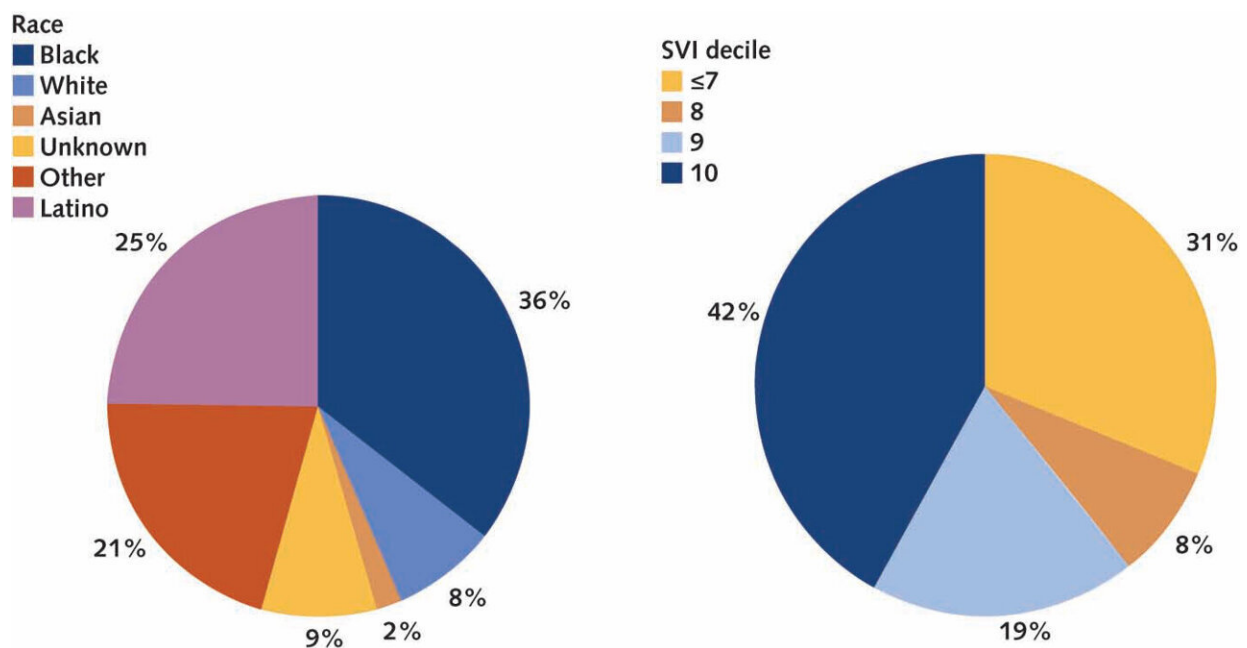


Community-focused strategy improves vaccine uptake in Black and Latino communities

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Racial/ethnic and SVI composition of persons vaccinated at mobile sites, November 2021. The majority of people vaccinated at mobile sites self-identified as people of color, with 36% identifying as Black, 25% identifying as Latino, and 2% identifying as Asian. Persons vaccinated at mobile sites also lived in locations with the highest SVIs. High SVI scores correspond to higher risk for poor health outcomes. SVI = Social Vulnerability Index. Credit: *Annals of Internal Medicine* (2022). DOI: 10.7326/M22-0028

New research from Boston Medical Center (BMC) shows how intentionality and partnership between community leaders and medical health centers can improve COVID-19 vaccination uptake in Black and Latino communities. Published in *Annals of Internal Medicine*, researchers analyzed the impact that a community-focused model led by BMC and its community partners had on improving equitable access to vaccination.

Between December 2020 and November 2021, BMC focused on three main initiatives to support the goal of vaccine uptake. These included the implementation of community-based vaccination sites in churches and community centers, the organization of mobile vaccination events at schools, grocery stores and community events, and providing vaccine access directly on the medical campus.

BMC established seven community-based vaccination clinics and conducted 99 individual mobile vaccination events in addition to vaccination opportunities on the medical campus to reach the health equity goals in historically disinvested communities.

The vaccination program administered over 100,000 first doses, with 86 percent given at community sites, and two percent at mobile vaccination sites. Although mobile sites recorded the lowest number of vaccinations when compared to other locations, these events reached over 2,000 individuals. As recent data show that vaccination among younger persons trails that of [older adults](#), the study demonstrates that mobile sites are an innovative solution to address this gap.

These events were critical in providing access for younger individuals in locations with the highest Social Vulnerability Index (SVI), identified using the US Census to determine the possible negative effects external stresses can have on communities and their health. The index identifies factors impacting social vulnerability including [socioeconomic status](#),

household composition and disability, minority status and language, and housing and transportation within communities.

"The BMC vaccination effort shows that in order to reach vaccine equity goals, we need to reach individuals where they are by bringing vaccines to the community," says Sabrina Assoumou, MD, MPH, an infectious diseases physician at Boston Medical Center and an assistant professor of medicine at Boston University School of Medicine. "These intentional and collaborative approaches that led to the creation of programs developed for COVID-19 could serve as a foundation for other initiatives that will tackle other health disparities including maternal and child health."

To build confidence in COVID-19 vaccines and in the healthcare system, BMC partnered with affiliated health centers, [community partners](#), state and local health departments, and the Commonwealth of Massachusetts.

Vaccine uptake in communities disproportionately impacted by the pandemic improved following the vaccination program. These communities predominantly included individuals who identify as Black and Latino, and many of these communities initially recorded lower vaccination rates when compared to other locations in the state. In Boston, residents of color are still disproportionately impacted by subsequent COVID surges, with Black and Latino individuals infected at 1.5 times the rate of white individuals.

"Building vaccine confidence takes time; it might take multiple encounters for individuals to decide to get vaccinated, and our experience demonstrates that an initial lack in vaccine confidence is not necessarily permanent," says Ellen Ginman, executive director of population health at Boston Medical Center. "With access to reliable information, many individuals who were initially wavering might decide

to get vaccinated."

This study used analytics and the Center for Disease Control and Prevention's SVI to identify communities most at risk for poor outcomes, informing the decisions for strategic locations of community vaccination sites and mobile vaccination events. The distribution of vaccinations from micro-targeting events are stratified based on race and SVI decile ranging from 0 to 10, lowest vulnerability to highest vulnerability.

Now that vaccination numbers have slowed, not only for the primary series, but also for boosters, researchers show that partnerships and continued intentional approach could still have a substantial impact on community vaccination uptake.

This vaccination initiative has shown the importance of having leadership and workforce commitment to health equity and community engagement. This has enabled the efficient development of impactful programs that will serve as the foundation for future health-related initiatives such as BMC's Health Equity Accelerator, including a focus on eliminating race-based equity gaps in maternal and child health.

Boston Medical Center is now part of the National Institute of Health's Community Engaged Alliance (CEAL) aimed at increasing [vaccine](#) confidence and engagement in research.

More information: Sabrina A. Assoumou et al, Addressing Inequities in SARS-CoV-2 Vaccine Uptake: The Boston Medical Center Health System Experience, *Annals of Internal Medicine* (2022). [DOI: 10.7326/M22-0028](#)

Provided by Boston Medical Center

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