WHAT IS SOCIAL VULNERABILITY?
Every community must prepare for and respond to hazardous events, whether a natural disaster like a tornado or a disease outbreak, or a human-made event such as a harmful chemical spill. Several factors, including poverty, lack of access to transportation, and crowded housing, may weaken a community’s ability to prevent human suffering and financial loss in a disaster. These factors are known as social vulnerability.

Using U.S. Census data, the Centers for Disease Control and Prevention (CDC) launched the first version of the Social Vulnerability Index (SVI) in 2011 to enable emergency response planners and public health officials to identify, map, and plan support for communities that will most likely need support before, during, and after a public health emergency.

WHAT IS THE MINORITY HEALTH SOCIAL VULNERABILITY INDEX?
In 2021, the HHS Office of Minority Health (OMH) partnered with CDC to launch the Minority Health SVI. The Minority Health SVI was updated in June 2023. The Minority Health SVI is an extension of the CDC/ATSDR SVI that combines the 15 social factors included in the original CDC/ATSDR SVI with additional factors known to be associated with COVID-19 outcomes. The factors are developed using 5-year estimates of demographic data from the U.S. Census Bureau’s American Community Survey (ACS) 2016-2020 5-Year Estimates, and are organized into six themes:

- Socioeconomic Status
- Household Characteristics
- Racial and Ethnic Minority Status
- Housing Type and Transportation
- Health Care Infrastructure and Access
- Medical Vulnerability

The Minority Health SVI also expands upon the CDC/ATSDR SVI to include statistics for specific race and ethnicity categories and languages. Specifically, data is included for the five racial and ethnic minority groups currently defined by the 1997 OMB Directive 15 and the top five languages spoken by populations with limited English proficiency (LEP) at the county level.

HOW CAN I USE THE MINORITY HEALTH SVI?
The Minority Health SVI can be used to apply a health equity lens to research, strategic planning, program design, and evaluation related to response and recovery for disease outbreaks and other public health emergencies. Specifically, the Minority Health SVI databases and dashboard can be used to:

- Inform efforts for focused and equitable testing and vaccine and treatment distribution and administration efforts in under-resourced communities.
- Identify communities with LEP individuals (and the languages spoken in those communities) who may need language assistance for outreach efforts and services.
- Support program planning and evaluation efforts, including those that may link Minority Health SVI with other databases.
- Identify medically under-resourced communities for which strategic efforts are needed to improve health care infrastructure and access.
- Plan community-level efforts to address systemic factors related to the social determinants of health.
- Help decide how many public health and emergency personnel are required to assist people in case of emergencies at the county level.
- Foster multi-sector collaboration within communities by offering a tool that is inclusive of a diverse range of location-based data.
- Inform the design of targeted programs and services to address chronic disease disparities.
- Inform research examining the correlation between socioeconomic, healthcare infrastructure, and demographic characteristics of an area.

Note: The findings and conclusions in this study have not been formally disseminated by the Centers for Disease Control and Prevention or the Agency for Toxic Substances and Disease Registry and should not be construed to represent any agency determination or policy.