Flu Deaths Are More Common in Children of Color, Study Finds

A large new analysis reveals stark disparities in flu hospitalizations and deaths

People who are Black, Hispanic, or American Indian/Alaska Native are more likely than white people to be hospitalized with a case of the flu in the U.S., according to a new study from the Centers for Disease Control and Prevention and other institutions. Young children in these groups, along with Asian and Pacific Islander children, are also more likely to die from flu than white children.

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The study, published today in the journal JAMA Network Open, took a close look at 113,352 flu hospitalizations between 2009 and 2019 from across the country. Researchers found clear disparities in those hospitalizations as well as among those who were ultimately admitted to the intensive care unit or who died.

“In many ways there was nothing here that was shocking,” says Sandra Crouse Quinn, PhD, professor and chair of the department of family science at the University of Maryland School of Public Health

and senior associate director of the Maryland Center for Health Equity, who was not involved in this research. “That doesn’t mean it’s not disturbing.”

What the Study Found

Researchers found the greatest disparities among children younger than 5. “In this age group, in-hospital mortality rates were three to four times higher in some racial and ethnic minorities compared with non-Hispanic white children,” says the study’s lead author Alissa C. O’Halloran, MSPH, an epidemiologist in the influenza division of the National Center for Immunization and Respiratory Diseases at the CDC.

Young children of color were also much more likely to end up in the hospital with the flu in the first place. Compared with non-Hispanic white children under 5:

- Asian and Pacific Islander children under 5 were 26 percent more likely to be hospitalized with the flu.
- Hispanic children under 5 were almost twice as likely to be hospitalized with the flu.
- Black children under 5 were more than twice as likely to be hospitalized with the flu.
- American Indian/Alaska Native children under 5 were three times as likely to be hospitalized with the flu.

Overall, Black people had the highest rates of hospitalization and ICU admission, followed by American Indians or Alaska Natives and Hispanic people, although the trends varied within age groups. Except in the youngest children, Asian and Pacific Islander people had hospitalization rates similar to or slightly lower than non-Hispanic white people. Across racial and ethnic groups, researchers found few differences in hospitalization, ICU admission, and death from flu among adults 75 and older.

The study used data from the CDC’s existing surveillance system that collects information on flu-related hospitalizations from select counties across the U.S. O’Halloran says that while previous research on the 2009 swine flu pandemic found similar results, the new study represents “the largest analysis to date to look at the impact of race and ethnicity on severe influenza-associated disease.”

What's Driving Flu Disparities

Part of what’s driving the disparities in severe outcomes from flu are differences between some groups in rates of flu vaccination, which sharply reduces the risk of hospitalization and death from the flu.
More on the Flu
Flu Prevention and Treatment Guide
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During the 2018 to 2019 season, for example, about 75 percent of white children between 6 months and 4 years old received flu vaccines, according to the CDC. But just 67 percent of Black children and 60 percent of American Indian and Alaska Native children got flu shots.

In the data collected for this new study, researchers found similar differences among adults. In most age groups, non-Hispanic Black and Hispanic people had lower rates of flu vaccination compared with non-Hispanic white people, O’Halloran says.

Still, differences in flu vaccination alone cannot account for the extent or scale of the disparities in hospitalizations and deaths. Systemic factors—what public health experts call the social determinants of health—are at play here, says Stephen B. Thomas, PhD, a professor in the department of health policy and management at the University of Maryland School of Public Health and the director of the Maryland Center for Health Equity, who was not involved in the new study.

These include a variety of elements key to people's health and well-being, such as economic stability, access to quality education and healthcare, the environmental conditions of a person's neighborhood, crowded housing, systemic racism, and more. "These are those factors outside of individual control," Thomas says, and they affect how likely a person is to get severe disease from flu, as well as their likelihood to receive a flu vaccine. "Do I have sick leave? Can I take off from my job to go get a flu shot?"

The social determinants of health also contribute to racial and ethnic disparities that occur in the rates of chronic diseases—such as diabetes and asthma—many of which can raise the risk of a case of the flu turning severe.

Similar factors have driven the racial and ethnic disparities in the rates of hospitalizations and deaths from COVID-19.

Thomas says it's disappointing that while this new study from the CDC provides excellent data on a critical problem, the researchers didn't address what could be done to close the gaps. "If there's anything that COVID has exposed," he says, "it's that there's far too much we have known about the disparities and about who is suffering, and far too little we have done to remedy it."

What to Expect This Flu Season

Last winter, the measures put in place to combat the spread of COVID-19, including wearing masks, improving ventilation, closing schools and workplaces, limiting crowds and gatherings, staying home when sick, washing hands diligently, and more, resulted in an almost nonexistent flu season.

With COVID-19 mitigation measures relaxed, eliminated, or in some cases prohibited across the country, however, some experts fear the coming flu season may be severe. And our immune systems are out of practice with the flu, which could be particularly worrisome for children, Crouse notes.

What does that mean for you? Getting a flu shot will be crucial. Even if you catch a case of the flu after getting your shot, having the vaccine means you'll be less likely to get severely ill from the flu, Crouse says. The CDC recommends that almost every person 6 months and older receive a flu vaccine. And if you haven't received your COVID-19 vaccine yet, the CDC says you can get both shots in the same appointment—no need for an extra trip to the doctor or pharmacy.

Have a friend or family member who is hesitant? Being open about your experience with getting vaccinated and encouraging others to do so as well could help, Crouse says. She applauds those who share that they've been vaccinated on social media, for example. "The social norms, whether it's flu or COVID, are important," she says.

There are many lessons we've learned from fighting COVID-19 that should be applied to fighting flu, too, Thomas says. "COVID has shown us a way," he says. "We've got more pop-up clinics than I've ever seen. If I can get a lifesaving COVID vaccine in a Black barbershop or beauty salon, why can't I be there and deliver a flu vaccine?"

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