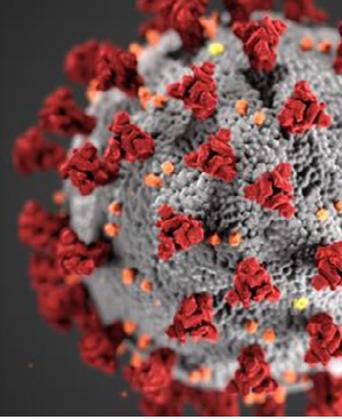


Strategies for Helping Older Adults and People with Disabilities Access COVID-19 Vaccines



Purpose

This document offers examples and promising practices for states, municipalities, community-based partners, and anyone else working to ensure that older adults and people with disabilities can get vaccinated for COVID-19. Across the country, people are engaged in creative approaches to outreach and education, vaccine appointment facilitation, website and vaccination site accessibility, and reaching people who cannot be vaccinated outside of their homes. These strategies can help states and other stakeholders to meet and exceed federal accessibility requirements and ensure that older adults and people with disabilities get vaccinated quickly and in a welcoming, culturally competent, and culturally relevant environment. While this document serves as a resource for promising practices, it is important to also be aware of the federal legal standards that prohibit discrimination against people with disabilities and older adults, which may apply to COVID-19 vaccination programs.¹ Visit the [HHS Office for Civil Rights](#) (OCR) for more information about civil rights and COVID-19 vaccination.

Background

The COVID-19 pandemic has disproportionately affected older adults, people with disabilities, and people with underlying health conditions.² Older adults are at the highest risk for severe illness and death due to COVID-19. People with Down syndrome and intellectual and developmental disabilities (I/DD) are also at higher risk for severe illness and death due to COVID-19.^{3,4} Furthermore, data collected by states suggest that all people who receive long-term services and supports in the community face an elevated risk of COVID-19 infection.⁵ For people of color in these populations, these risks are even greater.⁶

Due to their higher risk, the CDC recommended in December 2020 that states prioritize older adults and people with underlying health conditions to get vaccinated and has published resources to support state vaccination efforts for these populations. However, many states are still struggling to vaccinate older adults and people with disabilities.

All states have opened registration to older adults, and some have prioritized people with disabilities and their paid or unpaid caregivers, if applicable.⁷ However, according to news reports and information from the field, some states are failing to fully accommodate the needs of aging and disability communities to ensure speedy access to vaccines. Often, these groups have trouble getting access to vaccines in practice, even when they are prioritized in state and local vaccination plans.

The move by states to vaccinate people in lower priority categories increases concerns about the difficulties higher-risk groups may face. It is crucial that states and local health authorities take affirmative steps to ensure equitable vaccine access to older adults and people with disabilities, particularly those who may face additional barriers due to race, ethnicity, income, language, or other factors.

How States and Partners Can Improve Access

States should use promising practices and work with community-based organizations in the aging and disability network, such as the following, to help more high-risk people get vaccinated.

- » Area Agencies on Aging (AAAs),
- » Aging and Disability Resource Centers (ADRCs),
- » Assistive Technology (AT) programs,
- » Centers for Independent Living (CILs),
- » State (DD) Councils on Developmental Disabilities,
- » Protection and Advocacy (P&A) agencies, and
- » University Centers on Excellence in Developmental Disabilities Education, Research, and Service (UCEDDs).

Aging and disability network organizations are trusted entities that are deeply embedded in their communities. They offer unique and specialized knowledge of the needs, barriers, and preferences of the people they serve. These organizations can collaborate effectively with state agencies in virtually every stage of the vaccination process, from planning to transportation to clinic support.

Outreach and Education

Tailored and targeted outreach is essential. By reaching out with accessible and culturally competent information, partners and trusted sources spread the word to older adults and people with disabilities, reaching them where they are rather than expecting them to search for this information.

Tailored materials let people know why, how, when, and where to get their vaccine. Good outreach also provides an opportunity to address questions and concerns, which is key to overcoming hesitancy, countering rumors, and correcting misinformation.

Targeted and proactive outreach: More general public vaccination campaigns may not reach older adults and people with disabilities who lack access to the internet, have limited English proficiency, who live in rural areas, or who may benefit from rehearsing the steps in the vaccination process. States should leverage data and collaborate with aging and disability network partners to do targeted outreach for people at highest risk.⁸

Using Data to Identify High-Risk Individuals

- » [California is using data to target vaccine allocation to high-risk communities](#), as well as allowing people with underlying health conditions to be eligible for a vaccine through self-identification. This approach helps people with chronic health conditions in low-income communities of color get access to a vaccine appointment quickly and without the extra burden of having to provide proof of disability.
- » Some state Medicaid agencies are [sharing data about people who receive Medicaid Home and Community Based Services with public health agencies to target vaccine outreach](#).

Outreach through the aging and disability networks

- » The Denver Regional Council of Governments Area Agency on Aging (AAA) has been coordinating with the state department of health and health care providers to identify and reach underserved older adults including people who are homebound, live in rural areas, or have limited English proficiency.
- » Massachusetts AAAs have contacted older adults living in federal public housing and helped them complete vaccination registration forms.
- » Indiana and Georgia AAAs have proactively called their clients receiving long-term services and supports to help them register for a vaccine.
- » Georgia AAAs are working with the state to reach out directly to Medicaid HCBS recipients and their caregivers to help book vaccine appointments, answer questions, and facilitate transportation.

Accessible and Culturally Competent Materials: All information provided to the public about COVID-19 vaccination must be available to people with a full range of disabilities and language-access needs. Steps to ensure accessibility include, but are not limited to:

- » Ensuring websites meet [Web Accessibility Initiative Guidelines](#),
- » Providing text-only web pages or alt text for screen readers,
- » Offering dedicated hotlines,
- » Following [plain language guidelines](#),
- » Translating materials into other languages,
- » Providing information in braille, and
- » Access to American Sign Language (ASL) interpreters.

Accessible Websites and Materials

- » The Americans with Disabilities Act (ADA) National Network, funded by the Administration for Community Living (ACL), has a robust array of materials on accessible and inclusive [website design](#) and [digital access](#).
- » Johns Hopkins University maintains a [one-stop resource for state COVID-19 Vaccine Prioritization information](#) that is accessible to people with disabilities. The dashboard is text-only and provides screen-reader-compatible vaccine eligibility information available in multiple formats such as Excel, PDF, and CSV.
- » Arizona has created a [text-only version](#) of its vaccination site finder, [in response to concerns](#) that images and maps may be incompatible with screen reader technology.
- » The Georgia Assistive Technology Act Program, “[Georgia Tools for Life](#),” has contracted with the CDC Foundation to make vaccination guidance accessible, [including videos in ASL](#). They have also converted documents to digital Braille, embossed Braille, and other formats.
- » Assistive Technology programs in North Carolina, Wisconsin, Nevada, Maryland, New Mexico, and Idaho have been collaborating closely with states (sometimes through contractual relationships with departments of health) to make vaccine websites and information materials accessible.
- » UCEDDs in New Jersey and Arizona are creating accessible information such as social stories and videos to educate people with disabilities and low literacy about vaccinations.
- » The CDC has published a [Toolkit for People with Disabilities](#) that includes ASL videos and easy-read materials on COVID-19 and vaccines.

Hotlines

- » Many states (including [Massachusetts](#)) are collaborating with 211 as an alternative to websites for vaccine information, pre-registration, and scheduling.
- » ACL is providing help through the [National Eldercare Locator](#): 800-677-1116.
- » [New York City has created a dedicated toll-free number and website](#) to assist New Yorkers in finding accessible vaccine sites, booking appointments, and reporting barriers at vaccine sites.
- » [Area Agencies on Aging in Indiana, Iowa, Maine, Missouri, and Ohio](#) are providing information and education about vaccines and are offering vaccine hotlines as well as resources tailored to older adults.
- » The Aging and Disability Resource Center (ADRC) in Washington County, New York [launched a hotline](#) in partnership with New York State Department of Health to reach community members, particularly people without internet access.
- » The Pennsylvania Assistive Technology program in collaboration with a Pennsylvania UCEDD is working with the state to provide a vaccine registration hotline.

Multilingual Resources

- » The [New Hampshire UCEDD](#) has developed a repository of multilingual resources and language access contact information on their COVID-19 page.
- » [Dane County, Wisconsin ADRC added a Hmong speaker to its staff](#) in order to better serve the Hmong community.
- » [The California Developmental Disabilities Council](#) created Spanish-language COVID-19 vaccine information as well as plain language documents about the COVID-19 virus in Spanish, Mandarin, and Vietnamese.

Plain Language Materials

- » The Green Mountain Self-Advocates and the Vermont Developmental Disabilities Council wrote a [guide to COVID-19](#) at a 3rd-grade reading level.

Disability-competent vaccine education for diverse audiences: People with disabilities, particularly people with disabilities in communities of color, often have questions and concerns surrounding COVID-19 vaccination; some of these individuals may be [hesitant or fearful of receiving a vaccine as the result of discrimination or medical mistreatment they have experienced in the past](#). It is important that education efforts are multidirectional dialogues among state officials, medical providers, advocates, and community members.

Q&A Sessions

- » The Hawaii Developmental Disabilities Council hosted a Q&A session with county and state leaders and agencies who serve individuals with I/DD about vaccines.
- » The Kentucky Commonwealth Council on Developmental Disabilities is working with the Governor's office to assist with communication with the disability community.
- » Disability Rights North Carolina, a P&A, hosted a Q&A to encourage vaccination and address vaccine hesitancy among people with disabilities.
- » The Tarjan Center at UCLA, in California, a UCEDD, held town hall meetings on COVID-19 vaccines for people with disabilities. Similarly, a Maryland UCEDD participated in Kitchen Table Talk: COVID-19 Vaccine Conversations with multiple local churches.
- » A New York Center for Independent Living (CIL) educated state leaders in vaccine efforts about the concentration of people with disabilities who are Black and Latinx and low-income in communities that need more sites, education, and resources.
- » [Tennessee's Department of Intellectual and Developmental Disabilities](#) hosts "office hours" weekly, open to all stakeholders including advocates, families, and providers during which they explain how the planning for vaccine roll-out affects people with I/DD in the waiver service system.

Reaching caregivers and direct service professionals: Some older adults and people with disabilities rely on caregivers for communication and daily needs, including needing the assistance of a caregiver to receive a vaccine. Research has shown [significant vaccine hesitancy among caregivers](#) of older adults and people with disabilities and direct service workers that provide long-term services and supports. As a result, effective outreach must extend to caregivers and direct service workers.

- » [The Endependence Center of Northern Virginia](#) CIL has partnered with three counties in Virginia to offer a dedicated, expedited pathway for people with disabilities and paid- and un-paid caregivers to register for vaccines through a web portal and partnered on vaccine clinics targeted to these populations.
- » [AgeOptions](#), an AAA in Cook County, Illinois is helping family caregivers understand how they can be vaccinated under Phase 1a and helping them obtain the necessary certification letter.

Facilitating Vaccine Appointments

Many people need or prefer live help with navigating state websites, enrolling in vaccine registries, finding and signing up for appointments, arranging transportation, and requesting accommodations at vaccine sites. Aging and disability network organizations are ideal partners for this live assistance.

Help with scheduling appointments

- » The National Association of Area Agencies on Aging (n4a) provides an overview of the [Roles of AAAs in the Vaccination of Older Adults](#), including appointment scheduling.
- » [Massachusetts](#), Pennsylvania, Michigan, Iowa, and Indiana AAAs are assisting with vaccine pre-registration and scheduling, often in close collaboration with state and county health officials.
- » A Nebraska UCEDD is reaching out to its network to schedule appointments for individuals with I/DD.

Arranging for and providing transportation to and from appointments

- » Collaborate with transit authorities: Idaho, Michigan, and [Pennsylvania](#) AAAs are partnering with their local transit authorities or regional public transit providers to offer older adults door-to-door transportation to vaccine appointments.
- » Collaborate with public health and Medicaid agencies: Iowa's AAAs are partnering with county public health offices to facilitate transportation to and from vaccine appointments. Some state Medicaid agencies [reported proactively reaching out to Medicaid non-emergency medical transportation drivers](#) to get vaccinated and drive individuals to vaccination events. The Nisonger Center at The Ohio State University, a UCEDD, reports progress getting Medicaid transportation to support access to vaccine appointments happening at non-medical locations.
- » Leverage other community resources:
 - » [A Denver-area AAA](#) is working with the Rotary Club, faith-based organizations and other volunteer groups who want to help provide rides to vaccine sites.
 - » [Wisconsin](#) and Texas ADRCs are facilitating roundtrip transportation for older adults with vaccine appointments.

Vaccine second-dose reminders

- » In addition to assistance with online vaccine registration, Missouri's AAAs are conducting reminder calls for older adults' second doses.
- » A Denver-area AAA scheduled transportation to the second shot appointments for people as they were transported to their first appointment.

Vaccine Site Accessibility and Accommodations

Under federal law, all vaccine sites must be accessible to people with a range of disabilities. Aging and disability network organizations can be invaluable resources to help vaccine sites anticipate and meet the needs of a diverse population with a range of disabilities and functional limitations to assure that sites meet and go beyond federal requirements, making vaccination as easy and as welcoming as possible for older adults and people with disabilities.

Identify barriers

Some people with disabilities or older adults may be unable to stand for long periods of time or may have mobility impairments. Similarly, these individuals might be [unable to wear face masks](#); [have sensory disabilities](#) and seek to avoid or find accommodations for too loud, bright or crowded locations; [have communication disabilities, including people who are deaf or hard of hearing](#); and might require the assistance of a personal care attendant.

- » Center for Independence in Washington worked with the Department of Health to create a checklist for the state to use in planning its vaccination activities to identify barriers for people with disabilities.
- » The North Carolina DD Council worked with the state Department of Health to [develop a vaccine site accessibility checklist](#) in English and Spanish, and the North Carolina AT program developed and disseminated emergency AT toolkits for and maps of vaccination sites. The State of Minnesota has likewise [published a list of best practices for COVID-19 Vaccination Sites](#), including physical, sensory, cognitive, and technological ease of access suggestions as well as an [accessibility checklist](#).
- » The National Disability Rights Network and Protection and Advocacy Systems around the country have been working to identify and help resolve vaccine access issues. By working with local Protection and Advocacy Systems, vaccination administrators can learn about, and resolve, issues that impact the rights of people with disabilities.
 - » For example, Disability Rights Ohio, a P&A, is working with the Ohio Department of Health to address the accessibility of mass vaccine sites and generally of obtaining the vaccine. Disability Rights Oregon also worked with the State Health Authority to publish [guidance on access to vaccine sites](#).

Make information about accessibility of vaccine sites readily available

- » Center for Independence of the Disabled, a New York CIL, is educating individuals with disabilities on how to get reasonable accommodations when they make a reservation or are on site to get vaccinated.

More resources for ensuring accessibility

- » The CDC has published [guidance for vaccinating older adults and people with disabilities](#) for vaccination sites and providers.
- » FEMA created a [civil rights checklist](#) to help state, tribal, and territorial partners uphold their obligations to ensure that vaccine sites and other related programs are accessible.
- » [The ADA National Network](#) has published numerous resources spotlighting health care access requirements.

Ensure accessibility of drive-thru vaccine sites

- » Drive-thru vaccination sites require special considerations for people with disabilities. The ADA National Network has published [best practices, including training staff, accommodating wheelchair users, and effective communication](#).
- » The Institute on Development & Disability at Oregon Health & Science University (OHSU), a UCEDD, is working with the broader OHSU health system, community partners, and the local Red Cross to offer a [drive-thru vaccination site for people with disabilities and their caregivers](#).

Locate vaccine sites at disability and aging-friendly locations

- » CILs in [Virginia](#), Georgia and [Florida](#) have arranged vaccine clinics for targeted populations.
- » The [Arc of Louisiana](#) and the Arc of Baltimore, MD have partnered with their respective state departments of health to host dedicated vaccine clinics for people with disabilities.

- » UCEDDs in Georgia, Oklahoma, and [New York](#) are working with local partners including departments of public health to host I/DD-specific vaccine clinics.
- » The Ohio AAAs [partnered with the Ohio National Guard](#) to organize and implement vaccine clinics at affordable housing for older adults age 65+. As people wait post-injection to detect any reactions, the AAAs are providing information and assistance on social isolation, food insecurity, and other social determinants of health.
- » Nevada Senior Services, a AAA, launched their own small-scale vaccine site the first week of March. Their vaccine sites will take place at Adult Daycare Center locations and the AAA will also help schedule and arrange transportation to the sites.
- » In Washington State, tribal governments are making special efforts to vaccinate elders, and are also [providing vaccines to teachers at schools](#) attended by Native youth.

Meeting People Where They Are with Mobile Vaccination

Many people are unable to leave home to visit a public vaccination site or have great difficulty doing so. For these people, bringing the vaccines to them is [emerging as a promising practice](#).

In-home vaccination and mobile vaccine clinics

- » Texas has created the “[Save Our Seniors](#)” campaign, dedicating up to 8,000 vaccines the first week and working with organizations like *Meals on Wheels* and nursing groups to identify interested seniors.
- » Aging network partners in Delaware are working with the paratransit system to deliver in-home vaccine services to older adults.
- » The City of New York is partnering with the Department for the Aging, Medicaid Health Plans, and Housing Recovery Operations to call thousands of seniors to refer them to a [new city-run initiative providing in-home vaccination](#).
- » The Tennessee Commission on Aging and Disability is also working with the state Department of Health to vaccinate homebound community members.
- » An Indiana AAA is [partnering with local emergency medical services](#) to vaccinate homebound older adults.
- » The Topeka, Kansas Independent Living Resource Center, a CIL, is collaborating with local *Meals on Wheels*, the Kansas State Nurses Association, and their volunteer groups to put together a program that combines vaccination with meal delivery.
- » Nevada Senior Services is also working with home food delivery providers like *Meals on Wheels* to bring vaccines to people’s homes.
- » A Rochester, New York UCEDD provided vaccinations to group home residents via mobile units.
- » Georgia AAAs are working with the Georgia Department of Public Health and Atrium Health Navicent health system to identify individuals who need to be vaccinated at home.

Endnotes

1. For example, see the April 2, 2021 [Statement by the Principal Deputy Assistant Attorney General for Civil Rights Leading a Coordinated Civil Rights Response to Coronavirus \(COVID-19\)](#).
2. Gleason, Jonathan, Ross, Wendy, Fossi, Alexander, Blonsky, Heather, Tobias, Jane, and Stephens, Mary, "The Devastating Impact of Covid-19 on Individuals with Intellectual Disabilities in the United States: study across 547 U.S. health care organizations finds that individuals with intellectual disabilities are at substantially increased risk of dying from Covid-19.," NEJM Catalyst, 3/5/2021 <https://catalyst.nejm.org/doi/full/10.1056/CAT.21.0051>; and "Risk Factors for Covid-19 Mortality among Privately Insured Patients: A Claims Data Analysis." FAIR Health. November 11, 2020.
3. Clift, A. K., Coupland, C., Keogh, R. H., Hemingway, H., & Hippisley-Cox, J. (2020). COVID-19 Mortality Risk in Down Syndrome: Results From a Cohort Study Of 8 Million Adults. *Annals of internal medicine*, M20-4986. Advance online publication. <https://doi.org/10.7326/M20-4986>
4. Turk, M. A., Landes, S. D., Formica, M. K., & Goss, K. D. (2020). Intellectual and developmental disability and COVID-19 case-fatality trends: TriNetX analysis. *Disability and health journal*, 13(3), 100942. <https://doi.org/10.1016/j.dhjo.2020.100942>; research has also indicated that schizophrenia is second only to age as a risk factor for COVID-19 mortality. Nemani K, Li C, Olfson M, et al. Association of Psychiatric Disorders With Mortality Among Patients With COVID-19. *JAMA Psychiatry*. Published online January 27, 2021. doi:10.1001/jamapsychiatry.2020.4442.
5. [COVID-19 Vaccine Access for People with Disabilities](#); Kaye, S. (2021) [Elevated COVID-19 Mortality Risk Among Recipients of Home and Community-Based Services: A case for prioritizing vaccination for this population](#). *Disability Rights Education and Defense Fund*.
6. For example, see the National Academies of Science, Engineering, and Medicine's "[Conversations on COVID-19: Impacts on Communities of Color](#)."
7. [The Johns Hopkins University COVID-19 Vaccine Prioritization Dashboard](#).
8. The [CDC Social Vulnerability Index](#) maps indices like housing, language ability, ethnicity, and vehicle access to identify counties with the highest proportion of vulnerable residents.