

Normative reference points for pragmatic adjustments:

if we want to prioritize disadvantage groups, by how much, and on what grounds?

Harald Schmidt, PhD

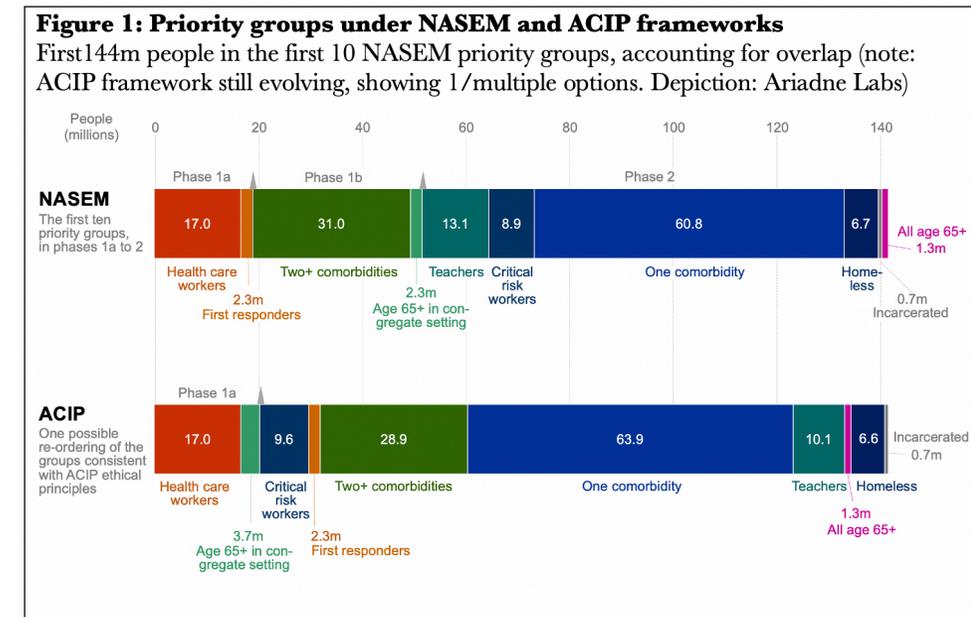
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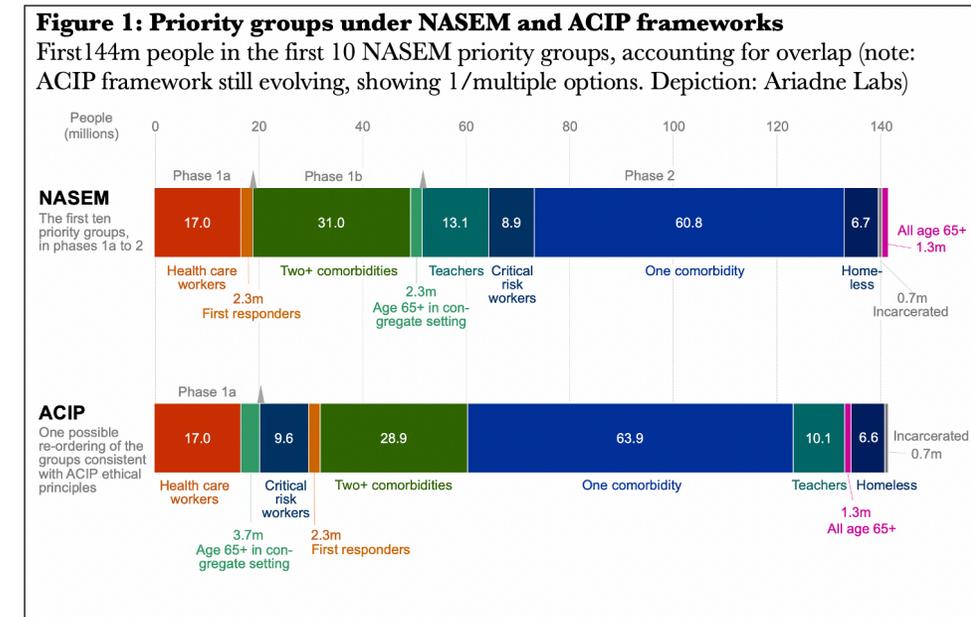
3 (main) Dimensions of equity in allocation

1. Sequence of phases and priority groups within them
2. Number of courses offered for each population – for each batch: adjusted by disadvantage, or not?



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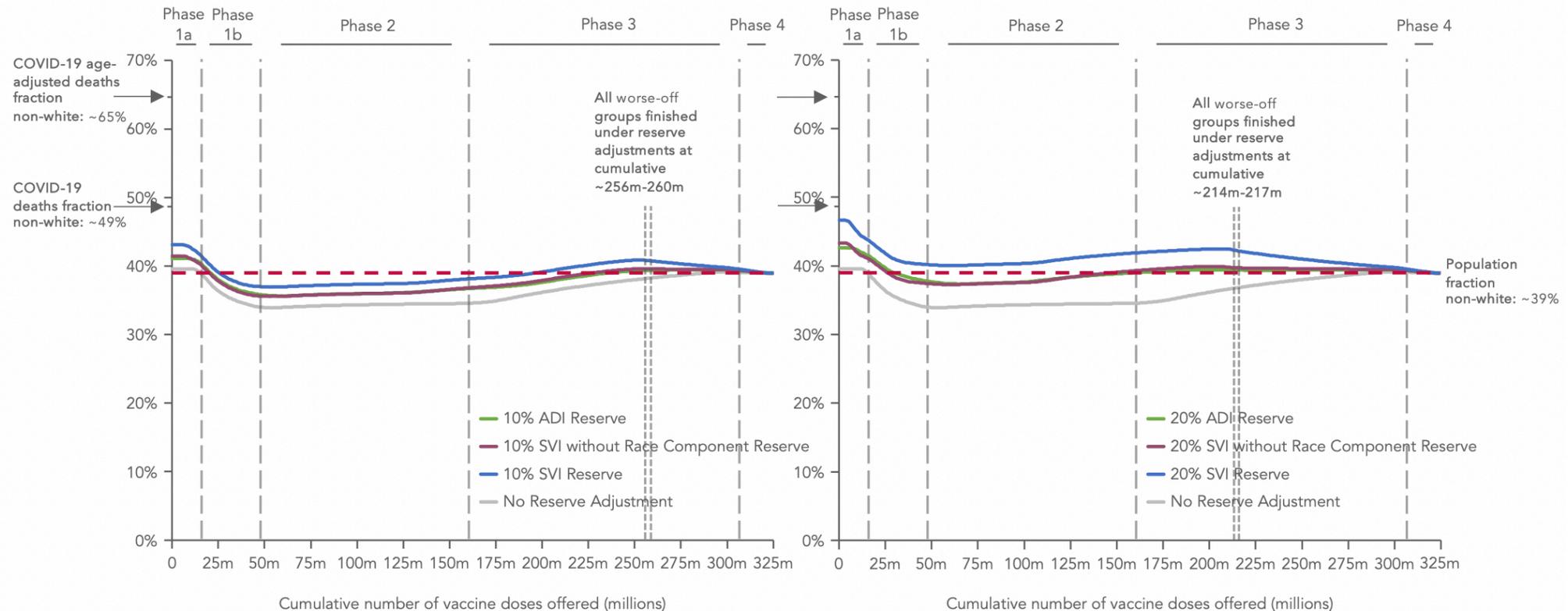
1. Sequence of phases and priority groups within them
2. Number of courses offered for each population – for each batch: adjusted by disadvantage, or not?
3. Outreach, communication, site planning



Equitable phases and allocation quotas are worth little, if prioritized groups don't take up the offer! (Disadvantage indices likely helpful in all 3 areas)

Phases and disadvantage adjustments: what is the *target*?

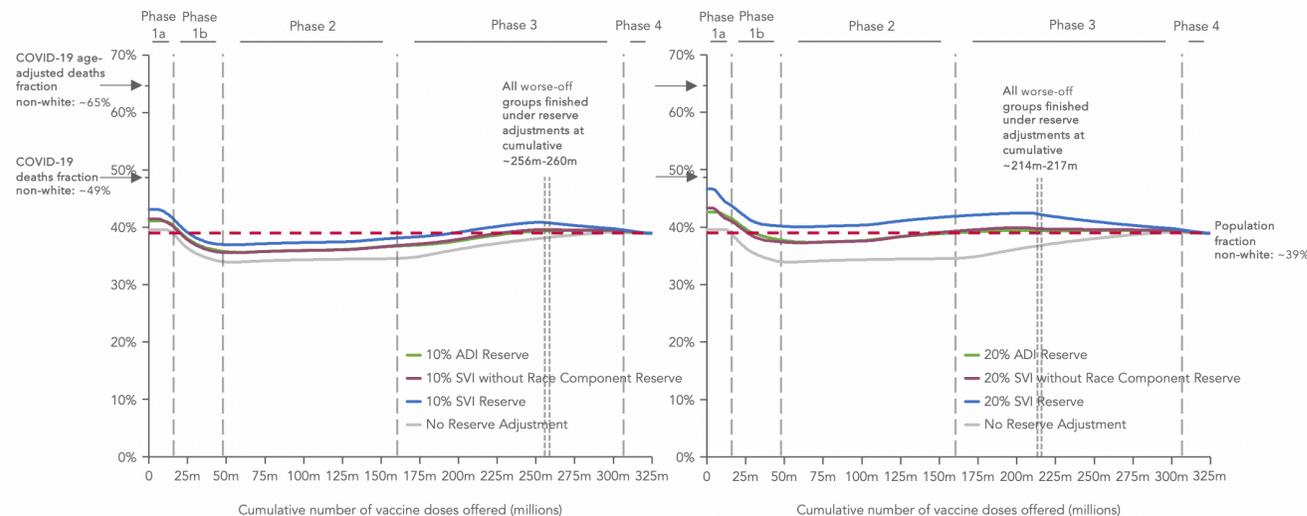
Figure 1: Proportion of vaccine doses offered to minorities (i.e. all Hispanic, Black, Asian, Indigenous, mixed-race groups), after and before reserve adjustments for worse-off groups, by cumulative number of vaccine doses offered



Schmidt, Harald and Unver, Utku and Williams, Michelle A. and Pathak, Parag A. and Sonmez, Tayfun Oguz and Gostin, Lawrence O., What prioritizing worse-off minority groups for COVID-19 vaccines means quantitatively: practical, legal and ethical implications. SSRN working paper, November 1.

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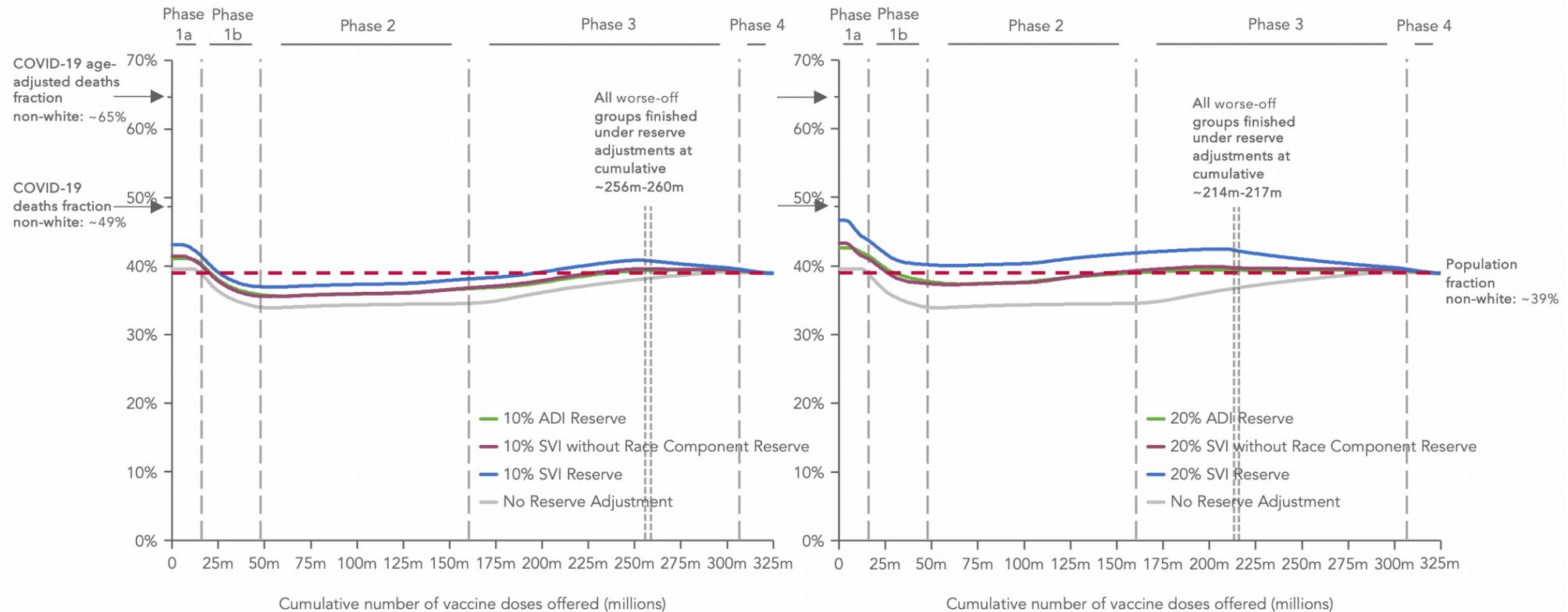
Normative proposal# 1:

Don't start out with allocation systems that offer *worse-off* minorities vaccines below their population share

For this: likely that phasing alone wont help to address, but SVI/ADI/other weights can make a difference

If/As we adjust by disadvantage: 10%? 9%? 11.5%? 20%? How to decide?

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Normatively relevant reference points

Benchmarks for adjusting vaccine allocation within phased systems, with and without a disadvantage index

- **10%** (pragmatic/Biblical tithe?) for worst off quartile

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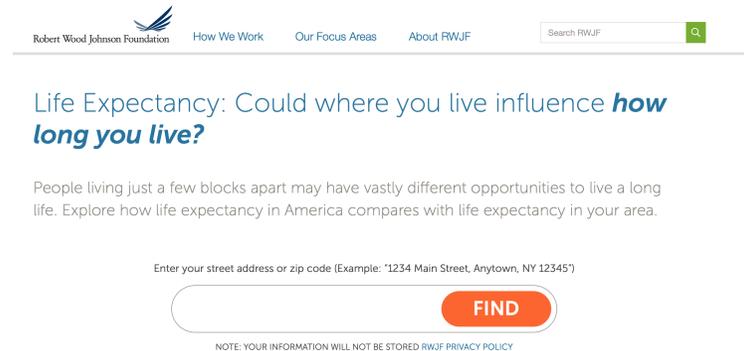
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- Area-specific **life expectancy shortfall** (as markers of systemic disadvantage/structural racism)



Robert Wood Johnson Foundation  How We Work Our Focus Areas About RWJF 

[Life Expectancy: Could where you live influence *how long you live?*](#)

People living just a few blocks apart may have vastly different opportunities to live a long life. Explore how life expectancy in America compares with life expectancy in your area.

Enter your street address or zip code (Example: '1234 Main Street, Anytown, NY 12345')

NOTE: YOUR INFORMATION WILL NOT BE STORED [RWJF PRIVACY POLICY](#)

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- **Opportunity Atlas** (Chetty et al.)

The screenshot shows the top navigation bar of the Opportunity Atlas website, including the Robert Wood Johnson Foundation logo and links for 'How We Work', 'Our Focus Areas', and 'About RWJF'. A search bar is present on the right. Below the navigation is a main heading: 'Life Expectancy: Could where you live influence *how long you live?*'. A sub-heading reads: 'People living just a few blocks apart may have vastly different opportunities to live a long life. Explore how life expectancy in America compares with life expectancy in your area.' Below this is a search input field with the placeholder text 'Enter your street address or zip code (Example: '1234 Main Street, Anytown, NY 12345')' and a red 'FIND' button. A small note below the button states: 'NOTE: YOUR INFORMATION WILL NOT BE STORED RWJF PRIVACY POLICY'. The main content area features a teal background with a map of the United States. A white text box on the left contains the title 'The Opportunity Atlas' and a sub-heading 'Which neighborhoods in America offer children the best chance to rise out of poverty?'. The text explains that the atlas uses anonymous data from 20 million Americans to trace the roots of affluence and poverty back to childhood neighborhoods. It encourages users to see where and for whom opportunity has been missing and to develop local solutions. A black button with white text 'BEGIN EXPLORING' is at the bottom of the text box.

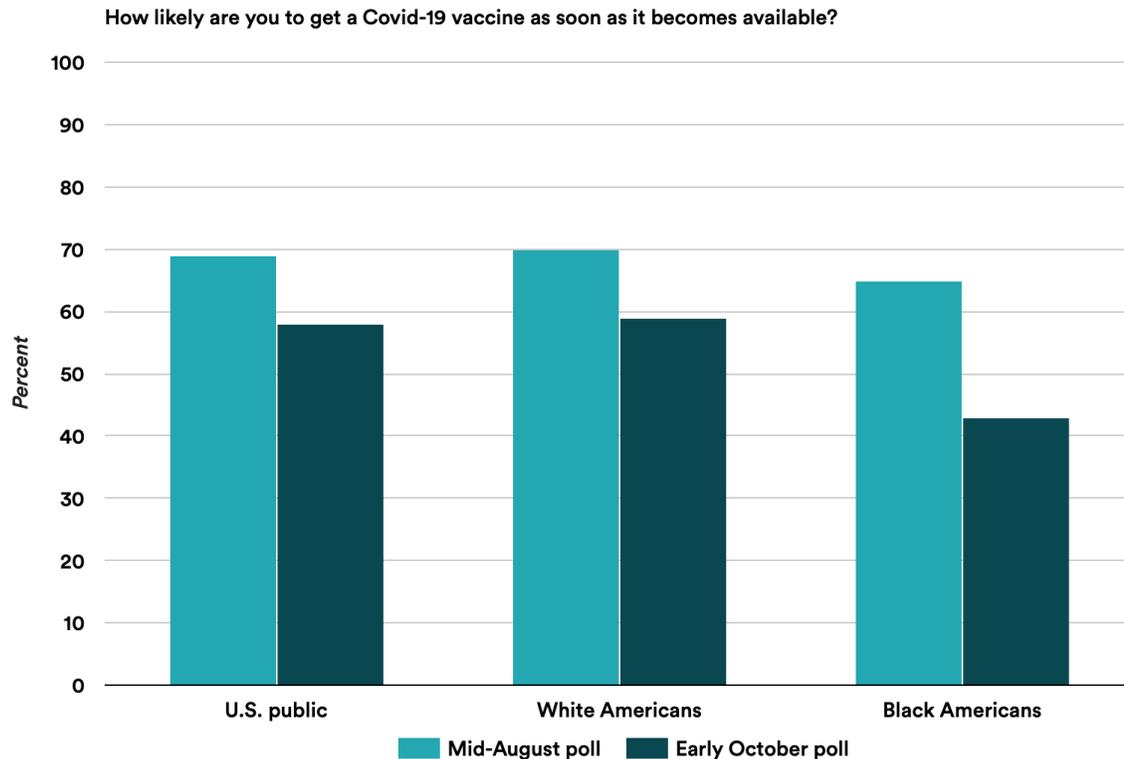
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- Area-specific **life expectancy shortfall** (as markers of systemic disadvantage/structural racism)
- **Opportunity Atlas** (Chetty et al.)
- **Racial Opportunity gap** (O’Brian et al.)

The image shows a screenshot of the Opportunity Atlas website and a page from the journal SSM - Population Health. The Opportunity Atlas page features a search bar with the text "Enter your street address or zip code (Example: '1234 Main Street, Anytown, NY 12345')", a "FIND" button, and a note: "NOTE: YOUR INFORMATION WILL NOT BE STORED RWJF PRIVACY POLICY". Below the search bar is a map of the United States with a text box titled "The Opportunity Atlas" containing the following text: "Which neighborhoods in America offer children the best chance to rise out of poverty? The Opportunity Atlas answers this question using anonymous data following 20 million Americans from childhood to their mid-30s. Now you can trace the roots of today's affluence and poverty back to the neighborhoods where people grew up. See where and for whom opportunity has been missing, and develop local solutions to help more children rise out of poverty." Below the text box is a "BEGIN EXPLORING" button. The Elsevier page is titled "SSM - Population Health" and "Volume 11, August 2020, 100564". It features the Elsevier logo and a "Short Report" section titled "Structural racism, economic opportunity and racial health disparities: Evidence from U.S. counties". The authors listed are Rourke O'Brien, Tiffany Neman, Nathan Seltzer, Linnea Evans, and Atheendar Venkataramani. There is a "Show more" link at the bottom.

Equity: work is not done with phases, quotas



STAT
SOURCE: THE HARRIS POLL / STAT. POLL ADMINISTERED OCT. 7-10, 2020.

STAT

Communication, outreach,
dispensing site planning:

- Avoid simplistic conception of autonomy
- Be mindful of history

Matters as current
incentives: could favor easy
to reach over hard to reach
(new batches only when
initial ones distributed)

Harald Schmidt, Ruqaiijah Yearby. Rationing vaccines fairly - In the rush to roll out vaccines, commitment to social and racial justice must not fall by the wayside. Boston Globe [forthcoming]

<https://www.statnews.com/pharmalot/2020/10/19/covid19-coronavirus-pandemic-vaccine-racial-disparities/>

Equity: work is not done with phases, quotas

Normative proposal #2: Use disadvantage index for disparate impact monitoring in real time

- Simple, yet meaningful: assess coverage rates by SVI/ADI/other disadvantage measure, adjust batch by batch by batch...
- Disadvantage index no magic bullet/only way, but key evaluation metric, helpful for further focused planning with community groups, faith leaders, others

If we want to prioritize disadvantage groups, by how much, and on what grounds?

- Prioritizing disadvantaged communities matters economically, epidemiologically and ethically
- Phased allocation systems do *some*, but most certainly *not all*, required equity work: disadvantage indices offer a meaningful pragmatic adjustment options
- Key priority for current and longer-term impact: **don't start with, and don't end up with, vaccines for disadvantaged minorities below their population share**
- Disadvantage indices likely critical for outreach, communication, dispensing site planning – and become more urgent, when no other adjustments
- Disadvantage indices and disparate impact monitoring: assess, adjust, repeat...