September 1, 2020

Committee on Equitable Allocation of Vaccine for the Novel Coronavirus
The National Academies of Sciences, Engineering, and Medicine
500 Fifth St. N.W.
Washington, DC 20001

RE: Framework for Equitable Allocation of COVID-19 Vaccine

Dear Committee Members:

The American Association of Colleges of Nursing (AACN) welcomes the opportunity to offer the following comments on the Framework for Equitable Allocation of COVID-19 Vaccine. As the national voice for academic nursing, AACN works to establish quality standards for nursing education; assists schools in implementing those standards; influences the nursing profession to improve health care; and promotes public support for professional nursing education, research, and practice. AACN represents more than 840 schools of nursing offering a mix of baccalaureate, graduate, and post-graduate programs at public and private universities nationwide.1 AACN member schools also represent more than 50,000 faculty members and 560,000 students who will comprise the future nursing workforce.2

AACN has a vested interest in improving our nation’s health and health care. For over five decades, the association has championed professional nursing education to ensure that Registered Nurses (RN) and Advanced Practice Registered Nurses (APRN), which include nurse practitioners, certified nurse-midwives, certified registered nurse anesthetists, and clinical nurse specialists, are prepared to provide evidence-based, cost effective, and high-quality care.

As our nation combats current and future public health challenges, access to nursing care is essential and ensuring a robust nursing pathway is imperative. Below are AACN’s comments on for the Framework for Equitable Allocation of COVID-19 Vaccine study sponsored by the Centers for Disease Control and Prevention and the National Institutes of Health. We appreciate your leadership to investigate these challenges and the opportunity to work with you and your colleagues on the committee to address them.

Equitable Distribution of Tests, Treatments, and Vaccines – Discussion and Strategy

The American people have seen the faces of nurses throughout this pandemic and recognize them as heroes. AACN urges that representatives from nursing, one of the country’s most trusted professions, have a leadership role and are actively involved in the decision-making process. As the government and private sector move forward in the race to develop a vaccine and determine how it will be equitably distributed, nurses must be utilized at the top of their education, especially given their intimate understanding of the communities they serve. Nurses work long hours and sacrifice to protect patients and fight diseases, risking their health to help others. Once a vaccine becomes available, it will surely fall to nurses to

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1 About the American Association of Colleges of Nursing. Retrieved from: https://www.aacnnursing.org/About-AACN
2 Ibid
administer it to thousands of people. Nurses must be appointed to relevant task forces and committees to provide valuable insight into our nation’s health system.

**Stockpiles, Distribution, and Prioritization – Develop Vaccine Recipient Distribution Framework, Eliminate Barriers, and Increase Vaccine Education and Awareness**

**Vaccine Distribution Framework**

AACN supports the committee’s classification of tier one vaccine recipients.³ It is crucial that recipients such as individuals with higher health risks due to underlying health conditions, as well as populations at higher risk due to age, geographical location, and historically vulnerable and unserved areas have prioritization in receiving the COVID-19 vaccination. It is also necessary to highlight that it is imperative that occupations at higher risk be prioritized as well. AACN is in agreement that occupations at higher risk, including healthcare workers and emergency service personnel, serve important societal needs and remain critical in combatting the current public health crisis.

Front line healthcare workers serve as the backbone of our vaccine distribution system. Nurses, especially registered nurses (RNs) and nurse practitioners (NPs), routinely deliver vaccines as part of their job duties.⁴ They also provide patients with evidence-based information about vaccine safety, potential side effects, and the importance of immunization. Nurses often fill the gap between patients and doctors. In rural areas, a shortage of primary care providers can mean that communities look to nurses for immunization advice and administration. School nurses also play a significant role in advising students and families about vaccine requirements, while organizations, such as the National Association of School Nurses, recommend implementing school-based vaccination programs.⁵ Due to nurses’ essential function in our nation’s vaccination process, it is crucial they have first tier access to COVID-19 vaccines so they can safely perform their jobs in their communities.

**Vaccine Education and Awareness**

An ongoing challenge for nurses and other healthcare workers lies in convincing reluctant patients to become vaccinated. This is an issue of both proper vaccine education and awareness and could impact the COVID-19 vaccination if not properly addressed. If people do not see people sick from the disease, they do not believe it poses a danger. Nurses must educate that remaining unvaccinated can affect both patients and their families. To combat this issue, it is necessary that the Centers for Disease Control and Prevention and the National


Institutes of Health create a national public awareness campaign designed to educate both high priority groups, as well as the general public, on the benefits of the vaccine and how it will positively impact communities looking to return to economic and social normalcy.

**Private and Public Partnerships – Leverage Partnerships to Ensure Fair and Effective Vaccine Distribution and Reach Vulnerable Communities**

The National Academy of Sciences, along with its partners at the Centers for Disease Control and Prevention and the National Institutes of Health, should engage the All of Us research programs’ community partners, The Community and Partner Gateway Initiative (CPGI), as they are already deeply engaged of communities with historically underrepresented and underserved communities, including communities of color and rural communities, and request to be at the table for entry into these communities.6 Another critical partner is higher education institutions within and outside of nursing education such as Historically Black Colleges and Universities, Tribal Colleges and Universities, and Minority Serving Institutions. Connecting these higher education partners with public entities can unify, innovate, and strengthen both our education and healthcare endeavors. By developing these collaborations, the committee can leverage these partnerships to further effective and equitable distribution of the upcoming COVID-19 vaccination.

AACN’s final recommendation for the committee is that the government prioritize stable funding for the Centers for Disease Control and Prevention. While a pandemic brings public health to the forefront of everyone’s minds, historically, there has not been consistent funding of public health and prevention efforts.

Thank you for your consideration of AACN’s feedback on the Framework for Equitable Allocation of COVID-19 Vaccine. This study is timely, essential, and critical to improving efficiency, safety, and innovation. Please consider AACN an ally in this endeavor. If our organization can be of any assistance, please contact AACN’s Director of Government Affairs, Rachel Stevenson at RStevenson@aacnnursing.org or AACN’s Director of Policy, Colleen Leners at cleners@aacnnursing.org.

Sincerely,

Deborah Trautman, PhD, RN, FAAN
President and Chief Executive Officer

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6 “Coronavirus: Join All of Us.” All of Us, www.joinallofus.org/coronavirus.