

# THE GATEWAY GAP: EQUITABLE ACCESS IN SAINT LOUIS CITY



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Pfizer. Moderna. Johnson & Johnson. For the past several months, these names have been repeatedly brought up regarding the simultaneously alluring and elusive COVID-19 vaccination. While some were able to get it early in the pandemic, most are still unaware of when it will be made available to them. As members of the Saint Louis University (SLU) community, we have received numerous emails from the university about their efforts to provide us with the vaccination as expediently as possible. However, that raises the question of how communities outside the SLU bubble will gain the very necessary access to this vaccine.

In Missouri, the COVID-19 vaccination has been distributed in phases. Phase 1 focuses on healthcare workers and high-risk populations, whereas Phases 2 and 3 focus on disproportionately affected individuals (such as unhoused individuals) and the remainder of Missouri residents, respectively. Although this seems like an ideal plan, the way vaccines have actually been distributed has proven unattainable to Saint Louis City residents with socioeconomic barriers. This has

resulted in a vaccine gap, or a difference between those eligible for the vaccine and those that receive it.

As of February, the Department of Health and Senior Services found the vaccine gap in Saint Louis City to be in the top five highest gaps of all the counties in the state, in large part due to vaccine deserts in urban Saint Louis. In fact, Deloitte, a consulting company hired by the state to assess vaccine distribution, found that the gap is growing due to vaccination centers moving to rural areas of Missouri and away from the more densely populated urban areas. This limits vaccine access to those with flexible time, money and transportation.

Though the vaccine is theoretically free and accessible, many people can not afford to drive far away or take time off work for the vaccination. This is evidenced by the over 7,000 vaccinations that have gone to waste in rural Missouri vaccination centers, according to The Missouri Department of Public Safety. The state government attempts to combat this obstacle by introducing a “Get a Ride” section on their vaccination site; however, when surveying the options, most are either cost-prohibitive or entirely unfeasible. For example, two of the main options listed are public transportation (which is limited to within the city) and ride sharing (which is very costly even within the city, let alone outside of it). This systematically disadvantages socioeconomic minorities, many of whom have technical eligibility but no access to the vaccine.

Furthermore, these disparities are not limited to Missouri; they are nationwide. The Kaiser Family Foundation compiled data from across states and found a consistent trend of Black and Hispanic people receiving a smaller share of vaccines in proportion to



had and will continue to have vaccine clinics. One such clinic held on March 27, 2021 aimed to vaccinate approximately 200 members of the Beloved Methodist United Church, a predominantly Black church.

Dr. Artman mentioned that SLU is planning to host more clinics and form additional community partnerships once they have the vaccinations and the capacity. Though SLU alone cannot alleviate the vaccination disparities in Missouri, the university is striving to uphold their commitment to social justice and support the greater Saint Louis community. Pfizer, Moderna and Johnson & Johnson will continue to be brought up in conversation as more SLU students and staff get vaccinated. Though it should be a right, getting vaccinated has largely become a privilege in Saint Louis: where transportation, wealth and time can determine one's accessibility to life-saving medicine. Though individual action cannot fix the systemic barriers that create vaccine disparities, we can play our part in raising awareness and spreading information to our communities.

their COVID-19 death toll. Even though the Centers for Disease Control and Prevention (CDC) find that Black and Hispanic populations have suffered 34% of the deaths due to COVID-19, they make up a mere five and eight percent of vaccinations, respectively. In fact, the vaccination rate for white Americans is double that of Black and Hispanic Americans. Though the exact reason for this rampant disparity varies from state to state, this trend unequivocally reflects an urgent need for more equitable vaccine distribution—in Missouri and nationwide.

The need for vaccinations both in urban centers like Saint Louis and to Black, Hispanic and other under-vaccinated communities is evident. Naturally, it becomes important to ask: how is SLU, with its social justice mission, working to alleviate the vaccine disparity and increase equity for the Saint Louis community? Dr. Deborah Artman, assistant professor in the Trudy Busch Valentine School of Nursing, is one of the leaders in the vaccine distribution efforts at SLU. Dr. Artman said the university is actively working to provide vaccines both to SLU students and the surrounding communities.

For example, since Harris Stowe University does not currently have the capacity to vaccinate their students and staff, SLU is assisting the neighboring campus. SLU has designed and disseminated a survey, similar to the one that its own students took, to determine which tier Harris Stowe students and staff fall into. In addition, SLU has

