

This is Douglas County and Douglas Public Health Network's response to the reporting requirement to demonstrate progress in the Vaccine Equity Plan.

1. Improvements to equity gaps have been made. A concrete example of this is in the increases in numbers of vaccinated individuals among racial and ethnic populations.

As of 9/27/2021 Douglas County has vaccinated 47.6 % of the population over 18 years of age.

- Hawaiian Native/Pacific Islander 238 of 511 (46.6%); an increase of 30 since 8/21/2021;
- Asian 925 of 2125 (43.5%); an increase of 155 since 8/21/2021;
- White 39,498 of 106,420 (37.1%); an increase of 4,073 since 8/21/2021;
- Black 245 of 1212 (20.2%); an increase of 43 since 8/21/2021;
- American Indian/Alaskan Native 1124 of 4794 (23.4%); an increase of 146 since 8/21/2021;
- Hispanic-Latino 1570 of 6732 (23.3%); an increase of 249 since 8/21/2021.

The equity gaps and barriers have been addressed. For instance, the Tiger Teams have worked with agricultural businesses to identify where and when vaccinations could be offered, and then made an event possible to provide vaccinations. We have also worked with the Catholic Church leadership to address low vaccination rates, barriers, and gaps. The Cow Creek Band of the Umpqua Tribe of Indians has partnered with DPHN on case finding, case investigation, testing, and vaccinations for their population and for the general population. Cow Creek participated in several Points of Dispensing, mass vaccination clinics, for Covid-19 vaccinations. Also vaccinated people at the jail, the men's mission, Samaritan Inn (for women and children) and at the Dream Center (for those who are houseless).

2. For migrant and seasonal farmworkers, there was a survey conducted by the state and the data was shared. Most of the agriculture in Douglas County that uses migrant farmworkers are in the blueberry and vineyard fields. We have worked with them to do testing and to get the vaccine information out to the employers and workers. The information was shared in the form of binders with materials in the Spanish language. Outreach also took place with food trucks and restaurants, such as Gilberto's and La Hacienda. There were 25 outreach events in March and April with resulted in several vaccination events with the Tiger Team.
3. A. DPHN has received feedback from communities experiencing inequities. For example, we met with two representatives of the houseless population to address how vaccinations might be taken to camps and other sites where the houseless are found. Feedback given included how to introduce the idea, which camp leaders to connect with, and how to progress from introducing the idea of vaccinations to being able to give vaccinations.

B. Power is shared with the various communities that experience inequities by engaging them to learn what their issues are and how to address them successfully. Both the agricultural farmworkers and the houseless residents have been invited to give input and share in the decisions that affect them. Worked with the Tribe, advertised events for tribal members, and vaccinated members of the Tribe. We worked with the Catholic Church's priest, Father Manuel, to provide testing, information, and vaccine access to Spanish-speaking members.