

QSS 20 Short Essay

Catherine Seok

Last updated: September 22, 2024

1 Racial Discrimination in Healthcare

While there are many instances of the racial inequities within social institutions, one that I am particularly interested in is the disparities in medical care provided to different racial and ethnic groups. National data has revealed that over the past 50 years in the United States, overall life expectancy has increased and infant and adult mortality have decreased. However, the discrepancies in medical care are still apparent to this day. Compared to white people, black people and other minority groups have lower levels of access to medical care, likely due to the higher rates of unemployment and under-representation in high-paying jobs that provide health insurance. Still, it is important to learn how to address the root of these issues [1].

Even in contexts where the differences in economic status and insurance coverage are minimized (such as the Veterans Health Administration System and Medicare), there were still differences in the types of procedures minorities received compared to white people. The COVID-19 pandemic has highlighted these disparities even more. Minorities have disproportionately been infected and died from COVID-19, yet still do not have the same access to treatment and vaccines as white people do [2]. These findings raise questions about structural racism in US health care policy and how to best address it.



Figure 1: Healthcare workers in the US.

References

- [1] D. Williams. Understanding and addressing racial disparities in health care. *Health Care Financing Review*, 21(4):75–90, 2000.
- [2] R. Yearby. Structural racism in historical and modern us health care policy. *Health Affairs*, 41(2):187–194, 2022.