MEMORANDUM

January 26, 2022

To: Jennifer Bryant, Director
Office of Management and Budget

From: Tiffany Ward, Director
Office of Racial Equity and Social Justice

Re: Racial Equity Impact Assessment (REIA) for Supplemental Appropriation #22-47
Immunization and Vaccines for Children Grant

I. FINDING: The Office of Racial Equity and Social Justice (ORESJ) finds that Supplemental Appropriation #22-47 is likely to advance racial equity and social justice in the County if the efforts involved in the request accelerate the reduction of existing racial inequities in vaccinations among children ages 5-11.

II. BACKGROUND: The purpose of Supplemental Appropriation #22-47 is to fund activities that will improve access to Covid-19 vaccines for children, and it will also continue the County’s community-based partnerships and vaccine equity coordination efforts.

On November 2, 2021, the Centers for Disease Control and Prevention (CDC) recommended that all children ages 5-11 years old receive a Covid-19 vaccine made by Pfizer-BioNTech. Montgomery County’s Department of Health and Human Services (DHHS) Pulse Reports\(^1\) began reporting on vaccine distribution for this age group on November 24, 2021. Since the reporting on this data began, consistently\(^2\) smaller shares of Black and Latino children\(^3\)—

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\(^2\) Due to data reporting issues from the Maryland Department of Health, data on pediatric vaccination was not available for the December 15th or December 22nd DHHS Pulse Report.

\(^3\) For the purposes of this assessment, children refer to ages 5-11, unless otherwise noted.
compared to their representation in the population\textsuperscript{4}—have received their first dose of the vaccine. At the same time, larger shares of Asian and White children have received their first doses compared to their representation in the population. Currently, the overrepresentation of Asian and White children and underrepresentation of Black and Latino children among the vaccinated first dose population (compared to their representation in the population overall) raises concerns about whether the distribution of and access to vaccines in the County is equitable.

Overtime, as a larger percentage of children get vaccinated, and assuming access is equitable, we would expect to see the percentage of Black and Latino children grow and eventually match their representation in the overall population, while we’d expect to see the percentage among Asian and White children to decrease and eventually match their representation in the population. Comparing data from December 2\textsuperscript{nd} and December 27\textsuperscript{th}\textsuperscript{6}, we can see early signs of this shift. For example, the percentage of vaccinated children who are White decreased by six percentage points and the percentage of vaccinated children who are Black increased by three percentage points.

An equitable distribution would guarantee that all children are fully vaccinated and gain protection against Covid-19. Protection is critical for all children, but like racial and ethnic disparities affecting adults in the US, children of color are experiencing disproportionate rates of Covid-19 cases and deaths, in addition to the mental health and academic impacts\textsuperscript{7} of the pandemic. According to CDC data from October 2021, Hispanic/Latino, Black, and Native Indian/Alaska Native children have experienced disproportionately higher percentages of Covid-19 cases and deaths. For the 5–11-year-old cohort, Hispanic/Latino and American Indian / Alaska Native children had higher percentages of cases compared to their representation in the US population. Black children experienced the starkest disproportionality in percentage of deaths compared to their representation in the US population. For additional context, Black children were the only racial and ethnic group to experience higher percentages of deaths than cases; the opposite is true for all other races. This was consistent across age groups as well (except for Asian non-Hispanic children ages 12-15). These disparities are highlighted in the below chart.

\begin{itemize}
  \item Population refers to the population of children in Montgomery County who are ages 5-11.
\end{itemize}
Racial Equity Impact Assessment (REIA) for Supplemental Appropriation #22-47 Immunization and Vaccines for Children Grant

January 26, 2022
Page 3 of 4

<table>
<thead>
<tr>
<th>Race/Ethnicity</th>
<th>Percent of cases</th>
<th>Percentage of deaths</th>
<th>Percent of US population</th>
</tr>
</thead>
<tbody>
<tr>
<td>Hispanic/Latino</td>
<td>31.9</td>
<td>30.9</td>
<td>25.93</td>
</tr>
<tr>
<td>American Indian / Alaska Native, Non-Hispanic</td>
<td>1.5</td>
<td>2.4</td>
<td>0.85</td>
</tr>
<tr>
<td>Asian, Non-Hispanic</td>
<td>3</td>
<td>0.8</td>
<td>5.06</td>
</tr>
<tr>
<td>Black, Non-Hispanic</td>
<td>12.9</td>
<td>21.1</td>
<td>13.78</td>
</tr>
<tr>
<td>Native Hawaiian / Other Pacific Islander, Non-Hispanic</td>
<td>0.3</td>
<td>0.8</td>
<td>0.2</td>
</tr>
<tr>
<td>White, Non-Hispanic</td>
<td>44</td>
<td>38.2</td>
<td>49.6</td>
</tr>
<tr>
<td>Multiple/Other, Non-Hispanic</td>
<td>6.3</td>
<td>5.7</td>
<td>4.57</td>
</tr>
</tbody>
</table>

Source: CDC | Data as of: Sunday, October 17, 2021, 12:37 PM ET. Posted: Sunday, October 17, 2021, 2:17 PM ET. Data from 35,717,611 cases. Race/Ethnicity was available for 23,386,093 (65%) cases. Data from 586,246 deaths. Race/Ethnicity was available for 494,407 (84%) deaths.

The Kaiser Family Foundation (KFF) adds detail about disparities in hospitalization and death rates at the national level, reporting:

- American Indian/Alaska Native and Hispanic children had the highest rates of hospitalization, followed by Native Hawaiian and Other Pacific Islander and Black children, who were two to three times as likely to be hospitalized than White children.\(^8\)
- Death rates from Covid-19 were 3.5 higher for American Indian/Alaska Native and 2.7 times higher for Black children than for White children; Hispanic children were also more likely to die from Covid-19 than their White counterparts.\(^9\)

Even prior to the availability of vaccines for children ages 5-11, KFF warned\(^10\) about potential disparities in vaccine distribution affecting children of color, stating that “Hispanic and Black parents are more likely than White parents to report potential access barriers to vaccination”.\(^11\)

Reported barriers include:\(^12\):

- not being able to get the vaccine from a trusted place
- believing they may have to pay an out-of-pocket cost
- having difficulty traveling to a vaccination site

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9 Samantha Artiga, Latoya Hill, Nambi Ndugga.


11 Samantha Artiga, Latoya Hill, Nambi Ndugga.

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Racial Equity Impact Assessment (REIA) for Supplemental Appropriation #22-47 Immunization and Vaccines for Children Grant
January 26, 2022
Page 4 of 4

- needing to take time off work to get their child vaccinated

Because of these disparities in access and long-standing economic, health, and housing inequities disproportionately affecting households of color, equitable vaccine distribution will be key in ensuring high rates of vaccine coverage in the County overall.

At the local level, continued utilization of the Montgomery County, MD Framework for Equitable Access to Covid-19 Vaccination\textsuperscript{13} and evolving strategies to respond to national trends that may also be present in the County (i.e., high early demand for vaccinating children with a leveling off effect since late November\textsuperscript{14}) will help address the barriers to vaccination that are contributing to racial disparities in Covid-19 impacts.

cc: Ken Hartman, Director, Strategic Partnerships, Office of the County Executive
