

# **Building Equity**

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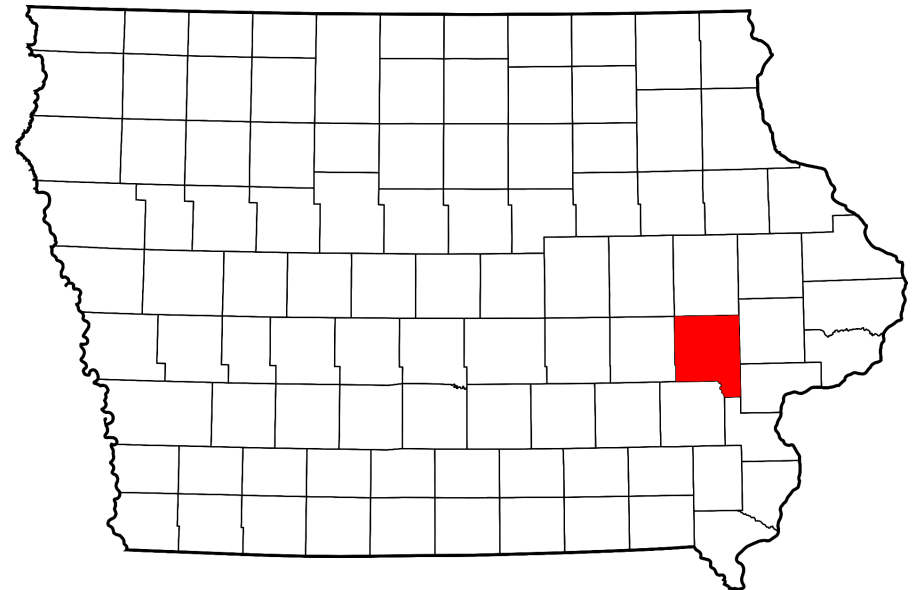
***Clinton Dimambu- Eschucha Mi Voz Iowa***

***Maria Torres- Pottawattamie County Public Health***

# Welcome and Expectation-Setting

- **This is NOT a health equity training**
- **We will share our experiences but we are NOT experts**
- **We can all learn from each other**

# Johnson County Experience



## Partnering for Vaccine Equity



Provide education  
and vaccine  
delivery at the  
community level

Identify and  
address  
drivers of  
vaccine  
hesitancy

Facilitate  
relationships  
between vaccine  
providers and the  
community to  
increase vaccine  
confidence and  
access to  
opportunities

Engage  
community  
stakeholders and  
influential  
messaging to  
support vaccine  
messaging

### Community of Focus: Refugee, Immigrant and Migrant Population

Refugee, immigrant and migrant population are disproportionately affected by health disparities because of social and economic barriers.

The total **measured percent** of foreign-born population in Johnson County is **11% (15,894)**.

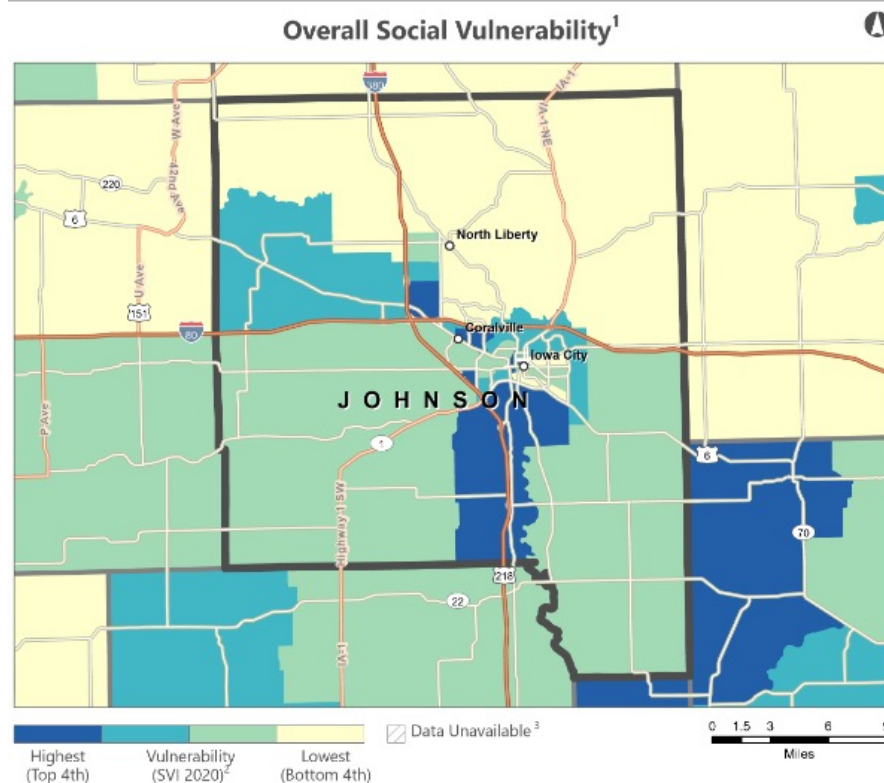
Escucha Mi Voz Iowa, an immigrant-led community organization that supports working-class, immigrant and refugee communities in Johnson County.

They are a trusted community partner and allowed us utilize their contacts to help conduct and serve this community

# Johnson County at a Glance

Total population: 156,420

- **68%** of the population are between the **age of 18-64** (105, 609)
- **96.2%** of the population are **high school graduates** and **54.1%** have a **Bachelor's degree or higher**
- **15,894** of the population are foreign born



CDC/ATSDR Social Vulnerability Index County Map – Johnson County, Iowa

## Race and Ethnicity:

White alone – 81.9%  
Black or African American, alone – 8.6%  
American Indian or Alaska Native alone- 0.4%  
Asian alone – 6.4%  
Native Hawaiian/Pacific Islander alone – 0.1%  
Two or more Races – 2.8%  
Hispanic or Latino- 6.1%

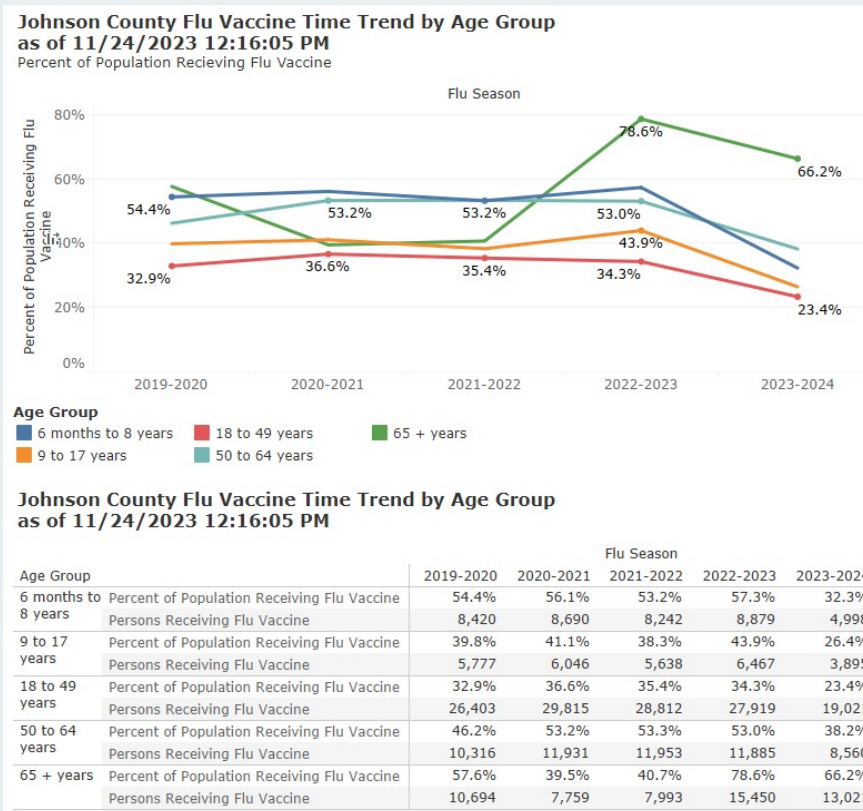
# COVID-19 and Influenza Vaccination Data in Johnson County

## COVID-19 Fully Vaccinated Individuals by Race and Ethnicity

- White: 64.4%
- Black or African American: 28.4%
- Asian or Pacific Islander: 47.4%
- American Indian or Alaska Native: 16.5%
- Hispanic: 57.3%

## Percentages of Population Receiving COVID-19 Vaccine by Age during 2023-2024 Season

- 6 Months to 8 years: 5.6%
- 9-17 years: 7.6%
- 18-49 years: 8.8%
- 50-64 years: 19.5%
- 65+ years: 40.8%



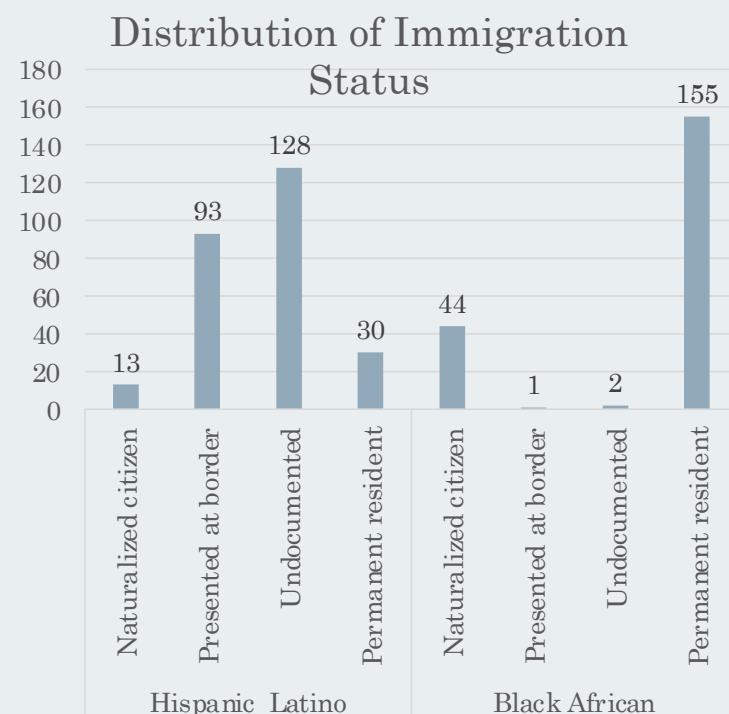
# Demographics

The total survey respondents was 481.

- 47% (217) were male
- 53% (246) were female
- 55% self identified as Hispanic or Latino
- 45% self identified as Black African

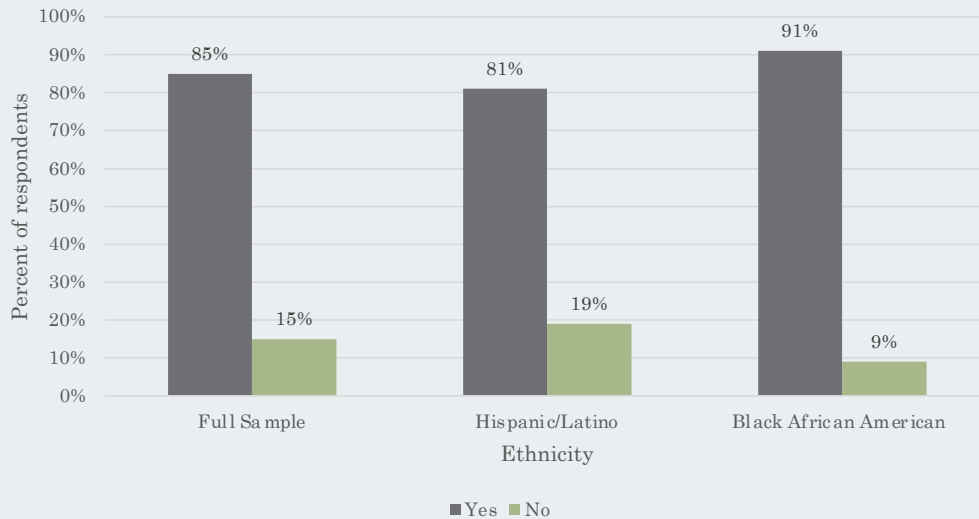
Health Insurance	Yes		No	
Hispanic or Latino	44	17%	220	83%
Black African	179	89%	23	11%
Total	225	47%	256	53%

Among the total respondents, 57 stated being naturalized citizens, 94 presented at border and are in asylum proceedings, 143 are undocumented and 197 are permanent residents.

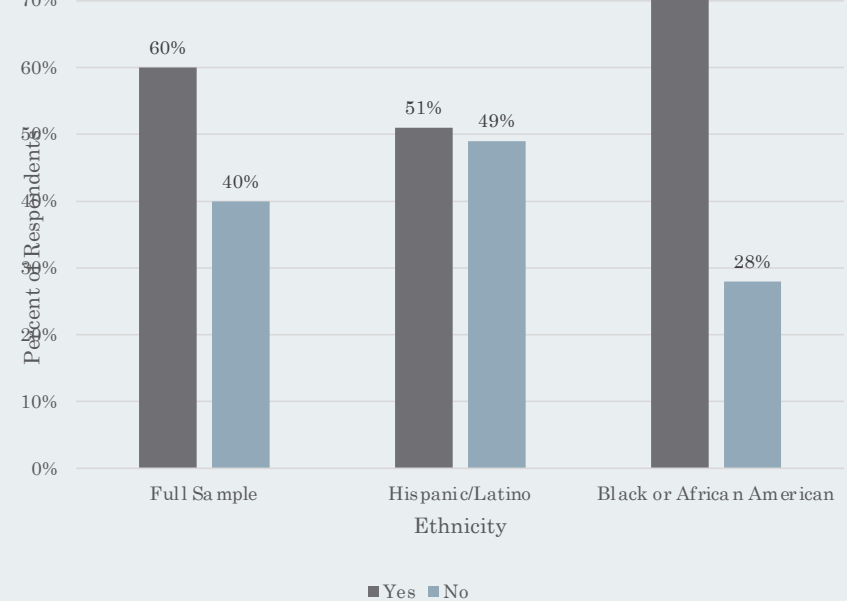


# COVID-19 and Influenza Vaccine Status

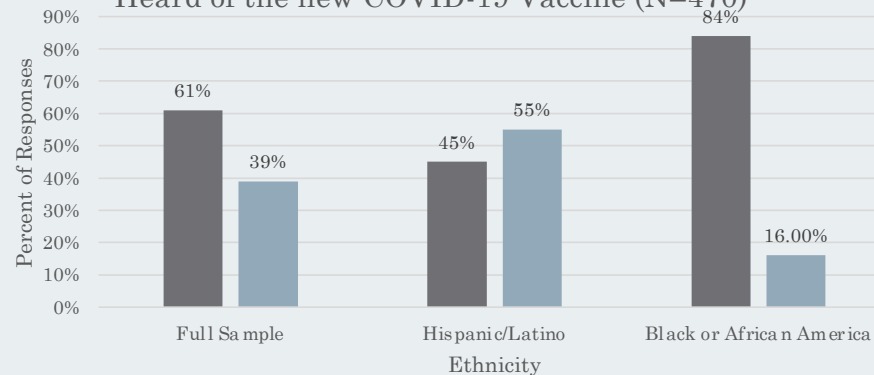
Percent of Respondents Vaccinated for COVID-19 by Ethnicity



Respondents Vaccinated for Influenza by Ethnicity



Heard of the new COVID-19 Vaccine (N=470)



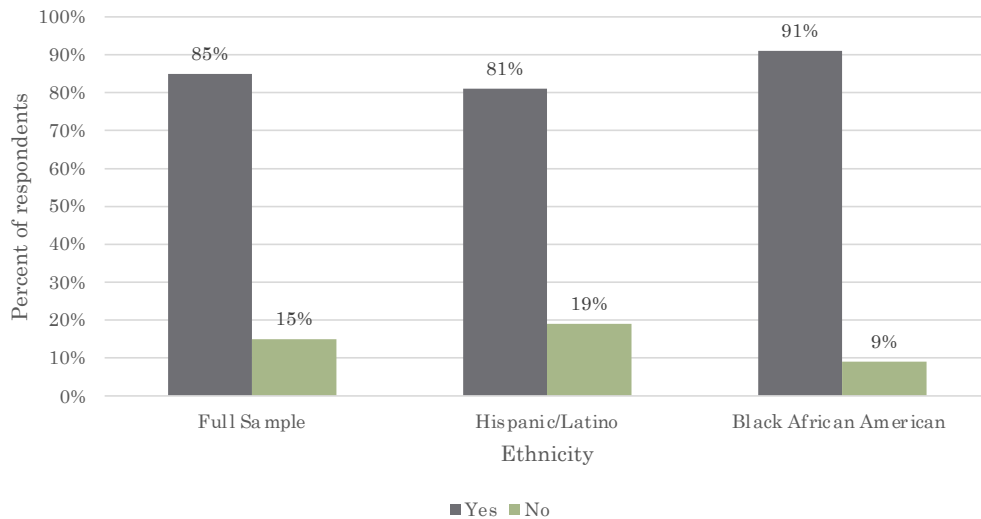
“Feels like you don’t need the vaccine anymore”- EMV Survey Respondent, translated from Spanish

\*See [Appendix](#) for more quotes

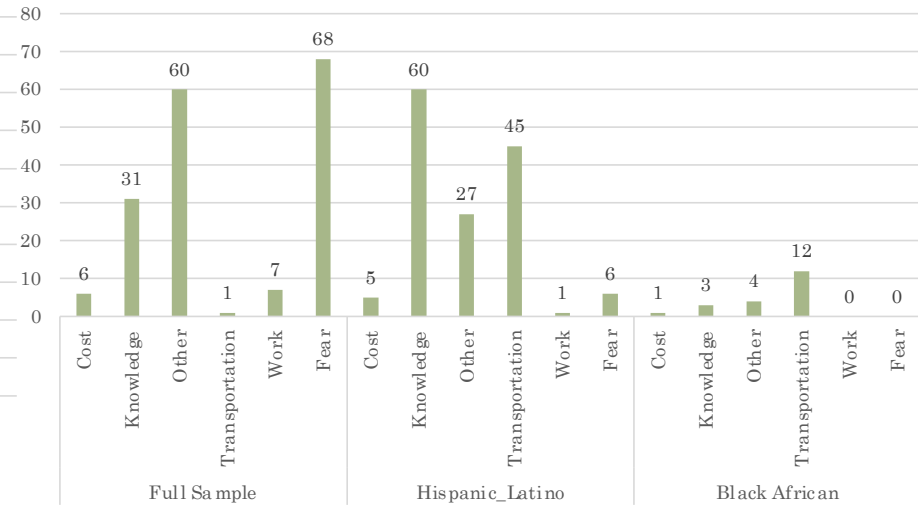


# EMV: COVID-19 Vaccine Status

Percent of Respondents Vaccinated for COVID-19 by Ethnicity



Reasons for not getting new annual COVID vaccine



Common themes found when looking at the “Other” open comments on what is stopping a respondent from getting the COVID-19 vaccine include:

- Nothing (16)
- Belief they longer needing the vaccine (10)
- Not interested (4)
- Other (9) includes hospitalization, belief that the vaccine causes sickness, not knowing where to get vaccinated and being pregnant

“Feels like you don’t need the vaccine anymore”- EMV Survey Respondent, translated from Spanish

\*See [Appendix](#) for more quotes

# What Challenges Exist Regarding COVID-19 Vaccination?

Selected Quotes and Comments from  
Intercept Interview and Digital Survey

*“Have free vaccine events as having those will have people find it convenient and it won’t be hassle to get into the doctor. Also, many people think it’s the same vaccine as others so make people understand the science and medicine around this vaccine and why it’s beneficial”* – Intercept Interview Respondent

*“Make it obvious that vaccines are free to [students]. Especially in the college town-- say that you aren't necessarily getting the vaccine for yourself but for others around you”*- Intercept Interview Respondent



Lack of information or clarity on the cost of the COVID-19 vaccine because they are busy and forget.



Lack of understanding of the benefits of the booster



Many respondents stated they felt sick after getting the vaccine and it discouraged them from getting vaccinated again.

# Thoughts on Influenza Vaccination

## Selected Quotes and Comments from Intercept Interview and Digital Survey

*“Didn’t feel like a priority for me. I know it is the responsible thing to do to keep at risk populations safe but I just never got around to it. I’m also a person who rarely gets sick so didn’t seem as important to me”*- Digital Survey Respondent

*“Scared of needles and lack of FluMist”*- Intercept Interview Respondent  
Mom never got him vaccinated and has been fine so he didn’t feel like he need to get one



Influenza vaccine isn’t as important to individuals because of busy schedules



Lack of understanding on the benefit of a yearly flu vaccine



Set beliefs and attitudes towards the influenza vaccine contribute to not getting vaccinated



Difficult to measure success of influenza vaccination without quality data from the State that is delineate



How can we make it a priority?

# Additional Findings

- Issues that are important to survey respondents
  - 24% Immigration reform
  - 22.3% Health insurance
  - 22% Raising wages
  - 21.9% Affordable housing
  - 9.1% Other
- 20% (98) of respondents had difficulty affording groceries every week
- 86% (416) of respondents **DO NOT** have paid sick leave

# Housing

- 116 respondents stating having 6+ people in their household
- 223 respondents pay more than \$800 in monthly housing cost
  - 115 self-reported as Black African
  - 103 Hispanic or Latino

**How many other families are living in the same house as you?**

	0	1	2	3	4+	Total
Hispanic or Latino	117	68	21	9	49	264
Black African	189	7	6	0	0	202
Total	315	80	28	9	49	481

# Recommendations

Challenges	Recommendations	Will this recommendation be implemented through the PAVE project?
<b>Cost</b> <ul style="list-style-type: none"> <li>Existing costs of influenza vaccine</li> <li>Newly-commercialized COVID-19 vaccines</li> </ul>	<ul style="list-style-type: none"> <li>Identify community resources for subsidized influenza vaccine costs</li> <li>Increase the reach of the COVID-19 Bridge Access Program for uninsured/underinsured</li> </ul>	YES
<b>Knowledge</b> <ul style="list-style-type: none"> <li>Changing recommendations</li> <li>Knowing who can provide doses</li> </ul>	<ul style="list-style-type: none"> <li>Maintain and disseminate up-to-date educational materials</li> <li>Recruit and train trusted messengers in the community for peer education</li> </ul>	YES
<b>Transportation</b> <ul style="list-style-type: none"> <li>Lack of access to providers able to address other challenges</li> <li>Lack of transportation in off-work hours</li> </ul>	<ul style="list-style-type: none"> <li>Work with community providers to increase their capacity to serve more of the community</li> <li>Collaborate with community entities to host mobile clinic sites</li> </ul>	YES
<b>Fear</b> <ul style="list-style-type: none"> <li>Adverse/unknown effects of vaccines</li> <li>Fear of government</li> </ul>	<ul style="list-style-type: none"> <li>Education by trained trusted messengers equipped with current info</li> <li>Community conversations to address fears directly</li> <li>Ongoing work building and maintaining trusting relationships with community</li> </ul>	YES
<b>Other</b> <ul style="list-style-type: none"> <li>Misinformation beyond lack of knowledge</li> <li>Vaccine fatigue</li> <li>Lack of urgency of the threat of disease</li> </ul>	<ul style="list-style-type: none"> <li>Local public health doing a better job of communicating pertinent data and actual risks to communities of focus</li> </ul>	YES

## Check In!

In your small group, discuss:

- Did Karrey and Clinton share anything that was surprising to you?
- Could you relate to their experiences? How?

# Pottawattamie County Lessons Learned



**POTTAWATTAMIE COUNTY**  
PUBLIC HEALTH

