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



2022-23 COMMUNITY NEEDS ASSESSMENT: Understanding COVID-19 Vaccine Perspectives and Confidence



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KEY FINDINGS



Protecting one's health plays a substantial role in vaccination

Individuals are primarily motivated to get a COVID-19 vaccine and boosters to protect their health.



Concerns about vaccine safety and effectiveness contributes to vaccine hesitancy Unvaccinated and booster hesitant individuals have concerns about vaccine safety and efficacy.



Lack of concern about COVID-19 and Long COVID Unvaccinated & booster hesitant individuals report less concern about COVID-19 and Long COVID than boosted individuals.



Vaccine safety education might influence individuals to vaccinate Community members want to hear more about vaccine safety from trusted sources of information (e.g., CDC, PCPs, etc.).



Emphasize choice and acknowledge mistakes to increase vaccine motivation Emphasizing choice to vaccinate and acknowledging missteps related to the rollout of vaccines and boosters and safety concerns (e.g., J&J vaccine) are important when speaking to vaccine hesitant individuals.





BACKGROUND & METHODS

From August 2022 to February 2023, 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 August 2022 to February 2023 to build upon our CNA findings from 2021 and to better understand community perspectives about COVID-19 vaccination during the changing landscape of the pandemic. Community members trained to be trusted/influential messengers (REACH Community Vaccine Champions) and partnerships with AAHETF and Calming Nature Doula Services (CNDS), 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 and holding listening sessions.

We Aimed To Learn:

- Personal experience with COVID-19
- COVID-19 vaccination & booster status
- What motivates or deters individuals from getting a COVID-19 vaccine and/or booster
- Who do individuals trust when hearing about COVID-19 vaccination/what kind of information do they want trusted sources to share
- 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/boosters as well as generate implementation strategies to increase vaccination and booster rates most effectively in Black/African American and Latinx communities along Ferry Street and Buffalo-wide.





Summary of Activities

The CNA was comprised of six listening sessions and one survey.

Community Needs Assessment Activities				
Date	Activity	Method	# of Participants	
December 2022 – February 2023	Six Listening Sessions	Listening Session	20	
August 2022 – January 2023	Vaccine Confidence Survey	Survey	280	

Listening Sessions

The listening sessions gave breastfeeding mothers 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. Two listening sessions were held with CNDS clients and four listening sessions were facilitated by AAHETF and held with community members. Sample questions include: "What comes to mind when you think about COVID-19 vaccination?", "What factors most influence people to get a COVID-19 vaccine?", "Have you received a COVID-19 vaccine? If so, have you received a booster?"

Vaccine Confidence Survey

The Vaccine Confidence Survey assessed personal experience with COVID-19, vaccine/booster hesitancy, motivation to vaccinate/to get boosted, barriers to vaccination, and vaccination/booster status. The survey also assessed trusted sources of COVID-19 vaccine information among respondents as well as knowledge regarding Long COVID and COVID-19 treatment. 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?", "Are you familiar with the "test to treat" initiative?", and "How concerned are you about getting COVID-19?"

Participants

In total, 300 community members participated in this CNA through listening sessions or surveys from August 2022 to February 2023. Survey respondents were recruited via community outreach engagement at community events (e.g., Pilgrim Baptist Church Family Concert), churches. local grocery stores, book clubs. Listening session participants were recruited by CNDS (CNDS recruited their clients) and AAHETF. AAHETF recruited and engaged participants in listening sessions at outreach events that took place at Charles Drew School, Hillary Park School, and Health Sciences Charter School.

Survey respondents were predominantly Black/African American (77%), followed by White (17%), and 6% were of another race. 2% of respondents identified as Hispanic or Latinx. The age range of survey respondents was 18 - 86 (average age of 47).





Personal experience with and thoughts about COVID-19

More individuals reported receiving a COVID-19 vaccine when compared to our 2021 CNA results (87% versus 61%, respectively). 59% of individuals who received a primary series of the vaccine also received at least one booster shot.

Personal experience with COVID-19 and the vaccine/booster

	2021	2022-23
Received a COVID-19 diagnosis	14%	45%
Knew someone who became seriously ill or died of COVID-19	65%	59%
Received a COVID-19 vaccine	61%	87%
Received a COVID-19 booster	-	59%

Protecting one's health is the biggest motivator to get vaccinated or boosted.

Overall, survey respondents were primarily motivated to vaccinate or get boosted to protect their health (60% and 62%, respectively). The second biggest motivator to vaccinate or get boosted is to protect family and friends (30% and 22%, respectively). 45% of unvaccinated respondents don't ever want to get the vaccine and 18% of booster eligible participants don't ever want to get a booster. However, 38% of booster eligible participants report that they might be motivated to get a booster to protect their health.

Concerns about safety and unfamiliarity with the vaccine/booster are barriers to vaccination.

Over half of unvaccinated respondents (58%) do not want the vaccine because of safety concerns. 25% of booster eligible respondents reported that there is still too much unknown about the booster to make a choice to get an additional vaccine.

What are your reasons for not getting the vaccine/booster?			
I do not trust the vaccine/booster is safe	Unvaccinated (n =33) 58%	Unboosted* (n = 72) 9%	
There is still too much unknown about the vaccine/booster	42%	25%	
I do not trust the vaccine/booster is effective	36%	9%	
I think the vaccine/booster has risks that are worse than getting COVID-19, so it is not the solution	33%	9%	

*Unboosted = vaccinated and eligible for booster

"I was forced to be injected with the vaccine or I would lose my job. I was shocked that, as an adult, I had no choice." -CNDS Listening Session Participant

Listening session participants reported that the initial vaccines were rolled out too fast, unhappiness regarding work mandated vaccination, and that the initial series of vaccines should have been enough to protect them from the disease. Participants also spoke about the J&J vaccine and that its recall justified their concerns about vaccination.





Lack of concern about getting COVID-19 is prevalent among unvaccinated and unboosted individuals.

65% of unvaccinated and 33% unboosted individuals reported that they were not at all concerned about getting COVID-19. By comparison, vaccinated and boosted individuals reported more concern about the disease.

How concerned are you about getting COVID-19?				
	Unvaccinated Unboosted		Boosted	
	(n =33)	(n = 72)	(n = 154)	
Not at all concerned	65%	33%	14%	
A little concerned	6%	30%	37%	
Somewhat concerned	12%	21%	23%	
Very concerned	18%	16%	26%	

"I don't want to get a booster unless there's a new variant that's back to causing a lot of deaths. I've gotten COVID twice and for me it was just like having a cold." -AAHETF Listening Session Participant

The CDC and Primary Care Providers are considered trusted sources for vaccine information.

Both boosted and unboosted participants expressed trust in the CDC and PCPs as sources for vaccine information. However, more boosted survey respondents reported trust in both sources than unboosted participants. Of note, a greater percentage of unboosted individuals (58%) reported trust in the CDC than 2021 CNA unvaccinated participants (34%).

When asked whether they trust the county health department, more boosted respondents (45%) stated "very much" compared to 13% of unvaccinated and 19% of unboosted participants.

Who would you trust to provide vaccine information?

Sources of information	Unvaccinated	Unboosted	Boosted
	(n = 33)	(n = 73)	(n = 166)
CDC	39%	58%	72%
Primary Care Providers	21%	29%	43%
Family & Friends	21%	24%	19%
News Sources	9%	4%	12%
Pharmacists	6%	8%	6%
Nurses	6%	10%	5%
FDA	18%	24%	23%
State Health Departments	18%	15%	19%
Local Health Officials	6%	12%	11%
Social Media	6%	4%	3%
Religious Leaders	6%	3%	2%

CNDS Listening Session participants said that some health care providers can be trusted, however, some can be too blunt and fear mongering when talking about COVID-19





Community members want to hear more about vaccine safety.

Survey respondents reported that their trusted sources of information should share more information about vaccine safety. Boosted respondents were more likely to want to hear more about where to get the vaccine/booster, how to encourage others to get vaccinated and information regarding where to get COVID-19 treatment than unvaccinated or unboosted respondents.

What types of information do you want to hear from trusted sources?

	Unvaccinated	Unboosted	Boosted
Sources of information	(n = 33)	(n = 73)	(n = 166)
Vaccine Safety	46%	55%	64%
Where to get the vaccine/booster	9%	19%	30%
How to encourage others to get vaccinated	15%	13%	31%
Where to get COVID-19 treatment	15%	13%	22%

"I want to learn more about the long-term effects of what happens to people who have gotten the vaccine." -AAHETF Listening Session Participant

Many community members are not familiar with "test to treat" or Long COVID.

45% of respondents were either unfamiliar or not sure if they have heard of the "test to treat" program established to treat individuals with COVID-19. 58% of respondents did not know that Erie County had such a program.

Are you familiar with the test to treat initiative?				
	Unvaccinated	Unboosted	Boosted	
	(n = 22)	(n = 58)	(n = 109)	
Yes	59%	63%	51%	
No	23%	26%	38%	
I'm Not Sure	18%	10%	11%	

"I've never heard of test to treat. I didn't even know there was medicine for COVID." -AAHETF Listening Session Participant





34% of respondents had not heard of or did not know much about Long COVID. Of those who have heard of Long COVID, unvaccinated and unboosted respondents were more likely to report a little or no concern about Long COVID than boosted respondents.

How concerned are you about Long COVID?				
	Unvaccinated (n =15)	Unboosted (n = 37)	Boosted (n = 103)	
Not at all concerned	73%	24%	15%	
A little concerned	7%	35%	32%	
Somewhat concerned	0%	19%	26%	
Very concerned	20%	22%	15%	

"I want to know about research that looks at whether Long COVID is worse in people who are vaccinated versus those who aren't." -CNDS Listening Session Participant

Increasing COVID-19 Vaccine Confidence

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



Share more information about vaccine and booster safety



Provide education related to the effectiveness of the vaccines and boosters (acknowledge that you can still get COVID-19 even if vaccinated/boosted)



Build trust by acknowledging missteps in messaging, vaccination/booster rollout and concerns about the J&J vaccine



Emphasize choice when discussing vaccination





SUMMARY

Our 2022-23 COVID-19 Vaccine Confidence Community Needs Assessment built upon our last assessment by revealing current factors that relate to COVID-19 vaccine hesitancy as well as booster hesitancy in our community. Protecting one's health was the primary motivator to get vaccinated/boosted among participants.

CNA participants expressed concern about the safety and efficacy of the vaccine and booster and stated that trusted sources of information should provide more educational information to counteract these concerns. Unvaccinated and unboosted participants reported less concern about COVID-19 and Long COVID than boosted participants. Our results also indicated that the CDC and Primary Care Providers are considered trusted sources of information for participants, however, these sources were more likely to be considered trusted among boosted participants compared to unvaccinated or unboosted individuals.

Participants report that building trust by acknowledging missteps related to the rollout of vaccines and boosters and vaccination safety concerns (e.g., J&J vaccine) are important when discussing vaccine confidence with community members. Additionally, continual education related to COVID-19 treatment, Long COVID, and the effectives of vaccines and boosters are necessary as the landscape of COVID-19 shifts over time.

