



COVID-19 Pandemic Guidance Document

THE ROLE OF THE PSYCHIATRIST IN THE EQUITABLE DISTRIBUTION OF THE COVID-19 VACCINE

Prepared by the APA Committee on Psychiatric Dimensions of Disaster, Committee on Integrated Care, Council on Communications, Council on Minority Mental Health and Health Disparities, and Council on Healthcare Systems and Financing

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People with substance use disorders (SUD) and serious mental illness (SMI) are not only at an increased risk of contracting COVID-19 but are also more likely to be hospitalized and experience serious complications, including death. Despite obvious benefit to these individuals and their communities in preventing the spread of the disease, low socioeconomic status, reduced access to medical care, and a historically well-founded mistrust in medical institutions create significant barriers to this vulnerable population receiving the vaccine. Psychiatrists are uniquely positioned to address many of these public health challenges and ensure equitable access to the COVID-19 vaccine. Psychiatrists should play an important role supporting healthcare systems and other entities within the community to develop and deliver culturally and contextually relevant public health messages to help overcome vaccine hesitancy.

- Why prioritize vaccinations for individuals with SUD and SMI?
 - People with SUD and SMI are likely to have comorbid, high-risk physical illness, overcrowded living conditions, other health risk factors, including smoking and reduced access to medical care, all of which lead to higher rates of acquiring infection, transmitting infection to others, as well as severe morbidity and mortality due to COVID-19.
 - Historically these populations have had limited access to preventative care and vaccinations, foreshadowing inequitable distribution of COVID-19 vaccines.

- What are the barriers to vaccination?
 - Low socioeconomic status limits access to transportation and technology to reach vaccine administration sites and ensure patients receive second doses. Housing and food insecurity create competing priorities of higher-order needs.
 - Mistrust and misinformation fuels paranoia and anxieties correlated with vaccine hesitancy and avoidance.
 - Information must be shared in a way that is appropriate for a patient's language, cultural, and educational background.

- How can psychiatrists educate their patients about COVID-19 vaccines?
 - Psychiatrists frequently serve as the single, trusted point of contact between people with mental illness and the general medical system.
 - Psychiatrists should actively engage with their patients around this topic, discuss vaccine-related concerns, and disseminate accurate information.
 - Psychiatrists can assist primary care and public health officials in determining an individual's decisional capacity to provide informed consent for a vaccination.
 - Psychiatrists should serve as 'vaccine ambassadors' promoting and modeling vaccine uptake.

- Where can patients with SMI or SUD access COVID-19 vaccinations?
 - While CDC has released guidance, every state has its own plan for prioritizing eligible populations and disseminating vaccines. Many patients with SMI or SUD will fall into high priority groups due to medical comorbidity or social risk factors such as homelessness.
 - Psychiatrists should help patients to identify locations where they can receive vaccines; these may include community mental health centers, inpatient or residential facilities, primary care clinics, public health clinics, or local pharmacies.
 - Because all currently approved vaccines require a two-dose schedule, it is important to work with patients to ensure that they receive both doses to be fully protected against infection.

- How can psychiatrists and other behavioral health providers receive COVID-19 vaccines?
 - Because each state will have different mechanisms for prioritizing vaccine distribution, members should reach out to their employer, primary care provider, or local public health agency to learn about options.
 - Members may also reach out to their District Branch for help with advocacy and development of partnerships with other medical societies and organizations.
 - The American Psychiatric Association has joined other professional and advocacy groups in calling on the Department of Health and Human Services to issue guidance advising states to include mental health and addiction treatment providers, as well as patients in high-risk settings, to be included as priority groups for COVID-19 vaccines.

COVID-19 Vaccine Prioritization

PHASE 1	PHASE 1A	Healthcare personnel and long-term facility residents.
	PHASE 1B	≥ 75 years of age and frontline essential workers.
	PHASE 1C	Persons aged 65-74 years, persons aged 16-64 years of age with high-risk medical conditions, and other essential workers.
PHASE 2		All persons age ≥ 16 years not already recommended for vaccination in Phases 1a, 1b, 1c.
PHASE 3		Young adults and children; workers in industries important to the functioning of society.
PHASE 4		All other individuals interested in receiving the vaccine.

Source: Dooling K, Marin M, Wallace M, ET al. The Advisory Committee on Immunization Practices' Updated Interim Recommendation for Allocation of COVID-19 Vaccine - United States, December 2020. MMWR Morb Mortal Wkly Rep 2021;69:1657-1660. DOI: <http://dx.doi.org/10.15585/mmwr.mm695152e2>

*This is guidance for states, but states may prioritize populations differently. Please check with your state.

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