



Black History Month: Talking Points & Research in Brief

This document collects talking points and research from Made to Save in recognition of Black History Month (BHM), which honors and celebrates the culture and contributions of Black Americans and takes place annually from February 1st to March 1st.

While our coalition has *always* prioritized Black, Indigenous and communities of color, BHM provides an organizing opportunity for Made to Save and coalition partners to specifically target, engage, celebrate, help address vaccination concerns in, and increase vaccination rates in Black communities.

We hope you find the content valuable. If you have any questions or feedback, please email Info@MadeToSave.org.

Talking Points

- Black History Month is a chance for us to take a step back and look towards the past, present, and future of Black communities.
- It's also an opportunity to directly address the shameful legacy of systemic racism and medical mistreatment in the United States, and highlight current-day efforts to improve access, break down barriers, and prioritize equity.

Black Americans have been critical to combating COVID-19.

- As we celebrate Black History Month, we must acknowledge the significant contribution of Black Americans to help combat the pandemic.
- Dr. Kizzmekia Corbett, a lead scientist of the Vaccine Research Center's coronavirus team at the National Institutes of Health, was central in the development of the Moderna vaccine. Dr. Corbett's years of research led to the discovery of a protein on coronaviruses that could serve as a target for the vaccines. Dr. Fauci: "Her work will have a substantial impact on ending the worst respiratory-disease pandemic in more than 100 years."
- All four HBCU medical schools — Drew, Meharry, Howard, and Morehouse — signed up as vaccine trial sites to make sure Black doctors, researchers, and communities were involved.

This page was last updated January 31, 2022. The information here has been aggregated from the CDC and other trusted medical resources and is not medical advice. If you have additional questions we encourage you to speak to a medical provider.

While our progress should be celebrated, much work remains to close the vaccination gap between Black and White communities.

- There's no ignoring that Black communities have been hit hard by the COVID-19 pandemic, causing an unequal amount of death and economic harm.
- In 42 states that are reporting race in their vaccination data, as of January 10, 2022, 60% percent of White and Hispanic people had received at least one COVID-19 vaccine dose, higher than the rate for Black people (54%). [[Source](#)]
- Despite the vaccination gap, according to a new study, Black Americans are more likely to overcome their vaccine indecision than White Americans. [[Source](#)]
- *"We tend to assume that this mistrust of the health care system and of health care innovations like vaccines – that's based in a history of racism and systematic mistreatment of Black populations by American health organizations – is something that can't be moved and that there is nothing we can do about it. Clearly that is not true"*—Lead study author Tasleem Padamsee, an assistant professor of health services management and policy in Ohio State University's College of Public Health.
- Organizations like the [Black Coalition Against COVID](#) have led the way in breaking through these barriers.

How we can take action, together, throughout the month to beat this pandemic and shine a spotlight on the work Black-led organizations are already doing:

- Made to Save will be putting together events and sharing stories throughout the month to paint the accurate picture of vaccination efforts by Black-led organizations.
- Join our efforts—or share your own by visiting MadeToSave.org or contacting us at info@MadeToSave.org
- To beat back the dangerous variants like Omicron, protect ourselves, and safeguard our families and communities, we must all get vaccinated and boosted. Visit Vaccines.gov, call 800-232-0233, or text your zip code to 438829 to get your free vaccine. No insurance or ID required.

This page was last updated January 26, 2022. The information here has been aggregated from the CDC and other trusted medical resources and is not medical advice. If you have additional questions we encourage you to speak to a medical provider.

Research in Brief

The following section highlights research documenting concerns faced by members of Black communities during the pandemic.

Black communities have been disproportionately impacted by the pandemic in part due to occupational vulnerabilities.

Black workers have had disproportionately higher rates of infection and mortality in part due to making up large shares of the [essential worker population](#). **Black workers occupy a greater proportion in [nine essential workforce professions](#):** Transportation and material moving, health-care support, food preparation and serving, building and grounds cleaning and maintenance, personal care and service, office and administrative support, protective service, production, and community and social service. Health professionals such as **social workers and at-home caregivers** are facing [increased burden in the pandemic](#), but are often not considered frontline health care workers. A majority are women from racial, ethnic and/or immigrant communities. Black essential workers have even [reported higher levels of stress and suicide ideation](#) than White essential workers.

The ongoing intersection between historical and structural racism has also been particularly taxing on Black communities during the pandemic.

Historical **mistreatment and discrimination by the U.S. healthcare system** has created distrust in members of Black communities that [impedes willingness to seek health treatment](#). [Recent research](#) has suggested **elevated mental health concerns** in members of Black communities since the pandemic started. Furthermore, acts of racism and police brutality that receive amplified attention in news coverage and social media during the pandemic have been [associated](#) with even greater symptoms of **anxiety and depression** for Black communities.

Improving the pipeline for Black doctors and health care workers can foster more support for Black communities' physical and mental health needs.

Black community health workers have [noted](#) that transactional, impersonal interactions with healthcare providers have made many Black patients feel that providers **do not fully understand Black communities' mistrust in the health care system** and do not care to attend to these concerns. **A lack of Black physicians and scientists [perpetuates feelings](#)** of a lack of understanding to these communities' needs, and recent research reveals Black patients are **more [responsive](#) to COVID-19 prevention messages from Black physicians**. A

This page was last updated January 26, 2022. The information here has been aggregated from the CDC and other trusted medical resources and is not medical advice. If you have additional questions we encourage you to speak to a medical provider.

[mobile vaccine clinic](#) conducted by Loma Linda University in San Bernardino included a Black pharmacist who completed several webinars prior to the clinic, which eventually vaccinated 351 people (84% were Black) and the county vaccination rate for the Black community went from 3% to 3.6% after just this one mobile clinic.

Though some progress has been made to improve vaccine confidence in Black communities, outreach can better address different types of hesitancy.

Recent research has suggested that **vaccine confidence has increased in the Black community**. Research published in the *Journal of Racial and Ethnic Disparities* emphasizes that COVID-19 vaccine hesitancy in Black communities is [multi-faceted](#) and that outreach should be prepared to address all facets. Hesitancy can occur because of **complacency** (such as feeling that COVID-19 infection is low risk and having preferences for other protection measures and treatments) and **lack of confidence** (specific concerns about the vaccine, vaccine technology, vaccine development timeline, and side effects in others). Hesitancy is also **distinct from resistance** (such as conspiracy theories, religious beliefs, and distrust of government and health care).