Vermonters who are Black, Indigenous, and people of color (BIPOC) have faced disparities throughout the COVID-19 pandemic. BIPOC Vermonters continue to have a lower vaccination rate (75.2% of those ages 5 and older) than those who are non-Hispanic white (77.9%), as of November 19, 2021.

Vermont’s age 5-11 population became eligible for vaccines on November 3rd. There is a higher proportion of BIPOC Vermonters in the state in the 5-11 age group than in older age groups. Non-Hispanic white Vermonters aged 5-11 have slightly higher vaccination rates than BIPOC Vermonters aged 5-11. In other words, since there are more Vermonters of color in the youngest age group than in older age groups, until this age group is more vaccinated, we are likely to see a wider disparity.

The gap in the vaccination rate between BIPOC and non-Hispanic white Vermonters increased with the addition of children ages 5-11 to the population of people eligible to get vaccinated.

White Vermonters (including Hispanic white Vermonters) age 5 and older have the highest vaccination rates (80%), followed by Black Vermonters (74%), Asian Vermonters (71%) and those who identify with two or more races (69%). Vermonters who identify as Native American, Indigenous, or First Nation, or Pacific Islanders are the least likely to have received at least one dose of the COVID-19 vaccine. A higher proportion of Hispanics (96%) received a vaccine than non-Hispanics (77%).

For Vermonters age 5+, whites have the highest vaccination rates.

Note: Race/ethnicity information is missing for 4% of people vaccinated.

Data sources: Vermont Immunization Registry (IMR); Vermont Department of Health Population estimates (2019)
COVID-19 Vaccination Rates by Race and Ethnicity

Race/Ethnicity Patterns by Age Groups (5-11, 12-30, 31-64, and 65+)

- Pacific Islander and Native American, Indigenous, or First Nation Vermonters have lower vaccination rates than white, Black, Asian and multiracial Vermonters within each age group.
- Hispanic Vermonters have a higher vaccination rate than non-Hispanic Vermonters in all age groups.
- White Vermonters have the highest vaccination rate in ages 5-11, followed by Asian Vermonters. Multiracial and Black Vermonters’ rates are slightly lower than these rates.
- Black Vermonters have the highest vaccination rates for ages 12-30, followed by white and Asian Vermonters who have similar rates for this age group.
- For ages 31-64, multiracial Vermonters have the highest vaccination rates. White, Black, and Asian Vermonters follow with slightly lower, similar rates.
- Multiracial and white Vermonters have the highest vaccination rates for ages 65+. In this age group, Black and Asian Vermonters have similar vaccination rates, lower than the rates among multiracial and white Vermonters.

BIPOC Vermonters have higher COVID-19 vaccination rates than non-Hispanic whites in the three older age groups, but not in the youngest age group.

Fewer than 1,000 of the almost 5,000 BIPOC Vermonters aged 5-11 have received at least one dose of a COVID-19 vaccine. More than 12,000 of the nearly 17,000 BIPOC Vermonters aged 12-30 have received at least one dose of a COVID-19 vaccine, and more than 15,000 of the nearly 17,500 BIPOC Vermonters aged 31-64 have received at least a first dose. Almost all the 3,800 BIPOC Vermonters who are aged 65+ have received at least a first dose of a COVID-19 vaccine.

Vaccination rates by race and ethnicity vary by age group and county.

Rates for BIPOC Vermonters are significantly lower than rates for non-Hispanic whites in these age groups and counties.

Age 5-11: Chittenden, Rutland, Washington
Age 12-30: Grand Isle, Windham
Age 31-64: Caledonia, Essex, Grand Isle, Rutland, Windham
Age 65+: Caledonia, Franklin, Lamoille, Orange, Rutland, Windsor

County findings are suppressed if either group has fewer than 50 people or if both groups have reached 95%.
Key Takeaways

The conditions in which we live, work, and play, known as the social determinants of health, affect a wide range of health outcomes. Systems of structural oppression and racism greatly impact social determinants of health. In other words, even before the COVID-19 pandemic, not everyone in Vermont had equal access to the conditions that favor health. COVID-19 shines a light on these inequities. BIPOC Vermonters are at disproportionate risk for poor health outcomes, including COVID-19. In addition, this population is at higher risk for more serious outcomes, such as hospitalization, and may lack access to information and resources. For more information on what the Vermont Department of Health is doing to mitigate racial and ethnic health disparities, please visit www.healthvermont.gov/about-us/our-vision-mission/health-equity

For more information: COVID-19 Vaccination Data Team, AHS.VDHSCOVIDVaccinationData@vermont.gov