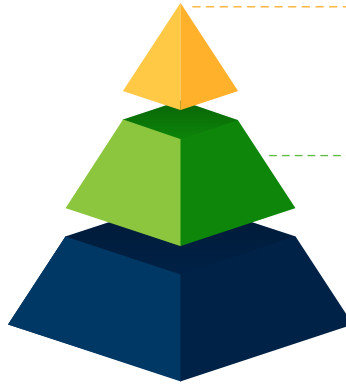


# MINNESOTA IMMUNIZATION NETWORKING INITIATIVE

## Minnesota Immunization Networking Initiative

### APPROACH



Providing free vaccinations in the greater Twin Cities region by connecting health care providers, trusted community organizations and skilled volunteers to organize and host clinics that provide free flu shots and other health information to uninsured or underserved populations.

Using Community Need Index (CNI) scores to assess five barriers to healthcare access: 1) income, 2) cultural/language, 3) education, 4) insurance, and 5) housing; and through CNI ensure highest-need populations are reached.



### CONTEXT

**Goal:** Minnesota Immunization Networking Initiative (MINI) contributes to closing the gap in influenza immunization rates for communities of color and American Indians in the greater Twin Cities.

**Causes:** Racism and discrimination have caused long-standing disparities in education, employment, income/wealth, housing, neighborhood conditions, and access to health care, transportation, social connections and support that directly affect health.

**Population:** Approximately 847,000 people of color and American Indians live in the Twin Cities region.

**Issue:** Inequities in health insurance coverage are linked to structural barriers to education, employment and wealth accumulation. Nearly 79 percent of white, non-Hispanic Minnesotans have employer-provided health insurance, compared to 61 percent of people of color and American Indians. Comprehensive strategies are needed to reduce disparities in influenza vaccinations, including increasing vaccine access in nontraditional settings.

### ROOT CAUSES/ CONDITIONS FOR HEALTH

Addresses the social and economic conditions for health (also known as the social determinants of health). This often happens by changing local, regional or state policy, changing the way systems work or changing the environment.

### ORGANIZATIONAL/ INSTITUTIONAL CHANGE

Addresses a health area by changing policies or systems in a school, clinic, hospital, etc. to support healthy behaviors and individual risk/protective factors.

### HEALTH PROMOTION/ DIRECT SERVICE

Addresses individual or family-level risk/protective factors through health education, programming, case management, etc.

### IMPACT

- Over 86,000 free shots provided since MINI began in 2006
- 36% of MINI clients had a Community Need Index score of 4.2 or higher, with 5 ranking the highest in health disparities

**6,100** free influenza  
vaccinations provided  
at **104** partner sites  
in the greater Twin Cities



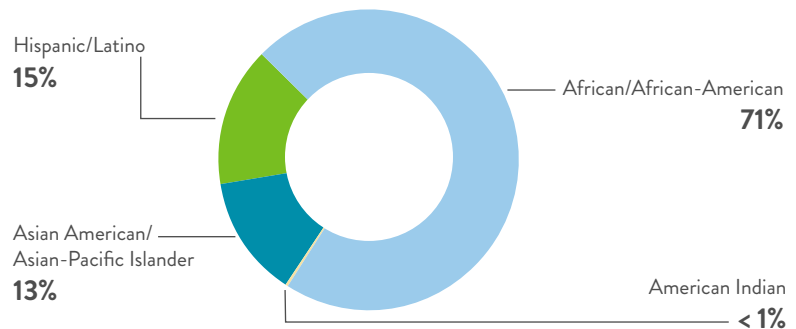
## Minnesota Immunization Networking Initiative

MINI is a multi-sector community collaborative providing free flu shots to uninsured, underserved populations in the greater Twin Cities.

### PRIORITY HEALTH AREA SPOTLIGHT

Misinformation about the safety and health benefits of vaccines along with barriers to access have reduced the number of Minnesotans getting immunized against preventable diseases. In 2013-2014, rates of vaccination for tetanus, diphtheria, acellular pertussis (Tdap) and influenza were significantly lower among African American and American Indian women when compared to white women.

**Collective Impact:** 45,799 individuals were reached through the work of three grantees addressing this priority health area in 2017-18. The proportions of individuals reached by race/ethnicity are shown in the figure below.



EHDI grantees addressing immunizations identified common measures to track and report. Collective results include:

- ★ 4,492 received a needed immunization according to national guidelines
- ★ 13,438 educated about vaccines and vaccine-preventable illnesses

### MDH ELIMINATING HEALTH DISPARITIES INITIATIVE

The Eliminating Health Disparities Initiative (EHDI) grant program was created to address health inequities for populations of color and American Indians across eight different priority health areas. Since 2001, the EHDI approach has been to support organizations and projects run by and for communities of color and American Indians to develop and implement strategies that are effective in reaching their communities. Every few years, the program reallocates the competitive grants to organizations and tribes across the state of Minnesota. The current grant cycle is from 2016-2019.