



Health equity and the COVID-19 vaccines

The COVID-19 vaccine can help alter the course of the pandemic, which has disproportionately impacted low-income and minority communities.

As of April 21, 2021, **those vaccinated for COVID-19 have not represented the U.S. population by race.**¹ While not all states collect race/ethnicity data, in general, Black, Hispanic and Asian Americans have been underrepresented among those vaccinated and white Americans have been overrepresented.

In addition, Black, Hispanic/Latino, and Indigenous Americans are significantly more likely to be hospitalized and die of COVID-19 than white or Asian Americans.²

Social determinants of health such as economic stability, education, social and community context, health and health care, and neighborhood and built environment can result in worse health outcomes.^{3,4} The Joint Commission understands these factors can influence an individual's risk of contracting COVID-19, their willingness and ability to seek care, their trust of health care professionals and vaccine hesitancy.

Increasing the percentage of those vaccinated among the most vulnerable groups is necessary to change the course of the pandemic. As more individuals are vaccinated, the overall community risk decreases.⁵

Concerns about the COVID-19 vaccines are higher among many Black, Hispanic, American Indian and Alaska Native people, and intention to get vaccinated is lower. Severe medical neglect (for example, the Tuskegee syphilis study) and the resulting effects of lower-quality care mentioned below has resulted in a distrust of the medical community for many.⁶

According to research by the Association for Healthcare Research and Quality, Black and Indigenous Americans received worse health care on 40% of quality measures than white Americans, while Hispanic and Native Hawaiians/Pacific Islanders scored worse on 30% of quality measures.⁷ In general, these groups also trust medical professionals less.^{8,9} **To overcome this, we need to improve trust in the vaccine.**

How can we increase trust in the vaccine?

When you're speaking with patients, loved ones and others, your approach can potentially improve openness to the vaccine or drive them deeper into hesitancy. A new campaign from the American Medical Association and the Ad Council addresses overcoming vaccine hesitancy. The research found that it's important to:¹⁰

- **Acknowledge concerns**, rather than challenge them.
- Focus on **moments missed** and that vaccination is an important step to return to normal.
- Emphasize **protecting** oneself, loved ones and the most vulnerable.
- Use a **positive tone**. Be respectful while acknowledging that receiving a vaccine is a choice, tying back to American values of liberty and freedom.

All three FDA-authorized COVID-19 vaccines have demonstrated safety and efficacy with diverse trial participation.

The Pfizer-BioNTech and Moderna vaccines are each about 95% effective at preventing COVID-19 after two doses. The Johnson & Johnson vaccine is about 66% effective at preventing COVID-19 and 85% effective at preventing severe disease after one dose.^{11,12}

Trials for all three vaccines included targeted efforts to improve the diversity of participants. While there is room for improvement, **the trials were more diverse than traditional clinical trials historically.**^{13,14}

All three vaccines are extremely effective at preventing the most severe concerns of contracting COVID-19: severe disease, hospitalizations, long-term side effects like heart conditions, and even death. We strongly recommend everyone who is eligible receive a vaccine, especially those who live among more vulnerable communities.

For more information on COVID-19 vaccines, visit the [Centers for Disease Control and Prevention \(CDC\) website](#).¹⁵

Sources:

- ¹ <https://www.bloomberg.com/graphics/covid-vaccine-tracker-global-distribution/us-vaccine-demographics.html>
- ² <https://www.cdc.gov/coronavirus/2019-ncov/covid-data/investigations-discovery/hospitalization-death-by-race-ethnicity.html>
- ³ <https://www.cdc.gov/coronavirus/2019-ncov/community/health-equity/racial-ethnic-disparities/index.html>
- ⁴ <https://www.healthypeople.gov/2020/topics-objectives/topic/social-determinants-of-health>
- ⁵ <https://www.nytimes.com/interactive/2021/02/20/us/us-herd-immunity-covid.html>
- ⁶ <https://www.healthaction.org/resources/communications/covid-19-vaccines-audience-insights-messaging-guidance-for-black-hispanic-american-indian-and-alaska-native-communities>
- ⁷ <https://www.ahrq.gov/sites/default/files/wysiwyg/research/findings/nhqdr/2019qdr-final-es.pdf>
- ⁸ <https://jamanetwork.com/journals/jamainternalmedicine/article-abstract/410195>
- ⁹ <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC1913079/>
- ¹⁰ https://adcouncil-covid-vaccine-education-initiative.s3.amazonaws.com/AC_CC_COVIDVACCINEEDUCATIONINATIVE_DECK.pdf
- ¹¹ <https://www.cdc.gov/vaccines/covid-19/info-by-product/clinical-considerations.html>
- ¹² <https://www.jnj.com/johnson-johnson-covid-19-vaccine-authorized-by-u-s-fda-for-emergency-usefirst-single-shot-vaccine-in-fight-against-global-pandemic>
- ¹³ <https://www.kff.org/racial-equity-and-health-policy/issue-brief/racial-diversity-within-covid-19-vaccine-clinical-trials-key-questions-and-answers/>
- ¹⁴ <https://www.jnj.com/johnson-johnson-covid-19-vaccine-authorized-by-u-s-fda-for-emergency-usefirst-single-shot-vaccine-in-fight-against-global-pandemic>
- ¹⁵ <https://www.cdc.gov/vaccines/covid-19/index.html>