SOCIO-DEMOGRAPHIC DATA COLLECTION

FOR COVID-19 VACCINATION

Voluntary socio-demographic data collection at vaccination sites was initiated for persons accessing COVID-19 vaccination starting in March 2021, to support the implementation of an equitable vaccination strategy.

What do we know?

Socio-demographic data are not available for most of the people who received a COVID-19 vaccine.

Of the more than **12.7 million** individuals vaccinated:

SOCIO-DEMOGRAPHIC DATA were available for only (621,585) of people

95.1% of individuals

10, 2022. Data includes individuals with a response to one or more socio-demographic variable.

Counts are from data extracted from COVaxON on October 11, 2022 and doses reported up to October

What are socio-demographic variables?

There are a total of 6 socio-demographic variables available to be collected in COVaxON including race, ethnicity, household size, household income, official language and childhood language.

What can we learn from this information? The very low percentage of people with data is likely due to a combination

of people not having been asked or people not providing this information. This means that the data can't be used to accurately understand

vaccine uptake based on these socio-demographic factors.

Why is this important?

Socio-demographic data allows health professionals and decision-makers to understand groups and communities who might benefit from additional supports to access COVID-19 vaccines.

What are the challenges?

There are likely challenges in collecting socio-demographic information at vaccination clinics, for example adding this process into a busy clinic setting, asking people sensitive questions in a public space and the lack of standardized training for vaccination clinic staff.

What can be done?

In order to collect socio-demographic data representative of Ontario's population, vaccination providers and Ontarians receiving vaccines need to be engaged.

It is important that vaccination providers and clients understand the importance of socio-demographic data and how it can be used

to further support access to vaccines in Ontario. Additionally, alternatives for more comprehensive and representative socio-demographic information should be explored, such as integration with other data sources.

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