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## People of color could be prioritized in Oregon's COVID-19 vaccine rollout to tackle 'structural racism' in healthcare as just 6.2% of the state's population is vaccinated

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**<u>Oregon</u>**'s <u>**COVID-19**</u> vaccine committee has proposed prioritizing shots to communities of color in order to tackle 'structural racism' in healthcare.

The state's 27-member COVID-19 Vaccine Advisory Committee recommended Thursday that the next eligible group to get the shot should be the roughly 806,000 people that make up the BIPOC - black, indigenous, and other people of color - communities across the state.

It also recommended people with underlying chronic conditions - about 1.8 million Oregonians - be next in line pitting these two groups ahead of some essential frontline workers and prisoners.

The committee, made up of representatives and public health professionals, was set up by the state and tasked with the job of recommending the order in which vaccines are administered.

The state has said it will follow its recommendations but Governor Kate Brown and the Oregon Health Authority do hold the final say.

Brown has already been forced to defend the state's vaccine plan after facing a backlash from some Oregonians over her controversial decision to vaccinate teachers ahead of people aged 80 and over.

This comes as the state has been lagging behind many other parts of the US in getting shots in arms, with just 6.2 percent of its population so far being given a shot.

The Oregon COVID-19 Vaccine Advisory Committee narrowed down its proposed list for those next in line for the COVID-19 vaccine in its meeting Thursday.

The recommendation to focus next on people of color and those with chronic health conditions would encompass a huge priority group of 2.5 million people or 60 percent of the entire population.

This would come on top of the 1.4 million people currently prioritized including.....

The committee agreed that communities of color and people with chronic health conditions are worst affected by the pandemic and health inequities but there was disagreement over how best to focus on these groups. Kelly Gonzales, representing Oregon Health & Science University, Portland State University and the urban Native community, said people of color should come ahead of people with chronic conditions in order to tackle 'structural and systemic racism'.

She argued that bumping people of color down the list was 'whitewash[ing]'.

'I don't agree with removing BIPOC as the first priority. I think it whitewashes the structural racism and systemic racism that we are trying to center,' she said.

'By centering on BIPOC people and then including chronic conditions, there is an overlap there.'

Kalani Raphael, from Oregon Pacific Islander Coalition, said focusing on chronic conditions first will cover much of the BIPOC community given it is adversely affected by ill-health.

'Chronic health conditions are more common in minority communities,' Raphael said.

'[Starting with chronic conditions] targets the most vulnerable people within our communities and it is one approach to this very, very complicated problem.'

Oregon state lawmakers of color waded into the debate Monday in a letter sent to the committee saying it should prioritize essential workers and that way people of color will be prioritized.

'We strongly believe that we need to prioritize the people who are in significantly vulnerable situations and who are dying right now - frontline workers, adults in custody, and people in low-income senior housing and other congregate care facilities,' wrote members of the Oregon Legislature's BIPOC Caucus in the letter, per <u>OPB</u>.

The lawmakers urge the committee to 'base its decisions on the data of who is most vulnerable because of their occupation and living position.'

'These frontline and essential workers, adults in custody, and people in low-income senior housing and other congregate care settings, are disproportionately BIPOC, and by prioritizing frontline and essential workers and communities, we are centering BIPOC communities,' it reads.

The committee will meet again January 28 to make a final recommendation which will be passed to the governor and state health officials to take action.

The state entered phase 1B group 1 of its vaccine rollout plan Monday which extended eligibility to childcare providers, early learning and K-12 educators and staff.

This includes roughly 105,000 people and is in addition to the 400,000 people already eligible in phase 1A including, among others, hospital staff, residents in long-term care facilities, workers in correctional facilities, caregivers, and people with medical conditions or disabilities who receive service at their homes.

In February, rollout will be extended to another 795,000 people.

These are in order: people aged 80 and over; 75 and over; 70 and over; and 65 and over.

The plan for the remainder of the population is still being determined by the state with the help of the vaccine committee but covers critical workers in high-risk settings, people with underlying

conditions, inmates and staff in prisons, jails and detention centers, as well as the general population.

Prioritizing the 806,000 BIPOC people would mean a longer wait for these remaining groups.

But such a move comes after communities of color have been disproportionately affected by the pandemic across both Oregon and the nation.

CDC data shows that black people and Hispanic people are both 2.8 times more likely to die from COVID-19 than white people.

American Indian or Alaska Natives are 2.6 times and Asian people 1.1 times more likely.

Communities of color are also more likely to suffer worse when contracting the virus, with Hispanics 4.1 times, American Indians or Alaska Natives 4 times and black people 3.7 times as likely to be hospitalized.

The CDC said the disproportionate impact of the virus on certain ethnic groups is down to several factors including socioeconomic status, access to health care, and exposure to the virus by being frontline, essential, and critical infrastructure workers.

Racial disparities have also emerged in the rollout of the vaccine to date.

White people are getting the vaccine at more than twice the rate as black and Latino people, according to a recent <u>CNN</u> analysis.

Analysis of data from 14 states showed more than 4 percent of the white population has received a shot compared to just 1.9 percent of the black population and 1.8 percent of Latinos.

Experts have put it down to both limited access as well mistrust among the black community in the safety of the vaccine.

While 71 percent of black Americans know someone who has been hospitalized or died from the virus, just 42 percent said they would get a vaccine straight away if it were available today, according to Pew Research Center in December.

This lack of trust is deep-seated in a lack of trust in the medical industry following a history of systemic racism.

Given the lack of inequity in both the toll the pandemic has taken and the vaccine rollout, Oregon asked the committee to consider equity and anti-racism when making its vaccine plan recommendations.

However, questions are mounting over whether a plan to prioritize people by race will face legal challenges after a similar move to prioritize COVID-19 relief to the state's black businesses sparked a litany of lawsuits from white business owners.

Experts warned rolling out the vaccine by race could be a violation of equal protection laws.

'This runs into the Fourteenth Amendment to the Constitution, which says citizens of all races are entitled to the equal protection of the laws,' according to Walter Olson, a senior fellow at the Cato Institute's Robert A. Levy Center for Constitutional Studies, in a recent **article**.

'The Supreme Court has long interpreted this to mean that the government may ordinarily not dole out valuable benefits, or impose harms, based on a citizen's race.'

Oregon is already facing dozens of lawsuits after lawmakers approved a plan to earmark \$62 million of its \$1.4 billion federal COVID-19 aid for black residents business owners.

Almost \$50 million of the funds were awarded but a court blocked the remaining funds after several lawsuits - by white business owners - were filed claiming the move was racial discrimination.

The allocation of the remaining money is now on hold until the litigation is resolved and it is likely a vaccine program that also serves to tackle deep-rooted racial barriers will also face legal challenges.

The state is already facing a backlash over its current rollout plans after it started vaccinating teachers ahead of the elderly.

Brown defended the decision Friday saying it is crucial to vaccinate educators so schools can start safely reopening in February.

She said schools need to return for the sake of students' 'suffering' mental health.

As it stands, people aged over 80 can start receiving the vaccine from February 7.

To date, just 308,066 vaccines have been administered across the state, with just 6.2 percent of Oregonians receiving at least one dose and just 1 percent having got both doses.

Just over half (52.3 percent) of the doses delivered to the state have gone into residents' arms with a staggering 47.7 percent sitting unused, according to Bloomberg data.

This pits the state lower than the national average of 55.2 percent of doses delivered being administered to date.

To date, Oregon has recorded 139,355 infections and 1,904 deaths from the virus.

A total of 7,592 people are currently hospitalized across the state.