

PUBLIC HEALTH ETHICS CASE STUDY

An Ethics Deliberation on Offering Financial Incentives for Receiving COVID-19 Vaccines in Multnomah County

By Nathan Wickstrom, MA Multnomah County Health Department Portland, Oregon

Background



In late 2017, the Multnomah County Public Health Division (MCPHD) partnered with the Multnomah

County Public Health Advisory Board (MCPHAB) to house the public health ethics committee within the advisory board structure. The purpose was to have broad community representation and input on *all* public health ethics deliberations, in addition to a formal, transparent process for decision making. It was also part of MCPHD's efforts towards Accreditation.

MCPHAB provides invaluable community perspectives on the public health division's most pressing public health issues. The ethics committee is made up of a broad cross-section of community members in our county, including: racial and ethnic communities, seniors/aging populations, youth, faith leaders, business leaders, physical and mental health providers, people living with disabilities, immigrant communities, and others. Additionally, the ethics committee consists of the Health Officer and PHD Director. Board meetings are open to the general public. The committee works through established public health frameworks and has chosen to include an equity lens process in all deliberations. The goal has been to expand on the questions of justice and distribution of burdens and benefits and examine each public health issue explicitly from an equity perspective.

MCPHD is oftentimes faced with complex decisions while possessing limited resources, and having an established ethics committee has been instrumental in successfully navigating these situations. The COVID-19 pandemic made it abundantly clear how important it is to have transparent processes in place for issues that don't have apparent solutions. For example, in a scarce resource setting, who should be prioritized to receive the COVID-19 vaccine? What are the implications of establishing a vaccine verification system? How should local public health administrators talk about "responsible gatherings"? Direct community input from a diverse board using an equity framework helps guide the public health division's policy decisions and ensures that the most vulnerable are considered.



Case Description

In May of 2021, the country moved into a COVID-19 vaccine-rich environment. MCPHD had great success in leveraging community partnerships to employ an equity-driven vaccine campaign. As a result, vaccine rates in some of the most impacted communities, such as the African American, Latino/Latina and Pacific Islander/Native Hawaiian communities increased greatly. By the time vaccines became widely available, however, demand had begun to wane and skepticism remained high.

In an effort to further increase vaccine uptake, Oregon Governor Kate Brown announced that if sixty-five percent of county residents age sixteen or older received a first vaccine dose¹, the county could move into a lower risk category (King 2021). There was high pressure to meet that threshold, which would allow for more businesses to open. The State provided substantial funding to Oregon counties to help motivate community members to receive vaccines.

MCPHD sought to use an equitable approach to determine the best use of State funds to increase vaccine rates among residents. Providing gift cards as an incentive for getting vaccinated was a popular method employed across the country and the leading option encouraged by Multnomah County leadership to increase vaccine uptake. There were potential ethical ramifications for doing so, however, so MCPHD brought the following question to MCPHAB: *What are the ethical implications of providing financial incentives to encourage COVID-19 vaccine uptake?*

Discussion

The ethics committee uses a modified equity lens tool during the deliberation process called the 5Ps: people, place, process, power, and purpose. Board members create a list of relevant questions in each category, such as:

People:

- Which communities of color are affected by this issue? How are they positively and negatively affected?
- How are communities of color differently situated in terms of the barriers they experience?

Place:

- How is this issue or decision accounting for communities of color emotional and physical safety, and their need to be productive and feel valued?
- How are public resources and investments distributed geographically?

Process:

- How are we meaningfully including or excluding people (communities of color) who are affected?
- What policies, processes and social relationships contribute to the exclusion of communities most affected by inequities?

Power:

- What benefits and burdens do communities of color experience with this issue?
- How is the current issue, policy, or program shifting power dynamics to better integrate voices and priorities of communities of color?

Purpose:

- How can we ensure that our purpose toward racial equity is integrated into our policies, procedures, and practices?
- In what practical ways can our institution add more value around racial equity and do less harm?

Board members receive the deliberation question one week ahead of the discussion, along with a short summary of the issue. This allows time for MCPHAB to reflect on the topic and come up with modified questions that fall in the 5Ps categories. The ethics deliberation begins with the subject matter expert, typically the Public Health Director or Health Officer, providing more detailed background information to frame the problem, followed by time for questions for board members to get further clarity on the situation. Meetings are virtual, so the 5Ps document and questions are displayed on the screen and adequate time is allocated for consideration of the equity impacts. Rich discussion that reflects the deep community wisdom and expertise of the board members ensues.

Health Department's Response

The deliberation topic of *the ethical implications of providing financial incentives to encourage COVID-19 vaccine uptake* was brought to MCPHAB on May 11, 2021. The goal of providing incentives was to increase vaccination rates in communities that were most impacted by COVID-19, particularly Black, Indigenous, people of color (BIPOC) and older adults. MCPHAB members represented many of these communities and offered important perspectives for determining whether incentives could help motivate some of those more hesitant to receive the vaccine.

There was concern from MCPHD staff that providing incentives in the form of gift cards could actually disincentivize communities from receiving the vaccine, making it appear to be less safe or trustworthy. Additionally, given the political divide related to the vaccine, there was uncertainty that the incentive would have any impact on vaccine uptake. MCPHAB's role was to ultimately make a decision on whether the public health division would move forward with the strategy of providing financial incentives for receiving COVID-19 vaccines.

The deliberation began by addressing barriers to accessing the COVID-19 vaccine that community members faced. For example, some people were unable to travel to the vaccine clinics, so having staff go directly to them would have led to an increase in vaccine uptake. A lack of information was another barrier, so it was suggested that staff visit households to provide information about the safety and efficacy of the vaccines. It was further recommended that working directly with community leaders, such as faith leaders, was an effective approach to reaching vaccine hesitant community members. Additional barriers identified were an inability to take time off work and a lack of digital literacy.

An argument in favor of financial incentives was that many of the communities most financially impacted by the pandemic were also those most vulnerable and in need of vaccines. The free incentives from the private sector, such as basketball tickets, did not provide support for families suffering from financial hardship. Gift cards, on the other hand, offered a potentially large benefit to them and could temporarily ease that burden.

Finally, concern was expressed around the framing of the gift cards as incentives. Providing the gift cards as a way of expressing gratitude, along with a more holistic approach of directing the community member to other health services, was a way of potentially avoiding the negative stigma around the gift cards. For example, in addition to providing COVID-19 vaccines, staff could also provide hot food and information about other services the County provides so that multiple needs were being met.

The outcome of the deliberation was that MCPHAB came to a general agreement that providing financial incentives in the form of gift cards for receiving COVID-19 vaccines was a good approach towards offering financial support to some of the most vulnerable community members. The importance of giving the vaccines in a more holistic manner, connecting community members to a suite of services and framing them as a thank you for taking care of themselves and their community, was strongly emphasized. Additionally, in order to make the vaccine campaign effective, MCPHAB highlighted creating an extensive communication plan with clear messaging on the approach and reaching out to the most vulnerable communities in their languages. Consequently, Multnomah County proceeded to offer gift cards to express gratitude to those who received the COVID-19 vaccines.

Conclusion and Learnings

There were several key takeaways from the deliberation. First of all, community voice was crucial to this decision-making process. The opinions expressed by diverse perspectives helped ensure that MCPHD made an equity-centered decision on this ethics topic. Without that input, great harm could have been done to the communities.

Second, using the 5Ps process was less effective in a virtual setting; the questions were in the background instead of centered directly in the conversation, and more vocal board members tended to dominate the discussion. Based on feedback from this meeting, the board decided to start using breakout rooms for small group discussions focused on specific 5Ps questions and report out to the large group afterwards. For example, board members would split into groups of two or three people and concentrate on one of the Ps, such as "Power" or "Place." This would bring additional voices to the table and ensure that all of the Ps were considered during the deliberation.

Last, it was an oversight to not factor safety into the deliberation. The safety of community members and staff became a major issue at the vaccine clinics that offered gift cards, as theft and violent behavior were exhibited multiple times. This caused trauma for those involved in the process and lasting harm.

Overall, the ethics deliberation on whether to provide financial incentives to increase COVID-19 vaccine uptake was a positive process that led to major change in Multnomah County.

Future ethics deliberations will build off of previous case studies to improve processes, and will continue to be embedded in the Multnomah County Public Health Advisory Board to ensure that there is strong community voice in decision making for the Public Health Division.

References

¹King, Natalie. 2021. *Governor Kate Brown Sets Vaccin tion Targets for Oregon to Begin to More Fully Reopen Economy*. <u>https://mailchi.mp/oregon/news-releasegov-</u> <u>ernor-kate-brown-sets-vaccination-targets-for-ore-</u> <u>gon-to-begin-to-more-fully-reopen-economy?e=e-</u> <u>c13697a5f</u>

This document was made possible through cooperative agreement #5NU38OT000306-05-00 from the Centers for Disease Control and Prevention. The content and methods used to develop this document are solely the responsibility of the authors and do not necessarily represent the official views of the CDC.





The mission of the National Association of County and City Health Officials (NACCHO) is to improve the health of communities by strengthening and advocating for local health departments.

1201 Eye Street, NW • 4th Floor • Washington, DC 20005

P 202.783.5550 F 202.783.1583



