Abstract:

The disparity in health outcomes between African Americans and Caucasians continues to exist (US ACMH, 2009) despite public policy that promotes equity (US DHHS, 2012). Data suggests African Americans over age 65 living in institutions are less likely to receive flu and pneumonia vaccinations (US DHHS, 2013; US DHHS, 2012) and more likely to live in segregated housing (Smith, Feng, Fennel, Zinn, & Mor, 2007). This project collected data on the local level to determine the degree of impact of low vaccination rates and segregated housing on African Americans in Southwest Michigan. Data regarding flu and pneumonia immunization status was collected from 816 residents in 13 nursing homes (NH) and homes for the aged (HFA) in two southwest Michigan counties. The populations of African Americans in the NH and HFA was much less dense than the population of African Americans in the counties where the nursing homes were found suggesting no potential increase risk on the basis of segregated housing for the erosion of community immunity at this local level. A disparity in immunization rates persisted on the local level: Caucasians were 4.7 times (odds ratio = 4.7; p>0.001) more likely than African Americans to be immunized against flu and 1.7 times (odds ratio =1.7; p = 0.002) more likely to be immunized against pneumonia. While the presence of African Americans in a facility did not influence the immunization status of the health care worker, all facility residents spent the majority of their time with nursing assistants, a group of health care workers that was least likely to have received the annual seasonal flu vaccine. Fifty seven percent of nursing assistants in the study NH and 80% of nursing assistants in HFA had received the vaccine compared to 74% and 100% of registered nurses in NH and HFA, respectively.