Comprehensive training 28 June – 21 July 2022

HOSTED BY GAVI, WHO, UNICEF & US CDC



Community Level Interventions and Strategies for Increasing Vaccine Demand

Michael Eriksen Prevention Research Center Georgia State University

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- Definitions
- Socio-ecological Model
- Community-level Strategies to Help Increase Vaccine Demand
- Field Examples



Learning objectives

Participants will...

- Understand definitions and evolving concepts of "community"
- Describe community level interventions and strategies to increase vaccine demand
- Assess community level strategies that might be possible in their context





- Community-based interventions involve members of the affected community in the planning, development, implementation, and evaluation of programs and strategies to create change at any level.
- Community-level interventions address a combination of socio-cultural, environmental, and policy level factors to create social and behavior change, including social determinants of health.



Problem statement

Increasing vaccine confidence and demand requires building trust, equity, and social norms which cannot be accomplished through individual and interpersonal strategies alone – or only through policy.





Socioecological Model

Community level interventions are a critical and central component of building the trust, equity, and social norms that ultimately drive vaccine confidence and demand.

Public Policy

National, state, local laws, and regulations

Community

Relationships between organizations

Organizational

Organizations, social institutions

Interpersonal

Families, friends, social networks

Individual

Knowledge, attitude, skills



Community-level Strategies

- Building Community Action Teams to plan and lead localized efforts
- Hosting community-wide events, performances, and trainings to change perspectives and increase understanding
- Social norming campaigns through local and social media
- Engaging community leaders, influencers, and trusted messengers as ambassadors
- Coordinating action across community organizations and institutions
- Advocating for policies that encourage vaccination and improve equity



Case Example: Vaccine Uptake Among Refugees in US Resettlement Community

Michael Eriksen Prevention Research Center Georgia State University



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Clarkston, Georgia



referred to as

- o"The Ellis Island of the South" or
- o"The Most Diverse Square Mile in America"
- Over 10,000 residents, half are foreign borne, from over 50 different countries, and half are African Americans.

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One of the largest refugee resettlement communities in the United States. Often

Clarkston Community-level Strategies

- Listening to community members and establishing trust
- Working with existing community partners
 - Resettlement agencies (e.g., International Rescue Committee)
 - Special COVID-specific initiatives (e.g., CORE Community Organized Relief Effort)
 - Health clinics (often faith-based)
 - State and local health departments
 - City government (Mayor active member of Community Advisory Board)
 - Public Schools (served as sites for vaccine events)
 - Employers (Refuge Coffee)







COMMISSIONER TED TERRY (BATMAN) & OUR OTHER SUPERHEROES















SUPERHERO VACCINE INDIAN CREEK ELEMENTARY

FEBRUARY 5 8:30-12:30

> **SUPERHEROES** WEAR MASKS **GET VAXXED!**

PLEASE GO TO INDIAN **CREEK TO REGISTER &** LEARN MORE





DEKALB COUNTY

AREF TELETAA **Board of Health**





RESCUE





Clarkston Community-level Strategies

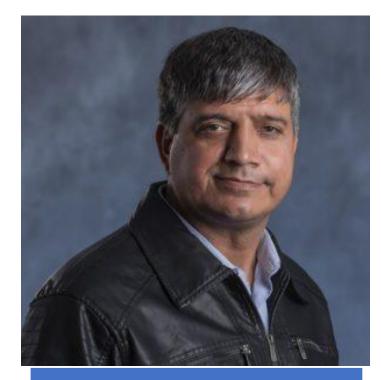
- Hiring Community Ambassadors from among the largest community population groups
 - Burmese
 - Congolese
 - Middle Eastern
 - Afghan
 - Sudanese
 - African American*
- Funding small community agencies to support vaccine confidence and uptake (e.g., Refugees Women's Network
- Convening Clarkston Community Listening
 Summit

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GSU PRC Vaccine Ambassadors



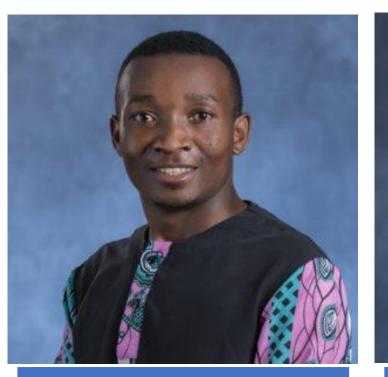
Ahmad Habibzai

- From Afghanistan
- Speaks Dari, Pashto, Urdu



Mohamed Mohamed

- From Somalia
- Speaks Somali, Swahili



Thomas Roger

- From DR Congo
- Speaks Swahili, French, Kibembe



Selar Shwani

From KurdistanSpeaks Kurdish



Kaeden Tun

- From Burma/Myanmar
- Speaks Burmese

Vaccine Uptake Challenges for Refugees

Regular drumbeat of US-based misinformation sources

Outspoken influential leaders opposed to vaccines

Lack of access for essential workers who don't have scheduling flexibility and transportation

Need for plain and simple messaging in first language of refugees and interpretation support



Vaccine Uptake and Social Vulnerability Index (SVI)

- The US CDC/ATSDR Social Vulnerability Index (CDC/ATSDR SVI) is a tool that uses U.S. Census data to determine the social vulnerability of every census tract.
- Developed to assess community resiliency to respond to natural disasters. SVI ranges from the least vulnerable of 0.0 to the most vulnerable of 1.0
- The four SVI themes are:
 - Socioeconomic Status
 - Household Composition & Disability
 - Minority Status & Language
 - Housing Type & Transportation.

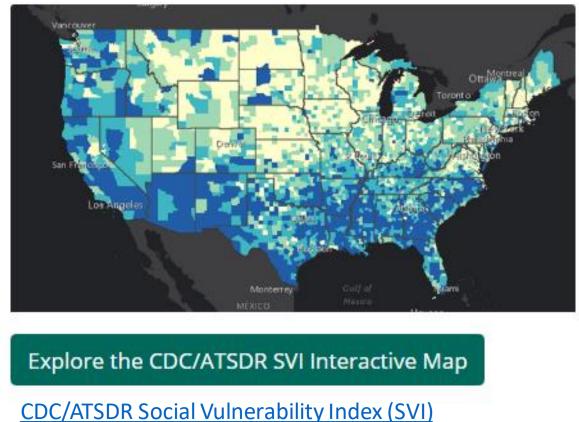
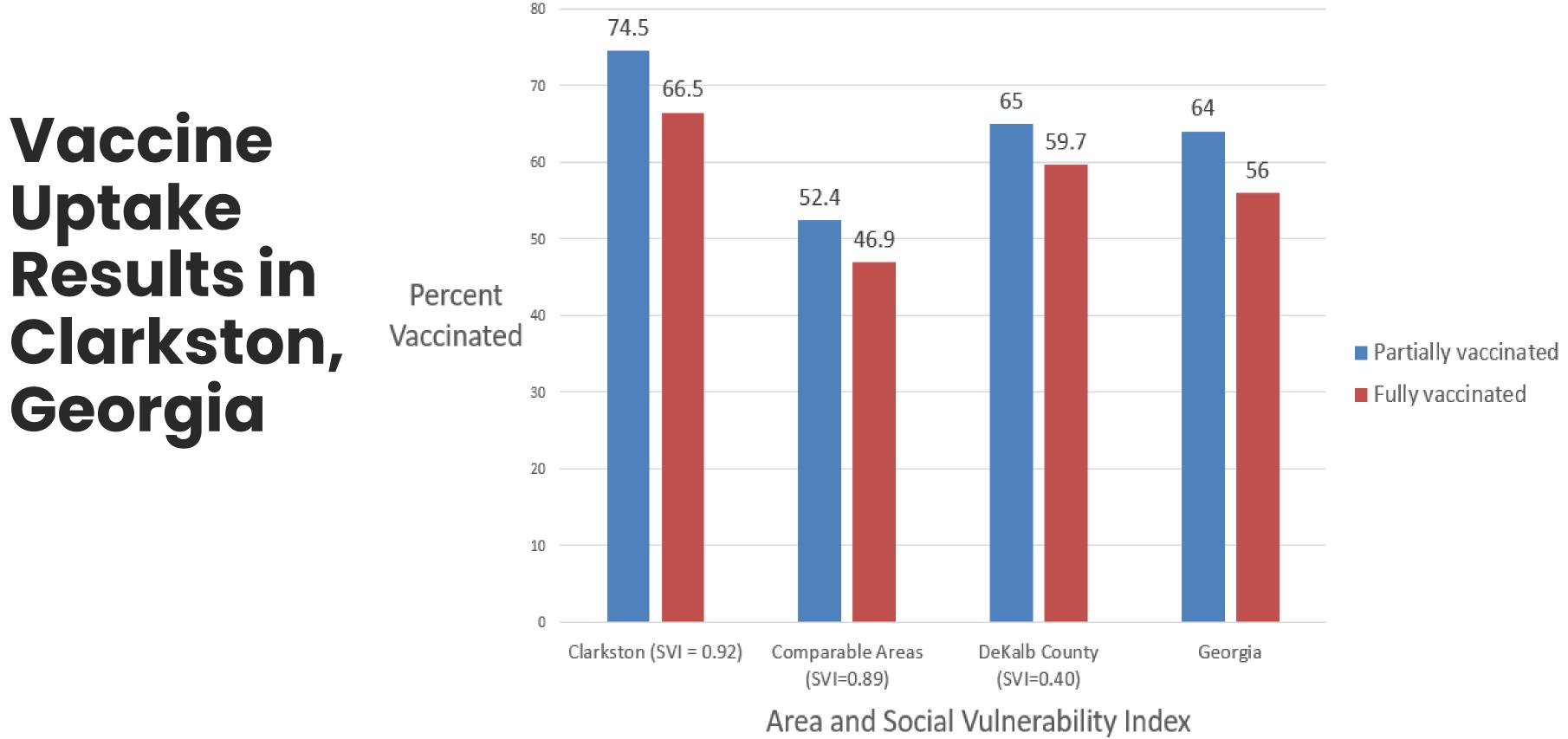




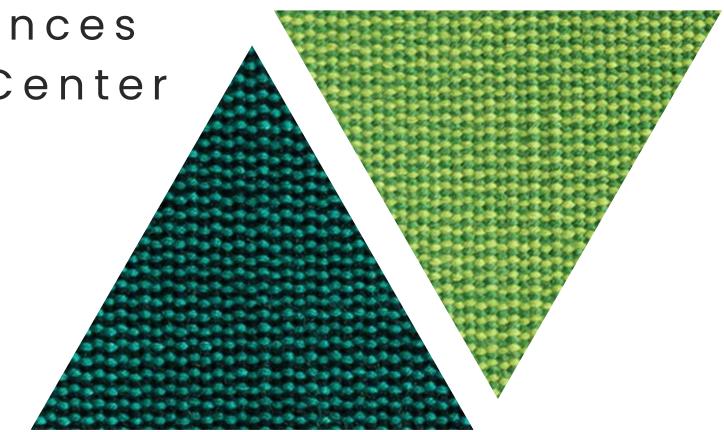
Figure 1. Covid-19 Vaccination Status, DeKalb County, May 10, 2022





Case Example: Social relations to promote vaccine demand Finger Lakes Rural Immunization Initiative (FLRII)

Reza Yousefi Nooraie, PhD, MD Department of Public Health Sciences University of Rochester Medical Center



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• Diseases spread in social networks, so do the ideas! •Health beliefs and behaviors spread in social networks (Latkin 2015) •Patients share with family and friends about their health and care (Vassilev 2014) oFake news spreads faster than true news on social media (Langin 2018)

 Social networks can be used to promote the spread of beliefs and behaviors.

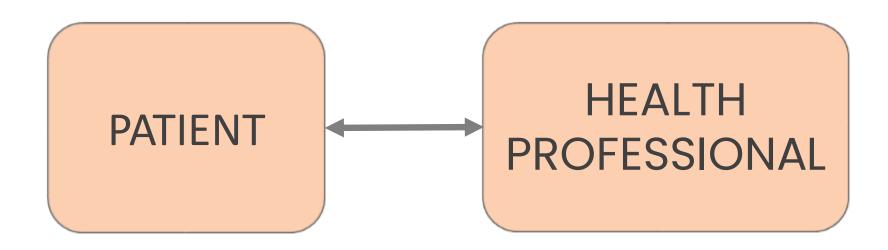
oLocal opinion leaders are effective in influencing providers' and patients' behavior (Flodgren 2019)

olndividuals listen to 'trusted messengers' to decide vaccinating



Health professionals as trusted messengers

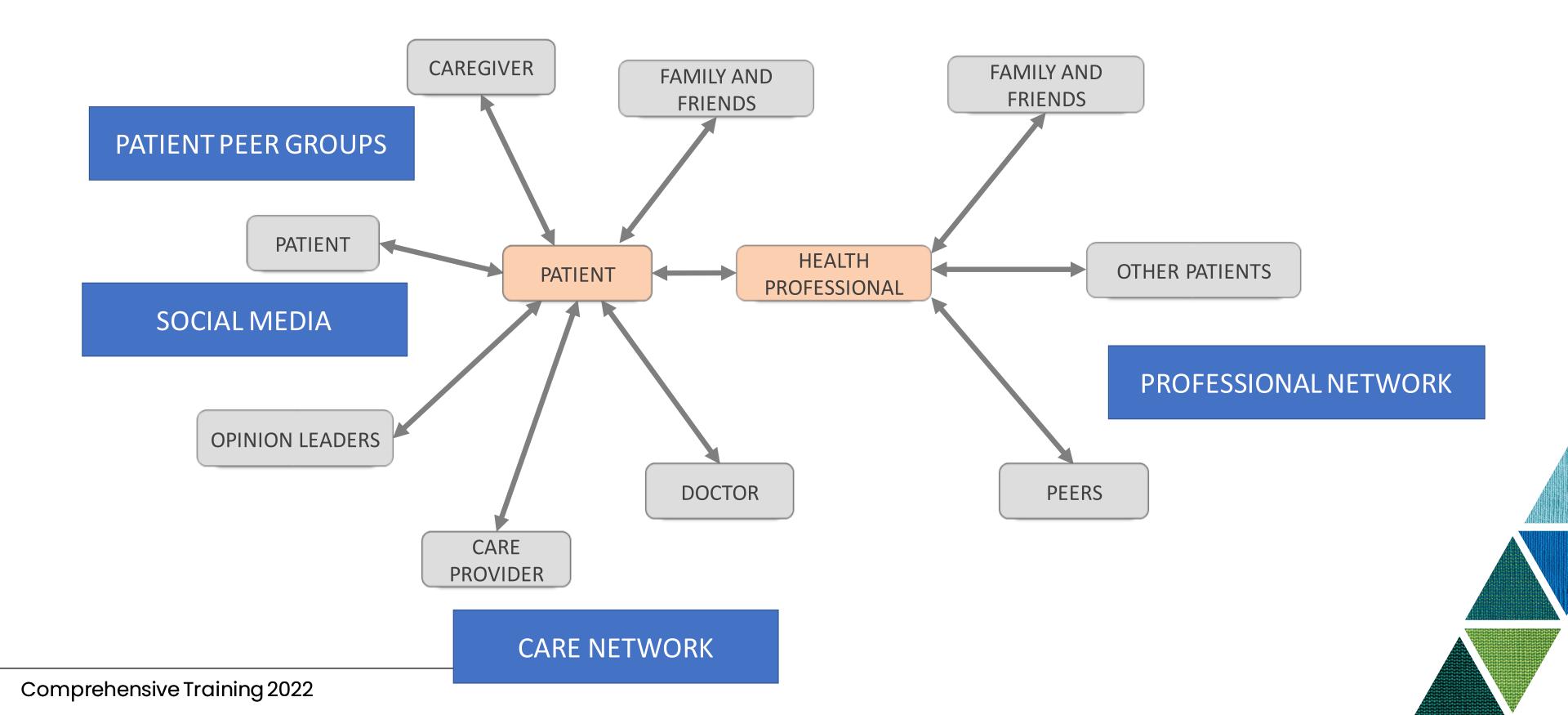
- Eight in ten patients turn to their doctors when deciding about vaccination (KFF 2021)
- Nine in ten physicians are vaccinated (KFF 2021)





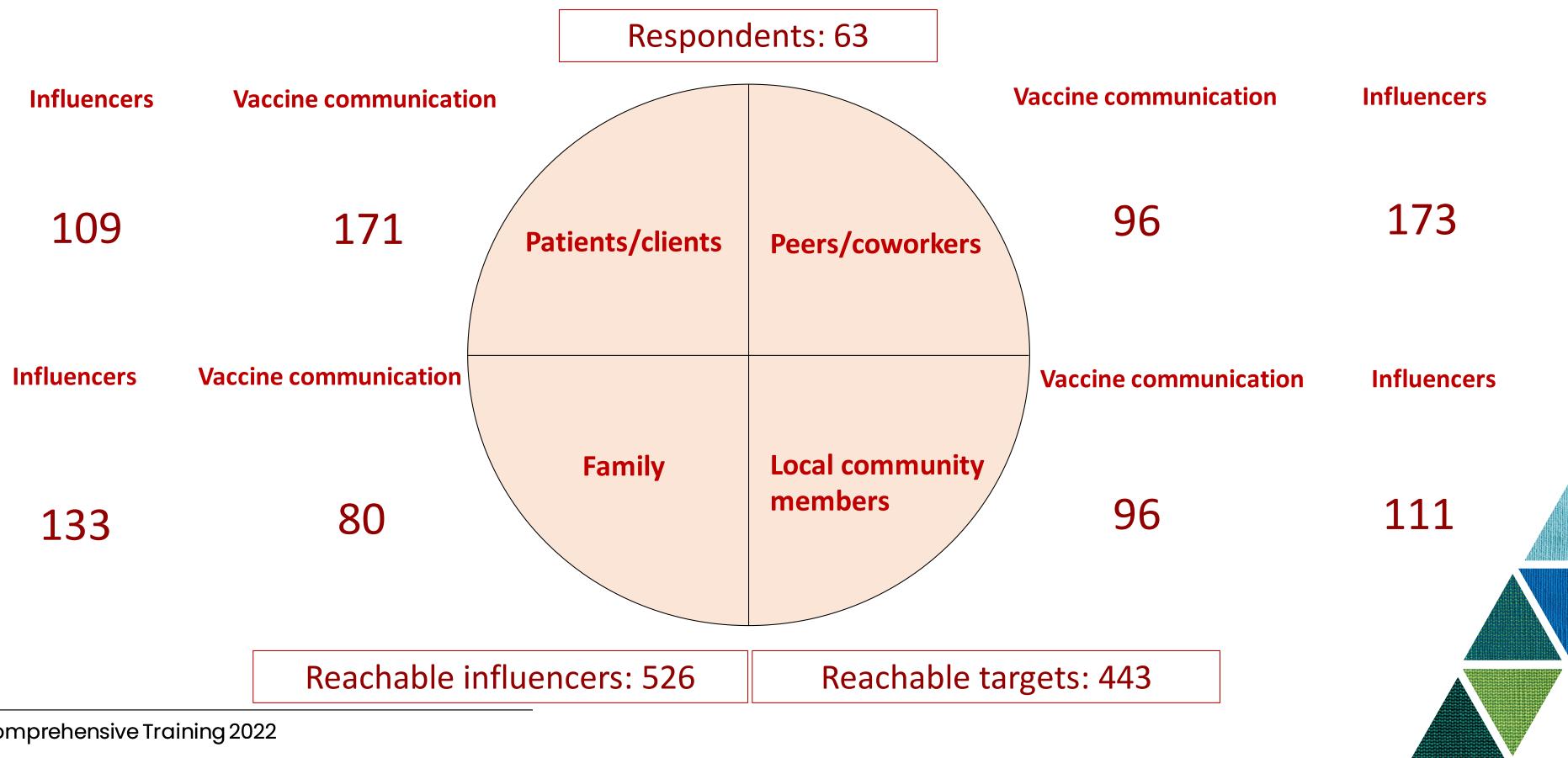


SUPPORT NETWORK



PERSONALNETWORK

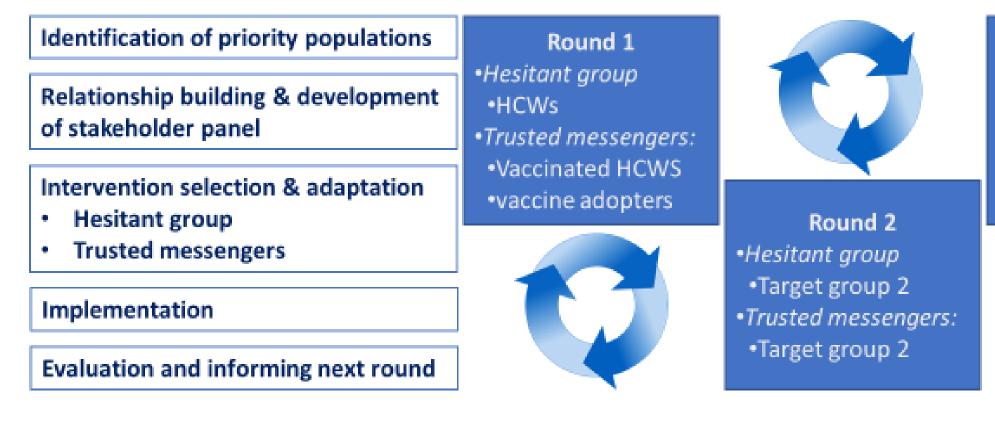
Networks of Trusted messengers



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The Finger Lakes Rural Immunization Initiative (FLRII)



Identification of Trusted Messengers (TMs)

o individuals already receive vaccine, healthcare providers, and community opinion leaders

- Engage TMs to influence their social networks
 - CAPABILITY: Educational packages for Hesitant group
 - **CONFIDENCE:** Trust-building and motivation
 - CONVENIENCE: Facilitate access to vaccine in rural areas
 - CONTAGION: Social media and communication networks

Round 3 Hesitant group Target group 3 Trusted messengers: Target group 3





Theater for Vaccine Hesitancy



https://youtu.be/ZYfUdnuVO8o

https://www.urmc.rochester.edu/community-health/communityprograms/finger-lakes-regional-immunization-initiative.aspx The purpose of the "Changing the Conversation" workshop is to train individuals to have more productive conversations with vaccine hesitant patients

using a combination of the science of motivation and improvisational theater.

Slide courtesy of John Cullen, PhD



The Science of Motivation

Self Determination Theory (SDT)

A theory of motivation that helps to explain human behavior within a framework of psychological needs satisfaction.

HOW TO SUPPORT THE THREE PSYCHOLOGICAL NEEDS OF SDT:

RELATEDNESS:

- Acknowledge & express interest in perspectives, feelings, conflicts
- Empathically respond
- Be respectful & convey caring

AUTONOMY:

- Treat people as responsible agents
- Recognize they have the power to choose within reasonable limitations
- Provide options

COMPETENCE:

- Provide concrete instructions & rationale for recommendations
- Partner with person to problem-solve re: obstacles

MOST IMPORTANTLY:

BELIEVE IN PEOPLE'S INNATE DRIVE TOWARDS GROWTH AND HEALTH.

Do listen, connect and validate Do ask questions, ask permission Do reflect back to them how they describe their emotions.

Don't argue ignore or lecture **Don't** just fire off facts and stats Don't overly focus on perceived offenses or ignore emotions.



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ised on recommendations from the Centers for Disease Control and Prevention (CDC).

Challenging Conversations:

Real-world statements from health care workers with concerns about the COVID vaccine and potential SDT based responses.

- When they first rolled out, I had a feeling of hope that the vaccines were a solution to the pandemic; we finally had an answer. Now it feels as if the vaccines were rushed and they haven't seemed to work
- Wow, that must have felt like a lot to process at that time. I think a lot of people who initially felt like the vaccine came out very quickly had questions about the safety process. Luckily there were people working on vaccines to this type of virus for years. Would you like to know more?
- There are emails encouraging people to get the vaccine, but questions about safety and efficacy are not being answered. Questions get shut down.
- I'm so sorry that you feel that your questions have been shut down; I imagine that is incredibly frustrating. I wonder if I could help answer your questions now? Is there something specific you are concerned about with the vaccines?



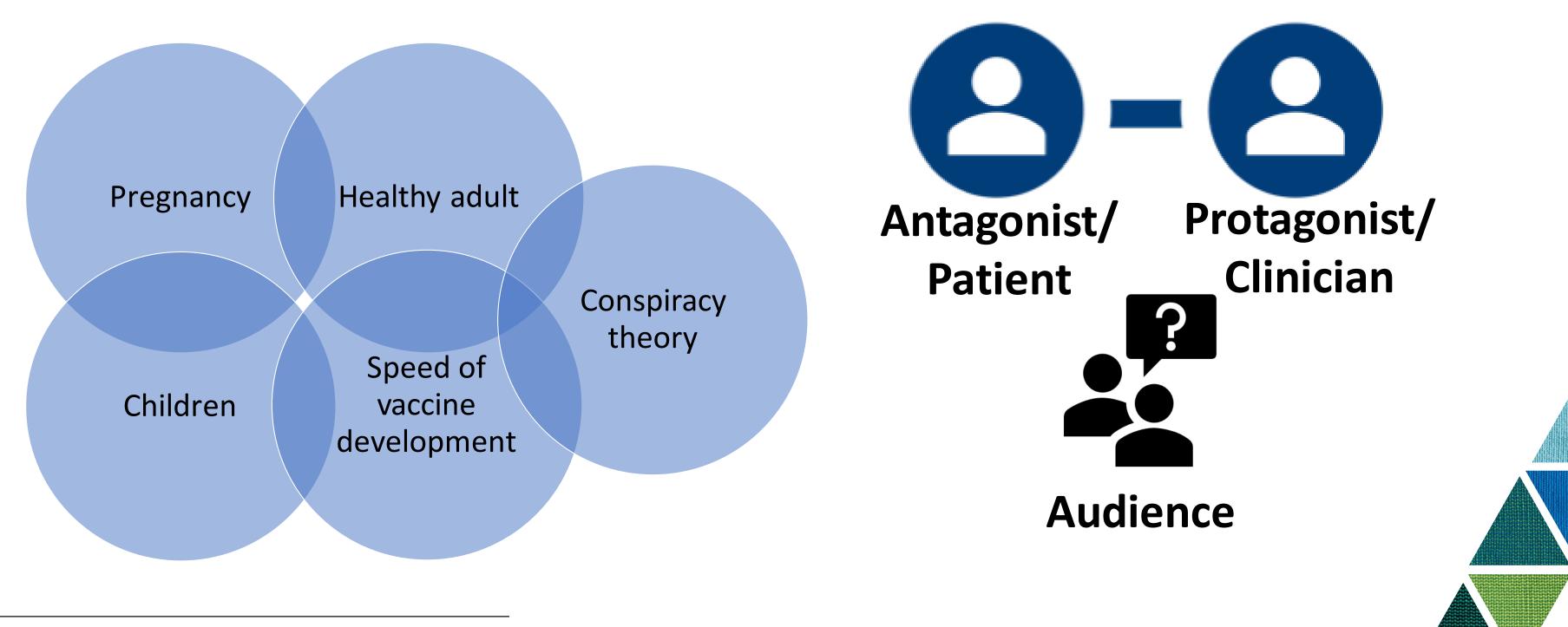
 Problem-solving technique in which an unresolved scene of difficult conversation is presented

 Theatrical improvisation to coach professionals in effective communication

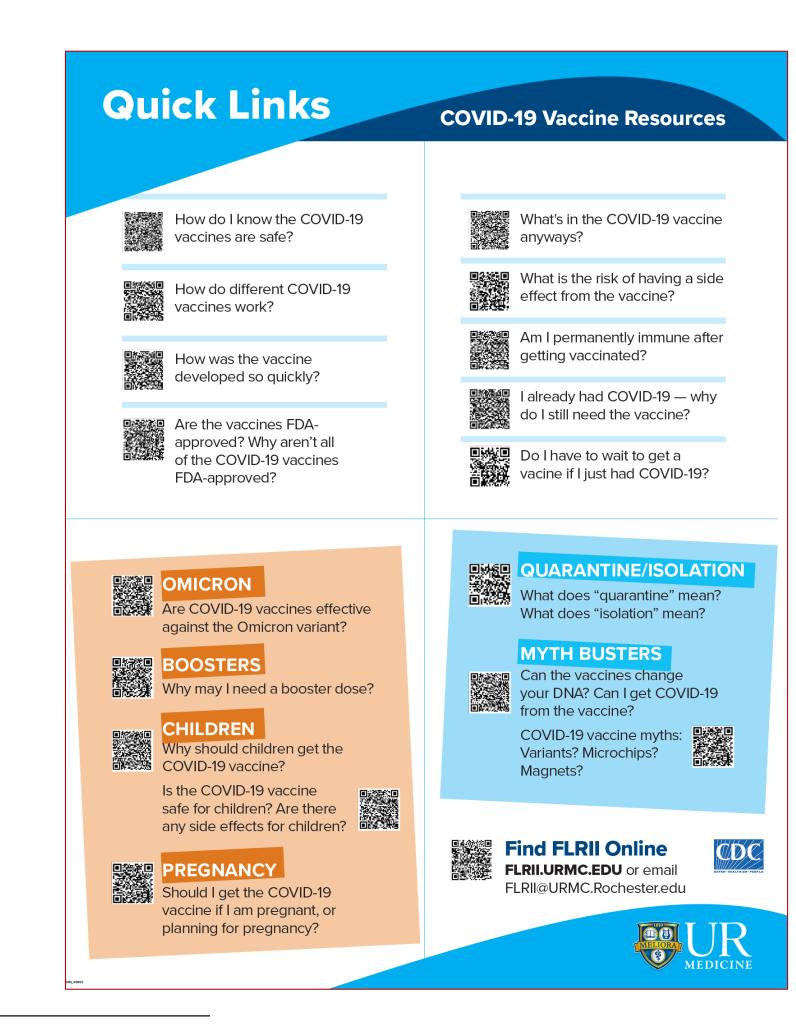
 Forum Theatre based on Theatre of the Oppressed, use of theater as a tool for social change and conflict resolution

Forum Theatre

Using Forum Theatre, we incorporate a short play dramatizing real conversations between clinicians and vaccine hesitant patients



Links to COVID-19 FAQs and Resources





The impact

- •16 workshops involving 133 'trusted messengers' (not considering online videos)
- Healthcare professionals and community-based trusted messengers
- Trusted messengers feel more confident
- They talk to more people about vaccination:
 - Talked to ~550 patients and clients about getting COVID-19 vaccine
 - Shared workshop materials with ~250 colleagues
 - Shared the skills and strategies discussed in the workshops with ~300 colleagues





Truths from the field

- Social influence is an important mechanism for health behavior change
- Patients listen to their doctors about vaccines
- People talk and share information!
- Effective empowerment of trusted messengers: Capability, Confidence, Convenience, Contagion
- Theatre for Vaccine hesitancy is potentially effective in addressing capability and confidence
- The impact is beyond immediate participants (Social influence at work!)







- Go beyond individual behavior to assess changes in population outcomes and the community environment
 - oAccess/Equity
 - oSocial norms
 - oCultural perspectives
 - oCommunity leader engagement
 - olnstitutions
 - oPublic policy





Best practices

3 Best Practices or Tools/Guidance Used by Practitioners

- Take time to understand the community. Don't assume. 1.
- 2. Listen to different voices in the community not just those that are easy to access or hold leadership positions.
- 3. Provide compensation and support to community organizations and members that you are partnering with.



Actions You Can Take to Address Community Interventions



Mountain Bike

- Take advantage of existing community gatherings to share information, encourage immunization, and offer vaccination services
- Create Community Action Teams with volunteers to plan and lead localized efforts
- Advocate for policies that encourage vaccination and improve equity Sturdy 4x4
- Host community-wide events, performances, and trainings to reach different community segments
- Engage community leaders, influencers, trusted messengers as ambassadors
- Social norming campaigns through local and social media

Luxury Vehicle

- Regularly monitor community perspectives, norms, and confidence levels • Coordinate efforts across community organizations and institutions • Implement and evaluate multiple community-level strategies to build vaccination norms
- and demand

Bigger vehicle = larger toolbox of interventions, more ways of promoting vaccine demand and mitigating the infodemic

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- <u>https://www.ajtmh.org/view/journals/tpmd/105/4/article-p879.xml</u>
- <u>https://www.thecommunityguide.org/findings/vaccination-programs-</u> community-based-interventions-implemented-combination
- <u>https://www.ncbi.nlm.nih.gov/books/NBK206935/</u>

