COVID-19 Vaccine Access Toolkit
Currently, the CDC Advisory Committee on Immunization Practices – whose recommendations influence the order in which states are making vaccines available – classifies type 1 diabetes (T1D) as a lower risk than type 2 diabetes for COVID-19.

The evidence cited in this recommendation does not include a more recent study which shows that adults with T1D have similar risks with COVID-19 as people with T2D.

Because of this, JDRF is advocating for the T1D community to be prioritized.

Current Engagement

JDRF provided formal comments to the U.S. Centers for Disease Control and Prevention (CDC) calling for a review of the latest data, met with officials there, and joined with other diabetes organizations in submitting a joint letter to the CDC. Our direct communications to the agency continue to advocate for those with T1D and T2D to be categorized as high priority for receiving the COVID-19 vaccine.

In the Fall, we provided input to the National Academies of Science, Engineering, and Medicine, which were seeking input on a proposed framework for vaccine distribution.

JDRF has also been sharing this important data with the news media including being featured in STAT News, a health and medicine focused news website, and contributing to the piece featured in The Hill, a media source for policy and political coverage.
How YOU Can Take Action

While many communities are relying on CDC guidelines, others are revising them. You may wish to reference the following steps as you consider advocating for yourself and the T1D community for COVID-19 vaccine prioritization.

1. **LOOK UP VACCINE PLANS IN YOUR STATE**
   - The vaccine plans are rapidly evolving, so start by checking the current T1D status in your state through:
     - Your state department of health website (see this list)
     - This resource from the Kaiser Family Foundation

2. **IDENTIFY KEY VACCINE POLICY INFLUENCERS IN YOUR COMMUNITY**
   - This could include news organizations, public health agency leaders, elected officials, hospital CEOs, and physicians.

3. **STUDY OUR RESOURCES TO GATHER KEY FACTS & PREPARE YOUR MESSAGE**
   - Reference the information from our Vaccine Access Guide
   - Borrow from the sample letter template (on the next page)
   - Use this spreadsheet on prevalence of T1D by state

Connect with Key Vaccine Policy Influencers to Share Your Message by taking steps such as:

- **Engage on Social Media.** Regularly comment on the social media accounts of key influencers and post from your own platforms. Tag key influencers, use the hashtag #PrioritizeT1D, and encourage your friends and family to do the same.

- **Submit Letters to the Editor** to local newspapers. Many have ways to do so on their websites.

- **Speak at Community Meetings.** Many communities are having virtual meetings to share information about the COVID response. Speak up during the public comment period on this issue.

- **Submit Comment Letters.** Some agencies are offering an opportunity to provide written comments about vaccine policies specifically, or the COVID plans more broadly. You can also send letters directly to your governor and state department of health.
Re: COVID-19 Vaccine Prioritization for People with Type 1 Diabetes (T1D)

Dear {Decision Maker}:

As one of the estimated {XX,XXX} people in {insert state} living with type 1 diabetes (T1D), {I / we} respectfully ask you to include people with T1D into {insert phase} of the vaccine allocation framework for distributing the COVID-19 vaccine.

{I / We} applaud the healthcare workers, research scientists and so many others who have helped our community during this pandemic and are now bringing us life-saving vaccines. {I / We} strongly support the initial prioritization of healthcare personnel and residents and staff of long-term care facilities, and also urge decision makers to prioritize health equity in their vaccine distribution plans, given the disparate impact COVID-19 has had on people of color in the United States.

That said, today {I / we} want to draw attention to the latest research, which shows COVID-19 has taken a significant toll on the diabetes community. A recent study conducted at Vanderbilt University shows that people who contract COVID-19 and have diabetes – whether type 1 or type 2 – have three to four times higher risk of severe illness and hospitalization, compared to people without diabetes. Additional research shows that even young, otherwise healthy patients with T1D who become infected with COVID-19 remain at an increased risk for poor outcomes, such as hospitalization due to diabetic ketoacidosis (DKA), which is a life-threatening complication of the disease. In a multicenter study by the T1D Exchange, 47% of patients with T1D who were hospitalized with COVID-19 had DKA. In England, a Lancet Diabetes & Endocrinology study found that being admitted to a critical-care hospital unit, or dying, was more than twice as likely for patients with T1D.

The national office of JDRF continues to be in direct contact with leadership at U.S. Centers for Disease Control and Prevention (CDC) to present these and other findings, requesting prioritization and re-categorization for those living with T1D. The CDC responded that they would review this information as their guidance to states continues to evolve.

Given the higher risks of severe illness and hospitalization from COVID-19, {I /we} join the chorus of others in urging you to prioritize access to the COVID-19 vaccine for those living with T1D.

Thank you for considering our request, and for your leadership during this public health crisis. Please contact me {insert name / contact info / city} with any questions on this important issue.

Sincerely,
{insert name}

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1 COVID-19 Severity is Tripled in the Diabetes Community: A Prospective Analysis of the Pandemic’s Impact in Type 1 & Type 2 Diabetes
2 COVID-19 Hospitalization in Adults with Type 1 Diabetes: Results from the T1D Exchange Multicenter Surveillance Study
3 Associations of type 1 and type 2 diabetes with COVID-19 related mortality in England: a whole population study
We applaud the healthcare workers, research scientists and so many others who have helped our community during this pandemic and are now bringing us life-saving vaccines.

Sample Messaging

• We strongly support the initial prioritization of healthcare personnel and residents and staff of long-term care facilities, and also urge decision makers to prioritize health equity in their vaccine distribution plans, given the disparate impact COVID-19 has had on people of color in the United States.

• We want to draw attention to the latest research, which shows COVID-19 has taken a significant toll on the diabetes community.

• A study published in December 2020 shows that adults who get COVID-19 and have diabetes, whether type 1 or type 2, have three to four times higher risk of severe illness and hospitalization, compared to people without diabetes.

• This new study is consistent with earlier data, and unequivocally demonstrates that adults with diabetes are at a significantly heightened risk of severe illness and mortality due to COVID-19.

• Based on this evidence, state vaccine distribution plans should make people with T1D or T2D – as well as their caregivers – a high priority for receiving COVID-19 vaccines.