

REACH Buffalo, New York: Ferry Street COVID-19 Vaccine Initiative



The Ferry Street Health & Wellness Project

**COMMUNITY NEEDS ASSESSMENT:
Understanding COVID-19 Vaccine Perspectives and Confidence**

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KEY FINDINGS



Family and friends play a substantial role in vaccination

Family and friends can either motivate individuals to vaccinate or contribute to vaccine hesitancy and reluctance.



Mistrust in medical providers, the government, and public health agencies is prevalent throughout the community

Historical trauma of events (e.g., Tuskegee Syphilis Study) contributes to mistrust of the government and ongoing reluctance to vaccinate. There were also great concerns about the content and quick development of the vaccine. Further, inconsistent information about the vaccine contributes to skepticism.



Widespread misinformation has led to uncertainty about what is fact versus fiction

Many individuals cannot tell whether information they learn about the vaccine is true or false.



Certain individuals are not motivated to vaccinate

Youth are more likely to be unmotivated to vaccinate than adults. The reluctance to vaccinate in this group exists despite many individuals knowing someone who has become seriously ill or died of COVID-19.



Incentives and vaccination education might influence individuals to vaccinate

Incentives, information events, and witnessing testimonials about fighting COVID-19 or making the decision to vaccinate might influence certain individuals to vaccinate.



BACKGROUND & METHODS

From April to August 2021, a Community Needs Assessment (CNA) was completed to better understand community perspectives along the Ferry Street Corridor in Buffalo, NY about COVID-19 vaccination.

The CDC funded REACH Ferry Corridor Good Health Project is a partnership between Cicatelli Associates Inc. (CAI) and the African American Health Equity Task Force (AAHETF) to address health disparities among historically marginalized communities in Buffalo, NY. The partnership works to resource the development of an environment in Buffalo that promotes “living a life of wellness” for Ferry Corridor residents. The Corridor includes five zip codes in Buffalo with the most dramatic disparities in health outcomes for African American and Latinx residents. As part of the REACH Ferry Corridor Health Project, the REACH COVID Vaccination initiative aims to raise COVID-19 vaccine awareness and confidence among Corridor residents. Accordingly, a Community Needs Assessment (CNA) was completed from April 2021 to August 2021 to better understand community perspectives about COVID-19 vaccination during the pandemic. Partnerships established under the Project Team Charter: Health Equity for African American and Latinx/a/o (HEAAL) Communities were instrumental in the recruitment of CNA participants, administering surveys, delivering listening sessions, and holding panel and community forum sessions.

We Aimed To Learn:

- Personal experience with COVID-19
- Personal experience with COVID-19 vaccination
- What motivates or deters individuals from getting a COVID-19 vaccine
- What individuals have heard about COVID-19 vaccines
- How to increase vaccine motivation

The findings of the CNA will be used to identify best practices in developing messages about the COVID-19 vaccine as well as generate implementation strategies to increase vaccination rates most effectively in Black/African American and Latinx communities along Ferry Street and Buffalo-wide.





BACKGROUND & METHODS

Summary of Activities

The CNA was comprised of two panel and community forum sessions, five listening sessions, and two surveys.

Community Needs Assessment Activities

Date	Activity	Method	# of Participants (n = 492)
May 2021	Panel and community forum	Panel and community forum	42
May 2021	Panel and community forum	Panel and community forum	30
June - July 2021	Five listening sessions	Listening Session	26
April - August 2021	Vaccine Confidence Survey for Adults	Survey	272
July - August 2021	Vaccine Confidence Survey for Youth	Survey	122

Panel and Community Forum Sessions

Panelists included medical professionals, community members who were previously diagnosed with COVID-19, and individuals who received the vaccine. Medical professionals answered questions such as “In what ways has the COVID-19 vaccine impacted this community?” and “How was the vaccine developed?” Community members described their own personal experiences with COVID-19 and/or vaccination. Sample questions used to facilitate discussion include: “What do you think about the COVID-19 vaccine?”, “What are the main reasons people in your community would want to vaccinate?”, and “Are there any key barriers that people in your community are likely to face if they went out to get a COVID-19 vaccine?” Audience members were given time to discuss their own concerns and ask questions about COVID-19 vaccination.

Listening Sessions

The Listening Sessions gave community center employees and volunteers, community advocates, and other community members the opportunity to discuss their own thoughts about the COVID-19 vaccine, what kind of information they’ve heard about the vaccine, and report fellow community members’ perspectives about vaccination in a group setting. Sample questions include: “What do you think about the vaccine?”, “What are some things you heard from your community about the vaccine?”, “What are the main reasons people in your community may not want the vaccine?”

Vaccine Confidence Surveys

The Vaccine Confidence Surveys assessed personal experience with COVID-19, vaccine hesitancy, motivation to vaccinate, barriers to vaccination, and vaccination status among youth and adults. Sample items include: “Do you personally know anyone in your family, groups of friends, or community networks who became seriously ill or died as a result of COVID-19?”, “How likely are you to recommend the COVID-19 vaccine to others?”, and “How concerned are you about getting COVID-19?”



BACKGROUND & METHODS

Participants

In total, 492 community members participated in this CNA virtually, through panel and community forums, listening sessions, and/or surveys from April 2021 to August 2021. These community members were recruited from various sources and settings; Buffalo Youth program members (WNY STEM Hub, Buffalo Urban League, Mayor Summer Youth Employment Program, CAO, Pratt and the Edward Saunders Community Center), college students, community advocates, employees and volunteers from community-based organizations (Martha Mitchell Community Center and Heart of the City Neighborhoods, Inc.), members from other community groups (St. James House of Prayer faith group and Align Women's group), and via community outreach engagement at local grocery stores, health fairs, and book clubs.

Listening Session participants included individuals between the ages of 18 and 79. Each participant identified as Black/African American.

Community forum participants included youth and adults who identified as Black/African American, White, and Latinx.

Survey respondents were predominantly Black/African American (79%), followed by White (12%), more than one race (6%), and 5% were of another race. 7% of respondents identified as Hispanic or Latinx. The age range of survey respondents was 12-90 (average age of 36). For the purposes of this report, "Youth" are individuals between the ages of 12 and 20.





RESULTS

Personal experience with COVID-19

Many survey respondents had personal experiences with COVID-19, such as receiving a diagnosis as well knowing someone who became seriously ill or died of the disease. Adults were more likely to have been vaccinated than youth.

Personal experience with COVID-19 and the vaccine

	Overall	Youth	Adults
Received a COVID-19 diagnosis	16%	9%	14%
Knew someone who became seriously ill or died of COVID-19	58%	46%	65%
Received a COVID-19 vaccine	54%	41%	61%

Family and friends play a substantial role in vaccination.

Overall, survey respondents were primarily motivated to vaccinate to protect family and friends (81%), protect their health (74%), and protect their community (47%). Youth are more likely than adults to be motivated to vaccinate because of a desire to get back to school or work (76% versus 19%) and to resume social activities (76% versus 21%).

Motivation to vaccinate

Motivators to Vaccinate	Vaccinated (n = 213)	Unvaccinated (n = 176)
Protect family and friends	76%	70%
Protect health	71%	63%
Protect community	35%	53%
Resume social activities	34%	50%
Get back to work or school	31%	50%
Resume travel	29%	51%

Community forum and Listening Session participants also indicated a desire to vaccinate to protect their health, friends, family, and community. Participants believed that getting vaccinated sets a good example for younger people as well as peers to demonstrate that the vaccine is safe. Participants also indicated a desire to vaccinate after doing research and learning about the benefits of receiving the vaccine.



“I’m afraid of being stigmatized by family and friends if I get the vaccine.”

-Listening Session Participant

Vaccinated and unvaccinated survey respondents reported protecting family and friends and protecting their own health as their greatest motivators to vaccinate. However, some participants spoke about how family and friends discouraged them to vaccinate.



RESULTS

Mistrust in medical providers and the government is prevalent in the community.

Both vaccinated and unvaccinated participants expressed a strong distrust of government health agencies as well as medical providers. However, vaccinated survey respondents reported greater trust in the CDC and primary care providers as trusted sources of information regarding COVID-19 vaccines than unvaccinated participants.

Who would you trust to provide vaccine information?

Sources of information	Vaccinated (n = 213)	Unvaccinated (n = 176)
CDC	52%	34%
Primary Care Providers	43%	32%
Family & Friends	32%	33%
News Sources	21%	15%
Pharmacists	23%	11%
Nurses	17%	19%
FDA	15%	14%
State Health Departments	13%	9%
Local Health Officials	14%	12%
Social Media	6%	9%
Religious Leaders	5%	2%



“They made it too fast, we don’t know what’s in it, just like the flu shot, I don’t trust what’s in it or what it’s going to do to your body.”

-Listening Session Participant

Widespread misinformation has led to uncertainty about what is fact versus fiction.

Both vaccinated and unvaccinated respondents had seen information about COVID-19 vaccines where they could not determine if it was true or false (45% and 51%, respectively).

Certain individuals are not motivated to vaccinate.

Some unvaccinated respondents did not endorse or list any motivations to vaccinate (35%). Unmotivated unvaccinated respondents were more likely to be youth (57%) than adults (43%). Of the unvaccinated respondents that were not motivated to vaccinate, family and friends were one of their most trusted sources of information (38%), followed by the CDC (23%), and primary care providers (21%). However, only 12% of youth in this group listed the CDC as a trusted source of information related to COVID-19 vaccines.



Community Forum and Listening Session participants expressed concerns that the vaccine does not protect you from COVID-19 and is being used to control the population



RESULTS and SUMMARY

Increasing COVID-19 Vaccine Confidence

Participants reported several ways COVID-19 vaccine confidence and uptake could be increased and achieved.



Offer incentives (e.g., host free concerts that can act as learning sessions, gift cards, raffles to win tickets to events)



Youth indicated that having support from the Buffalo Bills players/organization could increase vaccine uptick



Use social media to spark conversations and promote vaccination



Share testimonials about a community member's own experience with getting vaccinated



Provide more opportunities, such as panel and community forum sessions to discuss COVID-19 vaccination and give community voices a chance to ask questions and dispel misinformation

Summary

Our COVID-19 Vaccine Confidence Community Needs Assessment revealed several factors that contribute to COVID-19 vaccine hesitancy along the Ferry Street Corridor in Buffalo, New York. Protecting family and friends was the primary motivator to get vaccinated among participants. However, family and friends were also found to be influential in vaccine discouragement. Our results also indicated widespread mistrust in medical providers and government health agencies among both vaccinated and unvaccinated participants. Participants also expressed having difficulty discerning factual and false information related to COVID-19 vaccines. Notably, we found that certain individuals (a majority of which were youth) have no interest or motivation to become vaccinated. Lastly, some participants reported ways to increase motivation to vaccinate, including sharing testimonials about the impact of COVID-19 on a community member's life as well as providing more opportunities for community members to discuss vaccination.