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BRIEF19

A daily review of covid-19 research and policy

RESEARCH BRIEFING

Who got the vaccine? Demographic data released by CDC. Prepare to be *not* shocked.

The US Centers for Disease Control and Prevention released a detailed look at the demographics of those who have received coronavirus vaccinations in the first month of widespread rollouts across the United States. Data was obtained from information reported to the CDC by vaccinators around the country and the [findings](#) were published in *Morbidity and Mortality Weekly Report (MMWR)*, the agency's medical journal.

The report covers just under the first 13 million people to receive at least 1 dose of the Pfizer/BioNtech or Moderna covid-19 vaccine, representing just 4 percent of the total US population and 5 percent of the US population 16 years of age or older. Most of the vaccinations have been in persons in the "Phase 1a group," as defined by the CDC's Advisory Committee on Immunization Practices (ACIP). ACIP has recommended priority to healthcare workers and long-term care facility staff and residents.

Thus far, more women (63 percent) have received the vaccine than men. The most vaccinated age group was 50 years and older (55 percent) followed next by those 18-39 years (28 percent). Information on race and ethnicity was known in a little over half of the recipients. A majority of those in whom the race or ethnicity was known have been White, at 60 percent of all recipient. While the White demographic makes up 76 percent of the US population overall, that is not necessarily the breakdown of the regions where vaccine rollout has occurred in the highest numbers. For example, in some regions, disparities have been noted, including [in New York City](#), where just 25 percent of the people vaccinated so far have been Black or Latino, despite the fact that together, these two groups make up around 53 percent of the local population.

The Phase 1a group, which the published data reflect, is estimated to cover around 24 million people. But it is unlikely that 50 percent of the Phase 1a group actually received their first jabs. That's because some places, like Florida and Texas, expanded vaccination to all persons 65 years of age or older, meaning that some people in lower priority groups have been vaccinated ahead of those in higher priority groups.

Regional data reporting under representation of vaccine recipients who are minorities in this first round of vaccination is concerning. While some of the low numbers could be due to a lack of complete data (the race or ethnicity were known in only around 52 percent of those vaccinated so far). Moving forward, the focus of vaccination rollout organizers should be to monitor these data, making sure to track emerging inequalities and to determine to the extent possible the reason for any such finding. Whether lower rates of vaccination are due to lack of access, outreach, or hesitancy will be important to measure so that the necessary policy adjustments are made.

—Christopher Sampson, MD, FACEP

POLICY BRIEFING

Expansion of at-home testing program in the US on the horizon. What's the hold up?

The White House has [announced](#) a new partnership with Ellume, an Australian maker of a home nasal-swab based coronavirus screening test, to expand distribution in the United States. The product was the first over-the-counter rapid home test to [receive](#) an Emergency Use Authorization (EUA) from the US Food and Drug Administration (FDA). Though approved in December, production restrictions limited the impact of the decision. Under this new deal, the US government would purchase 8.5 million tests and support the construction of a facility here in the US capable of producing nineteen million tests per month. This figure comes with the caveat that until building is complete, currently scheduled for July, only one hundred thousand kits will be available each month.

It is unclear how the initial batch of tests will be distributed. That said, the contract was [awarded](#) through the Department of Defense, and the press release announcing it stated that the tests will be used “in accordance with the National Strategy for the COVID-19 Response and Pandemic Preparedness policy established January 21, 2021.”

A unique benefit of the Ellume test is that, while results are available in fifteen minutes, test users must download an app to view the findings. A copy of those results is automatically uploaded to a cloud-based database grouped by ZIP code, which stands to vastly improve reporting accuracy. On the other hand, the requirement of an app may be a barrier for some individual users, meaning that health literacy may yet again separate the haves from the have-nots. *Various*

—*Brief19 Policy Team*

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