

Adapting an HIV community-level intervention to improve COVID-19 vaccination uptake

Presenter:

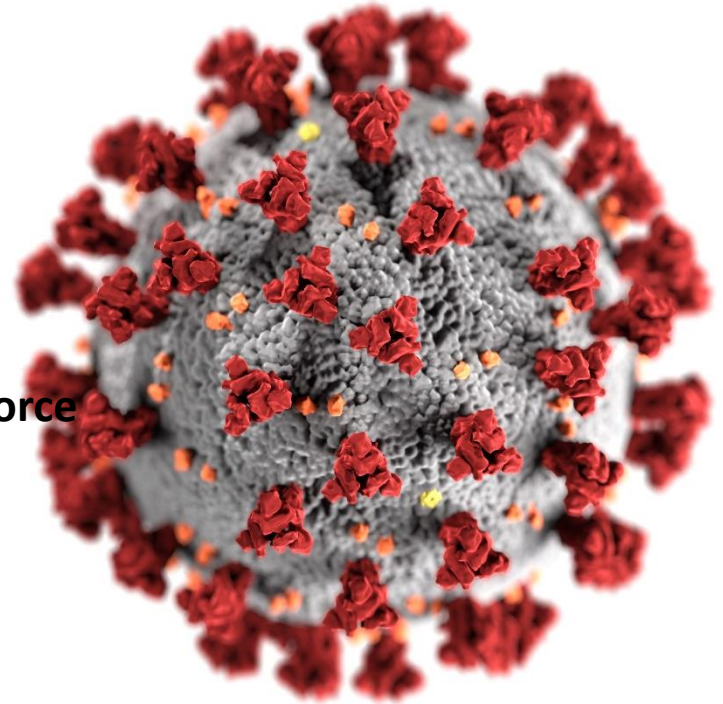
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CDC-State, Tribal, Local, and Territorial Support Task Force

United States Conference on HIV/AIDS (USCHA)

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cdc.gov/coronavirus

www.cdc.gov/coronavirus/2019-ncov/

Agenda

- Learn about the adaptation of an HIV community-level communications model to improve COVID-19 vaccination uptake
- Overview of a community intervention – Community PROMISE
- Importance of the Rapid Community Assessment (RCA): Methods and best practices
- Learn how to develop COVID-19 related role model stories
- Identification of resources, tools and supporting services to implement this strategy
- Acknowledgements



Introduction



Storytelling, health promotion and health equity

- Storytelling/narratives are tools to normalize positive norms, beliefs, attitudes for improving health
- Modalities that use community mobilization, street outreach, and dissemination of personal narratives been used extensively for health promotion and improve health equity.
- The use of formative assessment methods are important to learn about appropriate community member narratives and other social determinates of health.



Community PROMISE

- Community PROMISE is a community-level intervention that relies in four core elements: Community assessment process, peer volunteers, role model stories and evaluation.
- Community PROMISE engage community peers to disseminate stories and behaviors regarding HIV prevention and the HIV care continuum
- PROMISE evolved from the AIDS Community Demonstration Project funded by CDC, in reducing behaviors related to HIV/STD transmission and acquisition
- This adaptation consisted in two primary core elements: a Rapid Community Assessment (RCA) and role model stories (RMS)



[PROMISE for HIP | Treat | Effective Interventions | HIV/AIDS | CDC](#)

Importance of the Rapid Community Assessment (RCA): Formative Methods and Practices

- Multiple COVID-19 strategies has been identified based CDC Rapid Community Assessment (RCAs)
 - Identification of common barriers
 - Understanding your community
 - Vaccine confidence and uptake strategies

[12 COVID-19 Vaccination Strategies for Your Community | CDC](#)



Rapid Community Assessment (RCA) Guide

- How can the RCA help?
 - Better understand and address community needs around COVID-19 vaccines
 - Identify drivers of low vaccination rates in communities
 - Identify potential strategies for addressing low vaccination rates
- Who can use the RCA?
 - State and local immunization program managers
 - Community-based organizations
 - Hospital systems
 - And more!



Suggested 3-week Implementation Timeline



Week 1: Planning and Buy-In



Week 2: Implementation and Analysis



Week 3: Reporting and Action Planning

5 Steps to the RCA Process

- 1 Identify objectives and communities of focus
- 2 Plan for the assessment
- 3 Collect and analyze data
- 4 Report findings and identify solutions
- 5 Evaluate efforts



Week 1: Planning and Buy-In



Step 1: Identify Objectives

- Sample Objectives:
 - **Identify populations** at risk for low COVID-19 vaccine uptake
 - **Identify community leaders**, trusted messengers, and important message channels
 - **Assess barriers** to COVID-19 vaccine uptake
 - **Identify, implement, and evaluate strategies** to increase COVID-19 vaccine confidence and uptake



Step 1: Identify Communities of Focus

- Consider all communities of focus at higher risk for COVID-19 infection, not just certain ones that may be easier to reach than others
 - Especially hard to reach subpopulations (e.g. indigenous communities)
- Consider reviewing:
 - [Data on COVID-19 vaccine uptake and intentions](#)
 - [COVID-19 cases and impact](#)
 - [Social Vulnerability Index](#)



Example Communities of Focus from Other RCAs

July 2021:
Adolescents and their communities in San Mateo County

February 2021:
Albuquerque
-Immigrant and refugee populations
-Essential workers
-Clinic patients
-Mobile populations
-Older adults

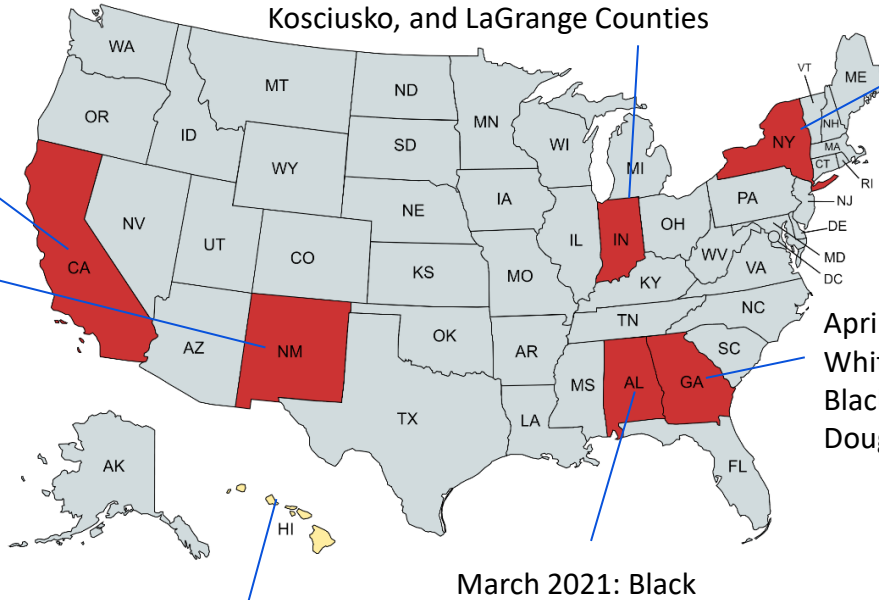
■ RCA conducted
■ RCA upcoming



Upcoming: Honolulu County
- Native Hawaiians and Pacific Islanders in Waianae

May 24-28, 2021:

Rural populations, Amish and Plain Church communities, Hispanic or Latino community and others in Jasper, Kosciusko, and LaGrange Counties



March 2021: Black or African American communities in Sumter and Macon Counties

April 2021:

White Rural Farmers in Bacon County and Black or African American community in Dougherty County

June 2021:

Puerto Rico
-People living with HIV
-People with hearing loss
-People experiencing homelessness
-LGBTQ+
-People experiencing substance/opioids abuse

July 2021:
Orange County
-Black or African American and Hispanic or Latino populations in urban areas
-Orthodox Jewish community
-Rural communities

Step 1: Human Subject Considerations

- The purpose of an Institutional Review Board (IRB) review is to ensure there are no unintended consequences of data collection, risks to participants are minimized, and all data are kept confidential.
- If applicable, contact the appropriate office at your agency or organization to determine whether they require human subjects or IRB review for collecting community data.



Step 2: Identify Key Stakeholders

- Identify people who are invested in the focus community and the implementation and/or outcomes of immunization programs
- Examples:
 - Minority health coalitions or immunization coalitions
 - Public sector (e.g., Cooperative Extension, public housing)
 - Elected government officials/leaders
 - State chapters of professional associations
 - Faith-based organizations and religious leaders
 - Leaders of local health systems, hospitals, and clinics
 - Organizations serving people with lower incomes
 - Employers and unions



Step 2: Choose Assessment Methods

- Several options depending on time and resources:
 - **Basic Assessment:** Social listening and a few key informant interviews (KIIs)
 - **In-Depth Assessment:** Social listening, KIIs and listening sessions
 - **Comprehensive Assessment:** Social listening, KIIs, survey, and observation

When choosing assessment methods, consider:

- Available budget
- Available time
- Available staff
- What tools are already being used
- Expected/desired timeline
- Existing partnerships/links to communities

Example Methods from Other RCAs

- New Mexico, Alabama, Georgia, Indiana, Puerto Rico, Orange County, Oregon:
 - KIs
 - Listening sessions
 - Observations
 - Intercept interviews
- San Mateo County:
 - KIs
 - Listening sessions
 - Observations
 - Adolescent and parent survey
 - Online observations



Step 2: Form Assessment Team

- The ideal assessment team includes individuals committed to understanding and addressing community needs regarding COVID-19 vaccines.
- Members have varied backgrounds, skills, and experience.
- Consider utilizing outside organizations or partners:
 - Local community-based organizations
 - Coalition members
 - Colleges or universities
 - Health facility staff
 - Youth groups



Step 2: Plan Some Initial Meetings and Listening Sessions

- Plan a few initial meetings to get started. It can be helpful to start with a listening session with an existing group (e.g., local coalition).
- Explain the assessment objectives and how the information they provide will be used.
- Propose potential dates and meeting mode (e.g., in person, phone call, teleconference).
- **Note:** Sometimes, it can be easier to participate in an already scheduled meeting rather than setting one up yourself.



Week 2: Implementation and Analysis



COVID-19 Vaccine Rollout Learning

These tables can be used to summarize what worked and what did not work during previous phases of COVID-19 vaccine rollout to prepare for next phases. Data collected at the local level can be consolidated to give a high-level summary.

[How to Conduct a Rapid Community Assessment | CDC](#)



These tables can be used to summarize what worked and what did not work during previous phases of COVID-19 vaccine rollout to prepare for next phases. Data collected at the local level can be consolidated to give a high-level summary.

Table 1
Phase __ Rollout Successes: What Worked

MAIN POPULATION	SUB-POPULATION	ROLLOUT SUCCESSES: WHAT WORKED?	WHY DID IT WORK?	IMPLICATIONS FOR PHASE __ OF COVID-19 VACCINE ROLLOUT

KII and Listening Session Guide

Use the guide to plan and implement KIIs and/or listening sessions with key individuals or small groups from the community.

The selected individuals should provide information on community perceptions of the COVID-19 vaccines and highlight key barriers and enablers related to COVID-19 vaccine confidence and uptake.

[How to Conduct a Rapid Community Assessment | CDC](#)



Observation Form

This form can be used to record observations for any meetings where the target audiences congregate or for listening sessions facilitated by others. Tailor these questions and probes as needed for your specific community circumstances.

[How to Conduct a Rapid
Community Assessment | CDC](#)

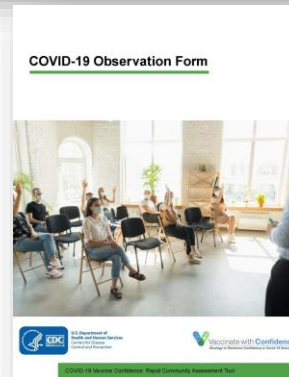


This form can be used to record observations for any meetings where the target audiences congregate or for listening sessions facilitated by others. Tailor these questions and probes as needed for your specific community circumstances.

Meeting name: _____ Date: _____
Hosting organization: _____
Location: _____ Observer: _____

1. How many participants were there?
2. How would you describe the participants (include demographic details, e.g., race/ethnicity, gender, occupation, etc.)?
3. What topics were discussed?
4. What was the tone of the discussion?
5. What concerns about COVID-19 vaccine did you hear?
6. Did you hear any misinformation about COVID-19 vaccines? What did you hear?
7. Why do people in this community want to be vaccinated?
8. Why do people in this community not want to be vaccinated?
9. What barriers do people in this community face when trying to get vaccinated?
10. What are some ways to increase confidence in and uptake of COVID-19 vaccines in this community?

2



Example Observations from Other RCAs

- Alabama:
 - Community food truck spot
- Indiana:
 - Amish grocery store and bakery
 - Pharmacies offering vaccination
 - Bars and restaurants
- Orange County, NY:
 - Farmer's market
 - Community BBQ
 - Vaccination site
 - Gun buyback event
- San Mateo County, CA
 - Food distribution centers
 - Libraries



Tips for Conducting Observations

- Windshield and walking tours:
 - Study Google Maps and local review websites (e.g., Next Door, Yelp, Eventbrite) for businesses and community activities.
- Photos/video:
 - Take pictures and video of the settings you're in but avoid identifying individuals (unless you have permission).
 - Taking photos with your phone is usually sufficient but be sure to upload to central file repository and **add a good descriptive title** as soon as possible for reference later.



Intercept Interview Guide

This guide will be used for conducting intercept interviews. Intercept interviews are unplanned conversations that can be conducted anywhere people are gathering (e.g., vaccination clinics, on the street, outside of homes, in stores).



COVID-19 Resilient Communities Rapid Community Assessment Tool

INTERCEPT INTERVIEWS

An intercept interview is a qualitative research method used to gather feedback from a community of interest in a specific location. The interview is conducted by approaching respondents in public places such as parks, farmers markets, street corners, restaurants, bars, or grocery stores. An intercept interview is an informal conversation that includes a brief set of open-ended questions. Data gathered is reported from the respondents, where rates of each of their responses are captured regarding COVID-19 information.

Tips for Conducting Intercept Interviews

- Intercept interviews should be kept brief, no more than 15 minutes.
- Ask for people who may offer a unique perspective on community life, such as a parent-child teacher, gay, lesbian, transgender, non-binary, or community garden manager.
- If your assessment is focused on pediatric concerns, ask for parents.
- If your assessment is focused on adolescent experiences, you should also speak with teens as they are often involved in social decision-making along with their parents. Remember to get permission before speaking with teens.
- Always identify yourself, state your purpose for approaching the respondent, and provide the purpose of the intercept interview.
- Find interviewees matter. Consider who might be best placed to share your data to your group. It may be most appropriate for a community health worker or someone from the community to start the conversation.
- Your entire conversation may not be recorded. Start with any relevant topics and/or engaged them to respond to, "We're here working with [CDC on COVID-19](#) on understanding what's happening here in the community about COVID-19 assessments. Do you mind if I ask you a few questions?"
- Remember that a lot of your interviews will be starting, and in certain places, only a small number of handheld devices for data entry during an interview interview.
- Sometimes in a building there may be members of the interview team standing around, or the conversation doesn't feel interesting. Step back or leave if someone else does not need additional support.
- Understand that intercept interviews are to be used as "quick checks" on community perceptions and are not meant to be comprehensive or representative of the entire population. Recommendations are fine.



[How to Conduct a Rapid Community Assessment | CDC](#)

Tips for Conducting Intercept Interviews

- Look for people who may offer a **unique perspective** on community life, such as pawn shop owner, gas station attendant, local artist, or community garden manager.
- First impressions matter—**consider who may be best placed to strike up a chat in your group**. It may be most appropriate for a community health worker or someone from the community to start the conversation.
- Your entry conversation may not be vaccine related. Start with any relevant topic and be engaged, then transition to: “We’re here working with ____ to understand what’s happening here in the community about COVID-19 vaccines, do you mind if I ask you a few questions?”
- Assume that a lot of your interactions will be standing, and so where possible, carry a small notebook for note taking during or **immediately afterward**.
- Sometimes it is helpful to have fewer people standing around so the conversation doesn’t feel like an interrogation. **Step back** or leave if someone else does not need additional support.



Vaccine Confidence Survey Question Bank

Use this survey question bank to select questions that are relevant to the population or study design.

[Vaccine Confidence Survey Question Bank \(cdc.gov\)](https://www.cdc.gov/vaccine-confidence-survey/question-bank/)



U.S. Vaccine Confidence Survey Question Bank
Domain: Demographic

ITEM CONSTRUCT	(A) CORE ITEMS FOR ADULTS WHO HAVE NOT YET BEEN VACCINATED	(B) CORE ITEMS FOR ADULTS WHO HAVE BEEN VACCINATED	(C) CORE ITEMS FOR HCP WHO HAVE NOT YET BEEN VACCINATED	(D) CORE ITEMS FOR HCP WHO HAVE BEEN VACCINATED
1. Age	How old are you? _____ years	Same	Same	Same
2. Sex	What sex were you assigned at birth, on your original birth certificate? <input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Rather not say <input type="checkbox"/> I don't know	Same	Same	Same
3. Gender	Do you currently describe yourself as male, female, or transgender? <input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Transgender <input type="checkbox"/> None of these _____	Same	Same	Same
4. Ethnicity	What is your ethnicity? <input type="checkbox"/> Hispanic or Latino <input type="checkbox"/> Not Hispanic or Latino <input type="checkbox"/> Other (Please specify): _____	Same	Same	Same



Considerations for Conducting Surveys

- If including a survey in the RCA, think about:
 - Whether you have access to a well-defined community that can be reached via a survey
 - Whether there are existing trusted networks that can be leveraged for survey administration
 - Whether the community is best reached in person with a paper survey or with a digital platform
 - What languages the survey needs to be in to reach the communities of focus
 - Human capacity available for data analysis



Social Listening and Monitoring Tools

These tools can be used to collect data from social and traditional media platforms to track online discussions, trends, and sentiments about a topic. It is useful for understanding the information landscape (including misinformation) and concerns and attitudes of your community of focus.

[Social Listening and Monitoring Tools \(cdc.gov\)](https://www.cdc.gov/social-listening-and-monitoring-tools)



These tools can be used to collect data from social and traditional media platforms to track online discussions, trends, and sentiments about a topic. It is useful for understanding the information landscape (including misinformation) and concerns and attitudes of your community of focus.

Steps for Conducting Effective Social Listening

1. Identify existing monitoring tools:

Your organization may have existing tools available to conduct social listening. If your organization has social media accounts, platforms such as Twitter and Facebook have some level of built-in analytics that are quick and easy to gather. An organization's website is another valuable resource that can provide insight about audience use and habits. If your organization has a hotline where people can submit questions, a quick scan of call logs could also help you understand concerns and questions of your community of focus.

2. Set up a social and traditional media monitoring system:

You can sign up for many free monitoring tools for tracking social and traditional media. Develop Boolean search queries, which are a type of search allowing users to combine key words with operators (or modifiers) such as AND, NOT, and OR to further produce more relevant results. Use these queries on each platform. For example, to understand questions about whether people know where to get vaccinated, you can search for "COVID vaccine" and "where". The search queries should be informed by the assessment's research questions and should be specific to your community or geographic location of interest (see below).

3. Check your monitoring tools regularly:

A dedicated team member should log into all monitoring tools at regularly scheduled time points (e.g., once a day) and gather social listening data. If available and needed, use the filtering feature in your monitoring tool to focus on a specific location or language. Use content themes provided below to keep track of what you are seeing on different platforms.

4. Analyze and develop insights:

Answering the questions below can be a good start. Develop integrated insights by considering findings from other data collection activities.

- What questions are people asking about COVID-19 vaccination?
- What are people's attitudes and emotions that may be linked to vaccination behavior?
- What rumors or misinformation are circulating and how quickly are they spreading?
- What overarching themes and narratives—beyond individual pieces of content—emerge from widely circulated rumors and misinformation?
- How are people responding to and interpreting vaccine-related communication from public health authorities?

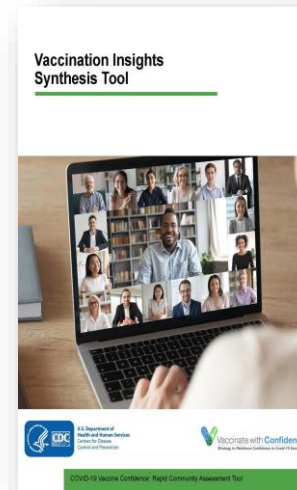
6. Report out on a regular basis:

The insights you develop from social listening should be shared with your assessment team and other stakeholders. See the template you can use to report findings on the following page.

Vaccination Insights Synthesis Tool

Use this key tool to compare your findings from surveys, interviews, focus groups, and observations.

- update regularly as interviews, observations, surveys are completed.
- update & cross-reference with staff



Use this tool to compare and contrast your findings from surveys, interviews, focus groups, and observations. What themes can you identify across all findings? Which findings reinforce each other? Which ones contradict each another? Are there outliers or positive deviants that illustrate something working?

DATA COLLECTION TOOL	SUMMARY OF KEY FINDINGS	SUMMARY OF BARRIERS TO VACCINATION	SUMMARY OF ENABLERS OF VACCINATION	SUMMARY OF PROPOSED SOLUTIONS
Vaccine Rollout Learning Template				
Key Informant Interviews				
Listening Sessions				
Observations				
Surveys				
Social Listening				
SUMMARY ACROSS DATA COLLECTION TOOLS				

[Vaccination Insights Synthesis Tool \(cdc.gov\)](https://www.cdc.gov)



Tips for Synthesizing and Analyzing Data

- Have a **daily debrief** with other team members to cross-check notes and add any additional information/recollections
- Use the time to reflect on the day and **decide what new directions may be taken the next day**
- Note key **facilitators, barriers and recommendations** heard by informants regarding COVID-19 vaccine confidence and demand
 - Use general descriptors rather than names to identify who said what, such as “pediatrician, private practice,” or “elementary school parent”
- Once the findings have been compiled, ask yourself:
 - What **themes/goal behaviors** can you identify across all findings?
 - Which findings **reinforce** each other? Which ones **contradict** each other?
 - Are there **outliers or positive deviants** that illustrate something working?



Week 3: Action Planning and Reporting



Step 4: Identify Solutions

- **Identify solutions by answering strategic questions:**
 - What are the main barriers affecting your community of focus' willingness or ability to be vaccinated?
 - What, if anything, is already being done to address barriers to COVID-19 vaccine confidence and uptake?
 - Which communication venues are more relevant for your population of focus?
 - What is the readiness for vaccination for your population of focus?
- **Effective solutions will:**
 - Increase trust in COVID-19 vaccines
 - Establish or solidify getting vaccinated as a social norm
 - Motivate or encourage people to get vaccinated
 - Improve physical access to vaccination



Step 4: Report Findings

- Report findings to key stakeholders at the end of the data collection week.
- Create a user-friendly report:
 - PowerPoint presentation
 - Longer narrative report
 - Visualization of key data (for surveys)
- Report sections:
 - Objectives and communities of focus (why did you choose these geographic areas/communities?)
 - Methods (which data collection methods did you use and how many were conducted?)
 - Findings (what are the primary facilitators and barriers to COVID-19 vaccination?)
 - Recommended strategies (how should collaborators or partners act on the identified findings?)
- Consider both format and literacy level (e.g., use graphics for people with lower literacy levels).



Example Strategies from Other RCAs

- Develop new partnerships with non-traditional community leaders and groups.
- Improve cultural competency of outreach, educational materials, and messaging.
- Support community conversations about vaccines with trusted community leaders.
- Offer mobile vaccination sites at the same time and place every week.
- Work with employers to provide vaccine education and paid time off for vaccination and side effect recovery.
- Engage healthcare professionals to post credible vaccine information in popular social media groups.
- Include teen voices and needs in outreach messages for teen vaccination.
- Develop communication strategies e.g., using role model stories to improve COVID-19 messaging and vaccine uptake.



Resources for Developing Strategies

- [Examples of evidence-based solutions to increase confidence and uptake](#)
- CDC tip sheets:
 - [How to address COVID-19 vaccine misinformation](#)
 - [How to tailor COVID-19 information to your specific audience](#)
 - [How to talk about COVID-19 vaccines with friends and family](#)
 - [How to talk to your patients about COVID-19 vaccination](#)
 - [COVID-19 Vaccination Field Guide: https://www.cdc.gov/vaccines/covid-19/downloads/vaccination-strategies.pdf](https://www.cdc.gov/vaccines/covid-19/downloads/vaccination-strategies.pdf)



How to do Role Model Stories



Why the use of story telling/narratives to mitigate COVID-19?

- Personal narratives can effectively influence beliefs, attitudes, intentions, and health behaviors.
- Narratives have been adopted to great effect by anti-vaccine advocates to influence public perceptions.
- Findings from an RCA in Oregon suggest that trusted, local community leaders' narratives disseminated among peer groups may influence attitudes, norms, and behaviors toward vaccination.
- Stories can be used by community outreach workers, leaders and organizations to engage social networks in disseminating simple and effective information for COVID-19 vaccination



Source: National Institutes of Health (NIH) COVID-19 Vaccination Communication: Applying Behavioral and Social Science to address vaccine hesitancy and Foster vaccine confidence. Dec 2020.

https://obssr.od.nih.gov/sites/obssr/files/inline-files/OBSSR_VaccineWhitePaper_FINAL_508.pdf

Role Model Stories portray genuine stories from members of the community who made a positive behavior change. Role Model Stories capture reality, show movement, and motivate change.



Role Model Stories and COVID-19 Prevention

- COVID-19 risk factors to consider:
 - Vaccine hesitancy* and or lack of vaccine uptake
 - Failure to wear face masks
 - Failure to observe physical distancing
- Role model stories can help to inform, educate, and demonstrate model behaviors of COVID-19 prevention.
- They rely on local influencers and peer networkers to contact friends, relatives, co-workers, and neighbors to share and model information.
- This training will focus on personal vaccine experiences and hesitancy.



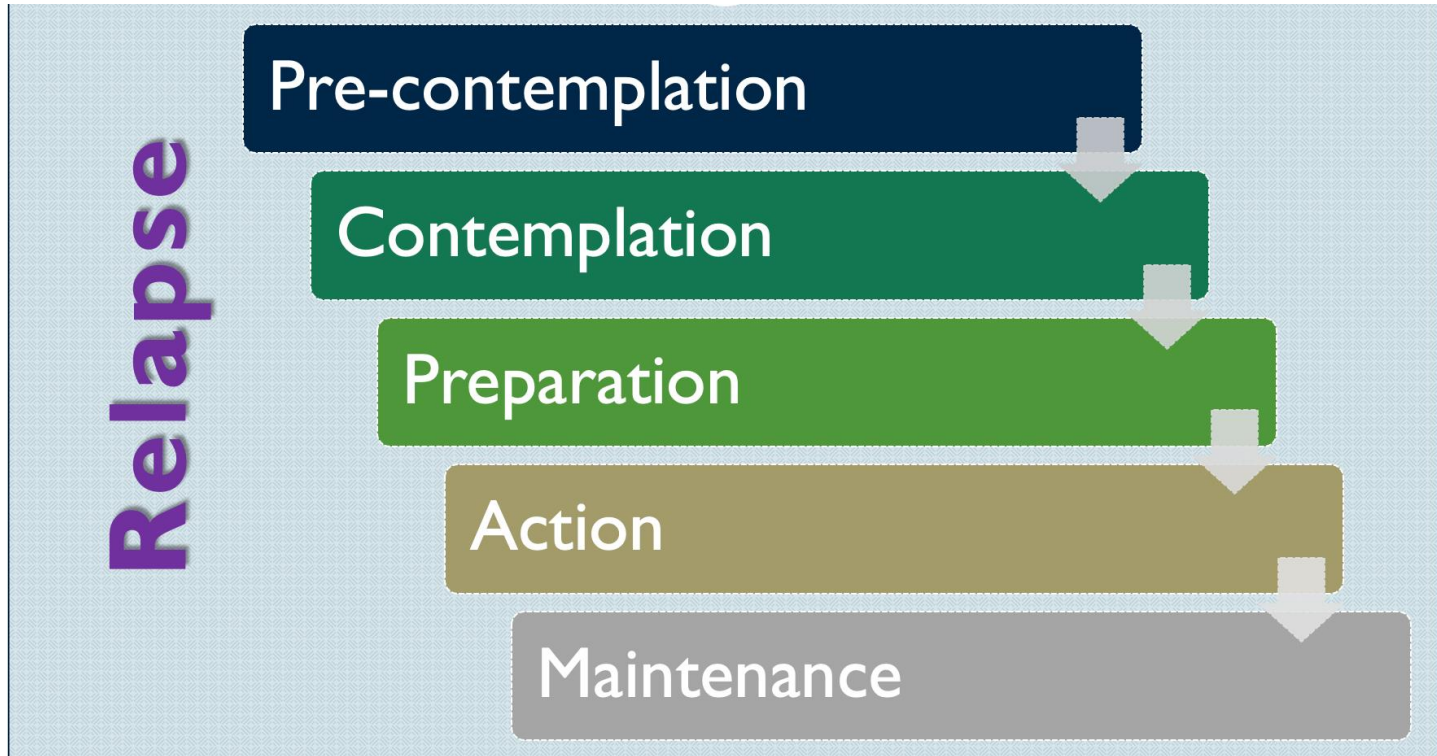
*Vaccine hesitancy has become an important issue as many have questions and misinformation exists.

Role Model Story Key Characteristics:



1. Characterization or membership- **age/gender/race-ethnicity/occupation**
2. Risk factor – **non vaccinated**
3. Goal behavior – **get vaccinated**
4. Influencing factor – **conditions that influence behavior or social determinant of health**
5. Stages of change – **shows movement towards a goal**
6. Barrier/difficulties – **obstacles (real/imaginary)**
7. Positive outcome – **positive ending of story**

How People Change: Stages of Change Theory



Source: The Learning Network. What's Going On in This Graph? | Coronavirus Protective Measures: How can social distancing affect the chain of coronavirus transmission? *The New York Times*. 2020.

Individual/Social determinants of health



(Constructs that influence behavior)

Influencing Factors (micro)

Knowledge

Skills

Attitudes/Beliefs

Perception of Risk

Perception of Severity

Intentions

Self Efficacy

Social Norms

Influencing Factors (macro)

Stigma/Racism

Fear of Public Charge

Anti-immigration Biases

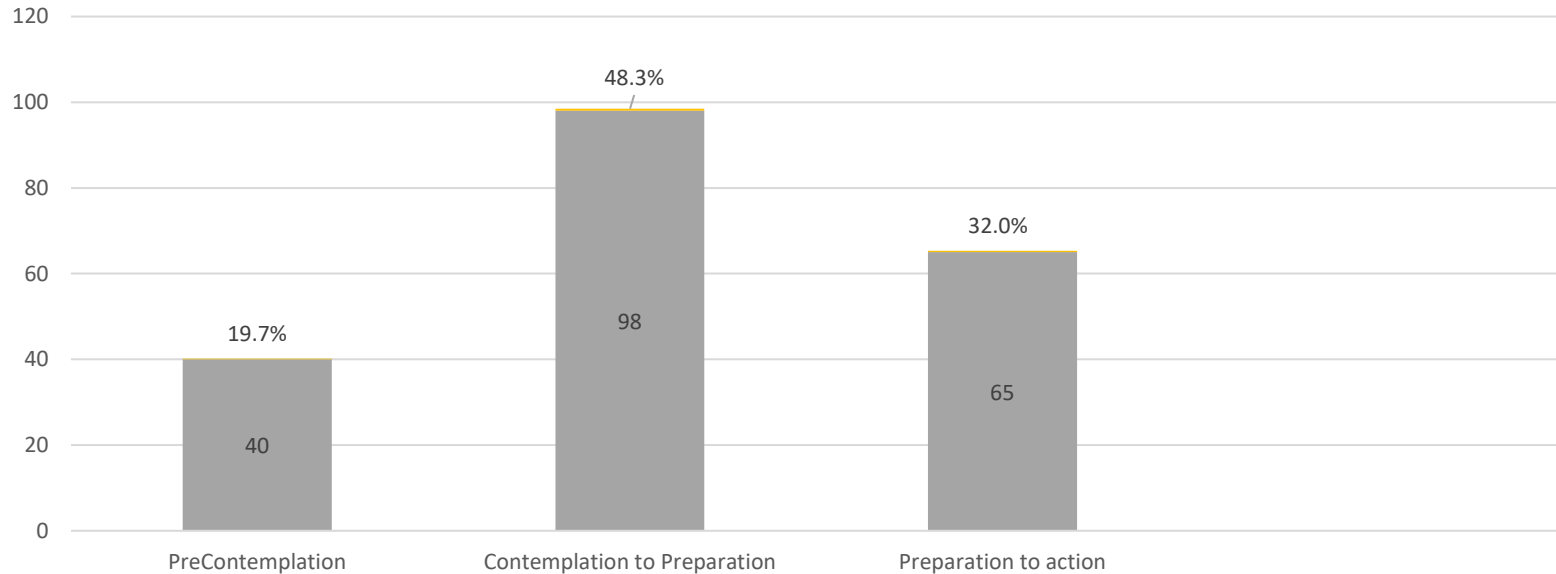
Health Inequality

Gender Inequality

Access

Migrant Seasonal Farm Workers, Oregon (Total sample 468 participants)

Stages of Change of COVID-19 Vaccination Uptake Among MSFW not yet vaccinated (n=203)*



*Note: adapted from question “If COVID19 vaccine were accessible, would you get it? [No; Not Sure+Yes, but will wait; Yes, ASAP]



Steps to Developing a Role Model Story

- Collect community observations within your network/population.
- Identify, recruit, and interview potential, trusted persons (e.g., community leaders, church leaders, and lay persons) that support COVID-19 prevention strategies and are influential in the priority population. Take good notes as well.
- Transcribe the interview, and/or review your notes.
- Validate the testimonial with the person you are citing.
- Write the story with the specific population in mind.
- Edit and re-edit.
- Produce your testimonial.



My COVID-19 Vaccination Experience Activity

Characterization and me



Hi, my name is Abby Munoz and I work in an educational migrant program in Hermiston, Oregon. We assist migrants by providing education and other social services. I am a happy mother of two beautiful girls and a proud grand mom.

Earlier in the year, my daughter was exposed to COVID-19 by a co-worker, and it was no joke. I remember one night back in February when my daughter answered a phone call, and then she dropped the phone in front of me. I asked her “What is going on?” She said, “My co-worker just called, and she is COVID positive!” She was devastated. I knew it was a big issue for us since we all have asthma. So, I was very worried. We did not know what to do.

We called our doctor and he recommended to quarantine and check for COVID-19 symptoms. Well, a few days later my daughter started having a fever and then a cough. I was worried and I called the doctor again, and he asked me to take her to the emergency room. It was very scary. We were there for a few hours and then they sent her home. Thank God she improved after a few days, but I was afraid, very afraid.



Source: testimonial from Abby Munoz- COVID-19 Emergency Response-Oregon 2021

My COVID-19 Vaccination Experience Activity Continued



Due to my experience, I was eager to get the vaccine. I always trust what my doctor recommends. Being a mom, you need to do that. Kids have routine vaccinations and I do not see any difference with the COVID-19 vaccine. Every year I take the flu shot, and if my doctor recommends the flu shot, I have no problem with the COVID-19 vaccine since it is also recommended by my doctor.

I remember that I waited my turn for the vaccine. In the early COVID-19 vaccination days, it was for people with underlying conditions; then for people who work with sick people, like doctors and nurses. When it was my turn, I was ready. The vaccine shot was like any other. It was one of the happiest moments in my life after more than a year of quarantine and anguish watching my daughter become sick from COVID. I took the vaccine for my family and I. Asthma is a condition that we all have. And I want that protection.

Risk factor=unvaccinated

Preparation
to Action

barriers

Goal behavior

Positive outcome

Perception of risk/ knowledge



Source: testimonial from Abby Munoz

Video Format - Role Model Story – Oregon Health Authority



[Historias de Vacunas:](#)
[\(963\) Juan Manuel Hernandez Marquez, Tienda La Juquilita, Newport, Oregon - YouTube](#)

Source: [Oregon.gov : State of Oregon](#)



Fotonovela Format



Info. de contacto

Una Voz Para la Salud
Si es un trabajador agrícola y necesita ayuda para encontrar la vacuna, llame 1-800-377-9968
 **envíe un mensaje** (737) 414-5121

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INFÓRMESE SOBRE LA VACUNA CONTRA COVID-19



Group practice



Group Practice – Exercise 1: Adapting RMS



Hello, my name is David. I work in San Juan as a bartender (1). I love my work because I make a lot of tips and I can afford paying my car and my apartment in Santurce. I am fully Covid-19 vaccinated and I don't want to get another vaccine or booster (2). I am tired of wearing a mask and being careful with everyone (3). Well, last night my girl friend called me from the hospital. She was very worried because her mom was admitted with COVID-19 symptoms. She is worried because her mom has a delicate respiratory condition. She was very scared that something will happen to her mom. I did not know what to say. So, she told me that to be around her mom, she will need to take the new COVID booster so she can protect her. After we finished the conversation, I started thinking. I don't know about me taking another booster, but I love my girlfriend and I know she wants me to be healthy and don't want to stress her (4) and I would like to help protect her mom's health (4) I will contact the hospital nurse and ask for more information on new booster (5). I love my girlfriend and I know she wants for all of us to be safe. (6)

1. Characterization/membership
2. Risk factor –don't want to get vaccine
3. Barriers/difficulties
4. Influencing factors:
Attitudes/Believes-Perception of risk
5. Stage of change: Contemplation to preparation
5. Goal Behavior
6. Positive outcome

● Word count: 199

Group Practice – Exercise 2: Adapting RMS

I am done with COVID but.....

Hello, my name is Maria, and I am fully COVID-19 vaccinated (1). I just found out that there is a new booster and believe me, I don't want to take one more shot (2). I am done with COVID!

Well, yesterday my friend Rosa told me that President Biden got it a few weeks ago. I can't



believe it! I told Rosa. Then, I start thinking, if the president who has the best protection in the world got it, then how secure am I or my boyfriend? (3) I am worried about my asthma condition, (4) and I can't be playing around with my health. I will contact my doctor and ask her if she recommends that I get a new COVID booster (5). It is my health and my boyfriend's health. (6)

1. Characterization/membership
2. Risk factor –don't want to get vaccine
3. Barriers/difficulties
4. Influencing factors: Perception of risk
5. Stage of change: preparation to action
5. Goal Behavior
6. Positive outcome

● Word count: 111



Some Programmatic Considerations



Developing Role Model Stories

- Create one story at a time.
- Craft clear, short, and concise stories (< 400 words).
- Select simple and motivating artwork (e.g., pictures, cartoons, and fotonovelas).
- Clear the product with the person(s) who you are quoting or paraphrasing.
- Decide the platform for dissemination (e.g., print, video, and audio).
- Provide an easy-to-read and appealing layout.
- Test your testimonials with a few people from your priority population and ask them if it sounds and feels real. **VERY IMPORTANT.**
- One interview can be used to make several stories.



Implementing Your Role Model Story Program

- Best practices for program implementation:
 - Select a day to launch your program.
 - Based on your community observation decide which topic/risk factor you want to disseminate first: vaccination or masking? Best practices indicate you start with one topic/risk factor until the conversation reaches a point of saturation or people stop commenting. Then, you change to another topic and so on.
 - Carefully select who your audience is, such as: Migrant farmworkers? Food processing plant workers? Young migrants? Adults? Men? Women? High School students? Church parishioners? And identify the stories you will share with them.
 - Identify the venue you want to use to disseminate the stories (e.g., community outreach, church bulletin, community newspaper, organization Facebook, your very own Facebook, local newspaper, and radio show interviews).



Social Media



Implementing Your Role Model Story Program

- Best practices for program implementation:
 - Create more stories or adapt them
 - Always ask for consent and make sure the individual you interview signs a release form (see supplemental materials).
 - If you created a story without a direct interview, you could say: “Inspired by a real community story.”
 - Always provide additional links from reputable sources of information next to the stories:
 - <https://www.cdc.gov>



Resources



Resources for Developing Strategies

- [Examples of evidence-based solutions to increase confidence and uptake](#)
- CDC tip sheets:
 - [How to address COVID-19 vaccine misinformation](#)
 - [How to tailor COVID-19 information to your specific audience](#)
 - [How to talk about COVID-19 vaccines with friends and family](#)
 - [How to talk to your patients about COVID-19 vaccination](#)
 - [COVID-19 Vaccination Field Guide: https://www.cdc.gov/vaccines/covid-19/downloads/vaccination-strategies.pdf](https://www.cdc.gov/vaccines/covid-19/downloads/vaccination-strategies.pdf)
 - [PROMISE for HIP | Treat | Effective Interventions | HIV/AIDS | CDC](#)



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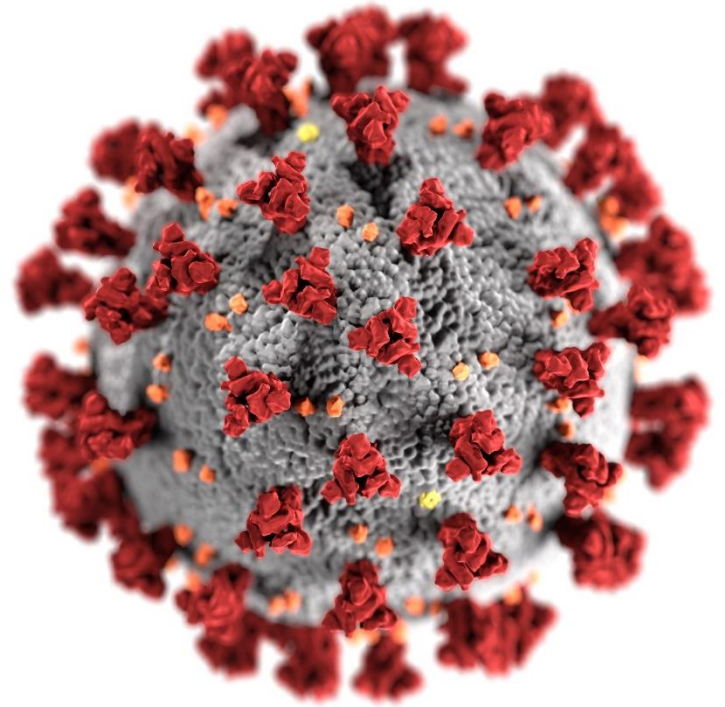
Thank you!

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The findings and conclusions in this report are those of the authors and do not necessarily represent the official position of the Centers for Disease Control and Prevention.

