

# *Influenza Disparities in Minorities and Seniors*

Influenza vaccine disparities among African Americans, Hispanics and other minority groups have existed for many years. Previous studies estimate that nearly 5,000 African Americans and 2,000 Hispanics die each year due to influenza and pneumonia-related complications in higher numbers when compared to other populations<sup>1</sup>.

Influenza coverage among minority populations remains low:

- In 2013-14 season, for adults 18 years and older, data from the CDC's National Internet Flu Survey showed that influenza vaccination coverage among non-Hispanic whites was 39.8 percent, while vaccination coverage among non-Hispanic blacks was 34.6 percent, 37.3 percent among Hispanics, and 40.7 percent among other races.<sup>2,3</sup>

- In 2013-14 season, vaccination coverage among children 6 months to 17 years of age, was highest among whites (41.1%) compared to African Americans (37.6%), Hispanics (41.2%), and 46.1% among other races.<sup>2</sup>

Older adults are especially at increased risk for complications from influenza infections. More than 90% of those who die from the flu are aged 65 and older.<sup>3</sup> Even though Medicare covers the cost of flu shots for seniors, only about two-thirds receive the vaccinations.<sup>4</sup>

Approximately, one fourth of hospitalizations and three-fourths of influenza related deaths occur in people older than 65.

Healthy People 2020 focused on the immunization health of seniors and has set a goal of immunizing 90% of persons aged 65 years and older by the year 2020 ([www.healthypeople.gov](http://www.healthypeople.gov)).

Although flu vaccination coverage has increased in Hispanics this season, disparities in flu vaccination among African Americans remain significant. Continued efforts with proven strategies will be needed to increase the number of minorities protected against the flu and minimize their risks from influenza complications. Minority providers should strongly recommend flu vaccination and adopt standing orders and implement effective patient recall/reminder system to ensure unvaccinated patients receive a vaccination as soon as possible.

## **References:**

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3. *Centers for Disease Control and Prevention : MMWR February 2014 63(07); 137-142*  
[http://www.cdc.gov/mmwr/preview/mmwrhtml/m6307a1.htm?s\\_cid=mm6307a1\\_w](http://www.cdc.gov/mmwr/preview/mmwrhtml/m6307a1.htm?s_cid=mm6307a1_w)
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5. <http://www.cdc.gov/flu/fluview/reports/report1314/trends/index.htm> (*Interactive Maps by state*)

## **Barriers to vaccination**

Socioeconomic and insurance status, language and access barriers contribute to disparities in influenza vaccination among minorities. African Americans are more reluctant to be vaccinated outside of the provider's office. Non-English speaking persons such as Hispanics face insurmountable language barriers in accessing health care. Minorities also have different health-seeking behaviors that impact their decision to seek or delay care. Some health care providers do not provide preventive services such as influenza vaccinations to their clients in minority Communities.<sup>4</sup>

However, even if access, language and lack of insurance problems were resolved and resources were more equitably distributed, challenges still remain in persuading minority groups of the importance of the yearly influenza vaccination and in getting providers to adapt systems that will improve vaccination rates. These challenges include the following:

### **Reluctance to get vaccinated due to:**

- Negative patient perceptions, fears and mistrust of the influenza vaccine
- Incomplete and inaccurate information about influenza regarding the safety and efficacy of the vaccine
- Lack of sufficient provider targeted information regarding the ease and importance of getting the influenza shot
- Lack of physician standing orders
- Lack of recall/reminder systems
- Lack of available consumer-oriented information on influenza from health professionals.

- Lack of electronic medical records to easily access and identify patients requiring influenza vaccination

## **Strategies to increase influenza immunization rates**

A physician's recommendation is the most often cited reason people receive immunizations. It is therefore incumbent upon medical professionals to enlighten and educate patients about the availability and effectiveness of vaccines. Other strategies might include:

- **Standing Orders:** Helpful during flu season campaigns when a large number of people need the vaccine and individual physician orders are impractical. Recent research suggests that physicians who wrote standing orders for flu vaccination of all patients 65 and older, improved vaccination rates.
- **Reminder/Recall Systems:** Computers can be programmed to generate a list of patients who need the vaccine. Reminders can be sent via the telephone or mailed as postcards to patients.
- **Home Visits:** Organizations and home health care agencies that offer home visits can include flu shots as one of the services offered.
- **Public Education:** Health providers can use visual aids in their offices to remind patients about flu shots.