

Promoting COVID-19 Vaccine Dissemination among African Americans

ABNF

Policy Brief



The Association of Black Nursing Faculty (ABNF), Inc

- Professional Development
- Encouragement
- Support
- Communication

The mission of ABNF is to address health issues of concern to the Black community through the scholarly activities of the Black Nursing Professoriate

Policy Statement

The Association of Black Nursing Faculty, Inc (ABNF) recognizes that the novel coronavirus (COVID-19) continues to have a devastating impact on Americans' health, primarily ethnic minorities. Remarkably, ethnic minorities continue to have more COVID-19 cases, hospitalizations, and higher mortality rates than their White counterparts. African Americans and Latinos are 2.8 times more likely to die from COVID, while Native Americans are 2.6 times more likely than Caucasians (CDC, 2020a). The high mortality rates seen in African Americans, Latinos, and Native Americans are attributable to multiple factors such as life-threatening comorbidities, socioeconomic factors, and occupation related COVID exposure risks among frontline, essential and critical infrastructure workers (CDC, 2020a). Additionally, inadequate access to quality healthcare hinders diagnosis and treatment of COVID within ethnic minority communities. In the wake of recent emergency approval of multiple COVID vaccines, there are new threats to COVID treatment in African American communities—fear and suspicion. Fear of the medical community is historical and well-documented. Racial and ethnic disparities and medical atrocities such as the United States Public Health Service Syphilis Study at Tuskegee (i.e., the Tuskegee Syphilis Study), the Sims' gynecological study on enslaved Black women, and John Hopkins' Henrietta Lacks cancer study serve as consistent reminders of how untrustworthy the healthcare system can be toward African Americans. African Americans must set aside this troubled past, trust science, and get inoculated.

ABNF, a historically Black nursing organization, seeks to assist African American communities to better understand the science supporting vaccine administration, to promote fairness in its delivery, and to ensure that ethnic minority communities and other marginalized groups gain access to the COVID vaccine. The widespread inoculation of the COVID-19 vaccine is essential to flattening the curve, building herd immunity, and reducing infectivity in the United States. Therefore, ABNF calls for the fair and equitable distribution of the COVID vaccine, focusing on social justice and reducing COVID-related health disparities. ABNF agrees with the CDC (2020b) that we should supply the vaccine to the following groups in the initial phase of distribution due to limited supply: elderly (i.e., 65 and above), those with comorbidities, health care employees, and frontline, essential and critical industry workers.

Overview

African Americans remain a minority group

within the United States representing only 13.4% of the population, according to the U.S. Census Bureau (n.d.). However, African Americans are 37% more likely to die from COVID than Whites (Keating et al., 2020). The disproportionate death rate in African Americans is impacted, in part, by health disparities, social factors such as income, housing and employment as frontline, essential or critical industry workers (Cilluffo et al., 2017). Health disparities have devastated African American communities and are an ongoing issue which deserve to be vigorously addressed by local, state and national government. While untoward social determinants of health are notable and actionable factors in contracting the virus, accessing quality treatment and historical mistrust of the healthcare system can derail vaccination efforts in African American communities. These fears are neither misguided nor unfounded. They are rooted in the medical and social mistreatment of African Americans from slavery to present-day.

African Americans have literature supported reasons for their continued suspicion of the medical community (Arnett et al., 2016). Moreover, this mistrust has been found to delay treatment efforts for communicable diseases such as HIV as well as preventive screening efforts (Adams et al., 2017; Kalichman et al., 2017). It is very probable that medical mistrust will hamper African American COVID vaccination rates. For instance, a recent Pew Research report indicates, only 42% of African Americans surveyed report willingness to get the COVID vaccination when compared to Latinos (63%) and Whites (61%) (Funk and Tyson, 2020). Unless a concerted effort is made to address the historical fears of this community and provide them with practical information and examples to alleviate their concerns, we will continue to experience difficulties with efforts to successfully vaccinate African American communities

Recommendations

ABNF supports a systematic distribution of COVID-19 vaccines beginning with at risk segments of the population to include early vaccination of nurses, especially public health nurses, and other frontline health care workers, elderly persons, persons with comorbidities and workers employed by frontline, essential and critical industries. Additionally, ABNF supports and expects transparency in data collection and provision of public access to information regarding side-effects and adverse reactions during all phases of the vaccines' use. We support provision of plain language materials to the public to assist with ease of public understanding. Further, we expect fair and equitable distribution of the vaccines. It is also impera-



tive that access to the vaccines be provided in disadvantage areas, and for teachers, to mitigate the spread for those who are in close proximity to children and at risk for exposure. ABNF calls for bolstered access to testing and treatment for all citizens, including uninsured and underinsured, poverty-stricken communities, persons experiencing homelessness, immigrants, and communities of color to assist with vaccine administration throughout the U.S.

ABNF supports the grassroots public health efforts of groups such as the Black Doctors COVID-19 Consortium in Philadelphia. Doctors in the consortium have dedicated themselves to increasing access to COVID-19 nasal swab testing, providing education and personal protective equipment to vulnerable and underserved communities of color in Philadelphia (*Coronavirus Philadelphia*, 2020).

ABNF supports measures to address the Coronavirus outbreak made by the US Department of Health and Human Services, the Centers for Disease Control and Prevention, the Centers for Medicare and Medicaid (CMS), and others in their call for objective and evidence-based approaches to the management of COVID-19.

ABNF joins with nursing and other healthcare organizations in the movement toward ensuring that only objective and scientific information will be utilized in the establishment of national guidelines and protocols in the management of the Coronavirus outbreak, both in national and global arenas (Gipson-Jones, et al., 2020).

Acknowledgements

ABNF congratulates and supports the decision of the Department of Health and Human Services (HHS) for its leadership in and oversight of the approval of the first COVID-19 vaccines by the Federal Drug Administration (FDA) and the Centers for Disease Control and Prevention (CDC, 2020c). ABNF represents nearly 100 nursing faculty, clinical educators, academic deans, and directors nationwide, who educate and train our front-line healthcare professionals. Many of our ABNF members are on the front line themselves serving COVID-19 patients. We welcome the potential and promise of these new vaccines and stand united with the federal government's efforts to eradicate the COVID-19 pandemic. We commend the pharmaceutical companies, laboratory scientists, vaccine trial volunteers, advisory review committees for ensuring the integrity of the development and clinical trials for the vaccines, and for overseeing the distribution of the vaccines to our frontline healthcare workers, especially nurses, but also pre-hospital responders, staff and residents of long-term care facilities, essential workers, and eventually to our underserved communities, as the vaccines become more readily available to help significantly reduce the U.S. COVID-19 burden.

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