

Adult Vaccination Coverage Rates, age 65 and older, 2008-2009



- White **68.6**
- African American 50.8
- Hispanic Americans 50.6

Source: NHIS,, 2009

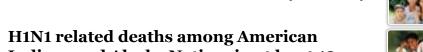
Vaccination Coverage Rates, Adults (18-49 and 50-64) 2008- 2009



	18-49	50-64
Whites	21.6	36.5
African American	16.5	28.2
Hispanic Americans	14.5	22.5

2009 H1N1 Deaths (AIAN)







Indians and Alaska Natives in at least 12 states across the nation was four times higher than rates for all other groups. [1]

• One-third (35%) of people hospitalized with H1N1 in 13 metropolitan areas of 10 states were non-Hispanic black, compared to 16% non-Hispanic white in study areas. [2]

^{*} Unpublished data from CDC for the period April 15-August 31, 2009; [1] CDC. Deaths Related to 2009 Pandemic Influenza A (H1N1) Among American Indian/Alaska Natives—12 States, 2009. MMWR Weekly, December 11, 2009 / 58(48); 1341-1344. Retrieved on May 3, 2010 from http://www.cdc.gov/mmwr/preview/mmwr/preview/mmwr/thrm/5848a1.htm. [2] CDC. 2009 H1N1 and Seasonal Flu and African American Communities: Questions and Answers. Unpublished data. Retrieved on May 4, 2010 from http://www.cdc.gov/h1n1flu/african_americans_qa.htm#ref

Preliminary Vaccination Coverage Rates, 2010-2011



• White 70.0

African American 50.2

• Hispanic Americans 54.9

Overview of Problem









- Disproportionately more underlying chronic diseases in racial and ethnic minorities
- Fewer resources (less income, insurance)
- More barriers (language, literacy, other social determinants)
- Continued lack of awareness
- Vaccine Hesitancy (fear, Tuskegee effect, complacency)
- Health care system barriers (inconvenient hours, long wait times, confusion over requirements, provider failure to recommend, health care provider attitudes)

HHS Interagency Task Force on Seasonal Influenza Vaccination

- Goal: Bolster and extend HHS' efforts on universal flu vaccine coverage
 - Led by ASH
 - Includes reps from all components of HHS:
 CDC, CMS, FDA, HRSA, OMH, NVPO,
 Partnership Center, AoA, ACF, OWH and
 Regional Health Administrators
 - Address both short term and long-term policies and programs to increase vaccination coverage.
 - Working groups to focus on key priority areas.
 - Leveraged department resources in key areas.

2010-11 HHS Minority Outreach Flu Workgroup



- Lead by Office of Minority Health (OMH)
- Agency wide plan to address misconceptions around vaccination risks and safety, disseminate information about vaccine importance and availability, and promote greater access to vaccinations
- Coordinated actions to help increase seasonal influenza rates in racial and ethnic minorities and underserved

2010-11 HHS Minority Outreach Goals for Seasonal Influenza Vaccine







- Raise Awareness
 - Implement Media Activities targeted to racial/ethnic minorities and hard to reach populations to increase awareness and provide accurate and timely information
- Promote Greater Access to and Availability of Vaccines
 - Address barriers affecting vaccination rates in racial and ethnic, and hard to reach populations
- Promote Community Outreach
 - Partner with community outreach and collaborative initiatives to improve access to and acceptance of seasonal influenza vaccinations

HHS Protecting All From Flu Initiative

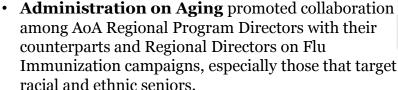


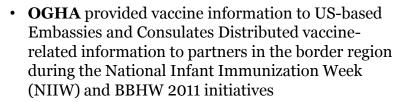




- Demonstration Project to address health disparities and influenza vaccination in cities around the country.
- 8 cities with focused community outreach; provider outreach and vaccine voucher distribution program
- Additional cities received pharmacy vouchers
- Significant involvement from local and state public health
- Significant engagement of community partners and organizations

Goal 1: Raise Awareness (Agency Activities)





 CMS provided messages to providers to encourage them to get and give the flu vaccination and secured over 30 multicultural partners for the 2010-11 campaign.

Goal 1: Raise Awareness (Agency Activities, continued)

- HRSA worked with regional offices on disseminating and promotion of Regional Pilot
- IHS promoted the seasonal flu vaccine PSA featuring Native American actor Wes Studi and conducted flu vaccine promotion segment on Native American Calling (nationwide radio call in show)

Project on health disparities and influenza.





Goal 1: Raise Awareness (Agency Activities, continued)



 OMH collaborated with the National Medical Association and the National Hispanic Medical Association to conduct health care provider flu vaccination education, outreach, and practice strategies (standing orders, provider education seminars, reminder/recall) in eight geographic areas. and vaccinated popular Radio Personality (Tom Joyner), staff and family on air to promote importance of Flu Vaccinations



Tom Joyner Morning Show September 28, 2010











Photos © Rance Elgin/Black America Web

 Dr. Garth Graham administers flu shots to Tom Joyner and staff during his live radio broadcast.

Goal 2: Promote Greater Access to and Availability of Vaccines







- **CDC** collaborated with HMA to distribute 14,000 free vouchers in 16 Hispanic markets; conducted media and community outreach to 25 Hispanic markets.
- CMS conducted flu clinics and vaccinated 1000s of enrollees in conjunction with Part D Annual Enrollment Program; Provided messages to providers to encourage them to get and give the flu vaccination.
- OMH lead efforts to secure 350,000 free seasonal influenza vouchers from Walgreens (valued at over \$10 million) to cover the cost of vaccinating uninsured and underinsured racial and ethnic minorities.

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Goal 3: Promote Community Outreach



- OGHA sponsored a promotora conference that included over 290 promotores from the Paso del Norte Region (El Paso, TX; Las Cruces, NM; Ciudad Juarez, Chihuahua)
- IHS conducted mass vaccination exercises and community based vaccination clinics (e.g. senior centers, schools, at workplaces, etc.); supported walk-in vaccination clinics

Goal 3: Promote Community Outreach







- **OMH** provided guidance and funding to HHS regional offices to support community engagement and outreach:
 - Communications
 - · Community health workers
 - Special Flu vaccination clinics in day care, schools, correction facilities, etc.

Many Targeted Actions



- Targeted Media Events
- National, Regional, and Local Outreach
- Provider Education, Standing Orders and Reminder Recall
- Engagement of national and regional partner organizations
- Partnership with Pharmacies
- · Webinars and Facebook Messaging
- Outreach through Border Health and Embassies to reach Immigrant and Undocumented

Lessons Learned Seasonal/Pandemic: CMS Data







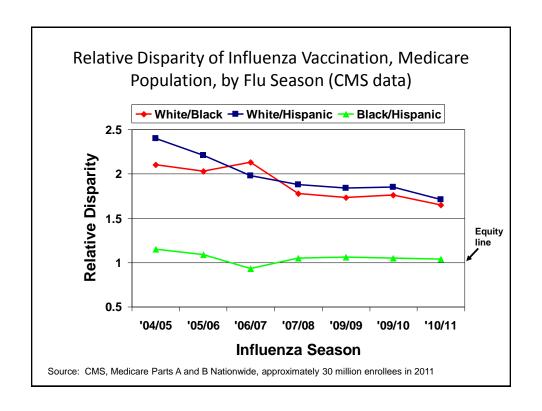
Potential Advantages

- Only two week delay
- Coverage for all areas and over time
- Large N allows for sub-analyses (e.g., by race)
- Internally consistent and Linked to morbidity data

Many Caveats:

- Only Medicare fee for service patients
- Adjusted for reporting delays
- Coverage levels poorly correlated with CDC survey data:

CDC	CMS
75.2	52.7
68.0	31.8
76.5	30.7
	75.2 68.0



Lessons Learned: Communications



Remaining issues:

- Earlier Planning/Earlier kickoff
- Improved use of HHS resources and universal materials
- Engage more provider organizations
- Improve appropriateness of content and availability of easy to read minority outreach materials

Lessons Learned: Outreach and Vaccine Access



- Earlier Planning/Earlier kickoff
- Earlier collaboration and outreach to Pharmacies
- Engage more local community partners
- Conduct more grassroots community outreach
- Address Vaccine Hesitancy/Fears

Barriers Still Remain to Vaccination in Minorities



- Value of vaccination:
- Vaccine cost
- Access and availability
- Patient and Health Care Provider Complacency
- Vaccine Hesitancy
- Patient beliefs
- Consumer misinformation

2011-12 Minority Outreach Plans





 Assess 2010-2011 accomplishments of minority health care provider activities



- Increase social media use to encourage public action
- Creation and dissemination of Low Literacy, culturally appropriate communication materials for racial and ethnic minorities
- Collaboration with academic institutions to promote vaccination of college students
- Promotion of outreach, communication, and vaccine availability in Community Health Centers
- Broader outreach to pharmacies to address vaccine availability and access