Global Vaccines During Pandemic Times: Older Low-Income Adults and Vaccine Equity

World Elder Abuse Awareness Day
Seventh Global Summit
June 14, 2021
About Us

**HelpAge USA** advances the wellbeing and inclusion of older people around the world through research, advocacy and programs. We work in the U.S. and with the HelpAge Global Network in 85 countries to ensure that the contributions of all older people are recognized, and they have the right to a healthy, safe, and secure life.
Introduction

Older people recognized as priority worldwide for the COVID-19 vaccine, but implementation has not considered unique needs, particularly low-income adults.

Little attention to questions such as:

- How will older people get information?
- Who will be their trusted advisors?
- How will family members support decision-making and access?
- How will attitudes towards the healthcare system influence the process?
- How will older people access the vaccine?
**U.S. Research Objectives and Method**

**Goal**
For insights to inform public health officials and community leaders, as well as guide further inquiry, in collaboration with older Black adults.

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**Older Black Americans hardest hit by COVID-19, but their voices largely go unheard**

Conducted in-depth phone interviews from Jan-Apr 2021 to explore their experience of the pandemic and views on the vaccine. Recruited through trusted partners. Worked closely throughout with the National Caucus and Center on Black Aging.

| **32** | Older Black adults interviewed |
| **5**  | Geographic locations in U.S.   |
| **70** | Average age of participants   |

Qualitative research can provide a rich view of the opinions of a small number of people. The value lies in revealing the range of opinions held and the intensity with which some people hold those opinions. The results from this research cannot, however, be used to project opinions of older Black adults as a whole.
### Widely Divergent Views about Vaccine

#### Skeptics and Questioners

<table>
<thead>
<tr>
<th>Rejectors</th>
<th>Wait and See</th>
<th>Pragmatists</th>
<th>Believers</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Medical abuses are cautionary tales</td>
<td>• Some see a possible connective thread to past</td>
<td>• Easy access</td>
<td>• Believe in science</td>
</tr>
<tr>
<td>• Insincere/bad intent of those pushing COVID-19 vaccine</td>
<td>• Fear of unknown side effects</td>
<td>• Doctor’s encouragement</td>
<td>• See link between past and present as problematic</td>
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<tr>
<td>• More broadly distrustful of vaccines</td>
<td>• Concerned about allergies, medications</td>
<td>• Don’t want to be die</td>
<td>• Dismiss rumors</td>
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</tbody>
</table>

#### Acceptors

**Most “Wait and See” Became Acceptors Over Time for Pragmatic Reasons**
Imperfect Information

• TV news predominates, little social media
• Struggle with conflicting information
• Gaps in information from routine or expected sources, like senior centers, libraries, elected officials

“...I think we have an obligation as citizens to educate ourselves. But when ... the library is closed, where do people go for information? Everybody doesn’t have access to the web and cable is expensive. They talk about programs like AT&T ... you can get for $10. What is being missed ... is if you’re a senior on a fixed income, even $10 is a lot of money.

- Male, GA, 67
### Complex Family Dynamics

**Aversion to crossing boundaries**

That's their body ... I can't tell them what to do, I haven't told them I'm not getting it.

- Female, DC, 71

**Denial**

They don’t want to hear about me getting sick .... They’re like “Mama let’s not talk about that.”

- Female, DC, 75

**Anger at irresponsible behavior**

...the ones we lost at our senior center ...

Their grandkids were coming home and giving it to their grandparents.

- Female, DC, 65

**Tension over different views on the vaccine**

My sister is a nurse and ... we get into very difficult conversations. I usually don’t even discuss it to be honest with you. This is not up for debate.

- Female, GA, 68
Inequitable Healthcare System

**Expectation of inadequate care and death if hospitalized**

I can’t tell you how many people ... tell me they saw that video about the black woman who ended up getting coronavirus and dying...she had done a video talking about how terribly she was treated.

- Female, CA, 64

**Trust of people in power not relevant in decision-making**

History has proven to me not to trust the medical people and not to trust anyone who is in power .... It’s not trust, it’s my options, my choices.

- Male, CA, 79

**Personal Physicians are exception**

They just came out with this and we need to know what happens. I'm waiting to talk to my doctor first.

- Female, DC, 71
Limited Influence of Public Figures

• Some say positively influenced by public figures
• A few are skeptical about credibility
• They know their own bodies so other people’s reactions don’t count
• Allergies and/or medications raise questions

“Some (black pastors) will sell you out quicker than the guy selling drugs on the corner.”
- Male, IL, 68

“I respect (Obama) but I’m not going to do it just because they say to do it. I think I can figure stuff out on my own, I’m going to go with what is best for me and my family.”
- Female, GA, 59
Access Barriers

• Feel at mercy of intermediaries due to tech barriers, mobility issues
• Frustration that others are getting the vaccines more easily

“I see these people standing in long lines on television and they’re all standing outside... I am not physically able to do that.”
- Female, DC, 71

“The area we live in is considered a minority area. We are frustrated because they keep saying we are reluctant, but ...they are just not available.”
- Female, GA, 59
Control and Impact

These adults know their own minds and want to be firmly in charge of their destiny. Some are pessimistic about the possibility of systemic change but there is also a desire for their needs to be considered and evidence it can make an impact.

“Before coronavirus hit, there’s a senior center at my church .. They would designate one or two people to speak, and we would change things and make an impact. (Female, DC, 71)

“... It’s no secret that we have been hurt all our lives ... Substandard healthcare, substandard food, substandard education, substandard housing. Everything is substandard, so it’s hard to change a whole lot ...

- Male, IL, 68
Global Vaccine Equity Barriers

Prioritization of older people on paper is not translating into practice in other countries as well.

Stumbling blocks related to:

- Digital barriers for older people unable to register online for the vaccine.
- Geographical access barriers to vaccination sites for older people in remote areas.
- Lack of awareness about vaccine effectiveness and misinformation is a major problem.

Lebanon

- Fear and misinformation about risks; failure to consider risks of COVID-19 to older people.
- Access barriers at vaccination sites faced by older persons with a disability or who are disadvantaged.
- Lack of any vaccination campaign targeting older persons, even though they are the most vulnerable, high-risk group.

The Gambia
Implications for Global Vaccine Equity

- Conduct research among older people in each country to understand barriers and facilitators.
- Empower appropriate community messengers to do outreach.
- Ensure information dissemination and quality: channels, accuracy, relevance, continuity.
- Ensure vaccine sites accessible to all.
- Engage older people in strategies to address vaccine rollout inequities.