

Testimony

of

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Before the

New York City Council

Committees on Health and Hospitals

on

Vaccine Hesitancy and Equity in NYC

September 30, 2021 Virtually New York, NY Good morning Chairs Levine and Rivera, and members of the committees. I am Dr. Dave Chokshi, Commissioner of the New York City Department of Health and Mental Hygiene (DOHMH). Thank you for the opportunity to testify today and provide an update on the City's efforts to address vaccine confidence and equity. I am joined today by my colleague Dr. Andrew Wallach from NYC Health + Hospitals (H+H).

It has been a long, challenging 18 months to say the least. I'd like to take a moment to thank our City's municipal workers and health care workers who have endeavored tirelessly throughout this pandemic – without them, we would not be where we are today in terms of progress on increasing vaccination rates. And I'd like to thank the community groups who have similarly worked around the clock to serve the needs of their neighbors and members. And thank you to Council – you all have been through this with us, many of you and your families affected personally – lending your voices and platforms to share critical information about COVID-19 transmission and vaccines, hosting events, and organizing townhalls where our experts can answer questions from your constituents.

And though there is still more to be done, we should take a moment to acknowledge that almost 5.3 million New Yorkers are fully vaccinated, and as of today, over 82% of adults and over 72% of 12-17 year-olds have received at least one dose of the vaccine. This is a monumental achievement when you consider the size and diversity of this city, and the adversity we have all faced. It highlights what we all already know about our City – New Yorkers care about their families, we look out for our communities, and we believe in science. Together, we have saved so many lives and prevented so much suffering. A study that the Health Department partnered on with Yale University scientists estimated that the City's vaccination campaign prevented an estimated 250,000 cases, 44,000 hospitalizations and 8,300 deaths related to COVID-19 through July 1 – and these are almost certainly conservative estimates, since the time period studied does not yet account for cases, hospitalizations, and deaths prevented after July 1, when the more transmissible delta variant was dominant in New York City.

Beyond these bottom-line outcomes, a core focus of our historic vaccination campaign, from its inception, has been equity — and we are continually working hand-in-hand with the City's Taskforce on Racial Inclusion and Equity (TRIE) to address the disparities we have seen in vaccine uptake thus far. We are doing this via an equity strategy that includes increasing access by locating City vaccine sites, engagement, and media in communities that need it most — with a focus on the 33 Taskforce neighborhoods. And our strategy is bearing fruit! We are seeing equity gaps closing — the vaccination rate among Latinos is now 9% higher than white New Yorkers; Black New Yorkers are now experiencing the fastest percentage growth in vaccination rates; and about 60% of first and single doses in August and September have been administered to Black and Latino New Yorkers. This is remarkable progress, but we are not done. The Health Department, and I personally, am committed to further closing the gap for neighborhoods that have been hardest hit by the COVID-19 pandemic.

The City has pulled out all stops to ensure that all New Yorkers have access to vaccines. We stood up a massive vaccine access infrastructure through City-run brick-and-mortar sites and supported over 3,000 providers in getting vaccine into their facilities. We've facilitated over 12,000 free rides to vaccine sites citywide, vaccinated over 27,000 people in their homes, and created a program where community partners were able to help people make appointments over the phone. We've broken down language access barriers by bringing translators and translated materials to vaccine sites, and we have entire vaccine vans staffed end-to-end in-language.

And we have "met people where they are" by deploying mobile vaccine via tent, van, and bus to over 1,100 locations across the City where people live, work, dine, commute, go to school, and play. I'd like to

note in particular the City's event-based campaigns with partners, including many of you — we've brought vaccine to locations identified by small businesses like restaurants, unions, over 700 schools, senior centers, NYCHA developments, and soon, movie theaters. I'd also like to take this moment to thank all of our incredible agency partners in this work — including our own staff at the Health Department, and our colleagues at the Vaccine Command Center, H+H, the Test and Trace Corps, NYCHA, DFTA, MOIA, and NYC Emergency Management, among so many others. We have been able to bring vaccine to New Yorkers because of this partnership and teamwork in pursuit of a shared goal.

We have also worked to build confidence in the vaccines, acknowledging that there are many New Yorkers who did not – and still do not – feel comfortable getting vaccinated against COVID-19. The reasons for this are vast – many are rooted in decades-long experiences with racism in the healthcare system, general mistrust in government, and misinformation about vaccines. Addressing these concerns takes time and there is no one-size-fits-all approach; above all, our outreach must be grounded in the evidence, in equity, and in empathy.

I've said this before - we need the truth about COVID-19 vaccines to spread faster than the virus itself, and our community partners have been at the heart of all this challenging work. They are trusted messengers in their communities. Through existing work and additional funding via the Public Health Corps, the City will support approximately 100 Community Based Organizations (CBOs) to conduct community engagement to provide current information on COVID-19 and the vaccines. These critical partners have been on the ground, in the communities they serve, helping to encourage and facilitate vaccination in languages, voices, and messaging that is known and trusted. A great example of this work has been our team's focused efforts in predominantly Caribbean communities. To address vaccine confidence and low uptake of vaccine in these communities, a dedicated group of Health Department staff of Caribbean ancestry got to work. The team provides one-on-one engagement and vaccination resources in partnership with CBOs and Federally Qualified Health Centers at Caribbean community events. They have also focused on working with home health aide associations to build vaccine confidence among staff. This engagement is meaningful and impactful – and I must say, often joyful – and we have already seen increased uptake in these communities. But as I said earlier, it takes time. Even single percent increase in vaccination rates week over week is progress – and represents prevented suffering.

In addition to this work, we regularly work with several hundred community-based and faith groups to disseminate information, hold events such as "community conversations," on vaccination, and train leaders as vaccine navigators through over 150 Train the Trainer sessions. We have held over 5,000 events related to vaccine since December 2020. We know these conversations our partners are having about the tough issues – particularly around mistrust – will take multiple tries.

Regarding misinformation, based on surveys and anecdotal information that we systematically gather through events and community engagement, we know that misinformation about the vaccine is a driving force for those who still lack vaccine confidence. I'll take this opportunity to correct the record about some common pieces of misinformation. First, the vaccines are safe, they do not cause COVID-19, and they do not contain the virus. Second, the vaccines are still necessary, even if you've had COVID-19 or if you have antibodies for COVID-19. Third, it is safe to get the vaccines even if you are pregnant, breastfeeding, or trying to become pregnant. And finally, the vaccines are the best way to reduce the risk of getting COVID-19 and experiencing severe illness from it. To address the most common pieces of misinformation we have heard, we created our Truth About COVID Vaccines document, designed infographics on how the vaccines work, launched an entire COVID Facts website, and have a "You're Right, You Should Know" campaign to answer common questions about the vaccines. We have YouTube

video series, talking points for our community partners, and a call center staffed by nurses and public health experts that people can call to ask questions about COVID-19 vaccines.

And you might have seen some of my public service announcements! In terms of media, the City has spent more than \$100M on citywide education campaigns about COVID-19 and the vaccines this calendar year alone. In addition to launching video series featuring City leaders, we have taken a multi-layered approach to our messaging, including using storytelling from everyday New Yorkers, from neighborhood providers to community members. And we have partnered with outside organizations like the New York Latino Film Festival to bring these real stories to life. These campaigns are designed to promote vaccine availability, address common drivers of misinformation and key confidence issues, and share timely information about news like booster eligibility.

Further, we know that people need to hear from their own clinical providers about the vaccines – they want to hear it's safe and that their doctor recommends it. For instance, I think about one of my recent patients, who had been delaying getting vaccinated because he was worried that the side effects would be too disruptive to his life. I heard him out, shared my own story of getting the single-dose Johnson & Johnson vaccine (and my experience with mild side effects), and also conveyed my sincere worries about his health in the context of the delta variant, particularly because he had multiple chronic conditions. By the end of our visit, I hadn't quite convinced him to get vaccinated on the spot. But I was relieved when he came back a couple of weeks later and chose to get the J&J shot for himself. It's conversations like this that clinicians have been engaging in throughout our vaccination campaign, bolstering New Yorkers' confidence in the COVID-19 vaccines.

To this end, we have worked tirelessly to engage providers and ensure they not only have a supply of vaccine to give to patients, but also have the most current information about vaccine safety, where patients can get vaccine outside their offices, facts to counter misinformation, and information about City incentive programs. The Health Department has engaged over 2,000 provider offices since February through remote technical assistance and our boots-on-the-ground public health detailing program. And we recently launched a \$35M program to compensate providers for vaccine counseling that we believe could be a model for the nation. Further, earlier this month, I issued a Commissioner Advisory to strongly urge health care providers serving patients in New York City to offer information at every patient visit on the efficacy, availability, and administration of COVID-19 vaccination – the latest salvo in our 'Use Every Opportunity' campaign, launched specifically for clinical providers in May.

In addition to lowering access barriers and building vaccine confidence, the City developed an incentives program to encourage more New Yorkers to get the vaccine, which – in addition to offering free tickets to sports events and museums, gym memberships, and more – now offers \$100 for New Yorkers vaccinated at specific sites across the City – or even in their homes. Another major component of our incentive programming is the NYC Vaccine Referral Bonus Initiative, which provides direct payments of \$100 per vaccine referral to civic, faith, tenant, and other associations. We've collected some great anecdotes from folks at vaccination sites about their experience with the incentives, and I'd love to share a couple here. First, an older woman came in to get vaccinated, and noted that her birthday was coming up and she wanted to get vaccinated so she could go to a restaurant and celebrate, and that she was going to use the incentive money to buy herself a birthday present. Other patients have remarked that the \$100 would mean being able to replace their broken TVs, pay their phone bills, and buy school supplies.

We know that vaccination is our most powerful tool for turning the page on the pandemic – and while the decision to get vaccinated is an individual choice, it has immense community consequence. Vaccination is how we return to school, recover our small businesses, and resume aspects of our life from the most memorable to the mundane. And in the face of the more dangerous delta variant, we knew stronger medicine was needed. The time has come to build upon the foundation we laid with broad access to vaccines, addressing confidence, and providing incentives. I am proud that New York City has led the nation in implementing vaccination requirements where they are warranted, from the Key to NYC for certain indoor activities to my Commissioner's Order for all Department of Education staff to be vaccinated. Particularly during a global pandemic, there are no risk-free choices, just choices to take different risks. The City of New York, with the leadership of Mayor de Blasio, has chosen to markedly reduce risk by increasing vaccination. You can see for yourself – in the graph included with my written testimony – how our vaccine policies are correlated with increasing first and single dose administration from July through September. Vaccines work, and vaccine mandates work – particularly when they are paired with efforts to build vaccine confidence, lower access barriers, and provide incentives as we have in New York City.

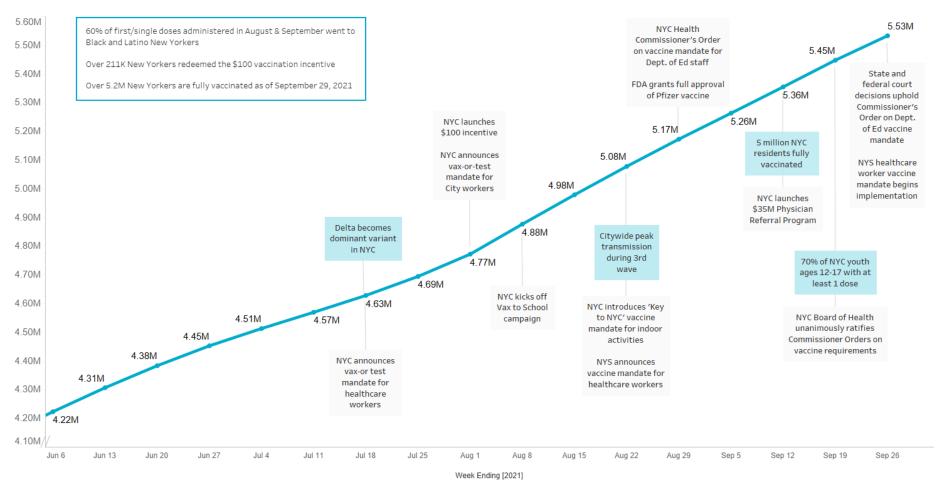
Very quickly, I will turn to the legislation being heard today. The Health Department supports Intro 2373 and we are prepared to begin waiving fees for this specific type of death certificate change immediately. As this relates to the Federal program for funeral assistance, the Health Department has detailed information on its website to explain the options for accessing that program, including the option to make a change to the death certificate itself. This is something we have been working on internally and appreciate the Councilmember's legislation and commitment to support New Yorkers who have lost loved ones due to COVID-19.

I want to thank Chairs Rivera and Levine for holding this hearing today and for being committed champions in the effort to stop the spread of COVID-19. Thank you for your partnership throughout this challenging year and half; I am happy to answer any questions.

Appendix

Cumulative number of first and single doses administered to NYC residents, June - September 2021





Source: NYC DOHMH, Citywide Immunization Registry Data as of 9/29/2021