

**Reinforcing Equitable Access to COVID-19 Boosters and Pediatric Vaccines**

On November 13, 2021, California allowed COVID-19 booster shots for everyone age 18 and above, as long as they met the timing requirement of being six months past the second mRNA vaccine of Pfizer or Moderna or two months after the initial Johnson and Johnson dose. State Public Health Officer Tomás Aragón instructed providers and local health officials to “allow patients to self-determine their risk of exposure” and “do not turn a patient away who is requesting a booster.” The Los Angeles County Department of Public Health immediately aligned with the State, encouraging booster vaccinations to all residents age 18 and above who met the timing criteria.

Although this initially moved further than federal guidance, the Food and Drug Administration (FDA) and the Centers for Disease Control and Prevention (CDC) fully authorized boosters for all adults age 18 and above on Friday, November 19. Now, everyone ages 50 and above or 18 and above with an underlying health condition is recommended to get a booster when they meet the timing criteria. Additionally, everyone ages 18 and above may get a booster when they meet the timing eligibility.

MOTION

MITCHELL \_\_\_\_\_

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This move was made with recognition that at six months after the Pfizer and Moderna second dose or two months after the Johnson & Johnson initial dose, the vaccine's protectiveness against symptomatic infection begins to wane. Additionally, studies have shown that the protectiveness against hospitalization and death also wanes slightly, however overall protectiveness against serious outcomes remains strong.

Given the onset of the holiday season and colder weather conditions brought upon by winter making it easier for the virus to spread, getting a booster is critical to increase protections and further slow spread once more. The County continues to average over 1,200 cases daily, driven by a steep rise in the rates of cases in unvaccinated people. In fact, unvaccinated people are nine times as likely to get infected and sixty-seven times as likely to get hospitalized. However, when cases in unvaccinated people increase and overall community spread increases, the likelihood of a breakthrough infection in a fully vaccinated individual also increases.

Unfortunately, in Los Angeles County disparities are once again characterizing the initial response. Of those age 65 and above, as of October 31 only 27% had received a booster dose, leaving this vulnerable population susceptible to breakthrough cases during the winter season. Additionally, only 19.2% of Latinx seniors, 20.2% of American Indian/Alaskan Native seniors, and 22.7% of Black seniors had received a booster dose. These communities have been hit hardest the past twenty months of the pandemic, and inequity in booster shots will only result in the same communities being susceptible to further disparate outcomes.

This trend is also replicated in the rollout of the pediatric vaccinations for 5-11-year-olds. As of November 14, 7% of eligible 5-11-year-olds had received at least one

dose of the vaccine. However, only 4% were administered in the hardest hit ZIP codes identified by the Healthy Places Index, compared to 12.5% in better resourced zip codes. This bears out when examining the data by race and ethnicity, with only 3% of Latinx children and 4% of Black children receiving a pediatric dose, compared to 12% of American Indian, 13% of White, and 14% of Asian children.

Disparities in vaccination efforts are not new, as the initial rollout of vaccines for adults was also characterized by significant gaps. However, after months of hard work on behalf of the Department of Public Health and community partners, many of those gaps have significantly closed. However, heading into the winter season there is great urgency to both close these initial pediatric and booster gaps and increase overall vaccination rates. It is imperative that the County mobilizes quickly to increase pediatric and booster doses, and to further encourage those who remain unvaccinated to do so before gathering with loved ones for the holiday season.

**I, THEREFORE, MOVE** that the Board of Supervisors direct the Department of Public Health to:

1. Engage with local and ethnic media, social media influencers, podcasts, to clarify the eligibility for booster doses and emphasize the importance of booster shots;
2. Engage with community-based organizations, federally-qualified health clinics, and faith-based organizations to participate in efforts to encourage booster and pediatric shots, and to partner on hosting vaccination clinics for the residents they serve;
3. Explore the feasibility of identifying existing funding to re-establish a vaccine incentive program, incentivizing boosters and childhood vaccinations;

4. Develop a plan to ensure that facilities serving the most vulnerable residents, such as senior facilities and those serving residents with Intellectual and Developmental Disabilities, are addressed through the booster vaccination campaign in a culturally and linguistically appropriate manner;
5. Regularly update the County Vaccination Dashboard to include booster shot and pediatric data broken down by demographic, city/community, and age;
6. Contact individuals vaccinated through the homebound program and proactively schedule appointments for their booster dose;
7. Collaborate with the Department of Mental Health and instruct Community Health Workers/promotoras to incorporate the importance of boosters and pediatric doses into outreach and messaging;
8. Prioritize areas in the HPI+ ZIP codes and high need ZIP codes as indicated by the Vulnerability and Recovery Index for mobile vaccination efforts for boosters and pediatric vaccination doses; and
9. Report back in 60 days on the results of these directives.

**I FURTHER MOVE** that the Department of Health Services ensure their patients and their families receive communications regarding the importance of booster and pediatric doses, as well as opportunities within DHS clinics to receive said doses.

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