

How inequities are surfacing in COVID-19 vaccine distribution

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An initial focus on immunizing health workers and those age 75 and older against COVID-19 has left many Black and Latinx people out of the vaccination picture.

“In those eligibility groups, there are going to be some ... structural inequities,” said Torian Easterling, MD, MPH. “You think about health care workers; they certainly tend to lean more towards white individuals.” Dr. Easterling also noted that the life expectancy of Black people in the U.S. falls below the 75-year mark.

Dr. Easterling, first deputy commissioner and chief equity officer of New York City’s Department of Health and Mental Hygiene, made those remarks during a recent episode of the AMA “Prioritizing Equity” video series on equitable distribution of COVID-19 vaccines.

The discussion was moderated by AMA Chief Health Equity Officer and Group Vice President, Aletha Maybank, MD, MPH, who noted President Joe Biden’s executive order on racial equity to “pursue a comprehensive approach to advancing equity for all, including people of color and others who have been historically underserved and marginalized and adversely affected by persistent poverty and inequality.”

AMA President Susan R. Bailey, MD, said the Association “strongly supports the Biden administration’s comprehensive efforts to dismantle systemic racism and advance equity for all, particularly for historically marginalized communities who have been long underserved and overlooked in our country.”

Dr. Maybank said that to see racial equity mentioned so explicitly in federal policy was “tremendous progress” and represented “the potential, the hope and the possibility of reimagining our future.”

Yet the harsh present of the pandemic cannot be ignored. Dr. Maybank cited a Kaiser Family Foundation report finding racial and ethnicity data on vaccine distribution lacking. According to the foundation's report, the limited data that is available shows "vaccination patterns by race and ethnicity appear to be at odds with who the virus affected the most."

But there is work underway to change that.

Connecting patients to COVID-19 care

Panelist Kaakpema Yelapaala, MPH, the CEO and founder of access.mobile International, said his company's remote patient-engagement app was used in Atlanta to connect Black residents in areas with a "disproportionate burden of morbidity and mortality" to COVID-19 testing resources.

"Because we already built the infrastructure and relationships for testing, we can quickly use those same channels to communicate vaccination," Yelapaala said. He added that his Denver-based company is working on a similar strategy to engage the Hispanic population in rural Colorado.

When the pandemic is over, Yelapaala said he hopes the public health infrastructure created for large-scale COVID-19 testing and vaccination remains in place as a "community asset" for future health equity needs.

Learn more with the AMA about COVID-19 and vaccine development and discover resources on COVID-19 and health equity.

Vaccine demand outstrips supply

Dr. Easterling noted that New York, as of late January, had received about 1.2 million vaccine doses, which were delivered to about 200 sites throughout the city. The city keeps tracks of the 100,000 to 200,000 doses it receives each week, the doses it administers and the number it has on hand.

When the vaccine doses on hand get too low, appointments have to be rescheduled and staff reassigned, Dr. Easterling said. He hopes that better planning from the new administration can help improve matters.

Find out more from Dr. Easterling on what New York's learned about health equity during the pandemic.

Dr. Easterling also noted that while there has been a lot of discussion about vaccine hesitancy, the COVID-19 vaccine demand remains greater than the supply. There are plenty of people who do not need “a whole lot of encouragement,” yet who cannot get access to the vaccine, he said.

His department has been doing community outreach and he said the question of access is the first thing that comes up at town-hall meetings.

“There are questions about the science” and questions about the vaccines, Dr. Easterling said. “But the No. 1 question is: I’ve been trying to schedule an appointment—can you help me?”

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