

BURDA ON HEALTHCARE

# Seeing Through the Black and White Healthcare Worker Vaccination Rates

By David Burda  
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**A**s a journalist, I'm always looking for a good man-bites-dog story. You know, the type of story that turns conventional wisdom on its head. You expect a dog to bite a man. You don't expect a man to bite a dog.

There's an illuminating man-bites-dog story in the April 2 [edition](#) of the Morbidity and Mortality Weekly Report (MMWR) from the Centers for Disease Control and Prevention (CDC). One of the two articles in the edition was on flu and COVID-19 vaccination rates of healthcare workers during the 2024-2025 "respiratory virus season." That's last year's cold and flu season, not the one that's just ending.

Before I tell you who bit who, let me set the scene.

If you have a functioning brain in your head, you know that getting the flu shot reduces your chances of getting the flu and spreading it to others. If you do get sick despite getting the vaccine, your symptoms are less severe. The same is



true with the COVID-19 vaccine. There is less chance of getting COVID, less chance of spreading COVID to others and less chance of severe symptoms or death if you get COVID.

We know those things to be true because of science, despite what your MAGA friend, neighbor or family member may tell you. [Here's a new study](#) published in Pediatrics that found that getting the flu vaccine kept kids healthy and out of the hospital. The Washington Post broke this [story](#) in April about the CDC sitting on a study that said getting the COVID vaccine kept adults healthy and out of the hospital.

OK, enough scene setting.

## RACE AND ETHNIC DISPARITIES IN VACCINE RATES

Here's the good news from CDC on flu and COVID-19 vaccination rates of healthcare workers. Workers include physicians, nurse practitioners, physician assistants, nurses, pharmacists, other clinical personnel (like dentists, allied health professionals, EMTs, paramedics), assistants, aides and non-clinical personnel. Of all those people, 76.3% got a flu shot last year. That's up from 75.4% during the 2023-2024 respiratory virus season. The COVID-19 vaccination rate also went up to 40.2% from 31.3%.

Here's the man-bites-dog part. The flu vaccine rate went up or stayed the same for all race and ethnicity categories except for white, non-Hispanic healthcare workers. The flu vaccination rate for white, non-Hispanic healthcare workers actually dropped to 74.2% from 75.9% compared with:

- No change for Asian, non-Hispanic healthcare workers at 89.2%.
- An increase for Black/African American, non-Hispanic healthcare workers to 76.5% from 70.5%.
- An increase for Hispanic, or Latino healthcare workers to 75% from 74.5%.
- An increase for Other, non-Hispanic healthcare workers to 85.2% from 66.4%.

Meanwhile, the COVID-19 vaccine rates for White, non-Hispanic healthcare workers rose to 35.5% from 29.6% compared with:

- A decrease for Asian, non-Hispanic healthcare workers to 49.6% from 53.4%.
- An increase for Black/African American, non-Hispanic healthcare workers to 47.5% from 29.7%.
- An increase for Hispanic or Latino healthcare workers to 45.8% from 28.7%.
- An increase for Other, non-Hispanic healthcare workers to 40.6% from 37.2%.



Why is this a man-bites-dog story? It's a man-bites-dog because when we talk about all the health disparities and health inequity in our healthcare system, it's almost always people of color (POC) getting the short end of the healthcare delivery stick. Less access. Poorer outcomes. Higher costs.

When it comes to healthcare workers and flu and COVID vaccines, it's just the opposite. White, non-Hispanic healthcare workers have lower flu vaccine rates, and white, non-Hispanic healthcare workers have lower COVID-19 vaccine rates.

## CDC CALLS ON HEALTHCARE EMPLOYERS TO DO MORE

The CDC didn't address the racial and ethnic disparities in vaccine rates. But the CDC did acknowledge that getting vaccinated from the flu and from COVID is a good idea.

Stating the obvious, the CDC said, "Influenza and COVID-19 continue to cause considerable morbidity and mortality, and vaccination coverage among HCP [health care personnel] remains low, increasing HCPs' risk for illness, as well as the risk for persons under their care."

Insanely, only 38.7% of healthcare employers required their workers to get flu shots last respiratory virus season. Even fewer — 14.1% — required their workers to get vaccinated from COVID.

The CDC said healthcare employers should do more to increase flu and COVID-19 vaccination coverage among their workers. The agency suggested on-site vaccines and employee education for starters.



## ANTI-VAX RHETORIC SEEPING INTO THE BRAIN

What's going on here? I'm not a sociologist. But I am a practicing amateur psychologist. Why are so few healthcare employers requiring their workers to get flu and COVID vaccines even though the science says that the vaccines will protect their workers and their patients from sickness and death? Why are white, non-Hispanic healthcare workers less likely to get flu and COVID vaccines even though the science says that the vaccines will protect them and their patients from sickness and death? Why are both happening even though the CDC says healthcare employers and healthcare workers should be doing the opposite?

The answer is anti-vax rhetoric from the Trump regime and its appointed roster of anti-science medical quacks, political loyalists and conspiracy theorists at federal health agencies led by Robert F. Kennedy, Jr. We're seeing the rhetoric seep into the brains of

executives who run healthcare provider organizations and into the brains of healthcare workers themselves.

Healthcare employers are afraid to offend the regime lest the regime investigate them for promoting diversity, equity and inclusion or pull their research grants for trying to reduce health disparities or improve health equity for underserved patient populations. White, non-Hispanic healthcare workers could be more gullible to anti-vax rhetoric from the regime's influencers than healthcare workers of other races and ethnicities.

On that second point, I know white, non-Hispanic healthcare workers who quit or were fired during the COVID-19 pandemic because they refused to get a COVID vaccine even though bodies were dropping all around them.

## GET EDUCATED, GET VACCINATED

Education level made a difference, according to the CDC. The more educated you were as a healthcare worker, the more likely you were to get a flu or COVID vaccine. To wit, 81.7% of healthcare workers with graduate degrees got a flu shot last season compared with 78.5% of those with associate or bachelor's degrees and 66.6% of those with some college or less. It was 47.3%, 37.9% and 36.2%, respectively, for the COVID vaccine. The CDC called those education level differences in rates "statistically significant."

Do you think it's simply a coincidence that the Trump regime wants to kill off the U.S. Department of Education (DOE) but not before the DOE restricts loans for graduate degrees in nursing and other health professions starting July 1? Think again. By keeping people, including healthcare workers, uninformed and uneducated, it keeps people more gullible to propaganda, including anti-vax propaganda.

Ultimately, the man-bites-dog story buried in the April 2 MMWR is a call to action for the private-sector executives who run our healthcare system. It's time for you to bite back and protect healthcare workers and your patients from preventable and



manageable respiratory diseases like the flu and COVID-19. It's both good science and good business.

Woof.

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## AUTHOR



**David Burda** began covering healthcare in 1983 and hasn't stopped since. Dave writes this monthly column "Burda on Healthcare," contributes weekly blog posts, manages our weekly newsletter 4sight Friday, and hosts our weekly Roundup podcast. Dave believes that healthcare is a business like any other business, and customers — patients — are king. If you do what's right for patients, good business results will follow.

Dave's personal experiences with the healthcare system both as a patient and family caregiver have shaped his point of view. It's also been shaped by covering the industry for 40 years as a reporter and editor. He worked at Modern Healthcare for 25 years, the last 11 as editor.

Prior to Modern Healthcare, he did stints at the American Medical Record Association (now AHIMA) and the American Hospital Association. After Modern Healthcare, he wrote a monthly column for Twin Cities Business explaining healthcare trends to a business audience, and he developed and executed content marketing plans for leading healthcare corporations as the editorial director for healthcare strategies at MSP Communications.

When he's not reading and writing about healthcare, Dave spends his time riding the trails of DuPage County, IL, on his bike, tending his vegetable garden and daydreaming about being a lobster fisherman in Maine. He lives in Wheaton, IL, with his lovely wife of 40 years and his three children, none of whom want to be journalists or lobster fishermen.

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