childhood experiences are the fruit of the tree, inequitable policies are the elements in soil that rob the community of vital nutrients, sustaining inequity. Asking, 'What's in your soil?' gets to root causes of trauma and despair.

In our current world of COVID-19 response, these systemic and systematic inequities are creating negative outcomes for vulnerable communities lacking access to supports and buffers.

Now more than ever is a time for Building Community Resilience — a time to leverage networks and harness our collective power to ensure the health, wellbeing and equitable access to much needed support for our children and families. As we continue to grapple with the pandemic response as a country, we must also change the systems and policies that got us here. To learn more about the historic drivers of inequity, click <a href="here.">here.</a>

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