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New COVID-19 Vaccine Coverage Index shows each U.S. county's key challenges to increasing vaccine coverage across five kinds of barriers; 54% of all U.S. counties face at least one significant barrier to getting their residents vaccinated

Although trouble spots exist all over, U.S. counties with highest levels of concern are concentrated in Texas, Nevada, Georgia, Arizona, and Mississippi

WASHINGTON, February 24, 2021—Surgo Ventures today launched a new data tool, the [U.S. COVID-19 Vaccine Coverage Index \(CVAC\)](#), to provide health officials and policymakers the precise, county-level data they will need to identify which communities are at risk of low COVID-19 vaccine coverage and why, based on underlying community characteristics.

The new [index](#) assesses every county in the United States—geographically and demographically—to identify the barriers to getting their residents vaccinated quickly, safely, and equitably. The index captures five key themes—**Historic undervaccination, Sociodemographic barriers, Resource-constrained health systems, Healthcare accessibility barriers, and Irregular care-seeking behavior**—and ranks every county **on a scale from 0 (lowest level of concern) to 1 (highest level of concern)**. Level of concern is categorized into: very low concern (score of 0-0.2); low concern (0.2-0.4); moderate concern (0.4-0.6); high concern (0.6-0.8), and very high concern (0.8-1).

“The United States is racing against time to vaccinate a majority of our population, while also dealing with supply- and demand-related barriers that can jeopardize any phase of the vaccine rollout,” said **Dr. Sema K. Sgaier**, Co-Founder and CEO of Surgo Ventures and Adjunct Assistant Professor at Harvard T.H. Chan School of Public Health. “We created this index to help decision makers address the *where*, the *why*, and the *how*: *Where* are the communities most at risk for low vaccine coverage? *Why* are these communities at risk? And *how* do we accelerate coverage?”

Key Index Findings

In rolling out its new index, Surgo also released [an analysis](#) of the current state of the COVID-19 vaccine rollout across American communities, which centered upon four key findings:

Finding 1: More than half—54%—of all U.S. counties score “very high” on at least one barrier to achieving widespread vaccine coverage, with the South and the West most vulnerable to low vaccine coverage.

Finding 2: Each U.S. community faces its own unique set of barriers to achieving widespread vaccine coverage. For example:

- **Historic undervaccination** is of concern in both rural and urban areas, with the West disproportionately affected. Hispanic and Native American communities are more likely to live in areas of high concern.
- **Sociodemographic barriers** affect the South and small counties across regions. Rural Americans are five times more likely to live in areas of very high concern than urban Americans.
- **Resource-constrained health systems** are of concern in rural areas and the South and Midwest. Hispanic, Native American, and rural Black populations are more likely to live in areas of high concern.
- **Healthcare accessibility barriers** affect rural areas and communities in the South, with Native American, Black, and Hispanic populations more likely to live in areas of high concern.
- **Irregular care-seeking behavior** disproportionately impacts the West, with many large, urban counties of high concern. Native American, Hispanic, Asian and rural Black populations are more likely to live in communities of very high concern.

Finding 3: During this first phase of the COVID-19 vaccine rollout, the states and counties with “Resource-constrained health systems” are falling behind. As vaccination eligibility expands and more priority groups are called upon, we should expect even starker differences in performance between regions if early action is not taken. For example:

- **Alabama** has vaccinated the lowest proportion of its population of any state to date: to overcome its weaknesses in ensuring equitable access to healthcare, it should target its vaccination messaging and facilities to underserved communities.
- **West Virginia** is one of the most successful states, thanks to a statewide interagency task force ensuring a uniform, coordinated response; but the next phases of vaccine rollout could be challenging in rural and socioeconomically disadvantaged areas.
- **Florida’s** rollout is particularly slow in regions with irregular care-seeking behaviors. A concerted effort to reach those outside of the care system and those facing economic and transportation barriers to vaccination is critical.

Finding 4: Web searches about accessing the COVID-19 vaccine signal advance demand, and suggest lower demand for getting vaccinated in states with a poorer track record of historic vaccination and greater share of people without a regular point of care.

U.S. States and Counties of Highest Concern

According to the Index, the following sets of states and counties are of highest- and lowest concern when it comes to ensuring widespread vaccine coverage.

TOP 10 “HIGHEST CONCERN” STATES

1. Nevada
2. Mississippi
3. Oklahoma
4. Texas
5. Georgia
6. Arizona

7. Arkansas
8. Indiana
9. Florida
10. Tennessee

BOTTOM 10 “LOWEST CONCERN” STATES

1. Connecticut
2. Massachusetts
3. New Hampshire
4. Rhode Island
5. Iowa
6. District of Columbia
7. Maryland
8. North Dakota
9. New Jersey
10. Virginia

10 MOST POPULOUS COUNTIES IN “HIGHEST CONCERN” CATEGORY

1. Hidalgo County, TX (0.99) [855K]
2. El Paso County, TX (0.96) [836K]
3. Clark County, NV (0.92) [2.2 mill]
4. Bexar County, TX (0.87) [2 mill]
5. Polk County, FL (0.87) [686K]
6. Pinal County, AZ (0.87) [433K]
7. Pima County, AZ (0.86) [1 mill]
8. Dallas County, TX (0.83) [2.6 mill]
9. Miami-Dade County, FL (0.82) [2.7 mill]
10. Kern County, CA (0.82) [888K]

10 COUNTIES IN “HIGHEST CONCERN” CATEGORY

1. Apache County, AZ (1.0) [72K]
2. Navajo County, AZ (1.0) [109K]
3. Tallahatchie County, MS (1.0) [14K]
4. Maverick County, TX (1.0) [58K]
5. Jim Hogg County, TX (1.0) [5K]
6. Scott County, MS (1.0) [28K]
7. Culberson County, TX (1.0) [2K]
8. Starr County, TX (1.0) [64K]
9. Zavala County, TX (1.0) [12K]
10. Duval County, TX (1.0) [11K]

Community Challenges the Index Can Help Solve

To help guide resource allocation, response plans, and advocacy, Surgo also shared a list of action-oriented solutions for addressing high scores in each of the five CVAC themes.

“We share these not as prescriptive solutions, but as a starting point for local leaders to see how they can use this index to design an informed, precise strategy at any phase of their vaccine planning and rollout,” Sgaier said.

Table 1. COVID-19 Vaccine Coverage Index Solution Set

Barrier driving the level of concern for COVID-19 vaccine coverage (CVAC themes)	Targeted interventions
Historic Undervaccination below-standard vaccination coverage, high vaccine exemption (i.e. refusal) rate	<ul style="list-style-type: none"> • Build off of gaps and lessons learned from standard vaccination programs and former responses to outbreaks (e.g. H1N1 pandemic)
Sociodemographic Barriers socioeconomic disadvantage, lack of access to information	<ul style="list-style-type: none"> • Leverage existing community health center networks serving key populations • Integrate vaccination clinics within existing social support programming (e.g. Special Supplemental Nutrition Program for Women Infants and Children (WIC)) • Develop communication material in contextually relevant languages • Provide frequent, regular communications through trusted and different non-digital channels (i.e. community spokespersons, radio, town halls, etc.)
Resource-constrained Health System limited workforce, infrastructure, and strength	<ul style="list-style-type: none"> • Expand capacity beyond traditional providers to include other types of non-traditional health professionals (i.e. emergency medical technicians, dentists, veterinarians) • Partner with federal entities and community-level organizations to support logistical issues • Strategically consolidate resources across counties without compromising access to the most vulnerable
Healthcare Accessibility Barriers underinsured, delayed care-seeking, lack of transportation and limited transit connectivity	<ul style="list-style-type: none"> • Use transparent communications materials and resources to provide up-to-date information on cost expectations • Close transportation gaps through mobile vaccination clinics and alternate transportation models • Increase access to vaccines through workplace programming and other frequented, congregate community sites • Advocate for policies that limit out-of-pocket costs and the billing of the underinsured (even if costs are eventually reimbursed)
Irregular Care-seeking Behaviors lack of a personal doctor, failure to seek routine care	<ul style="list-style-type: none"> • Partner with existing community-level programs to reach and engage underserved populations (e.g. Meals on Wheels)

Access the [U.S. COVID-19 Vaccine Coverage Index \(CVAC\)](#) to see the CVAC scores (composite and theme-based scores) of any U.S. county.

Download the full report, [“The U.S. COVID-19 Vaccine Coverage Index: Leaving No Community Behind in the COVID-19 Vaccine Rollout”](#).

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