

Lessons Learned: Building Vaccine Equity for COVID-19 and Flu Vaccination in REACH Communities

Thursday, December 7, 2023

Vaccine equity acknowledges that no nation, state, or individual's life is more important or more deserving than another's.

[Save the Children](#)



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Association of
Immunization
Managers

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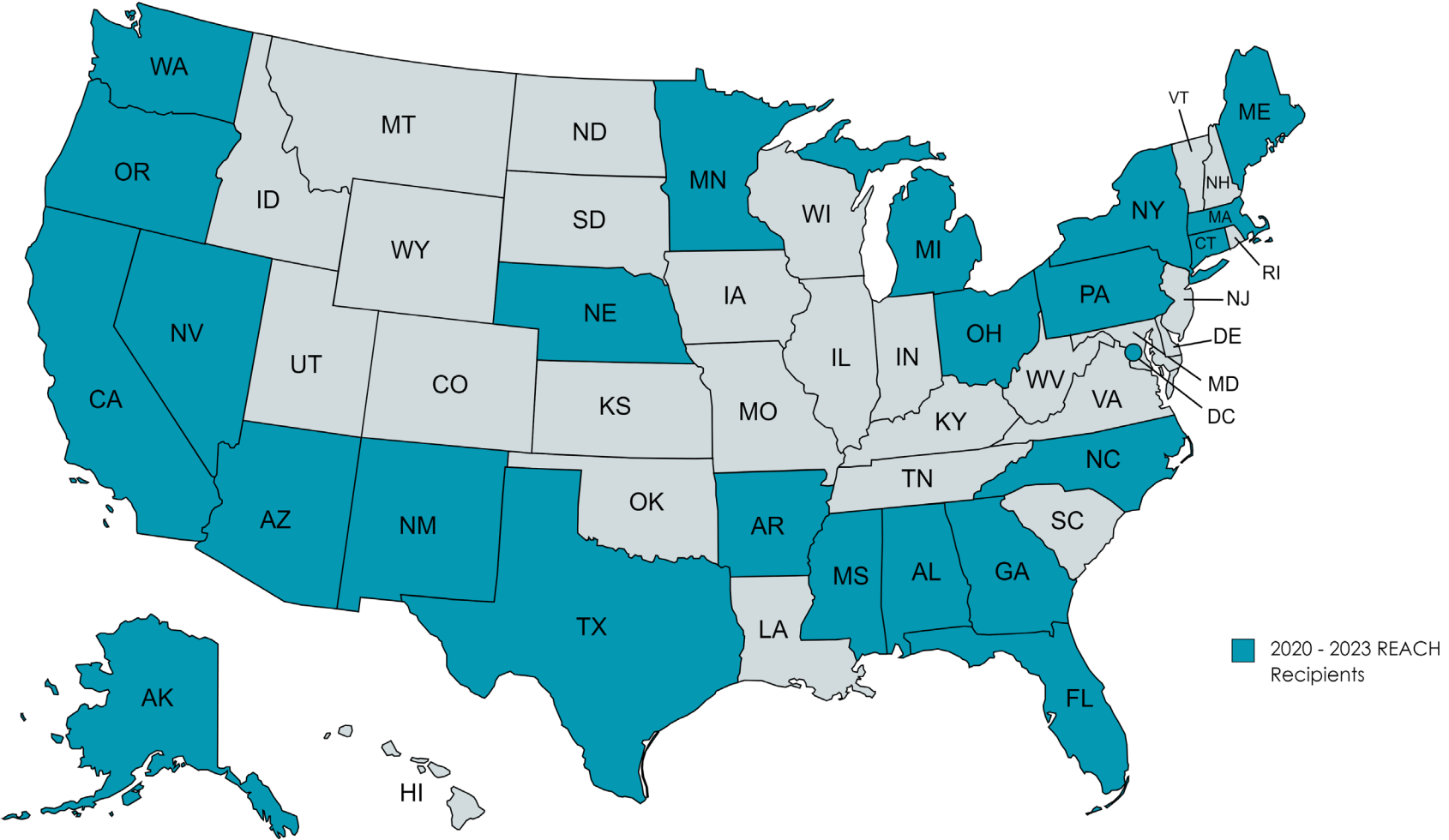
About iREACH

- Racial and Ethnic Approaches to Community Health (REACH) is a national program administered by the Centers for Disease Control and Prevention (CDC) to reduce racial and ethnic health disparities.
- AIM has partnered with CDC to engage and support participating REACH organizations in their efforts to address racial and ethnic disparities related to COVID-19 and flu vaccination coverage.
- Through this partnership—known as iREACH—recipients plan and carry out local, culturally appropriate programs to address racial and ethnic disparities in immunization coverage among Black/African American, Latino, Asian, American Indian, and Pacific Islander, Alaska Native communities.



2020-2023 REACH Recipients

From October 2020 through September 2023, iREACH provided support to 38 REACH recipients.



Agenda

- **The Church Initiative and Trusted Messenger Expansion: A Combined Effort to Increase Vaccine Uptake for a Successful Immunization Program**
 - Irene Nyanuba, Worcester Department of Public Health, MA
- **Rethinking Access to Vaccines through Small Community Organizations Serving Racial and Ethnic Minorities**
 - Marolyn Valenzuela, National Kidney Foundation of Michigan
- **Leveraging Community Engagement and Multi-Sector Partnerships for Vaccine Equity**
 - Jackson Higginbottom, MPH Yale School of Public Health and Bernard Macklin, PhD Southern Connecticut State University
- **REACH Recipient Highlights**
- **REACH Lessons Learned Project findings**
 - Dr. Yabo Beysolow, iREACH Subject Matter Expert
- **Q&A**

Today's Panelists



Irene Nayanuba
Worcester Department of
Public Health



Marolyn Valenzuela
National Kidney Foundation
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Jackson Higginbottom, MPH
Yale School of Public Health



Bernard Macklin, PhD
Southern Connecticut State
University



The Church Initiative and Trusted Messenger Expansion: A Combined Effort to Increase Vaccine Uptake for a Successful Immunization Program

Irene Nyanuba

Worcester Division of Public Health, MA



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The Church Initiative and Trusted Messenger Expansion: A Combined Effort to Increase Vaccine Uptake for a Successful Immunization Program

Presented by:
Irene Nyanuba,
Vaccine Program Manager
Worcester Division of Public Health

AIM Leadership in Action Conference
2023



Vaccine education event at Good Shepherd Ghana Methodist Church, January 2022



Vaccine education event at Iglesia Ministerios La Trinidad, January 2022

Presentation Outline

- Introduction
- REACH COVID-19/Flu Program
- Identified Problems
- Identified Opportunity
- The Church Initiative
- The Church Initiative Achievements
- Lessons from the Church Initiative

Introduction

- The Worcester Division Public Health (WDPH) is the lead agency of the Central Massachusetts Regional Public Health Alliance (CMRPHA).
- The division provides services including:
 - Emergency Preparedness
 - Regional Health
 - Public Health Nursing
 - Data, Research and Epidemiology
 - Community Health
 - Maternal and Child Health
 - Behavioral Health
 - REACH (Built Systems & Environment, Nutrition and Breastfeeding Coordination)
 - Vaccine Program



Worcester Division of Public Health Workers, April 2023



Introduction


Profile of the City of Worcester, Worcester County, Massachusetts


The second largest city in MA and in New England

 **203,867**
People

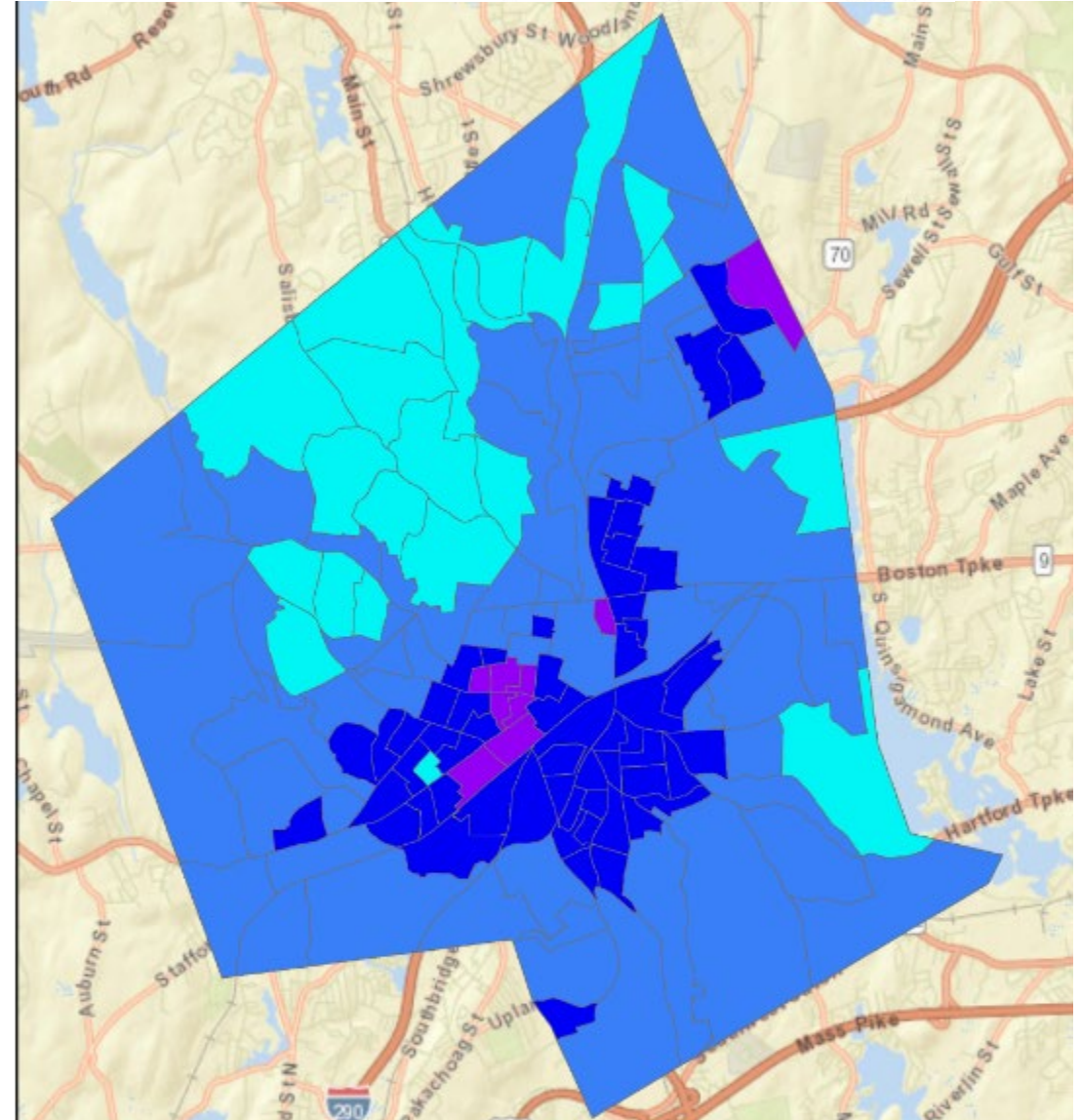
Total Population

Worcester City County Subdivision, Worcester County, MA

 **49%**
of total population
Males






 **51%**
of total population
Females

Worcester Latino Population (Percentage)



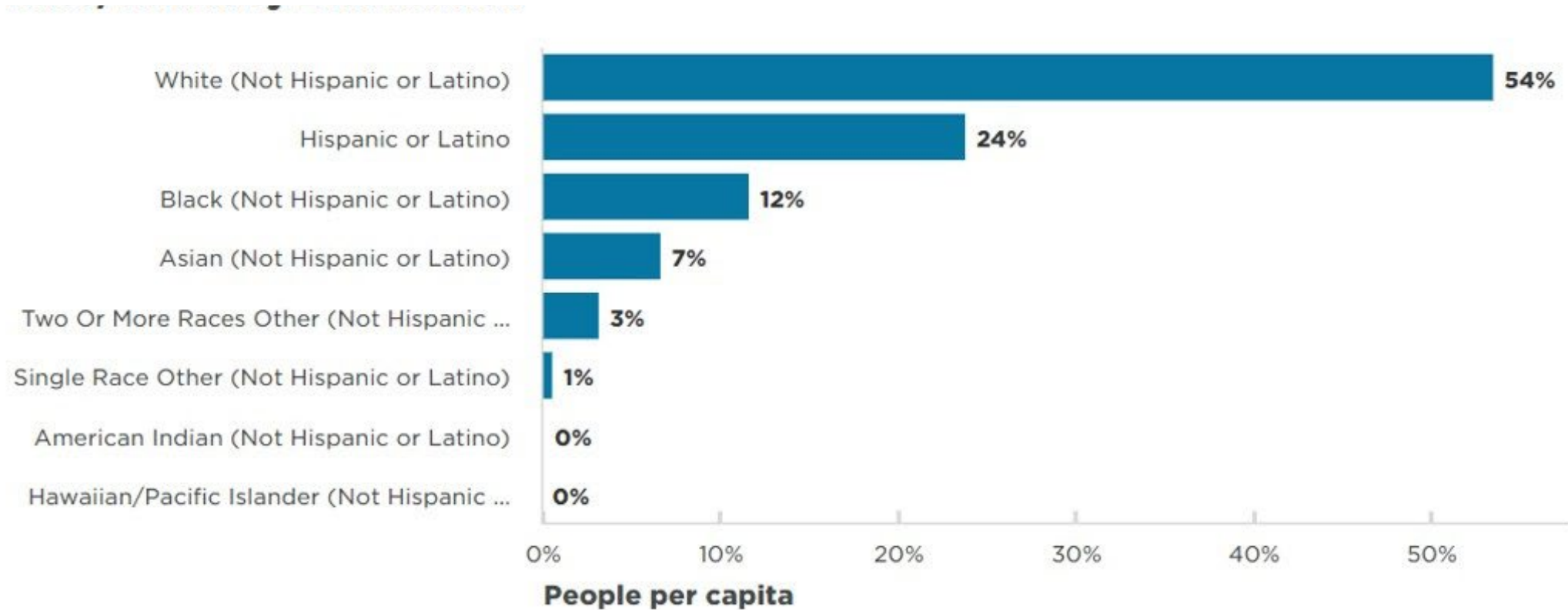
Legend

2020 US Census Block Groups
TOTAL_HISPANIC_LATINO_PCT

-  < 10%
-  10% - 25%
-  25% - 50%
-  50% - 75%
-  > 75%

Introduction

Race and Ethnicity Distribution For Worcester City/County Subdivision: US Census, 2021



Worcester City County Subdivision, Worcester County, MA



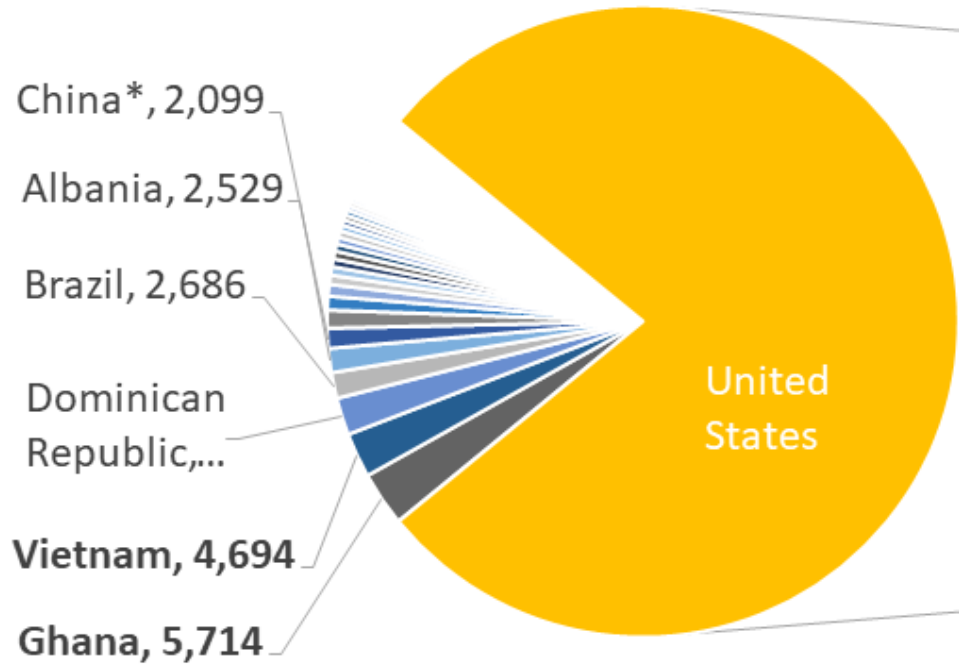
The City of
WORCESTER

Public Health

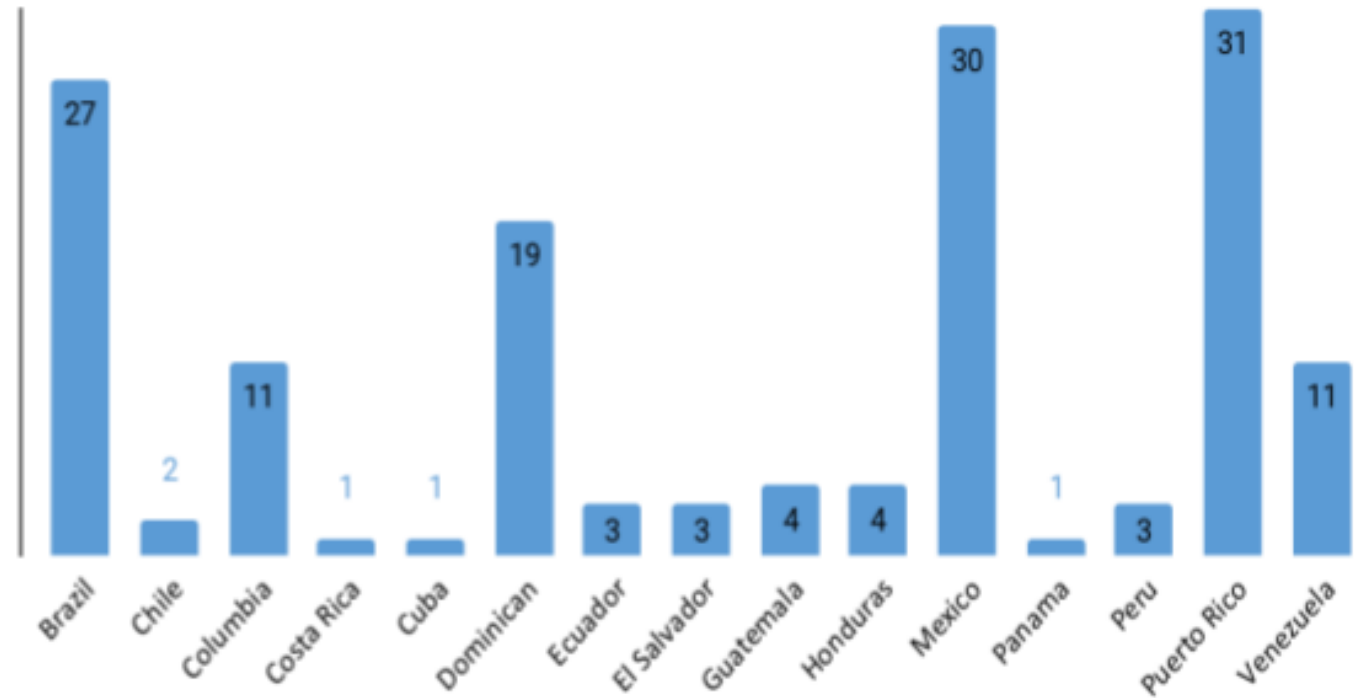


Introduction

Country of Origin : US Census, 2021



Country of Origin of Hispanics Only: Field Report January, 2021-May, 2022



REACH COVID-19/Flu Program

- The Racial and Ethnic Approaches to Community Health (**REACH**) COVID/Flu program was established to increase vaccination rates for Hispanic/Latino communities and other minority populations.
- In 2020, The Worcester Division of Public Health (WDPH) was awarded REACH Influenza Immunization Supplement Grant from the Centers for Disease Control and Prevention (CDC).
- WDPH worked towards increased vaccination rates through intensive vaccine educational campaigns and the recruitment of key community leaders for training in COVID-19 and Flu vaccine promotion.



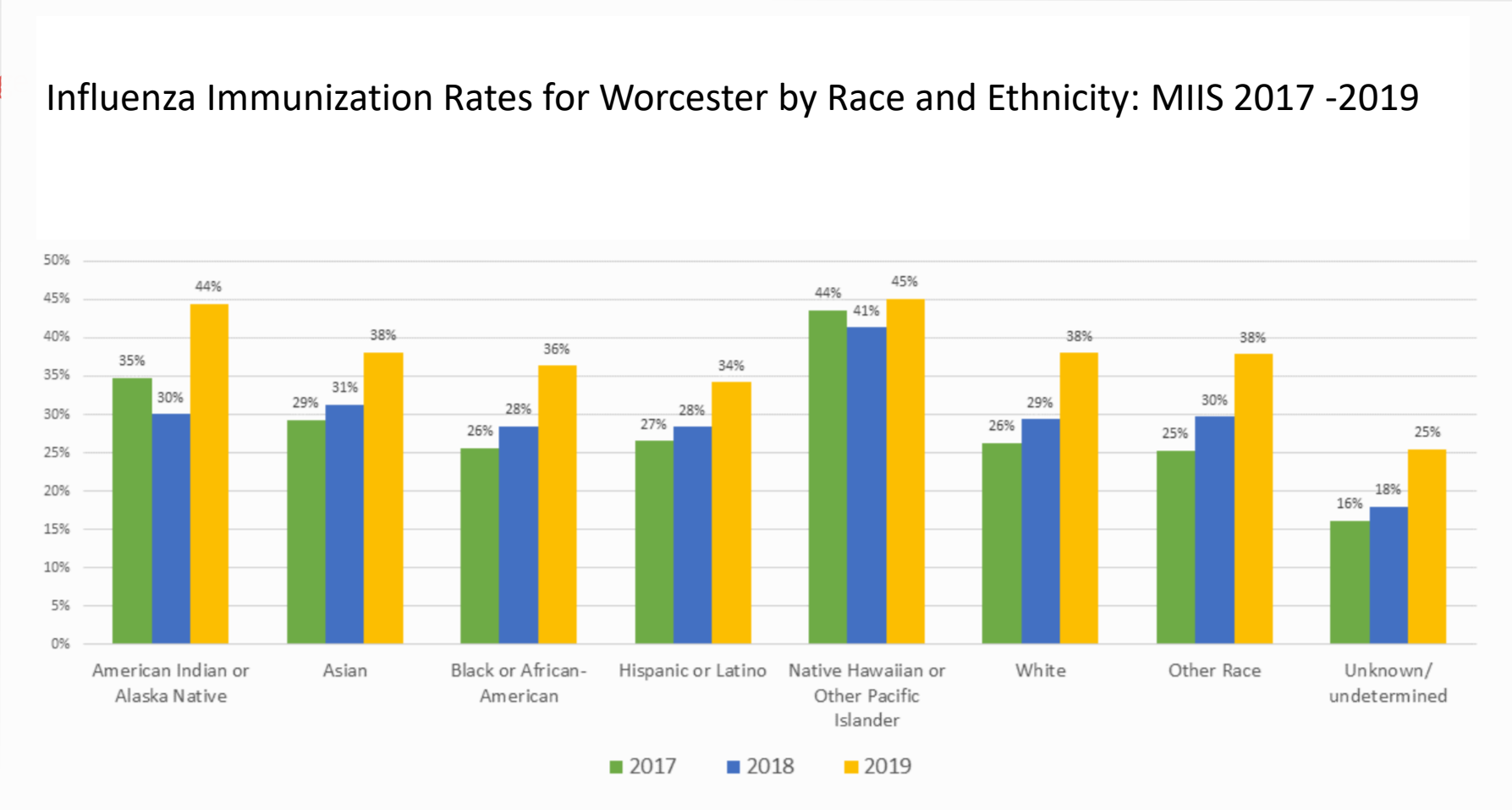
REACH COVID-19/Flu Program

- We also put effort into connecting vaccination providers with community stakeholders for the establishment of vaccination sites to ensure availability and accessibility.
- Key pillars for implementation included:
 - Data monitoring to improve evidence informed strategies
 - Effective communication across teams
 - Active community partnerships
 - Increasing vaccination sites



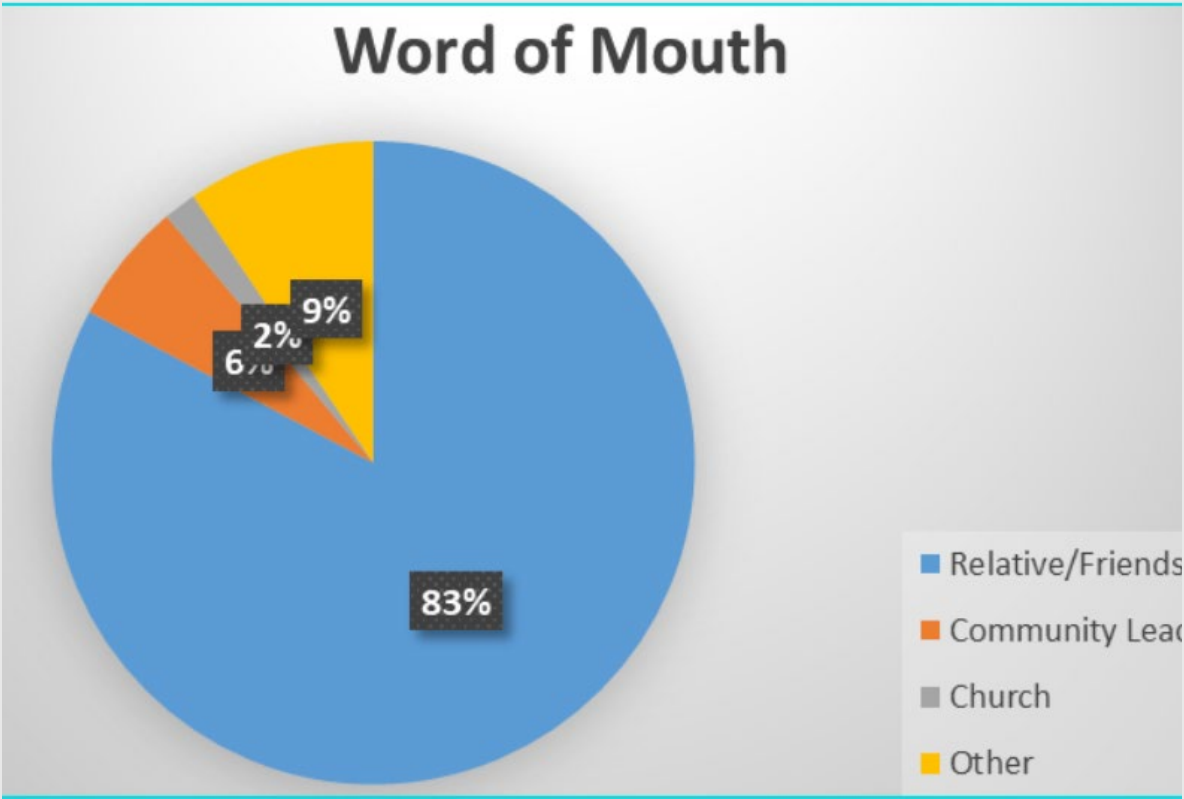
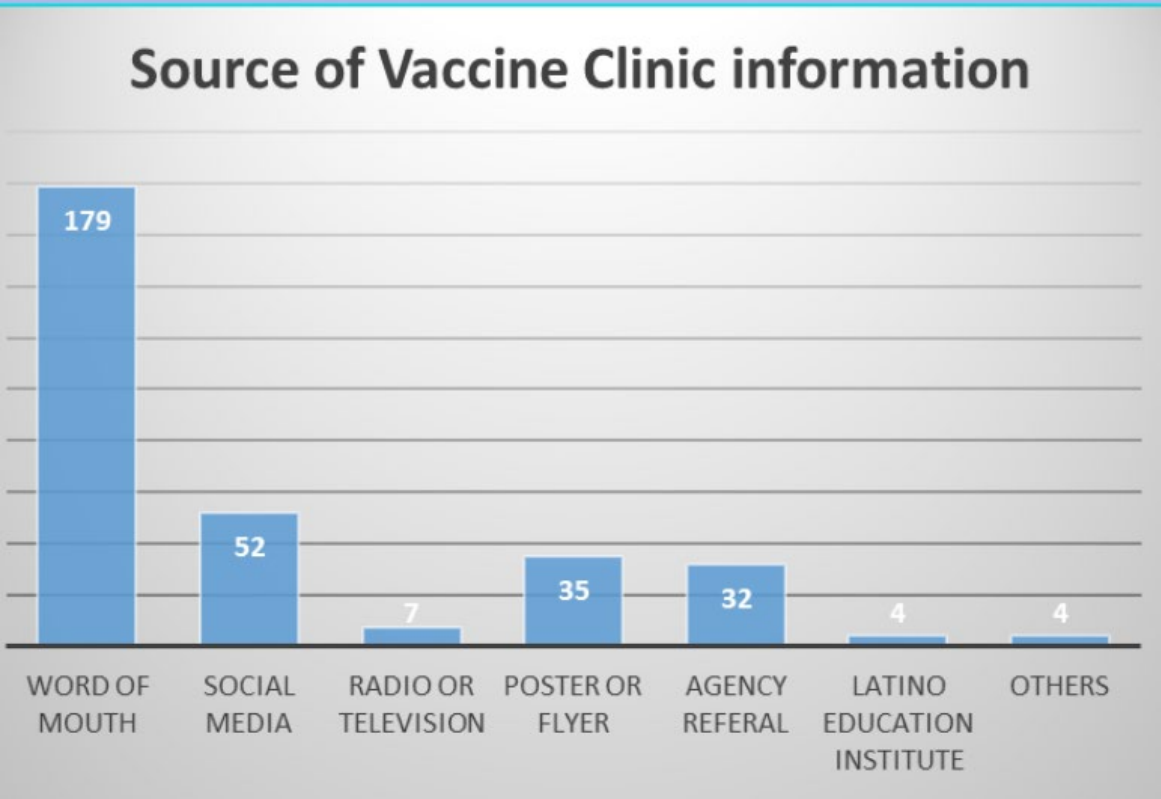
Identified Challenges

- Low vaccine clinic attendance (especially for Black and Brown people)
- Inadequate health and vaccine knowledge
 - Information access
 - Language barrier
- Vaccine misconceptions
- Vaccine hesitations and refusal
- Competing health needs
- Data collection



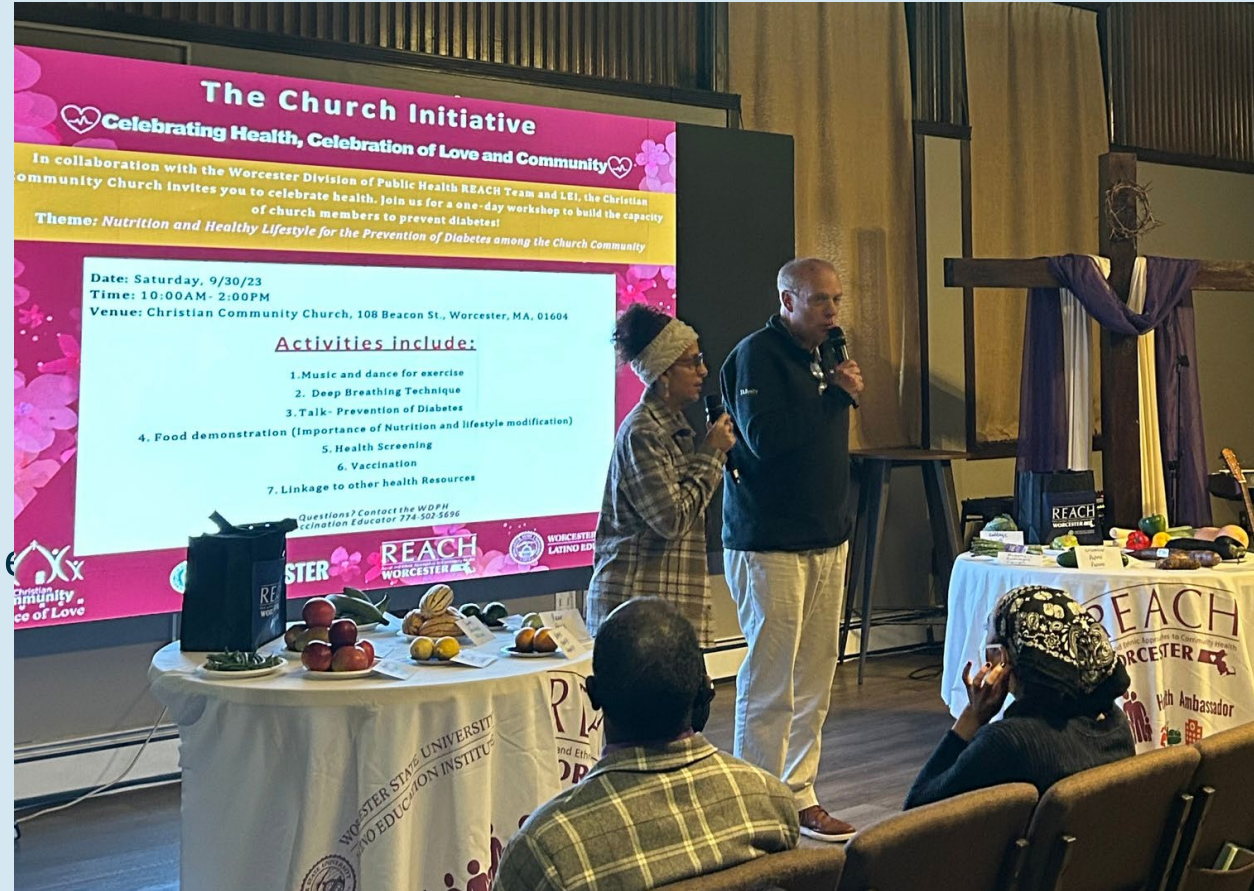
Identified Opportunities

- Supportive leadership
- Resource availability
- Active community organization
- Active community members asking questions, commenting, providing feedback, and responding to surveys



WHY THE CHURCH INITIATIVE?

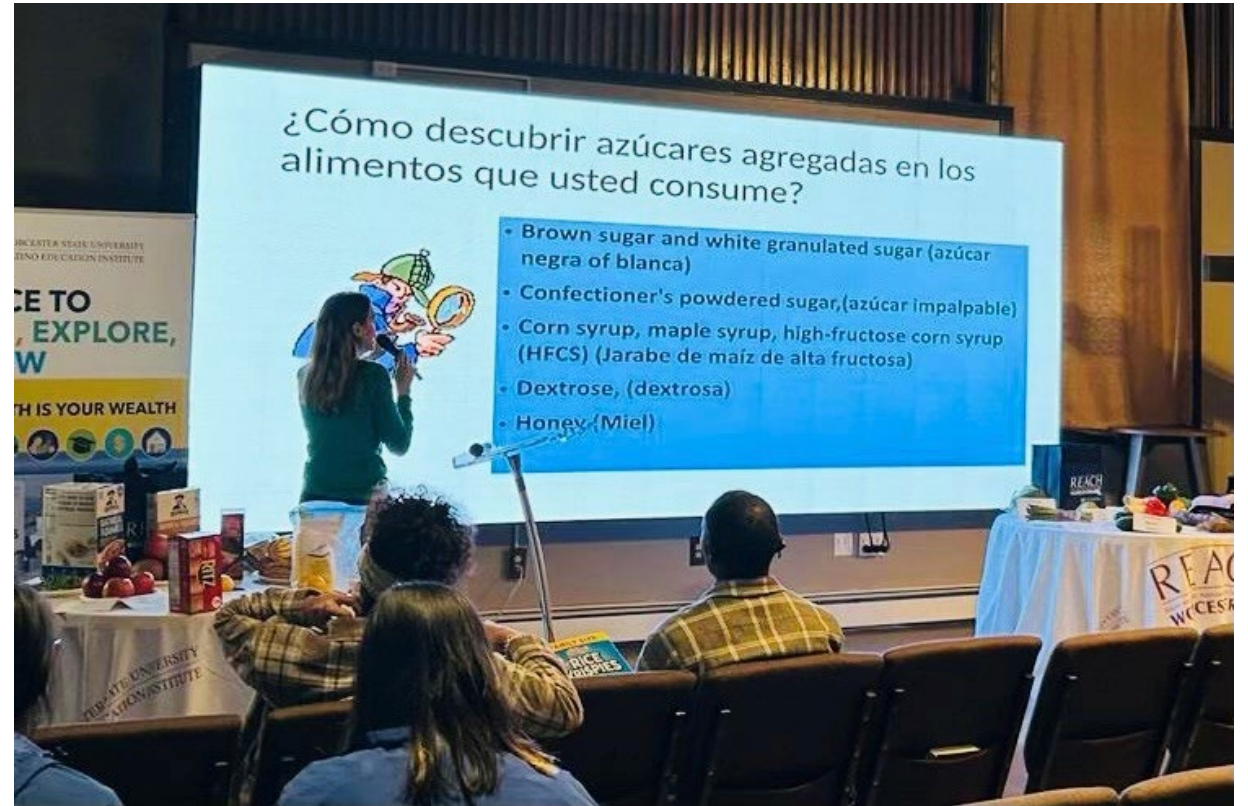
- According to Gallup polls, as of 2021, almost 50% of the United States population is religious
- Churches offer:
 - Community spaces with leadership and trust
 - Congregation and socialization
 - Opportunity for sit-down conversations
- Scientific facts tailored to fit the shared experience of the community increases uptake
- Individual health does not exist in isolation
- Existing structure to complement the resources of the health system



Church initiative event at Christain Community Church: Discussing Diabetes and Vaccination, September 2023

The Church Initiative

- The Church Initiative uses discussion forums to provide accurate vaccine information in culturally-tailored and appropriate languages
- Building the capacity of church members to continue with educating their community
- The initiative integrates vaccination education with communities' health needs to increase engagement
- Vaccinations are also provided during the event



Church initiative event at Christain Community Church: Health Education on Diabetes and Vaccination in Spanish, September 2023

The Church Initiative

- Highlight other express health concerns such as hypertension and diabetes
- The initiative put effort into collaboration and integration to make vaccine education more relevant to a church
- Emphasis is on health education that is culturally-competent and culturally-relevant to improve engagement
- Members of the BIPOC community with experience and expertise are supported to facilitate the discussions or lead a section of the workshop



Church initiative event at Christain Community Church: Drumming Exercise , September 2023

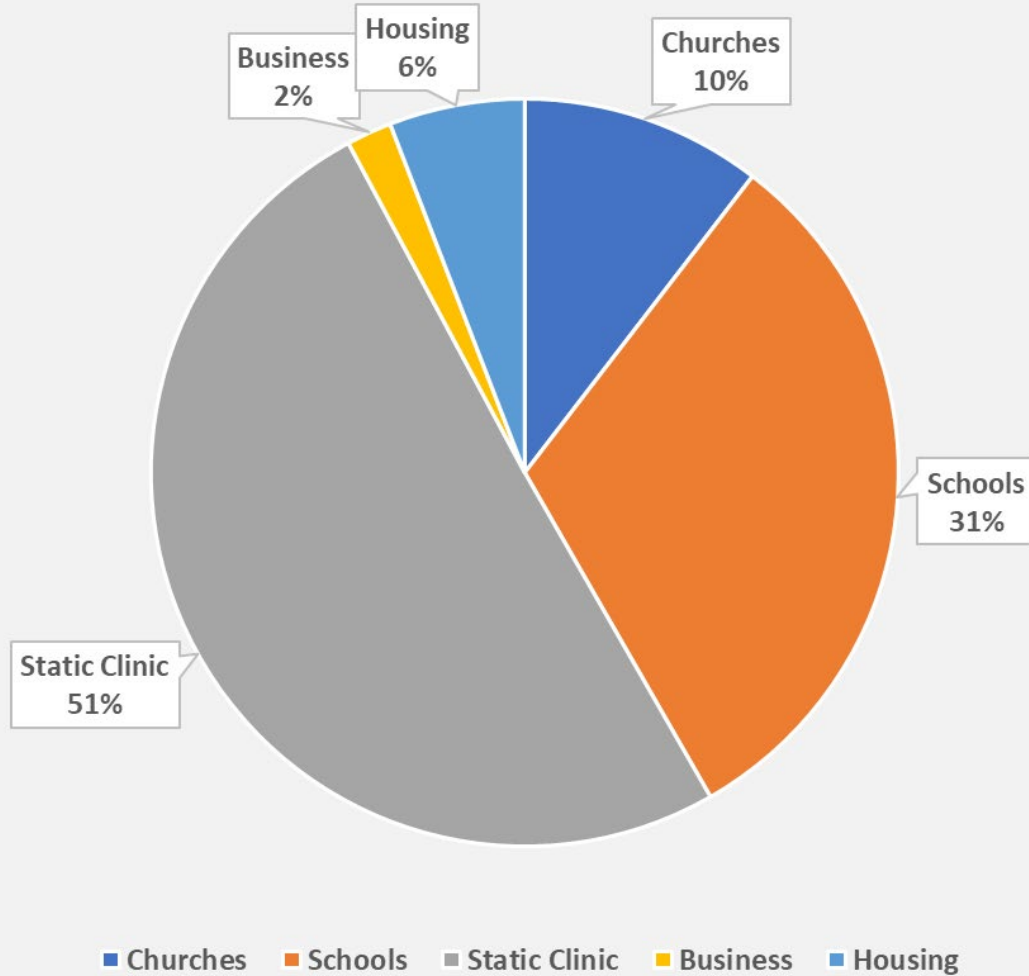


Implementation style for increased level of engagement

- Community entry for relationship building
 - Anyone serves as an entry point
 - Gathering information on structure, culture, and current health capacity and needs
 - Agreeing on action points with leaders for follow-up
- Implementation workshop
 - Involving the members at all stages of the event, including meeting to plan event
 - Highlight community efforts in reports, storytelling, and promotion of messages
 - Evaluate workshop (Community feedback is crucial)
- Follow up with community
 - Support the church in adding health committee into their structure if there is none
 - Expanding Trusted Messengers
 - Continue to support the church to address other health concerns.

The Church Initiative Achievements

Vaccination Clinics in Worcester, MA 2022

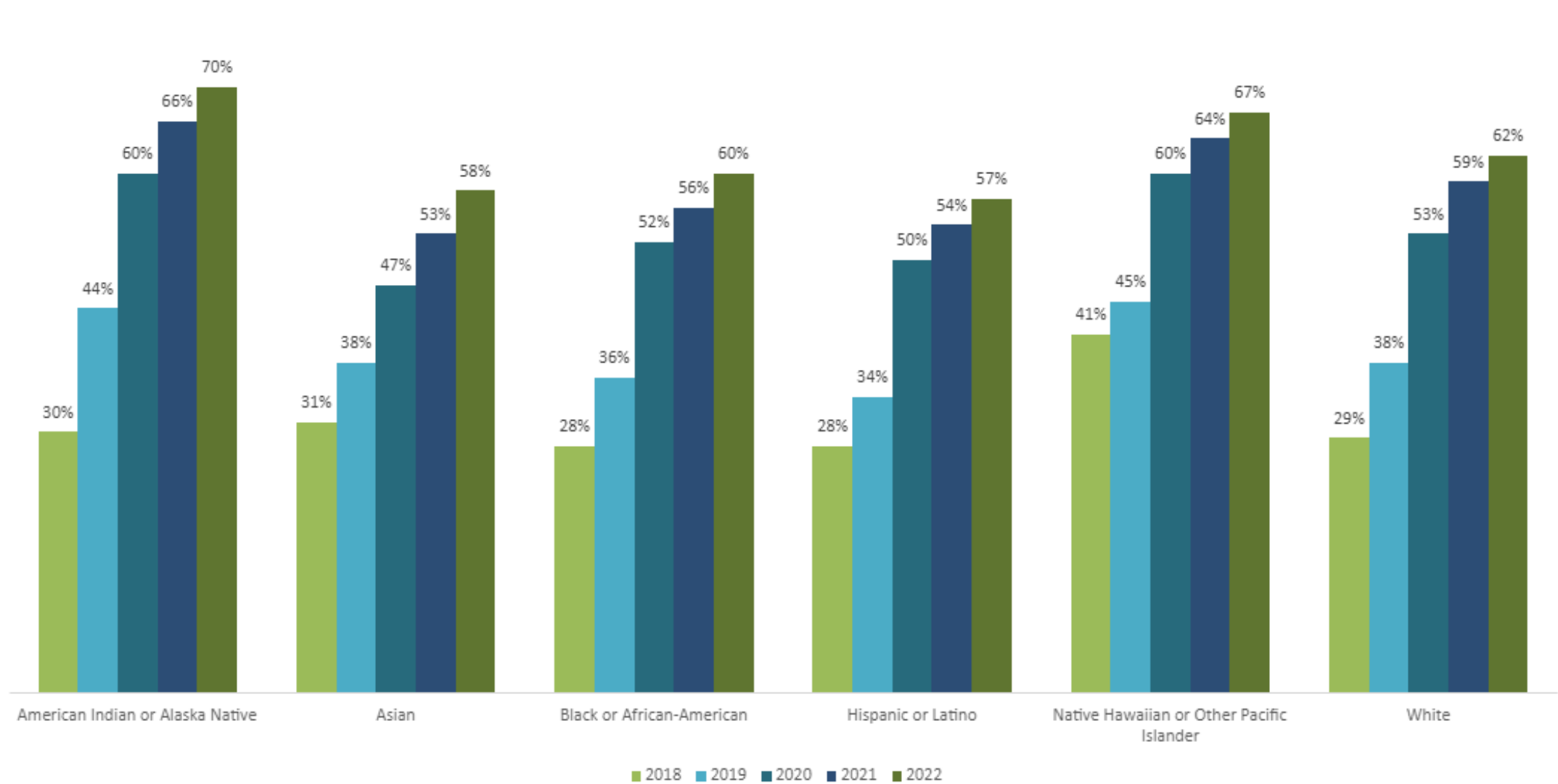


Worcester vaccinations administered at churches

As of December 2022, 78% of Worcester population had received at least one dose of the COVID-19 vaccine. 80 Churches contributed to 10 % of all mobile clinics. These clinics resulted in 1,770 (4.33%) vaccinations.



Influenza Immunization Rates for Worcester by Race and Ethnicity: MIIS 2018 -2022



COVID-19 Cases and Immunization Rates for Worcester by Race and Ethnicity:
MIIS 2018 -2022

WORCESTER (Population = 206,518)							
Race/ Ethnicity	Proportion of Town Population	COVID Cases		COVID Vaccinations			
		Number of Cases	Percentage of Cases per Capita	At Least One Dose per Capita	Primary Series Complete per Capita	Booster per Capita	
White or Caucasian	50%	19753	30%	73%	66%	23%	
Hispanic	25%	17434	26%	72%	61%	12%	
Black or African American	14%	6460	10%	71%	62%	14%	
Asian	7%	2184	3%	88%	74%	19%	
Multiple Races/ Ethnicities	4%	Data unavailable	Data unavailable	66%	63%	23%	
American Indian or Alaskan Native	0.17%	118	0.18%	64%	45%	8%	
Native Hawaiian or Pacific Islander	0.02%	48	0.07%	>95%	>95%	28%	

The Church Initiative Achievements

As a result of the Church Initiative, we were able to...

- Increase community partnership
- Expand the number of Trusted Messengers by 55% (the churches contributed 26%)
- Create more mobile vaccination sites (10%)



Event to celebrate our Trusted Messengers in Worcester, March 2023



Lessons and Recommendations from the Church Initiative

- Mistrust exists; however, the right community entry approach provides opportunity to build relations for community health intervention
- Social influence within faith groups is a resource for health intervention acceptance. Faith-based systems provides this influence and reaching them help address health misinformation
- Establishing vaccine clinics in easily accessible locations for hesitant communities increases acceptance of immunization
- Public health practitioners can utilize the Church Initiative program to increase community groups' participation in health interventions. This model will enhance community involvement from intervention planning through evaluation



Vaccine Education on a Sunday service at Pentecost International Church, December 2022



The Church Initiation Documentary -Trailer



Acknowledgment and Appreciation

We acknowledge and appreciate the following organizations for their contributions to our work;

- Center for Disease Control
- Association of Immunization Managers
- The City of Worcester
- The Worcester Board of Health
- Latino Educational Institute
- City of Worcester Health and Human services' Mobile Vaccination Team
- Health Institutions (including Pharmacies) in Worcester
- Worcester Interfaith, Leaders and members of the many churches who worked with us.
- The Worcester Islamic Center
- Worcester Senior Center
- The Worcester Public Library
- Media Persons who were sharing Health Messages
- And the many other community-based organizations and local businesses that partnered with us (including Pharmacies)

"It is a good and wonderful program, we are all looking forward to participate and learn, and learn what's to do, so that it can prevent hypertension and lots of diseases. Thank you Good Shepherd for promoting such a wonderful program, and I hope more can follow."

Ruth Williams, member of the Good Shepherd congregation

Links

[The Church Initiative Documentary](#)

Contact

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www.worcesterma.gov



Thank you!



The City of

WORCESTER

Public Health



Questions?

Rethinking Access to Vaccines through Small
Community Organizations Serving Racial and Ethnic
Minorities

Marolyn Valenzuela

National Kidney Foundation of
Michigan



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Immunization
Managers



Rethinking Access to Vaccines through Small Community Organizations Serving Racial and Ethnic Minorities

National Kidney Foundation of Michigan

Marolyn Valenzuela

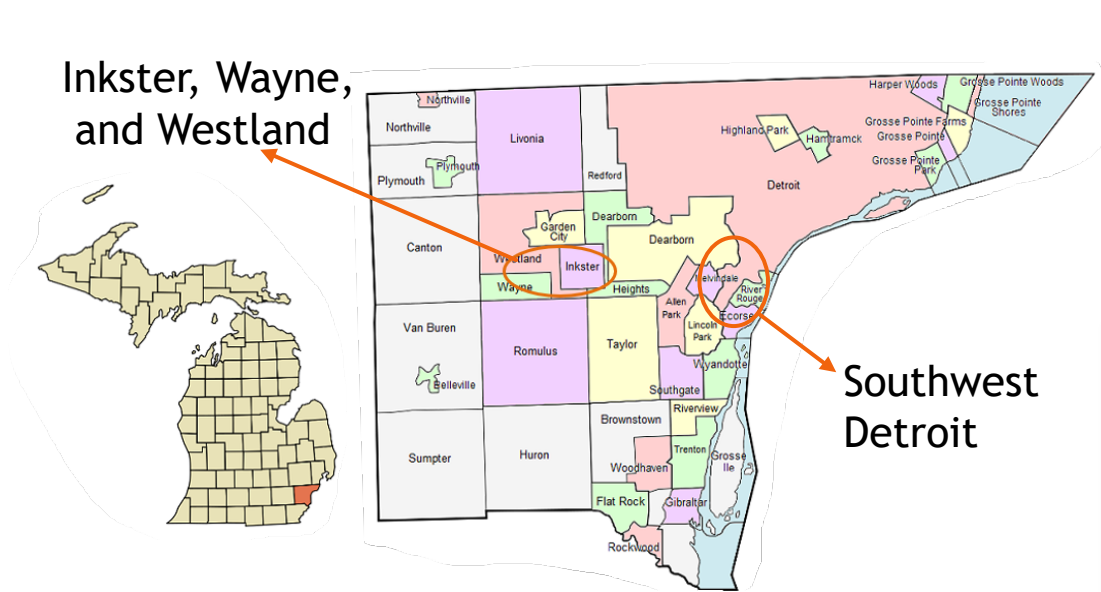
December 7, 2023



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FOUNDATION®

of Michigan

NKFM REACH Vaccine: Overview



Meet our Team



Partnerships were possible in part because of our team's **cultural sensitivity and competency, language fluency, and racial and ethnic representation.**



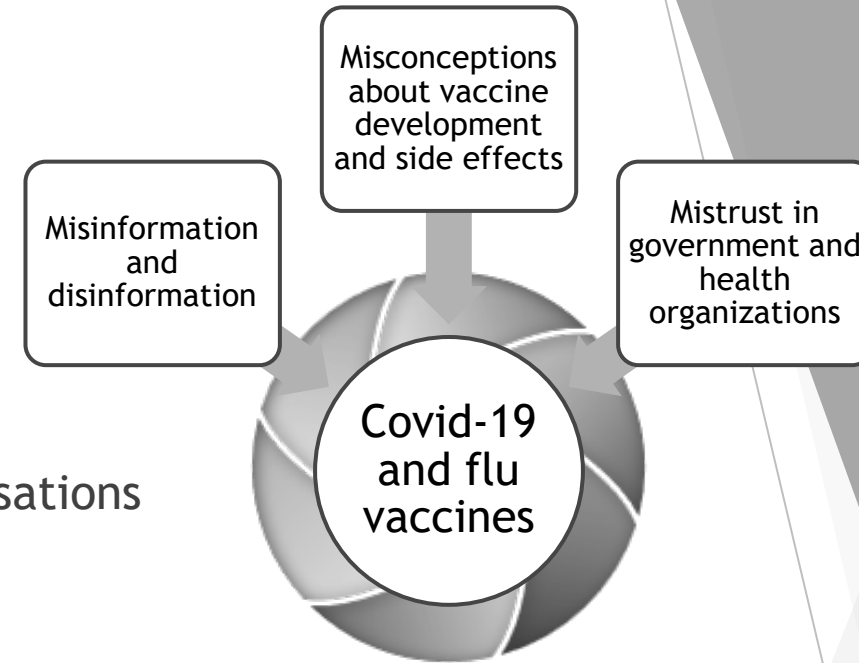
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Understanding the Community's Concerns Around Vaccination

▶ Multiple CNA

- ▶ Listening Sessions
- ▶ Surveys
- ▶ Social media monitoring
- ▶ **Ongoing:** Outreach vaccine conversations



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Lessons Learned: Who gives the vaccine matters.

Local vaccine providers

- ▶ Black-owned community pharmacy
- ▶ Authentic connection and understanding



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Lessons learned: The cost of vaccines matters.



Breaking down barriers:

- ▶ Cost
- ▶ Language
- ▶ Email access
- ▶ Low health literacy



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Lessons learned: Access to vaccines where the community plays, lives, and work matters.

- Scheduling flexibility
- Mobility in different geographic areas
- Wholistic approach
- Cultural humility



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NKFM REACH Vaccine Impact



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Recommendations



Identify vaccine providers and community partners who understand the community's culture and can more quickly adapt vaccine education and administration to areas with low vaccination uptake.



Delegate vaccine delivery and uptake to smaller community partners to reach individuals from racial and ethnic minorities with high vaccine hesitancy by building trust at a local level.




Leverage partnerships with smaller vaccine providers by offering small grants targeting vaccine education and delivery in specific communities.



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PROTEJASE A USTED Y A SUS SERES QUERIDOS.

Mientras celebra el Mes de la Herencia Hispana, proteja a sus seres queridos recibiendo una vacuna anual contra la gripe y el COVID-19. Las vacunas pueden reducir severidad de las enfermedades, las visitas a médicos, las hospitalizaciones y se ha demostrado que salvan vidas, brindándole más tiempo para celebrar.

APRENDA MÁS SOBRE LAS RECOMENDACIONES DE VACUNAS CONTRA LA GRIPE Y EL COVID-19 EN:

[VACCINES.GOV](https://www.vaccines.gov)



NATIONAL KIDNEY FOUNDATION
REACH
your best health

**TEST IT.
TREAT IT.
BEAT IT.**

If you test positive for COVID-19, you may be eligible for medication to help you recover.



NATIONAL KIDNEY FOUNDATION
REACH
your best health

**DON'T WAIT UNTIL
IT'S TOO LATE.**

Adults 65 years and older are at higher risk of developing serious flu complications.

Schedule your flu shot today. #fightflu



NATIONAL KIDNEY FOUNDATION
REACH
your best health

National Influenza Vaccination Week 2021

Thank you!

Questions?

Email Marolyn Valenzuela at
mvalenzuela@nkfm.org

Trusted Messenger Materials at nkfm.org/ttm.



NATIONAL KIDNEY FOUNDATION
of Michigan

KIDNEY CONVERSATIONS
Dietta McKinney

PEER MENTOR

NATIONAL KIDNEY FOUNDATION
REACH
your best health

Questions?

Leveraging Community Engagement and Multi-Sector
Partnerships for Vaccine Equity

Jackson Higginbottom, MPH
Yale School of Public Health

Bernard Macklin, PhD
Southern Connecticut State
University



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LEVERAGING COMMUNITY ENGAGEMENT AND MULTI-SECTOR PARTNERSHIPS FOR VACCINE EQUITY

JACKSON HIGGINBOTTOM, MPH (he/him)

Lead, Initiative for Strategic Health Communications
Yale-Griffin Prevention Research Center
Yale School of Public Health

BERNARD MACKLIN, PHD (he/him)

Coordinator, Outreach & Education
Community Alliance for Research & Engagement
Southern Connecticut State University



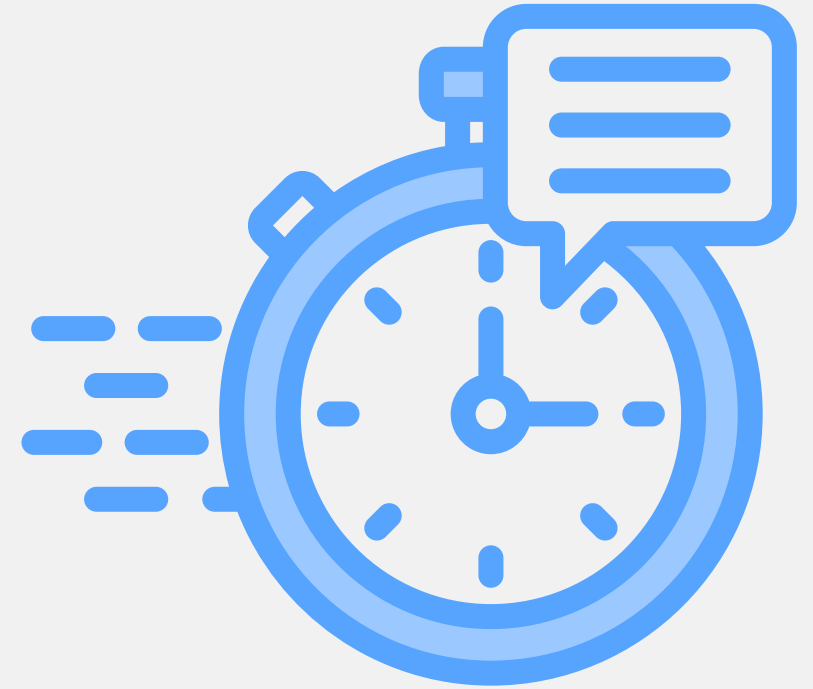
Local Context

Local COVID-19 Response

Health department and health organizations quickly mobilized to respond to COVID-19 early on in the pandemic

- ▶ Weekly Community Partner Meetings June 2021 - 2023
- ▶ Weekly Internal Outreach Meetings 2021 - 2023
- ▶ Strategic Partnership Meetings June/July 2021

The Y-G PRC utilized the Program Impact Pathways (PIP) framework to co-develop a Program Change Diagram.



Program Change Diagram

Our partners included:

- Community-based organizations / non-profits
- Federally Qualified Health Center (FQHC)
- Academic institutions
- Local Health Department
- State Health Department
- Hospital systems



The importance of shared,
standardized messaging

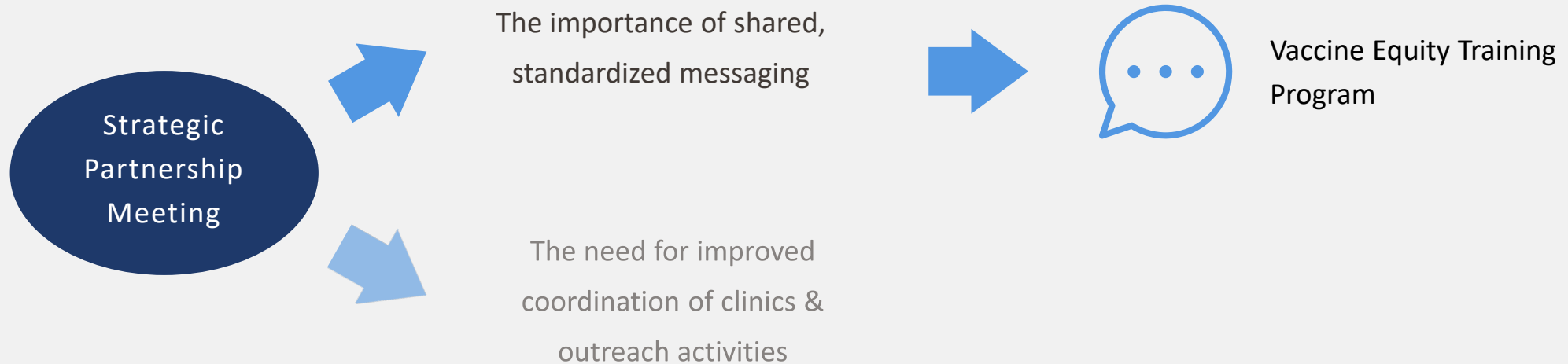


The need for improved
coordination of clinics &
outreach activities

Program Change Diagram

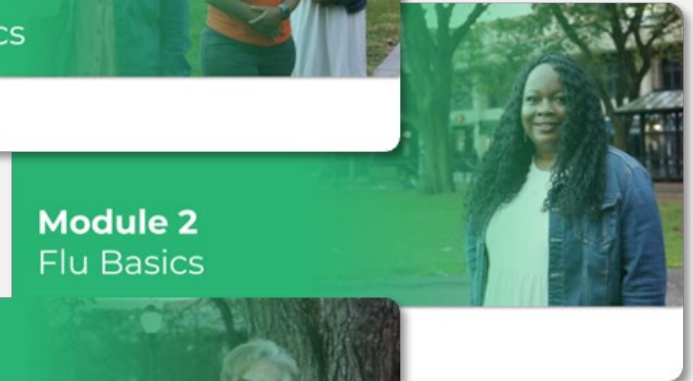
Our partners included:

- Community-based organizations / non-profits
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- Local Health Department
- State Health Department
- Hospital systems



Vaccine Equity Training

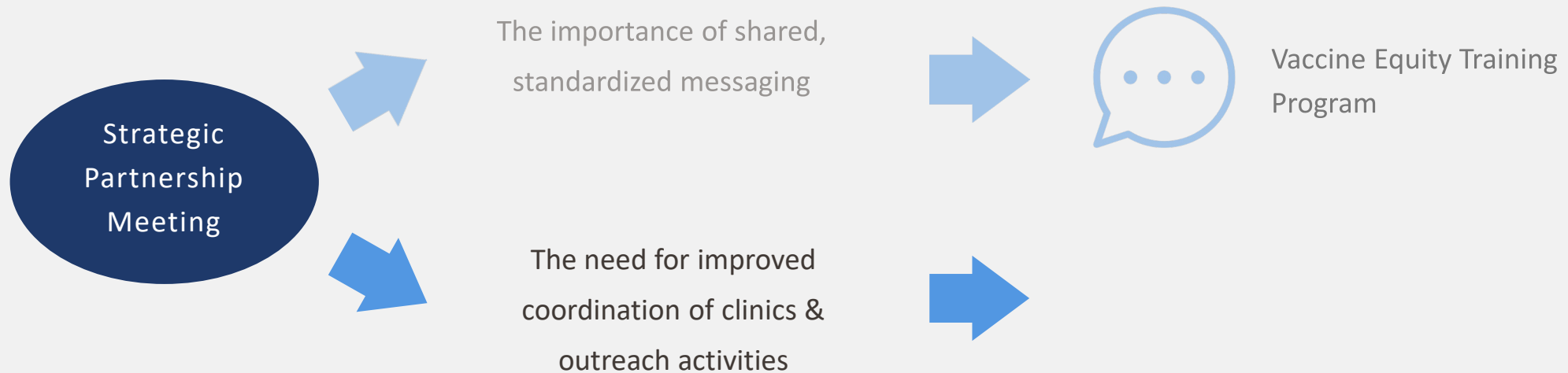
- 4-module training for outreach teams
 - Curriculum includes:
 - COVID-19 Basics
 - Influenza Basics
 - Effective Communications
 - Outreach Safety
-
- Trained 30+ partner staff
 - Trained 24 Vaccine Equity Fellows as Trusted Messengers



Program Change Diagram

Our partners included:

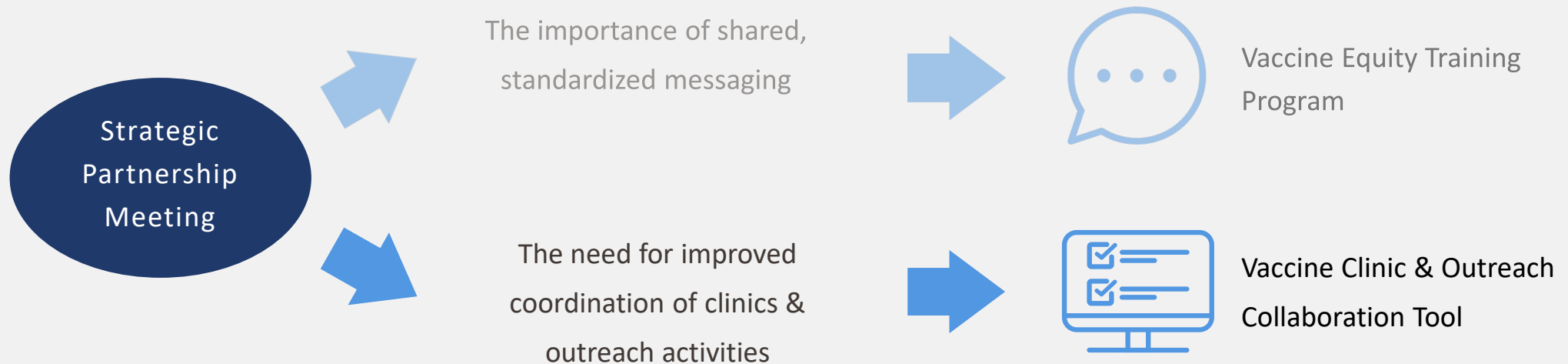
- Community-based organizations / non-profits
- Federally Qualified Health Center (FQHC)
- Academic institutions
- Local Health Department
- State Health Department
- Hospital systems



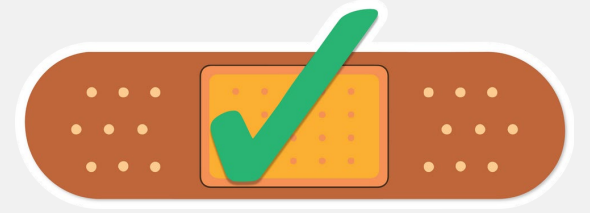
Program Change Diagram

Our partners included:

- Community-based organizations / non-profits
- Federally Qualified Health Center (FQHC)
- Academic institutions
- Local Health Department
- State Health Department
- Hospital systems



Social Listening



Outreach Staff & Vaccine Equity Fellows

- Outreach Tracking Tool
 - Barriers to vaccination
 - Motivations & concerns about vaccination

Community Partner Collaboration

- Vaccine Clinic & Outreach Collaboration Tool
 - Vaccine clinic locations & services
 - Outreach locations & coordination

Weekly Feedback Sessions / Partner Meetings

Challenges encountered during outreach
Motivations & concerns about vaccination

Outreach Tracking Tool

2,035

Submissions

JUN 2021 - OCT 2023

Feedback Sessions

40+

Sessions

APR 2021 - OCT 2023

Collaboration Tool

795

Submissions

DEC 2021 - OCT 2023

Partner Meetings

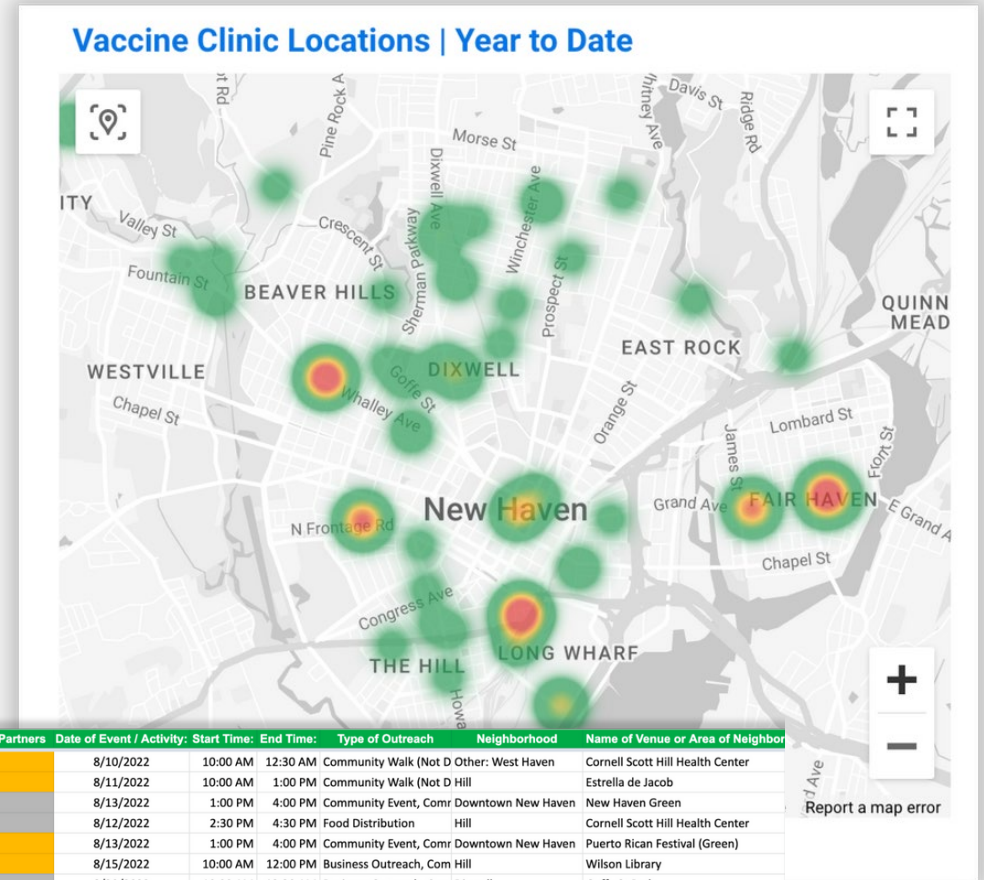
60+

Meetings

JUN 2021 - OCT 2023

Data-Driven Strategies

- Weekly review of the tracking tools with partners.
 - Identified opportunities for collaboration and neighborhoods to prioritize outreach.
- Community insights gained on emerging vaccine concerns and barriers.
- Discussed potential solutions to respond to community concerns.



Searching for Partners	Date of Event / Activity	Start Time	End Time	Type of Outreach	Neighborhood	Name of Venue or Area of Neighbor
Yes	8/10/2022	10:00 AM	12:30 AM	Community Walk (Not D Other: West Haven	West Haven	Cornell Scott Hill Health Center
Yes	8/11/2022	10:00 AM	1:00 PM	Community Walk (Not D Hill	Hill	Estrella de Jacob
No	8/13/2022	1:00 PM	4:00 PM	Community Event, Comr	Downtown New Haven	New Haven Green
No	8/12/2022	2:30 PM	4:30 PM	Food Distribution	Hill	Cornell Scott Hill Health Center
Yes	8/13/2022	1:00 PM	4:00 PM	Community Event, Comr	Downtown New Haven	Puerto Rican Festival (Green)
Yes	8/15/2022	10:00 AM	12:00 PM	Business Outreach, Com	Hill	Wilson Library
No	8/20/2022	10:00 AM	12:30 AM	Business Outreach, Com	Dixwell	Goffe St Park
No	8/17/2022	1:30 PM	3:30 PM	Business Outreach, Com	Hill	Wilson Library
No	8/18/2022	3:00 PM	5:30 PM	Business Outreach, Com	Dixwell	Bowen Field
	8/19/2022	1:30 PM	5:00 PM	Business Outreach, Com	Hill	CSHHC
No	8/21/2022	12:30 PM	3:30 PM	Business Outreach, Com	Hill	Goffe St Park
Yes	8/31/2022	4:00 PM	4:00 PM	Community Event	Downtown New Haven	Overdose Awareness Day
	9/16/2022	1:00 PM	5:00 PM	Vaccination Clinic	Hill	Ct Mental health center
No	8/27/2022	2:00 PM	4:00 PM	Business Outreach, Com	Fair Haven	Junta
No	8/25/2022	10:00 AM	12:00 PM	Business Outreach	Dixwell	Goffe St. Park
CARE)	8/25/2022	10:00 AM	2:00 PM	Business Outreach	Other: Ansonia	Cornell Scott Hill Health Center
No	8/27/2022	11:00 AM	1:00 PM	Business Outreach, Com	Hill	Flea Market
CARE)	8/28/2022	11:00 AM	2:00 PM	Business Outreach, Com	Hill	Flea Market
No	8/29/2022	10:00 AM	12:00 PM	Business Outreach, Com	Other: Hill North	Estrella de Jacob
No	8/31/2022	11:00 AM	3:30 PM	Community Event, Comr	Downtown New Haven	New Haven Green
No	9/1/2022	11:00 AM	1:30 PM	Business Outreach, Com	Dixwell	Burger King Parking Lot
No	9/8/2022	1:00 PM	3:30 PM	Business Outreach, Com	Annex	AMF Circle Lanes

Vaccine Clinic & Outreach Collaboration Tool

Our Response

- Prepared talking points and factsheets for staff/volunteers conducting community outreach.
- Developed tailored informational materials for the community.
- Actively disseminated accurate information by trusted messengers.



What We Learned

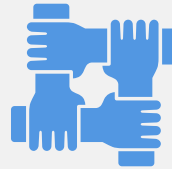
- Importance of multi-sector partnerships to respond to emerging health threats.
- Tailored interventions addressing real-time concerns need to be agile to effectively respond to rapidly evolving situations.
- Organizational/institutional processes need to be adapted to accommodate community and partner needs.
 - “Turf” issues can impede outreach and education



Recommendations



Strengthen Community
Engagement



Promote Cross-Sectoral Synergy



Implement Social Listening



Prioritize Community-Centric
Approaches



Adapt and Respond

ACKNOWLEDGMENTS

Let's Connect!



Team

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This project was funded by the Centers for Disease Control and Prevention, Racial and Ethnic Approaches to Community Health program [grant number: REACH, CDC DP18-1813].



Questions?

Highlights from Other REACH Recipients

Advancing Health Literacy to Decrease COVID-19 Vaccine Hesitancy

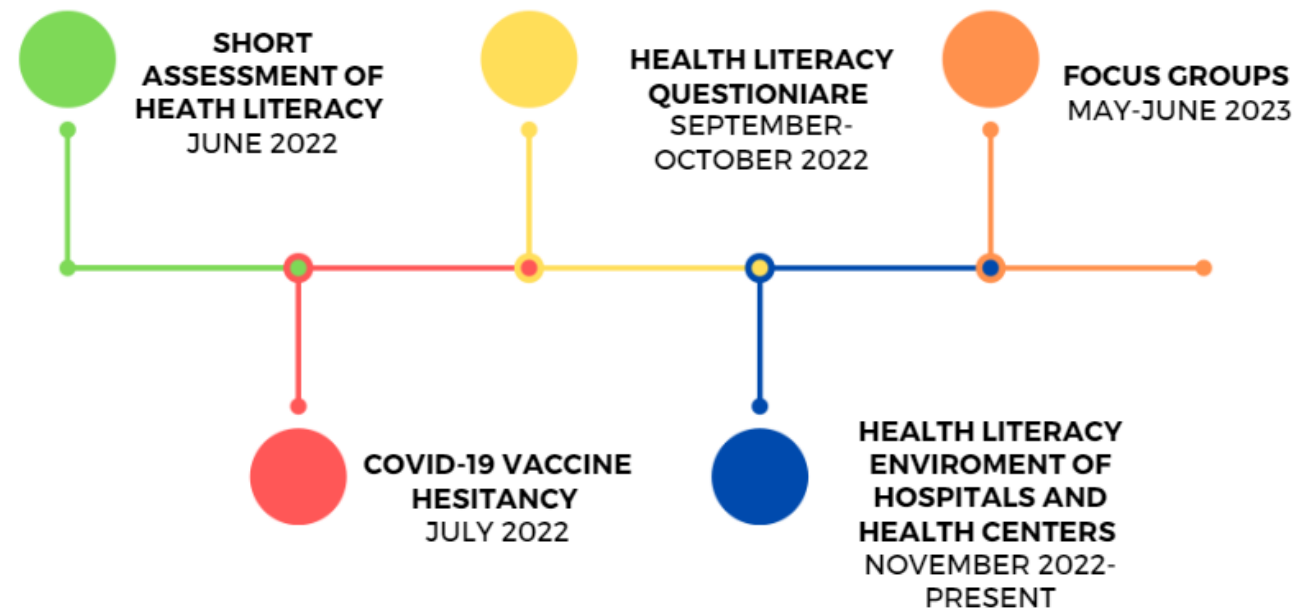
- Mitigate risk factors for COVID-19 in the Hispanic and Latino community, thereby reducing COVID-19 disparities in Reading
- Address the factors that influence community and organizational health literacy to influence sustainable positive health outcomes.



Insights to Vaccine Hesitancy Related to Health Literacy

Mixed method data collection was utilized to provide a comprehensive and informed understanding of the health literacy needs and vaccine hesitancy challenges of those living in Reading, PA.

- Findings from the data collection informed the creation of
 - Misinformation toolkit- Community partners are trained how to teach community members about misinformation.
 - Organizational Health Literacy Toolkit- Health serving institutions (hospitals, clinics, pharmacies) are provided information on how to increase health literacy related to vaccines.



Lessons Learned: Building Vaccine Equity for COVID-19 and Flu Vaccination in REACH communities

Vaccine equity acknowledges that no nation, state, or individual's life is more important or more deserving than another's.

Save the Children



iREACH

resource. engage. connect.

AIM

Association of
Immunization
Managers

REACH Virtual Roundtable & Key Informant Interviews: Summary Findings

Project Overview

- From October 2020 through September 2023, iREACH provided support to 38 REACH recipients.
- AIM Lessons Learned project included:
 - a national-level environmental scan
 - one-on-one interviews and
 - online Virtual Roundtable (VRT) discussions

The project aimed to capture insights, successes, and challenges of REACH organizations working in communities to educate about and increase flu and COVID-19 vaccination coverage rates and to explore ways to strengthen and sustain the partnerships and activities developed over the last few years in REACH communities.



Methodology: Key Informant Interviews

- **Eight (8) in-depth interviews, each lasting 30 minutes** were conducted via Zoom in September 2023 with REACH recipients supported by AIM.



- **Informed consent obtained** from participants.
- Interviewees work for organizations representing a range of geographic and demographic populations in the United States:
 - Georgia, Massachusetts, Michigan, Mississippi, New Mexico, New York, and Pennsylvania
 - African American, Hispanic American, Asian American, Alaska Native, American Indian, Arabic-speaking, and refugee African communities



Methodology: Virtual Roundtables

- **Three Online (Virtual) Roundtable Discussions (VRT)** facilitated on the Advanced Strategy Lab Converge Platform
- **34 total participants** across three sessions, representing 24 REACH organizations
 - **Session 1:** September 5, 2023 – (15) African American/Black populations
 - **Session 2:** September 5, 2023 – (8) American Indian, Asian American, Pacific Islander, Alaska Native and Native Hawaiian populations
 - **Session 3:** September 12, 2023 – (11) Hispanic/LatinX populations

Informed consent obtained from participants*

**32 participants submitted informed consent. Respondent feedback from participants who did not provide informed consent has been excluded from this report.*



Acknowledging and Applying Community Strengths

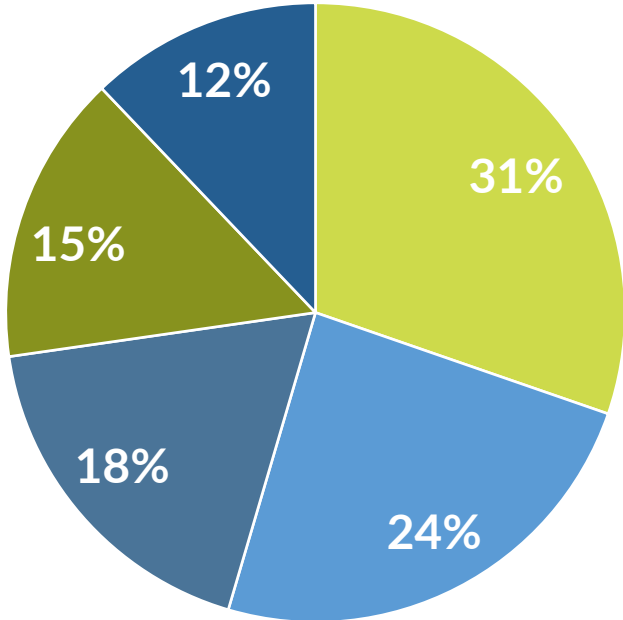
Community Strengths - VRTs

Community strengths reported during the virtual roundtable sessions fit within common themes across the three groups and were aligned with key informant interview input

“Many community members are passionate about improving the health of the community.”
—SESSION 1

“My community is resilient and hopeful.”
—SESSION 3

“The sense of family unity and respect.”
—SESSION 3



- Existing coalitions
- Support from community-based orgs
- Trustworthy spokespersons
- Faith-based organization partnerships
- Community collaboration

Q: What are some of the strengths of your community that enabled your COVID-19 and flu outreach efforts?



Findings Key Informant Interviews

Community Strengths

- Communal mindset
- Understanding nuances and embracing lifestyles, rather than trying to change them

*“The strengths of these communities are that they huddle together and they work together. Not only are they working with each other 24/7...they also work very weird hours where they might work 4 hours on, 4 hours off,.. So, they work and then rest, and some work different shifts... their families are together as well. Being migrant farm workers, they tend to move with each other too. Their strength comes in that family dynamic. What we found in our Hispanic and Latino communities *in Central PA* is that they trust each other.”*

Applying Community Strengths: KIIs

- Community Engagement Strategies
 - Communication strategies
 - Leading from the ‘inside out’
 - Cultural competence of trusted messengers

“We weren’t prepared for COVID, but we were prepared for a change. We didn’t have to start new relationships – we had those relationships and cultural competency already. We spend a lot of time working in these communities on 7 or 8 of these social determinants. We had our African American Equity task force. Those relationships were there going into the crisis [of the pandemic]. That enabled us to pivot quickly.”

“This team effort was really successful because we had such a dedicated team both within the Kidney Foundation of Michigan and through our partners who knew their own community and knew how to talk to folks and really cared.”

Findings Key Informant Interviews

Understanding Community Conditions

- Diversity: race, ethnicity, immigrant status
- Urban vs. rural
- Income level
- Health Status
- Awareness of and Overcoming stereotypes
- Acknowledging historical trauma, mistrust
- Barriers to 'navigating' the U.S. healthcare system

Members of the priority populations for COVID-19 and flu outreach often had several intersecting identities including race and ethnicity, gender, immigrant, migrant, or undocumented status – and currently live with one or more comorbidities or are at risk for chronic diseases.

“Asian Americans are considered model minorities. But that includes so many races and ethnicities and can be detrimental – there are groups that need additional resources but it’s often a group that is not prioritized”

Applying Community Strengths - VRTs

“Obtaining community feedback to inform the creation of messaging.”

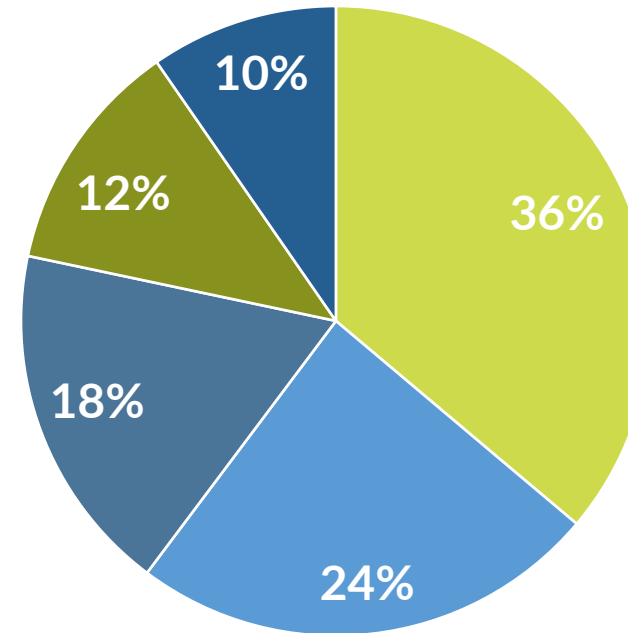
–SESSION 3

“Employing graphic artists of color.”

–SESSION 1

“Use of images that represent the community; bilingual outreach; partnering with Hispanic/Latino organizations.”

–SESSION 3



- Using language that the community would understand
- Focus groups and listening sessions
- Leveraging trusted messengers and champions within the community
- Utilizing diverse images and languages

Q: Many of your organizations created COVID-19 and flu outreach resources such as videos, PSAs, flyers, social media posts, etc. How were you able to APPLY your community strengths in your COVID-19 and flu outreach efforts with these resources for your community? What has enabled your outreach success?



Acknowledging and Overcoming Challenges

VRT SESSION VERBATIM INSIGHTS

Challenges evolved through the beginning, middle, and currently, during the pandemic.

P A N D E M I C	Beginning	“Stigma of vaccinations, addressing history of medical mistreatment/trauma with the African American and Latino communities.” –SESSION 1
		“Trust of community members and organizations with local government.” –SESSION 3
		“Constantly changing guidance on vaccination and promises made upfront that the vaccine would be more of a silver bullet than it was.” –SESSION 2
		“Why are people still getting sick after getting the vaccine?” –SESSION 1
	End	“People are tired of hearing about COVID.” –SESSION 1

Q: What were some of the challenges you were faced with to increase vaccination rates in your community?



Most Effective Approaches

Taking an active role in the community and participating in events were the most successful approaches shared by VRT participants.

- “**Listening** to the concerns of the community” had a relatively high average success rating even though it was not implemented by all participants.
- “**Mobile clinics**” had more varied results than other approaches, suggesting that the effectiveness of this strategy varied among participants.

Least Effective Approaches

- **Communication techniques:** Social media was found to be “white noise” at times, as well as difficult to be creative with and capture the attention of audiences. Many found it only useful with younger audiences.
- Other forms of digital engagement (webinars, Spotify ads, etc.) had varying effectiveness – not all have access to smart phones.
- The **message matters** – telling people they have to get vaccinated was not successful, it was better to frame vaccination as a choice.



Overcoming Challenges



- **Language:** “I knew by looking at data that we had a neighborhood that was largely inhabited by folks that were Puerto Rican, then I would have made everything in Puerto Rican Spanish. If I knew a neighborhood had a lot of Dominicans, I would have made it in Dominican Spanish. Only because when they see it, they’re like, ‘That’s my language.’ But we just didn’t get there.”



Key Informant Interview Insights – Integrating Total Health

“Combining vaccine outreach with general health promotion was very successful. Talking about health in general and reducing risks for chronic disease is what we want to do at the Kidney Foundation. But we also know that that has an impact on people's health and whether they might get hospitalized or have severe complications from COVID and flu too. So, we can talk about those types of messages at the same time and why it's important to eat healthy and exercise and take medications, and then include getting vaccinated as part of that.”

– REACH RECIPIENT

“We have started using a more well-rounded approach from the standpoint of talking about vaccination. We try to help increase understanding that there is a crisis when it comes to health in general in Buffalo. We have to start there before even talking about vaccines. We created a palm card for an event... encouraging people to have healthy habits. Number 4 was staying up-to-date with vaccinations. We are starting with – let's talk about health. Do you have a [primary care provider]? Are you aware of what is important for your diet, exercise, sleep? People don't want to be approached to be told to be vaccinated.”

– REACH RECIPIENT

Q: Of the strategies you used to engage communities, is there one that was new to your organization, or something you'd describe as innovative?



Lessons Learned - KIIs



“One thing that stood out we did almost all the time was the church initiative. Churches have always been involved but this was different in terms of the COVID message integrated in something people needed. People might be more worried about the dentist, you couldn’t go because of the risk of COVID. If they weren’t receptive right away [to vaccination], we ask, ‘What are your health needs?’ If they mention it and you help them solve their other health needs, they were more open to talking about COVID.”



“In our listening sessions with the Native population, we realized that students – especially during the height of COVID-19 – had more credibility in communicating about the vaccine because they were learning about it in real time...from their peers, school, social media. So, we recruited them to start sharing with their community elders and leaders about the science of the vaccine and its efficacy. This was a big shift. Typically, the elders hold the wisdom.”

Recommendations

Recommendations

- **Begin and cultivate relationships with the community before a crisis.**
 - REACH recipients who had embedded themselves in the community through networking and cultivating relationships were seen as trusted and were able to pivot their message and outreach quickly during the pandemic.
- **Successful communications and outreach have defined outcomes.**
 - Being clear about the content, audience, and communications needs is critical so communities can take the necessary actions for their health.



Recommendations (2)

- **Input from communities helps with relationships and content development.**
 - Community member input about communications content and visuals, as well as including community members as part of campaigns, helped to establish trust and relationships.
 - These feedback loops enabled the identification of trusted messengers as well as identified language and outreach needs among community members.
- **A focus on total wellness, with flu and COVID-19 vaccinations as a component, can help future engagement strategies.**
 - Including information about chronic conditions and other whole-person wellness needs (i.e., mental health, nutrition, regular check-ups) in communication and as part of outreach is essential for continuing the conversation about the importance of flu and COVID-19 vaccinations.



Recommendations (3)

- **Focus on Sustainability**
 - Leaving the community better than when you first encountered the community
 - Community-led activities that the community can sustain



Disclaimer

- Despite this abundance of information gathered from REACH recipient communities across the U.S., the findings cannot be generalized to all communities across the country.
- This report summarized what was learned in these specific communities.
- Always perform a listening session and a community needs assessment with the community you plan to engage. Tenet of Trust Building.



From Health Equality to Health Equity



“Health equality can resolve some health disparities, especially when the disparity stems from lower quality treatment, deliberate discrimination, or lack of adequate screening.”



Equity-minded medical professionals must consider how social determinants of health such as access to a healthy diet, stress, and trauma affect outcomes. They must also consider how apparently equal systems lead to inequitable and unjust outcomes.



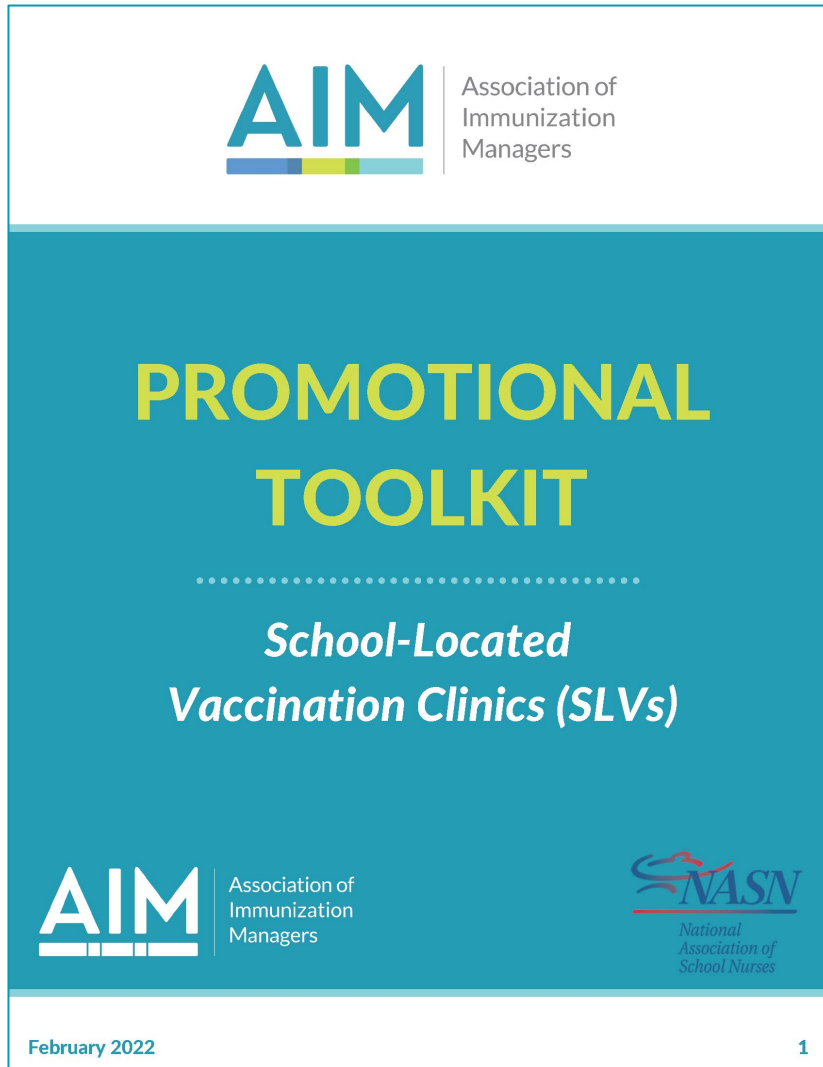
An equity lens moves health systems closer to removing disparities. It also encourages policymakers to think about the myriad ways social environments affect health.”





Resources

School-Located Vaccination Clinics Toolkit



Tips and tools to support school-located vaccination clinics in your jurisdiction




Partnering with Diaper Banks Q&A


Information to identify and promote non-traditional partnerships between immunization programs and diaper banks



www.immunizationmanagers.org



Q&A



Association of Immunization Managers

Partnering with Diaper Banks to Increase Childhood Vaccination Rates and Improve Access

Improving Vaccine Confidence from the Bottom Up

The Association of Immunization Managers (AIM) partnered with the National Diaper Bank Network (NDBN) to identify and promote promising practices to foster non-traditional partnerships between immunization programs and diaper banks.

This resource provides answers to commonly asked questions regarding immunization stakeholder and partnership strategies to improve immunization rates.

How can diapers improve access to vaccinations and increase immunization rates?

- Immunization programs can partner with diaper banks to provide diapers and vaccines through community events, pop-ups, mobile clinics, or community clinics.
- [Nashville Diaper Connection](#), an NDBN member in Tennessee, has developed and tested a model program called [Connections](#) that can be implemented in any community with a diaper bank, pediatric health care provider/community clinic/federally qualified health center (FQHC), managed care organization (MCO), and a supportive department of health.
- [Learn more](#) from the Association of Maternal & Child Health Programs (AMCHP) Innovation Hub, a repository of practices and policies in the maternal and child health field.

How can diaper banks increase confidence in vaccines?

- Diaper bank staff and volunteers are trusted messengers that interact directly with the communities in which they serve.
- Diaper banks can promote research-based information about routine and respiratory virus (influenza, COVID-19, and RSV) vaccines for children and adolescents. They can distribute both printed and social media messages to clients to help raise public awareness and acceptance of vaccines.

What are diaper banks and who is the National Diaper Bank Network?

- Diaper banks collect, store, and distribute donated diapers, period supplies, and other basic necessities to individuals, children, and families in need.
- The [NDBN](#) is composed of more than 300 basic need banks that serve urban, suburban, and rural communities across all 50 states, Puerto Rico, and the District of Columbia.
- The NDBN acts as a membership organization that connects and supports the network of diaper banks across the U.S.
- Community-based diaper banks directly serve populations struggling against economic marginalization, including Asian American, Native Hawaiian, Pacific Islander, Black and African American, American Indian, Alaska Native, Latinx, and rural communities.

The NDBN's member directory can be used to find nearby diaper banks:
nationaldiaperbanknetwork.org/member-directory

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Vaccine Confidence Toolkit

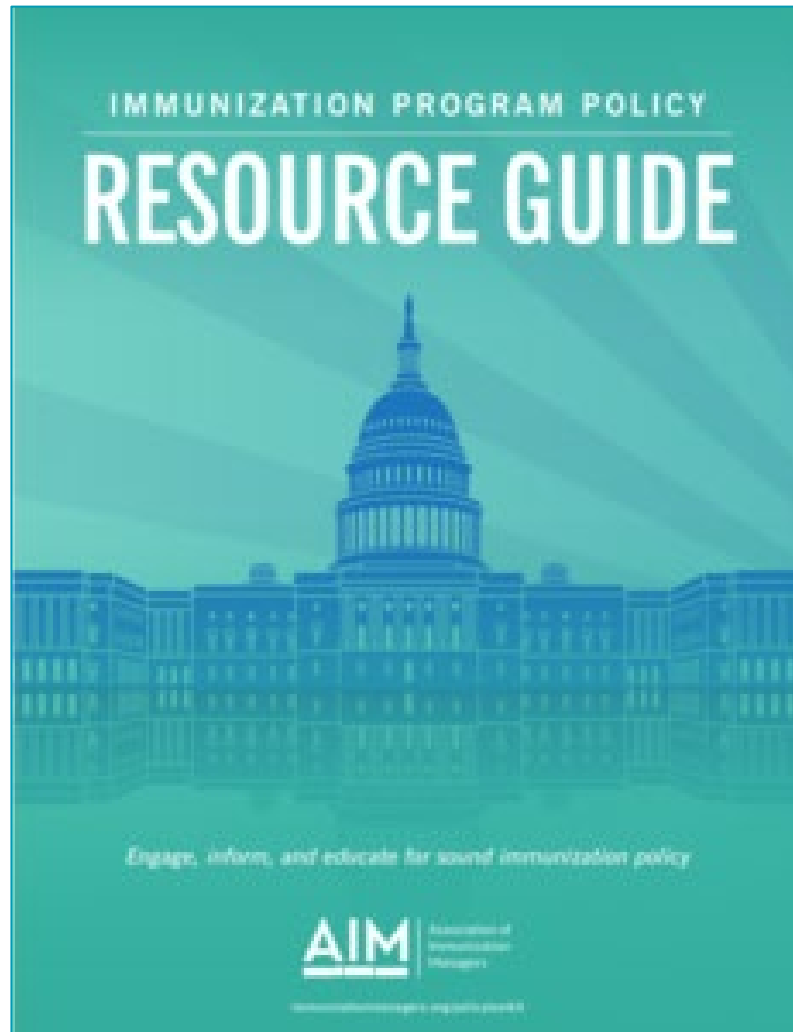
Resources for promoting vaccine confidence during the legislative session, addressing incorrect information, and considerations for cultural competency



www.immunizationmanagers.org



Immunization Program Policy Toolkit



www.immunizationmanagers.org

Learn about advocacy rules, navigating the legislative process, and educating policy makers

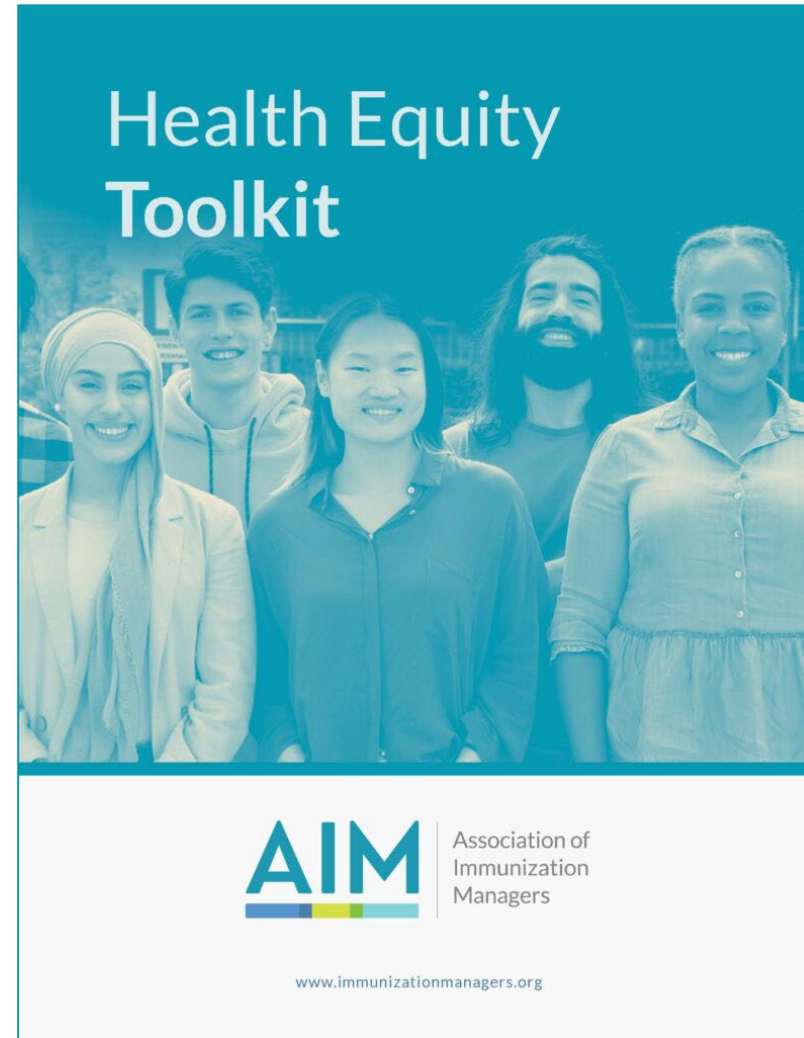


MAP Health Equity Resource Guide

Find programmatic lessons learned and resources on seven strategies to increase health equity



www.immunizationmanagers.org



Podcasts

AIMing to Inform

This series of conversations with immunization managers hopes to motivate and inspire public sector leaders while helping them feel supported in their role. These short episodes hosted by Brent Ewig, AIM's Chief Policy and Government Relations Officer.



REACHing for Vaccine Equity

This series of informative episodes discusses how individuals living with chronic health conditions, including heart disease, diabetes, clinical depression, and more, can continue to thrive with the preventative power of getting vaccinated and adopting healthy behaviors. The podcast's hosts are AIM iREACH project Public Health Consultants Yabo Beysolow, MD, MPH and Lisa Jacques-Carroll, MSW.



Thank you!

This project [*Racial and Ethnic Approaches to Community Health (REACH) Lessons Learned and Promising Practices in the Field of Immunization from the COVID-19 Pandemic*] was supported by the *Center for Disease Control and Prevention (CDC)* of the *U.S Department of Health and Human Services (HHS)* as part of a financial assistance award totaling \$3,250,000 with 100 percent funded by *CDC*. The contents of this [*Racial and Ethnic Approaches to Community Health (REACH) Lessons Learned and Promising Practices in the Field of Immunization from the COVID-19 Pandemic*] reflect the views of the author(s) and do not necessarily represent the official views of, nor an endorsement, by *CDC*, or the U.S. Government



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