

Vaccine distribution inequality reflects 'broken' U.S. healthcare system, experts say



March 18 (UPI) -- The racial inequality in [COVID-19](#) vaccine distribution across the United States reflects a "broken" healthcare system that has long overlooked communities of color, Stephen B. Thomas, a professor at the University of Maryland School of Public Health, said Thursday.

In an analysis of roughly 50 million of the 113 million vaccine doses administered nationally so far, shots were given to 16% of residents of counties with low rates of poverty and unemployment and higher per capita income, [Centers for Disease Control and Prevention data](#) released earlier this week showed.

In comparison, about 14% of residents of U.S. counties with higher rates of poverty and unemployment have received the shot, the agency reported.

At least some of this disparity can be attributed to the long-time lack of trust in the U.S. healthcare system among communities of color, said Thomas, who was not part of the CDC research.

Some portion of this hesitance, he said, is linked to the legacy of the Tuskegee Syphilis Study, in which Black Americans with the disease were intentionally left untreated.

"So when it comes to the COVID-19 vaccine, we need to make sure that minority groups are treated," Thomas said during a panel discussion hosted by [CommuniVax](#), an alliance of social scientists, public

health experts and community activists formed to advocate for the COVID-19 needs of communities of color.

Equitable distribution of COVID-19 vaccines across demographic and socioeconomic lines has been a point of emphasis for experts and government officials because of the racial disparities in virus infection rates and deaths.

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Since the start of the pandemic last year, Black people and Hispanic people have been up to twice as likely as White people to become infected with the coronavirus and more than twice as likely to require hospital care if they get COVID-19, according to [data](#) from the CDC.

People of color in the United States also are more likely to die from the virus, the agency said.

To reverse these trends, efforts to build trust of the healthcare system within communities of color must "come with trustworthiness," meaning public health leaders need to take steps to earn the faith of at-risk populations, Thomas said.

This entails listening to the needs of these communities in terms of improving vaccine access and designing initiatives to address them, said Lois Privor-Dumm, a senior advisor with the [Johns Hopkins International Vaccine Access Center](#) in Baltimore.

Privor-Dumm and her colleagues have been hosting "listening sessions" with members of at-risk communities in Baltimore in recent weeks to discuss vaccine-related fears and concerns over access.

Because of these sessions, the group is launching new programs designed to make shots available at facilities within at-risk communities, provide transportation for those who need it, particularly seniors, and to create platforms for people who do not have a computer or Internet access to make an appointment to get vaccinated, she said.

These efforts are in keeping with recommendations made by CommuniVax in a report entitled "Equity in Vaccination: A Plan to Work with Communities of Color Toward COVID-19 Recovery and Beyond," which was released in February.

The report is designed to provide state and local public health officials with tools to "support and enable" an equitable vaccination campaign, said Monica Schoch-Spana, a senior scientist at Johns Hopkins Bloomberg School of Public Health and a principal investigator with CommuniVax.

To address gaps in vaccine distribution, the CDC announced Wednesday plans to invest \$2.25 billion over two years to address COVID-19-related health in high-risk and under-served communities, including those of racial and ethnic minority groups and people living in rural areas.

The investments will include grants to local public health departments to provide funds for improved testing and contact tracing capabilities and enhance outbreak mitigation and prevention resources and services, the agency said.

"Everyone in America should have equal opportunity to be as healthy as possible," CDC Director Dr. Rochelle P. Walensky said in a statement Wednesday.

"This investment will be monumental in anchoring equity at the center of our nation's COVID-19 response -- and is a key step forward in bringing resources and focus to health inequities that have for far too long persisted in our country," she said.