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D.C.S.O Community Health Proposal against COVID 19 - Public School System

DC is a community with a rich culture that's extremely sundry and diversified. When the Covid-19 epidemic hit, all of us were stopped in our tracks. It affected our everyday lives. However we never asked the question, is there an epidemic taking place right in our own community? Asthma influences almost 1 out of every 10 kids. It is a widely known and exceptionally treatable malady (McDade,2014). It's accordingly worried that such huge numbers of low-income kids—frequently African American or Latino—in Washington, DC, endure customary, negative outcomes of asthma (among the most elevated rates in the country). Kids from low-income families have far less authority over asthma and therefore have higher morbidity from the ailment than their higher-pay peers (McDade,2014). About one in four kids in the district fall below the poverty line which is above the nation's average (Glambrone,2019). Many of these families can't afford to take care of their kids with or without asthma. To make matters worse low-salary occupations include much more association with people in general and significantly less stability – and both of these components are uniquely hazardous during this pandemic to the family and kids (Children Fund international, 2020). This problem raises the question of what, as a community, can we do to help kids in the D.C. public schools system with

or without asthma to stay safe from COVID-19? Asthma can impede a kid's instruction because these issues get intensified at school. Low-income kids will, in general, need progressively careful asthma observation and treatment at school, for which most schools are essentially not prepared for. In addition, when low-salary families either don't have the assets to get a second school inhaler or the bandwidth to guarantee that children carry one consistently, asthma issues can compound at school (McDade,2014). To ensure that kids with asthma get adequate care once school starts this fall and to combat the threat of COVID-19 during the year, we propose 1) to equip either classrooms or floors, especially for kids with asthma, with air purifiers that are going to circulate clean air so that they don't have any triggers like smells, mold. 2) We plan on making a questionnaire that every student has to answer before entering the school in the morning. The questions will help us know who has asthma and a list of other things such as if they have been exposed to anyone who has had COVID 19. This could help us figure out if anyone is a liability to other students or staff. Also, 3) we propose training D.C. public schools teachers with C Diff cleaning procedures. C Diff is a bacteria that can be spread from individual-to-individual by contact or by direct contact with polluted items and surfaces (for instance, apparel, phones, entryway handles) (Davis,2017). A few people are transporters of this bacterium however have no symptoms of infection. C Diff and Covid-19 have a similar way of spreading and being highly contagious but we know a lot more about C Diff and it's safety measures to prevent transmission. So, if we implement C Diff cleaning procedures in D.C. public schools we can guarantee a clean and sterilized environment for the students. Lastly, 4) we propose an after school program which gives kids masks, hand washing soap, and hand sanitizers to take home. Since many kids in the D.C. Public School system falls under the

poverty line. It's safe to assume that they might not have access to the proper tools to protect themselves and their families at home. This means that they might have to wear the same mask over and over again which is not ideal. We propose these four community student operations that we are naming under the umbrella of D.C.S.O (DC Community Student Operation) for the start of the school year. We plan on starting the questionnaire, training and the set up with the air purifiers in September 2020. To check upon the success rate of our proposals we plan on reviewing the questionnaires and testing the student at the end of each quarter. With this valuable piece of information we can see if there were changes in students' answers in the questionnaire, how many students and staff contracted the virus and were we able to successfully maintain a safe and sterile environment. In addition if our proposal works it can not only help students in D.C, it can be implemented in schools around the U.S. To make these ideas and policies come to life we can partner up with foundations such as the DC asthma coalition, breathe the DC, and others non-profits. By working alongside foundations that are based in D.C we are more cost effective and we are raising awareness about what's taking place in D.C and about the foundations that are working to make a difference, especially among students with asthma. By taking these steps, we can better the lives of students that are in the D.C. Public School system. They will continue to have an education that will support on site learning and benefit from in-person instruction. We want to help students achieve their dreams and ambitions, as once said “when you cease to dream, you cease to live.”

Work cited

- McDade, Z. (2016, October 10). In Washington, DC, is childhood asthma part of a poverty trap? Retrieved July 21, 2020, from <https://www.urban.org/urban-wire/washington-dc-childhood-asthma-part-poverty-trap>
- Charles Patrick Davis, M. (2019, November 07). Is C. diff (Clostridium difficile) Contagious? Retrieved July 21, 2020, from https://www.medicinenet.com/is_c_diff_clostridium_difficile_contagious/article.htm
- Giambrone, A. (2019, June 19). D.C. has one of the highest child poverty rates in the U.S., report says. Retrieved July 21, 2020, from <https://dc.curbed.com/2019/6/19/18691931/child-poverty-inequality-casey-foundation-income-education>
- Children and families living in poverty are more heavily affected by the COVID-19 pandemic. Here's why. (2020, April 19). Retrieved July 21, 2020, from <https://www.childfund.org/Content/StoryDetail/17179869951/>