

UK's color-blind COVID-19 vaccine strategy putting ethnic minorities at higher risk

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Omitting ethnic minorities from the vaccine priority list is putting these groups at a significantly higher risk of COVID-19 illness and death. Public health doctors, writing in a commentary published by the *Journal*

of the Royal Society of Medicine, say that the UK's colour-blind vaccination model disregards the unequal impact of the pandemic on minority ethnic groups and is worsening the racial inequalities that the pandemic and the wider governmental and societal response have harshly exposed and amplified.

The commentary describes how COVID-19 has disproportionately affected Black, Asian and Minority Ethnic (BAME) groups, resulting in higher rates of infection, hospitalisation and death. People from [minority ethnic groups](#) are more likely to live in crowded and multi-generational households where there may be increased risk of transmission. They also comprise a higher proportion of the high-risk and low-paid essential workers, especially in urban areas, thereby increasing their risk of exposure to COVID-19.

Calling for targeted vaccination of all high-risk groups, the lead author of the commentary, Professor Azeem Majeed, of the Department of Primary Care & Public Health at Imperial College London, said: "Prioritising essential workers for vaccination will preserve the healthcare system, accelerate re-opening of society, help revive the economy and enable the operation of essential community services."

He continued: "If insufficient numbers of individuals from BAME communities are vaccinated, the virus will continue to spread amongst these groups, putting the general population at risk."

The authors say that ineffective vaccine allocation strategies are likely to play a role in the high levels of vaccine hesitancy observed across ethnic minorities. The UK Government's Scientific Advisory Group for Emergencies (SAGE) has highlighted the significant risk of low COVID-19 vaccine uptake in ethnic minorities, advising better understanding of the barriers that contribute to low uptake.

Prof Majeed said: "Lack of trust in some [ethnic minority](#) communities as a result of cultural and structural racism, low confidence in the safety and efficacy of the vaccines, and limited endorsement from trusted providers and [community leaders](#) are likely to be key factors." He went on to describe lack of vaccines, transport access and inconvenience of appointments as other factors hindering vaccine uptake in these communities.

Prof Majeed concluded: "Dismissing the racial and socioeconomic disadvantages that ethnic groups face may result in devastating impact lasting far beyond the end of the pandemic. Controlling further outbreaks and, ultimately, ending the pandemic will require implementation of approaches that target ethnic minorities as well as ensuring [vaccine](#) allocation strategies are effective, fair and justifiable for all."

More information: Tasnime Osama et al, COVID-19 vaccine allocation: addressing the United Kingdom's colour-blind strategy, *Journal of the Royal Society of Medicine* (2021). [DOI: 10.1177/01410768211001581](#)

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