

**Travis County
Priority Population Estimates
Planning For SARS-CoV-2
Vaccination
December 03, 2020
Version 0.9 DRAFT**

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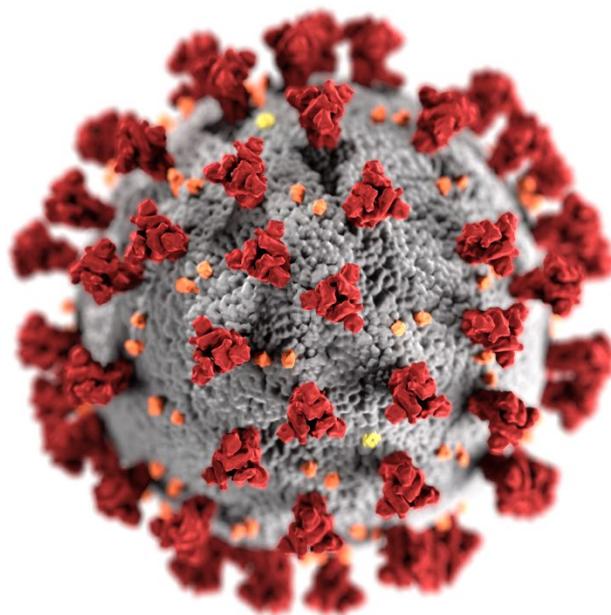


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Travis County Priority Population Estimates Planning For SARS-CoV-2 Vaccination

Background & Important Information

This document is an independent work created by Marlon Haygood to inform the efforts of all interested parties who are planning for the approval and distribution of the SARS-CoV-2 vaccine in Travis County. Parties outside Travis County may find this document useful as they attempt to enumerate their critical populations and develop methods of prioritization.

This document is based upon available information and assumptions presented in the [COVID-19 Vaccination Program Interim Playbook for Jurisdiction Operations](#) published by the CDC. The author advises readers of this document to read the CDC document for additional contextual information and guidance.

Data was collected from reputable sources with an emphasis on publicly available and readily accessible data sources. It is the intent of the author to demonstrate the lack of bias inherent in the data contained within this document. The population groups described within this document are by no means an exhaustive list of all potential priority groups for vaccination. Rather, the selected groups were chosen after careful consideration and discussion with healthcare professionals and guidance issued by the CDC. The author encourages those planning for the release of the SARS-CoV-2 vaccine to review the available data and consider what priority populations are most appropriate for their jurisdiction.

Disclosures

Marlon Haygood is a current employee of Austin Public Health (APH) working in the Emergency Preparedness Department. Mr. Haygood is involved in the planning efforts for the release of the SARS-CoV-2 vaccine and is a member of the APH led COVID-19 Vaccine Distribution Partner Coalition.

Unless specified otherwise, views, thoughts, and opinions presented within this document belong solely to the author and not to the author's employer or any other group or individual. The author takes no responsibility for any works created through consultation of this document by other parties.

Disclaimer

This document is intended to help jurisdictions plan for the release of a COVID-19 vaccine by providing population estimates and general guidance. All jurisdictions should follow state and federal laws and guidelines when developing their vaccine distribution plans.

Travis County Priority Population Estimates Planning For SARS-CoV-2 Vaccination

Methodology, Data Sources

For the purposes of COVID-19 vaccine planning, estimated frequency counts are the most commonly reported data within this document. The author's intent is to help public health professionals and community partners measure the absolute number of vaccine doses needed to serve a particular population. For more information regarding the methodology of data collection and proper interpretation, please consult the original data source.

[The primary data source](#) used in the creation of this document was the 5-year Public Use Microdata Sample (PUMS) created from the Census Bureau's 2018 American Community Survey (ACS) data. 5-year estimates were selected as the preferable source of data due to the [increased reliability and precision](#) of the dataset in comparison to other available estimates. However, this does come at a cost as the dataset is less current than other estimates.

The following geographic regions, defined by the Census Bureau as [Public Use Microdata Areas](#) (PUMAs), were used to estimate frequency counts for priority populations:

Travis County (Northeast) – Pflugerville, Manor Cities & Wells Branch PUMA; Texas
Austin City (North) PUMA, Texas
Austin City (Northeast) PUMA, Texas
Austin City (Southeast) PUMA, Texas
Austin City (Northwest) PUMA, Texas
Austin City (Central) PUMA, Texas
Austin City (South) PUMA, Texas
Austin City (Southwest), Lost Creek & Barton Creek PUMA; Texas
Travis County (West, South & Outside Austin City) PUMA; Texas)

The original data set with the identified PUMAs can be viewed [here](#). Those planning for the release and distribution of a COVID-19 vaccine in Travis County are encouraged to review the data themselves. Planners in other jurisdictions may benefit using similar methods to view population estimates in their area.

The author recognizes that the above methodology will not provide exact, current frequency measures of the priority populations being estimated. The author encourages local planning agencies to seek the most up-to-date and precise data available to their organization.

Travis County Priority Population Estimates Planning For SARS-CoV-2 Vaccination

Methodology, Critical Population Selections

The CDC Has Identified the Following Critical Populations:

- **Essential Workers**
- **People at Increased Risk For Severe COVID-19 Illness**
- **People at Increased Risk of Acquiring or Transmitting COVID-19**
- **People With Limited Access to Routine Vaccination Services**
- **Any Other Critical Populations**

Source: COVID-19 Vaccination Program Interim Playbook for Jurisdiction Operations. Centers for Disease Control and Prevention (CDC). October 29, 2020. Version 2.0

The populations identified in this document will be based upon this framework in order to facilitate understanding through a consistent framework. For the same reason, the term ‘critical population’ will be used to describe populations of individuals who may be considered for prioritization.

It is important to note that groups and individuals may fall into multiple categories; the frameworks are not mutually exclusive; it is possible that a single individual may fall into multiple categories or even all of them. Therefore, caution is encouraged when comparing frequency counts between categories or even within individual categories (e.g. a single individual may have multiple underlying medical conditions).

The populations identified by the CDC are not binding; they are meant to support state and local officials as they reach their own decisions. Likewise, the populations identified within this planning document and recommendations made in regard to methods of prioritization are not binding. Jurisdictions may find that alternative methods of defining critical population are better suited to their purposes. Jurisdictions should also note that further means of prioritizing within a critical population will likely be necessary. Ultimately, vaccine providers are responsible for exercising their own judgment on how to prioritize individuals within their jurisdiction in all situations in which local, state, or federal guidance does not supersede such authority. Further information regarding the principles that will guide the Advisory Committee on Immunization Practices’ decisions as to which populations should be prioritized can be found [here](#).

**Travis County Priority Population Estimates
Planning For SARS-CoV-2 Vaccination**

**Critical
Infrastructure
Workforce**

Travis County Priority Population Estimates Planning For SARS-CoV-2 Vaccination

Critical Infrastructure Healthcare Personnel

Total Population of Travis County: 1,203,830

Healthcare personnel are uniquely situated to face [increased risk for acquiring COVID-19](#) while also providing essential services to those suffering from the illness. Therefore, they are an obvious target for prioritization. Jurisdictions are encouraged to consider healthcare personnel part of the earliest phase of vaccine distribution, referred to as 'Phase 1A' in the CDC Playbook. Notably, this category does not explicitly include personnel such as EMS and firefighters who operate as healthcare personnel in the course of their duties. Further, more specific, guidance from Texas DSHS and the ACIP is expected in the near future.

IPUMS USA Industry Healthcare	Count (Individuals) Travis County
Offices Of Physicians	8,828
Offices Of Dentists	3,884
Offices Of Chiropractors	496
Offices Of Optometrists	690
Offices Of Other Health Practitioners	2,621
Outpatient Care Centers	7,292
Home Health Care Services	5,394
Other Health Care Services	6,187
General Medical And Surgical Hospitals, And Specialty (Except Psychiatric And Substance Abuse) Hospitals	19,424
Psychiatric And Substance Abuse Hospitals	382
Nursing Care Facilities (Skilled Nursing Facilities)	3,779
Residential Care Facilities, Except Skilled Nursing Facilities	3,153
Direct Care Physicians	3,567*

ACS 5-Year Estimates - Public Use Microdata Sample

In the event that vaccine doses are limited such that not all healthcare personnel are able to be vaccinated, further methods of prioritization will be required. For example, those working in skilled nursing and residential care facilities, who have direct contact with high-risk patients, may be suitable for prioritization over other personnel. An alternative method may involve prioritizing physicians over 65 as opposed to their younger colleagues. Such other methods of prioritization are detailed in the following sections of this document.

Many healthcare personnel who work for vaccine providers, such as physicians at hospitals, may receive vaccination from their place of work. Those planning for the release of a COVID-19 vaccine should consider how best to leverage the existing vaccine delivery capacity of hospital systems in order to vaccinate healthcare personnel and other critical infrastructure workers with a minimal amount of jurisdictional overlap and vaccine wastage.

*The number of direct care physicians in Travis County in 2019 was obtained from the [Health Professions Resource Center](#) of the Texas Department of State Health Services. [Direct patient care physicians](#) are active, licensed professionals defined as those who “work directly with patients and does not include researchers, administrators, or teachers.”

Travis County Priority Population Estimates Planning For SARS-CoV-2 Vaccination

Other Essential Workers CDC Guidance

The CDC Playbook provides limited guidance regarding the “critical infrastructure workforce” identified as a critical population. The only individuals specifically referenced are healthcare personnel, with readers being directed to reference [additional guidance](#) provided by the Cybersecurity and Infrastructure Security Agency (CISA) in which critical industries are identified. The following advice is also provided:

“Note: The critical infrastructure workforce varies by jurisdiction. Each jurisdiction must decide which groups to focus on when vaccine supply is limited by determining key sectors that may be within their populations (e.g., port-related workers in coastal jurisdictions).”

Each jurisdiction is encouraged to communicate with community stakeholders to determine which industries are deemed vital and the appropriate means of prioritization. Employer may be required to develop their own means of prioritizing their workforce should further state or federal guidance not make such determinations. These decisions are likely to be under a great deal of scrutiny from the public, employees, and industry stakeholders. Jurisdictions are encouraged to take immediate action to develop a comprehensive and transparent means by which to tier their employees for prioritization should such measures be necessary.

The remainder of this section will include a review of the additional guidance provided by the CISA as well as population estimates for several of the identified industries. Apart from healthcare workers, no further attempt is made by the author of this document to prioritize between these industries.

Travis County Priority Population Estimates Planning For SARS-CoV-2 Vaccination

Other Essential Workers CISA Guidance

CISA has identified the following 16 [critical infrastructure sectors](#):

<i>Chemical</i>	<i>Dams</i>
<i>Commercial Facilities</i>	<i>Defense Industrial Base</i>
<i>Communications</i>	<i>Emergency Services</i>
<i>Critical Manufacturing</i>	<i>Energy</i>
<i>Financial Services</i>	<i>Information Technology</i>
<i>Food and Agriculture</i>	<i>Nuclear Reactors, Materials, and Waste</i>
<i>Government Facilities</i>	<i>Transportation Systems</i>
<i>Healthcare and Public Health</i>	<i>Waste and Wastewater Systems</i>

CISA has also developed the following [risk categorization methodology](#) for use in assessing the risk of workers being infected with COVID-19.

- **Setting:** Are workers indoors or outdoors?
- **Proximity:** How physically close are workers (and customers) to each other?
- **Type of contact:** Do workers touch shared surfaces, common items, and other workers or customers?
- **Duration:** How long does an average interaction last?
- **Number of different contacts:** How many interactions occur daily?
- **Employee risk factors:** Which workers face heightened risk due to their age or underlying medical conditions?
- **Capability to assess possible infection:** Are there screening protocols that protect workers (and customers) from interactions with contagious people?
- **Cleaning:** How frequently can the facility be sanitized and cleaned?

The United States Department of Labor Occupational Safety and Health Administration (OSHA) has developed an alternative, yet similar, method of [classifying risk](#) to workers. Either of these risk categorization methods may serve as useful tools for employers.

It is important to note that, circumstances permitting, the provision of additional PPE or a transition of workers to working from home could dramatically shift the level of risk that workers face. Such measures may increase worker safety and trust while also allowing for more flexibility when determining tiers of prioritization.

The remainder of this section will provide estimates of several different industry groups. Occupations are identified by Integrated Public Use Microdata Series (IPUMS) USA industry codes and will not align with other methods of categorization such as CISA's critical infrastructure sectors. The inclusion of presented industries is not meant to reflect an attempt by the author at prioritization, rather, they are meant to serve as examples of potential industries for prioritization. Those planning for the release of a COVID-19 vaccine are encouraged to view [the same data](#), as well as estimates obtained from community partners, as they consider their own methods of prioritization.

Travis County Priority Population Estimates Planning For SARS-CoV-2 Vaccination

Other Essential Workers Estimates

Total Population of Travis County: 1,203,830

Utilities

IPUMS USA Industry Utilities	Count (Individuals)
Electric Power Generation, Transmission And Distribution	2,486
Natural Gas Distribution	351
Electric And Gas, And Other Combinations	198
Water, Steam, Air Conditioning, And Irrigation Systems	1,182
Sewage Treatment Facilities	336
Not Specified Utilities	271

ACS 5-Year Estimates - Public Use Microdata Sample

Education

IPUMS USA Industry Education	Count (Individuals)
Elementary And Secondary Schools	40,909
Colleges, Universities, And Professional Schools, Including Junior Colleges	32,763
Business, Technical, And Trade Schools And Training	1,001
Other Schools And Instruction, And Educational Support Services	7,130

ACS 5-Year Estimates - Public Use Microdata Sample

Agriculture, Forestry, Fishing, and Hunting

IPUMS USA Industry Agriculture, Forestry, Fishing, and Hunting	Count (Individuals)
Crop Production	1,192
Animal Production And Aquaculture	1,195
Forestry Except Logging	20
Logging	0
Fishing, Hunting And Trapping	64
Support Activities For Agriculture And Forestry	307

ACS 5-Year Estimates - Public Use Microdata Sample

Travis County Priority Population Estimates Planning For SARS-CoV-2 Vaccination

Other Essential Workers Estimates, Continued

Total Population of Travis County: 1,203,830

Transportation and Warehousing

IPUMS USA Industry Transportation and Warehousing	Count (Individuals)
Air Transportation	2,043
Rail Transportation	566
Water Transportation	204
Truck Transportation	4,884
Bus Service And Urban Transit	1,638
Taxi And Limousine Service	2,900
Pipeline Transportation	143
Scenic And Sightseeing Transportation	56
Services Incidental To Transportation	3,254
Postal Service	2,106
Couriers And Messengers	3,603
Warehousing And Storage	960

ACS 5-Year Estimates - Public Use Microdata Sample

Retail Trade

IPUMS USA Industry Retail Trade; Food, Drugs, and Essentials*	Count (Individuals)
Supermarkets and Other Grocery (Except Convenience) Stores	13,885
Convenience Stores	1,269
Specialty Food Stores	911
Pharmacies And Drug Stores	2,804
Health And Personal Care, Except Drug, Stores	2,135
Gasoline Stations	1,335
General Merchandise Stores, Including Warehouse Clubs and Supercenters	6,775

ACS 5-Year Estimates - Public Use Microdata Sample

*Employment estimates identified in the table are those which are employed in retail services providing essential products, specifically food, drugs, and fuel. Jurisdiction should review the available data to determine which retail outlets they consider essential.

Travis County Priority Population Estimates Planning For SARS-CoV-2 Vaccination

Other Essential Workers Estimates, Continued

Total Population of Travis County: 1,203,830

Public Administration

IPUMS USA Industry Public Administration	Count (Individuals)
Executive Offices And Legislative Bodies	8,665
Public Finance Activities	5,539
Other General Government And Support	1,029
Justice, Public Order, And Safety Activities	9,112
Administration Of Human Resource Programs	7,853
Administration Of Environmental Quality And Housing Programs	2,405
Administration Of Economic Programs And Space Research	4,200
National Security And International Affairs	2,504

ACS 5-Year Estimates - Public Use Microdata Sample

Social Assistance

IPUMS USA Industry Social Assistance	Count (Individuals)
Individual And Family Services	5,766
Community Food And Housing, And Emergency Services	597
Vocational Rehabilitation Services	501
Child Day Care Services	6,313

ACS 5-Year Estimates - Public Use Microdata Sample

People at
Increased Risk
for Severe
COVID-19
Illness

Travis County Priority Population Estimates Planning For SARS-CoV-2 Vaccination

People at Increased Risk for Severe COVID-19 Illness Long Term Care Facility Residents

Total Population of Travis County: 1,203,830

The Census Bureau classifies those living in houses, apartments, mobile homes, and rented homes as living in housing units. All other living arrangements are classified as group quarters. The Census Bureau distinguishes between two types of group quarters:

Institutional Group Quarters, including:

- Correctional facilities
- Nursing homes
- Hospice facilities
- Mental hospitals

Non-Institutional Group Quarters, including:

- College dormitories
- Military barracks
- Group homes
- Missions
- Shelters

In order to estimate the population of in long term care facilities, the number of Institutional Group Quarters residents in Travis County was obtained using the ACS 2018 5-Year Estimate microdata; doing so provides an estimated 6,829 residents. The average Travis County inmate population, [as reported by Travis County](#), during the 2019 Fiscal Year was ~1,938 individuals. Therefore, we can estimate that approximately 4,891 individuals live in institutional group quarters such as nursing homes, hospice, and mental hospitals. This provides an imperfect estimate of long-term care facility residents in Travis County.

It is important to note that jurisdictions in Travis County such as local health departments, will not be responsible for totality of this population. The U.S Department of Health and Human Services has established the [Pharmacy Partnership for Long-Term Care Program](#) in order to provide assistance to long term care facilities as they vaccinate their patient population. As part of this free program, CVS and Walgreens will vaccinate residents of such facilities. However, long term care facilities were required to sign up for the program by November 6th. Jurisdictions should work to determine the number of facilities in their area that either have or have not signed up for the HHS program.

Travis County Priority Population Estimates Planning For SARS-CoV-2 Vaccination

People at Increased Risk for Severe COVID-19 Illness People With Underlying Medical Conditions

Total Population of Travis County: 1,203,830

The CDC has identified the [following conditions](#), seen in the tables below, as conclusively placing individuals at a higher risk for severe COVID-19 illness.

Period prevalence rates reported from the Texas Behavioral Risk Factor Surveillance System (BRFSS) and Texas DSHS Vital Statistics Annual Report

Conditions at Increased Risk	Rate
Cancer	9.70%*
Kidney Disease	2.70%*
COPD	2.90%*
Cardiovascular Disease	7.00%*
Obese or Extremely Obese	29.40%*
Current Smoker	11.70%*
Diabetes	9.20%*
Pregnancy	70.5 per 1,000 women, 15-44**

Estimated frequency counts using a total Travis County population of 1,203,166 individuals per the 2018 ACS.

Conditions at Increased Risk	Estimated Count (Individuals)
Cancer	116,707
Kidney Disease	32,485
COPD	34,892
Cardiovascular Disease	84,222
Obese or Extremely Obese	353,731
Current Smoker	140,770
Diabetes	110,691
Pregnancy	20,516

It is important to note that the estimated count of individuals with each condition are not mutually exclusive. A single individual may possess multiple comorbid conditions and therefore be counted in multiple categories.

Furthermore, this is not an exhaustive list of conditions which may place individuals at a higher risk for severe COVID-19 illness. People who are immunocompromised and those with Sickle Cell disease are also identified as high risk. However, these conditions are not track by the Texas BRFSS. As new data is obtained and reviewed, additional conditions may be identified after the release of the document.

Within each phase of vaccine distribution, the presence of these risk conditions may be a useful method of further prioritization within a priority group. The presence of an underlying medical condition is an evidence-based method by which to select individuals who definitively face a higher risk of severe illness or death. Jurisdictions and vaccine providers should consider methods by which they will prioritize between these conditions and how they might verify the presence of a condition in an individual should further guidance not be received on these matters.

Source:

*Texas Behavioral Risk Factor Surveillance System (BRFSS) 2018

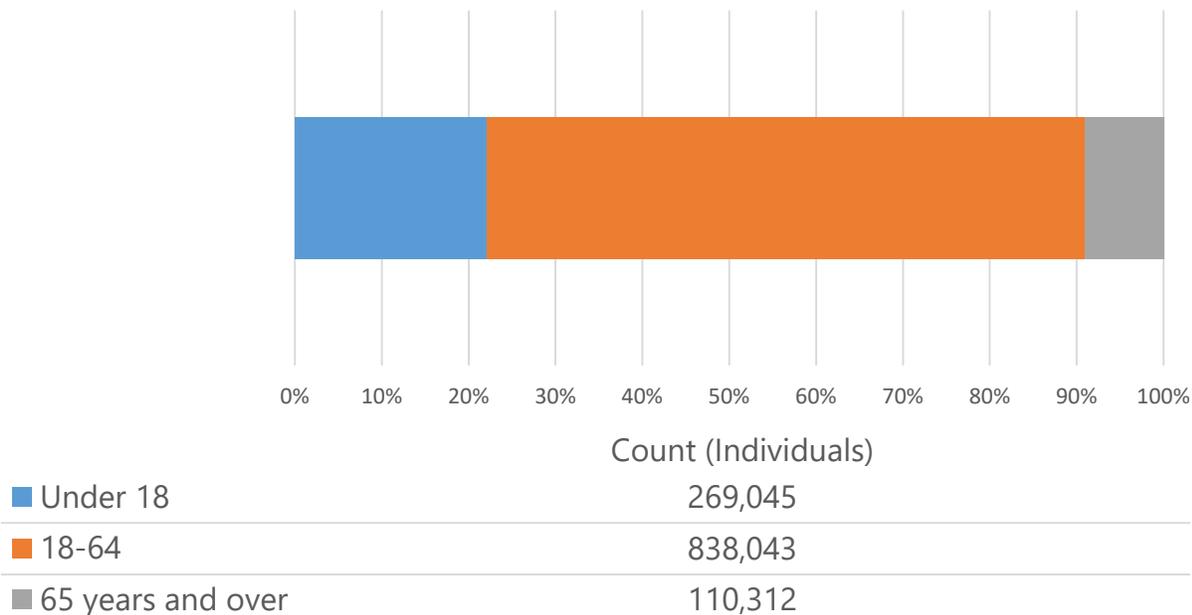
**Texas Department of State Health Services, Vital Statistics Annual Report, 2015

Travis County Priority Population Estimates Planning For SARS-CoV-2 Vaccination

People at Increased Risk for Severe COVID-19 Illness People 65 Years of Age or Older

Total Population of Travis County: 1,203,830

Population of Travis County by Age Group



There is conclusive evidence that older adults are at an increased risk for severe illness from COVID-19. The increase in risk continues to rise as one gets older. The CDC reports adults 65 and older have accounted [for 8 out of 10 COVID-19 related deaths](#) reported in the United States. Adults 65-74 years of age experience hospitalization rates 5 times higher than among 18-29-year-olds and deaths rates [90 times higher](#) than that of the comparison group, with those rates increasing even more dramatically for adults in higher age groups. Therefore, age itself may be a suitable factor on which to determine prioritization.

Age may also be a useful means by which to further prioritize within a priority population group. Similar to the presence of an underlying medical condition, age is an evidence-based method by which to define individual as being at higher risk for severe illness or death.

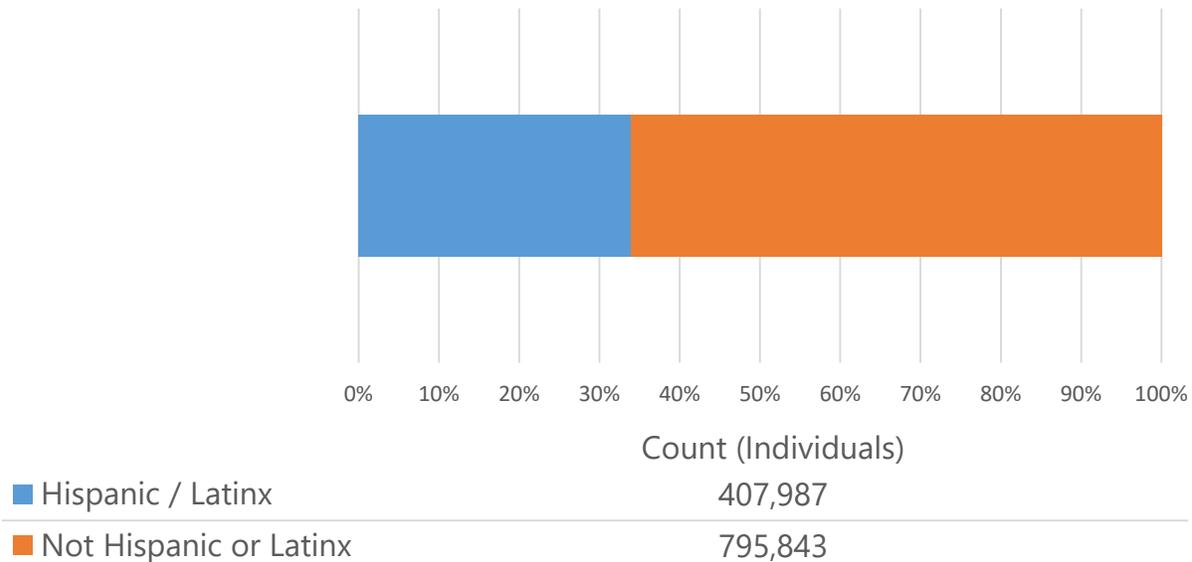
People at
Increased Risk
for Acquiring
or Transmitting
COVID-19

Travis County Priority Population Estimates Planning For SARS-CoV-2 Vaccination

People at Increased Risk of Acquiring or Transmitting COVID-19 People From Racial and Ethnic Minority Groups

Total Population of Travis County: 1,203,830

Individuals Identifying as Hispanic/Latinx vs Not Hispanic/Latinx in Travis County



The CDC has confirmed that minority racial and ethnic groups, including American Indians and Alaskan Natives, Black Americans, and Hispanics/Latinos, have experienced higher rates of COVID-19 [infection, hospitalization, and death](#) in comparison to Non-Hispanic Whites.

[Systematic inequalities](#) in employment, healthcare access, wealth, and housing status are only a few of a diverse range of reasons that racial and ethnic minorities are disproportionately suffering from the COVID-19 pandemic. For example, the Black and Hispanic/Latinx communities are overrepresented in [essential workplace settings](#) that place individuals at risk of exposure, such as healthcare facilities, factories, and public transportation. In addition, the industries in which these minority groups are employed are less likely to [offer paid sick days](#) or [telework opportunities](#).

Those determining how individuals in their jurisdiction are prioritized may further subdivide their priority populations by considering race. However, the author cautions that the use of race as a primary prioritization method, without sufficient justification, is likely to be controversial. The author recommends that members of vaccine prioritization teams develop clear, equitable guidelines for prioritization and encourages the transparent sharing of all such guidelines and associated justifications.

Collaboration with community leaders is essential to coordinating an effective vaccine distribution effort. As necessary, jurisdictions are encouraged to reach out to one of the many organizations in their area that are working to improve minority health during the pandemic. Participation by trusted community leaders in discussions and debates regarding prioritization is likely to improve communication and outreach efforts once vaccine distribution begins.

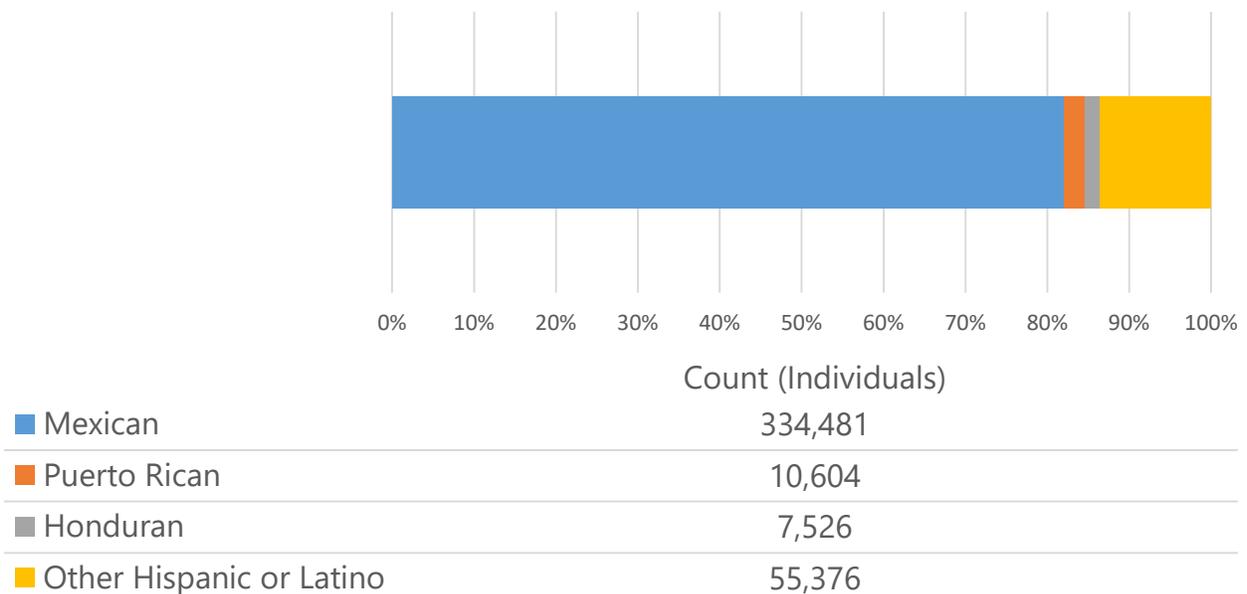
Travis County Priority Population Estimates Planning For SARS-CoV-2 Vaccination

People at Increased Risk of Acquiring or Transmitting COVID-19 People From Racial and Ethnic Minority Groups, Continued

Total Population of Travis County: 1,203,830

Total Hispanic/Latinx Population: 407,987

Racial Distribution Within the Hispanic/Latinx Ethnic Group in Travis County



It is also important to note that Travis County is estimated to have an [unauthorized immigrant population](#) of ~84,000 individuals, with the majority of individuals tracing their region of birth to Mexico and Central America. These individuals are more likely to experience [barriers to healthcare access](#) such as a lack of health insurance. In addition, they may fear discrimination or legal actions such as detention or deportation.

Jurisdictions should engage community partners experienced in outreach to the unauthorized immigrant population in order to develop methods to encourage vaccine uptake among this population.

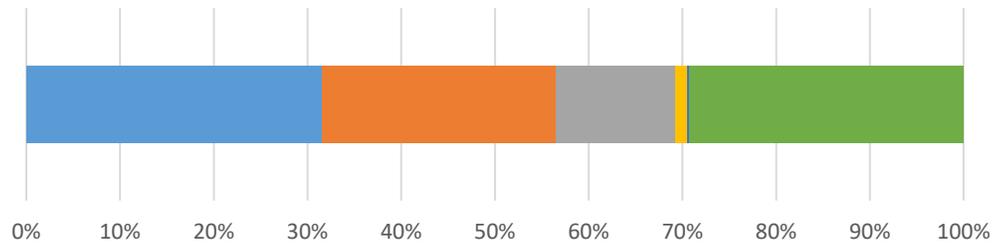
Travis County Priority Population Estimates Planning For SARS-CoV-2 Vaccination

People at Increased Risk of Acquiring or Transmitting COVID-19 People From Racial and Ethnic Minority Groups, Continued

Total Population of Travis County: 1,203,830

Total Non-Hispanic/Latinx Population (Excluding Whites) : 316,532

Racial Distribution of Minority Groups in Travis County, Non-Hispanic/Latinx (Excluding Whites)



1

■ Black or African American	100,040
■ Asian Alone	78,800
■ Two or More Races	40,337
■ American Indian and Alaska Native	4,108
■ Native Hawaiian and Pacific Islander	670
■ Some Other Race Alone	92,577

Racial minorities may express low levels of trust in the healthcare system as a response to numerous, historical occurrences of [unauthorized sterilization](#) and [experimentation](#) on minority groups. With many of the COVID-19 vaccine candidates being based on novel technologies, racial minorities may hesitate to receive vaccination with an ‘experimental’ vaccine. Again, the author stresses the importance of working with trusted community partners, with close ties to minority communities, in all stages of the vaccine distribution planning process.

Travis County Priority Population Estimates Planning For SARS-CoV-2 Vaccination

People at Increased Risk of Acquiring or Transmitting COVID-19 People From Tribal Communities

Total Population of Travis County: 1,203,830

Indian Health Services (IHS) released the [IHS COVID-19 Pandemic Vaccine Plan November 2020](#) on November 18, 2020. Within, IHS details how the IHS health care system has been preparing for the release of a COVID-19 vaccine, including the development and mobilization of the IHS Vaccine Task Force.

Those planning for the distribution of the COVID-19 vaccine who expect to work with tribal communities who receive their healthcare through IHS are advised to consult the [IHS COVID-19 Pandemic Vaccine Plan](#) for more information on ongoing efforts. Travis County does not have tribal communities served by Indian Health Services within its boundaries.

Travis County Priority Population Estimates Planning For SARS-CoV-2 Vaccination

People at Increased Risk of Acquiring or Transmitting COVID-19 People Who Are Incarcerated/Detained in Correctional Facilities

Total Population of Travis County: 1,203,830

As a congregate living settings, prisons and jails [facilitate the spread of COVID-19](#). Travis County maintains an [interactive report](#) of all inmates incarcerated in Travis County jails, updated daily by the Travis County Justice Planning Department. As of [November 23rd](#), the average inmate population during the 2021 fiscal year was 1,848 individuals.

Inmate Population: 1,848

The facilities holding these individuals, often responsible for their healthcare, may be the preferred avenue through which these individuals are vaccinated. However, it is important to note that only a part of this population will be incarcerated for any significant length of time. Incarceration facilities may consider reserving vaccination for those individuals expected to be detained for a designated period of time.

Travis County Priority Population Estimates Planning For SARS-CoV-2 Vaccination

People at Increased Risk of Acquiring or Transmitting COVID-19 People Experiencing Homelessness

Total Population of Travis County: 1,203,830

The [Ending Community Homelessness Coalition](#) (ECHO) is a non-profit organization that develops and implements plans to reduce the number of homeless individuals in Austin and Travis County. As a part of their services, ECHO performs an annual point in time count of the number of homeless population in Austin/Travis County. On January 25th, 2020 ECHO counted [2506](#) homeless individuals in the Austin/Travis County area.

Homeless Population: 2506

It is important to note that this is a point estimate and that the true number of homeless individuals may differ significantly. Furthermore, increases in the [unemployment rate due to COVID-19](#) may result in an increase in the homeless population. At this time, there is currently insufficient data to determine whether this as occurred.

The City of Austin and Travis County have established an [Isolation Facility](#), a location that provides free services such as lodging, meals, and basic medical cares to individuals who are unable to safely self-isolate, such as those experiencing homelessness. As the leading local health department in the area, Austin Public Health may be the de facto entity through which homeless individuals receive vaccination. Local health departments such as Austin Public Health should consider where in their prioritization framework homeless individuals lie and begin drafting plans to reach this population.

Travis County Priority Population Estimates Planning For SARS-CoV-2 Vaccination

People at Increased Risk of Acquiring or Transmitting COVID-19 People Attending Colleges/Universities

Total Population of Travis County: 1,203,830

Generally speaking, children and young adults are [less likely to experience severe symptoms](#) of COVID-19. As well, early vaccine candidates [may not be recommended](#) for children. Because there is currently insufficient data regarding the risks and benefits of vaccinating the following populations, children should not be considered a high priority group for vaccination until further federal guidance is received.

Nursery School/Preschool Aged Children: 21,294 Individuals
Children in Grades K-8: 121,919 Individuals
Children in Grades 9-12: 53,266 Individuals

In comparison, though less likely to experience severe symptoms than older adults, individuals in college and graduate schools may be at higher risk for acquiring or transmitting COVID-19. Those living in congregate settings such as dormitories or housing cooperatives are particularly at risk. However, effective quarantining and contact tracing measures may greatly reduce the risk that such students face.

Population in College and Graduate School: 101,767

There has been a massive shift toward online learning across the U.S. Vaccine distribution planners serving student populations should work with educational institutions, such as the University of Texas at Austin and St. Edwards University, to estimate the number of individuals who are currently living in congregate settings and therefore may be at increased risk.

Travis County Priority Population Estimates Planning For SARS-CoV-2 Vaccination

People at Increased Risk of Acquiring or Transmitting COVID-19 People Living or Working in Other Congregate Settings

Total Population of Travis County: 1,203,830

The Census Bureau classifies those living in houses, apartments, mobile homes, and rented homes as living in housing units. All other living arrangements are classified as group quarters. The Census Bureau distinguishes between the following types of group quarters:

Institutional Group Quarters, including:

- Correctional facilities
- Nursing homes
- Hospice facilities
- Mental hospitals

Non-Institutional Group Quarters, including:

- College dormitories
- Military barracks
- Group homes
- Missions
- Shelters

The number of individuals in Non-Institutional Group Quarters, as determined using the ACS 2018 5-Year Estimate microdata, is **17,854**. However, the nature of the COVID-19 pandemic has led to dramatic shifts toward distanced learning and increased precautions within group homes and shelters. Therefore, this estimate can be considered extremely unreliable. Jurisdictions should consult community partners for more up-to-date estimates of populations living in congregate settings.

People With
Limited Access
to Routine
Vaccination
Services

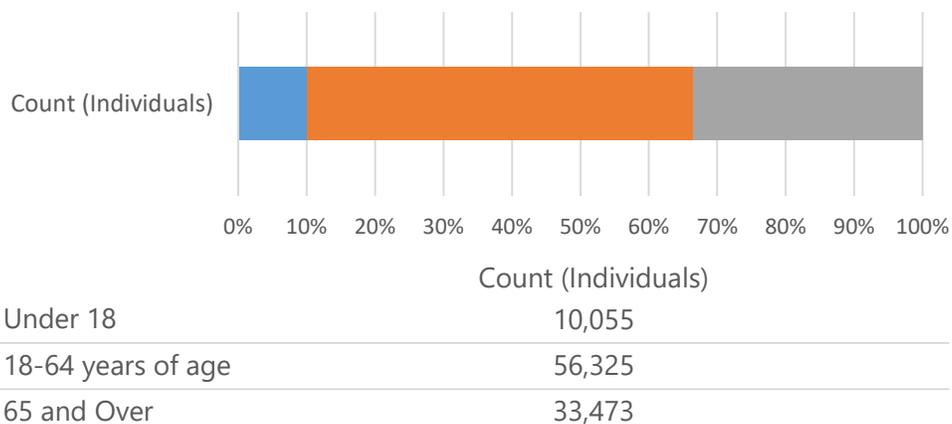
Travis County Priority Population Estimates Planning For SARS-CoV-2 Vaccination

People with Limited Access to Routine Vaccination Services People With Disabilities

Total Population of Travis County: 1,203,830

Total Disabled Population: 99,853

Disabled Population of Travis County by Age Group



While disability status alone does not place an individual at higher risk for acquiring/transmitting COVID-19, people with disabilities may be at increased risk if they face certain difficulties such as:

- A limited ability to avoid coming into contact with care providers or family members
- Trouble understanding or practicing preventive measures
- An inability to adequately communicate symptoms of illness

As well, [people with disabilities](#) are more likely than other adults to have underlying chronic medical conditions and poorer overall health while also having less access to adequate health care.

Jurisdictions should review their vaccine distribution plans to ensure that they are taking into account the diversity of difficulties that people with disabilities may face. Those with hearing or visual impairment may be more difficult to access through typical outreach methods. People with disabilities that limit their mobility or require them to have an attendant or caretaker may find it difficult to access traditional vaccine distribution sites, particularly those that are not ADA compliant.

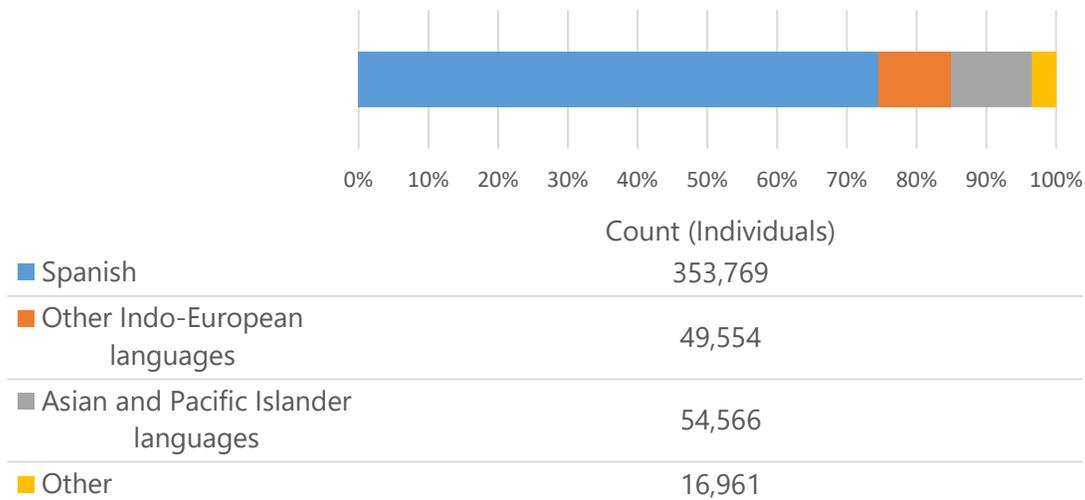
Travis County Priority Population Estimates Planning For SARS-CoV-2 Vaccination

People with Limited Access to Routine Vaccination Services People With Limited English Proficiency

Total Population of Travis County: 1,203,830

Total Individuals Who Speak a Language Other Than English in the Home: 474,840

Primary Language Spoken at Home, Excluding English, Within Travis County



While English proficiency is not suitable as a method of prioritization itself, it is an important consideration during vaccine distribution. Individuals with limited English proficiency may seek out information regarding the pandemic from different sources than the general population. Jurisdiction may need to use alternatives to traditional communications channels to effectively reach this population. The CDC has a variety of resources in their [communications toolkit](#) to aid jurisdictions in communicating with Non-English-speaking populations. These resources and others that jurisdictions may develop are useful tools for increasing accessibility to vital educational and informative communications.

Per the 2018 American Community Survey 5-Year Estimates, the five most commonly spoken languages, other than English, in Travis County are:

1. Spanish
2. Vietnamese
3. Chinese (Including Mandarin and Cantonese)
4. Hindi
5. Arabic

Jurisdictions are encouraged to seek further data regarding which languages are most commonly spoken in their area.

Note: The data above is meant to illustrate the most commonly spoken languages to facilitate communication efforts. It should not be interpreted as, or be used to create, a determination of the level of English proficiency in any population.

Travis County Priority Population Estimates Planning For SARS-CoV-2 Vaccination

People with Limited Access to Routine Vaccination Services Other Vulnerable Groups

These groups may have limited access to healthcare or be less likely to seek out care. This is not an exhaustive list, nor is it meant to be so. Jurisdictions are encouraged to discuss what they consider to be other vulnerable groups who may be less likely to receive a COVID-19 vaccine unless concentrated efforts are made to engage them. For instance, the rural population, people living in poverty, people with mental health or substance abuse disorders, etc.

Total Population of Travis County: 1,203,830

People Who Are Under- or Uninsured

Uninsured Population: 167,017

People who are uninsured are more likely to have low incomes than the average population, which may discourage them from visiting a vaccine provider who charges an administration fee. People of color are also [more likely to be uninsured](#) than Non-Hispanic Whites.

Refugee Population

Refugee Population: ~12,000

The refugee population in Austin is served by the [Austin Public Health Refugee Services](#), which historically has provided immunizations to the refugee population. Austin Public Health Refugee Services is uniquely situated to develop accessible and trusted outreach methods due to their history of providing medical care to this population. In addition, Austin Public Health may be the preferred vaccine distributor to administer vaccines to the segment of this population that is uninsured or does not have a regular healthcare provider.

Travis County Priority Population Estimates Planning For SARS-CoV-2 Vaccination

Important Considerations Regarding Vaccination

Vaccination should not be considered a definitive means by which to protect the entire population. There are several pressing reasons why vaccination will not entirely replace current preventative measures.

There is currently limited information regarding any contraindications for COVID-19 vaccination. The CDC suggests that the vaccine may [not be recommended for children](#) at the time of release; however, there is limited guidance on what other, if any, contraindications there may be. The Advisory Committee on Immunization Practices (ACIP) will submit guidelines regarding contraindications to the CDC pending FDA authorization of a vaccine candidate for emergency use.

Furthermore, the COVID-19 vaccine candidates will not be 100% effective. Though current evidence suggests that a few of the first COVID-19 vaccine candidates to be released will be [nearly 100% effective](#), others will be [less so](#). When one considers a large population, a failure rate of even a few percentage points can lead to a large number of cases. Therefore, it is important that community leaders continue to encourage the consistent practicing of preventive measures.

Furthermore, years of [widespread misinformation campaigns](#) by anti-vaccine campaigners have decreased the public's faith in immunizations. People may not want to get vaccinated and vaccine mandates, while legal, are likely to be incredibly unpopular and politically contentious.

A great deal of effort should be devoted to developing methods of clear communication regarding vaccination plans. As appropriate, the vaccine distribution planning process should be made transparent to community stakeholders and members of the general public. Jurisdictions are encouraged to include community leaders in such planning efforts. Assurances of vaccine safety should be made, with an emphasis on the numerous, rigorous safeguards certifying the safety and effectiveness of the vaccine. Care must be taken to assure critical populations that they are not being selected to 'test' the vaccine, especially when those populations are selected based upon factors such as race, ethnicity, or refugee status.

Vaccination is not simply a means by which individuals are protected. Effective and thoughtful distribution of vaccine doses to those who face the highest risk can improve the resilience of the county as a whole. The invaluable services that healthcare personnel and other essential workers provide the community allow daily operations to continue with a minimum of disruption. In addition, a targeted approach to vaccinating those who face the highest risk of acquiring COVID-19 helps reduce the burden of strained healthcare services that will experience significant challenges in the weeks and months to come.