



Environmental Scan Report

*Deliverable of the Project: Technical Assistance To Improve Vaccine Access,
Education, and Outreach Through Faith-Based Partnerships, Centers for
Disease Control and Prevention, NOA No.: 5nu38ot000306-05-00*



Introduction

Faith-based organizations (FBOs) have been critical partners to public health organizations for decades. As local health departments (LHDs) work to increase vaccination more equitably, partnerships with FBOs are key to reaching many communities.

FBOs are trusted voices in their communities and often engage in work to improve community health. Many FBOs are also strong advocates for healthcare services and work to address the social determinants of health ([Communities in Action: Pathways to Health Equity--Faith-Based Organizations](#)).

Partnerships between faith-based organizations and public health agencies have existed for decades, dating from the national U.S. Health and Human Services Project of the General Baptist State Convention of North Carolina, which was established in 1978¹, to the more recent initiative by the National Black Church Initiative ([NBCI](#)), a coalition of 150,000 Black/African-American and Hispanic/Latino churches in 2021 to work with the Centers for Disease Control and Prevention (CDC) to increase COVID-19 vaccination rates within Black/African-American and Hispanic/Latino communities.

LHDs can build strong partnerships with FBOs to increase vaccination by utilizing the principles of co-creation, centering the community perspective, and planning for sustainability, among other things.

Report Background

YB Consultants, LLC (YBC) was awarded a contract with the National Association of County and City Health Officials (NACCHO) to provide technical assistance from April 1-September 30, 2024, to six LHDs to support efforts to improve vaccine access, education, and outreach through faith-based partnerships. As part of this work, YBC conducted a comprehensive scan of ten LHDs' websites and social media accounts (including six LHDs designated by NACCHO and four additional LHDs selected by YBC). YBC also performed an internet search of ten FBOs. These organizations represented diverse ecumenical groups, including Christian denominations, historically Black/African-American churches, Hispanic/Latino community churches, and Muslim organizations.

These environmental scans aimed to identify existing partnerships, best practices, and lessons learned; assess how LHDs and FBOs collaborate to improve vaccine uptake; and highlight successful strategies, challenges, and outcomes from these collaborations.

Additionally, YBC conducted a limited literature review to supplement the environmental scan with additional best practices, successes, and challenges related to improving vaccine access, education, outreach, and uptake through faith-based partnerships.

The findings in these two reports will help identify themes for training activities and educational opportunities throughout the project period and inform the final report for the project.

Environmental Scan

Review of LHDs: Vaccine-Related Activities

Methodology

The purpose of the review of LHD sites was to find activities that LHDs have conducted to promote vaccine confidence and uptake and to document best practices and lessons learned from these activities.

The scan of ten LHDs was divided into a scan of the six designated* LHDs for this current project and four non-designated LHDs looking for:

- information on the website: vaccine-related services provided, vaccine-related information, and
- information on social media pages: vaccine-related posts.

*Designated - Local Health Department sites funded through the NACCHO funded opportunity *Improving Vaccine Access, Education, and Outreach Through Faith-Based Partnerships*, CDC Supported: 5 NU50CK000587-03-00

Designated LHDs

Between April 1-May 5, 2024, YBC reviewed the websites and social media pages of the following six designated LHD sites:

- Monongalia County (West Virginia),
- Rockland County (New York),
- Trumbull County (Ohio),
- Durham County (North Carolina),
- Impact Ulysess (Grant County, Kansas), and
- Mobile County (Alabama).

The scan included, but was not limited to, finding examples of vaccine-related community events, examples of messaging, educational opportunities, and vaccine awareness activities. Content related to vaccines included but was not limited to:

- posts regarding vaccine-preventable diseases/vaccines, and
- vaccine recommendations/schedules.

Non-Designated LHDs

The websites and social media pages of the following four non-designated LHDs were similarly reviewed to ascertain the depth and breadth of immunization-related information posted:

- Multnomah County Health Department (Oregon) and its Racial and Ethnic Approaches to Community Health (REACH) immunization program,
- Lowell Community Health Center (Massachusetts) and its REACH program,
- Worcester County (Maryland), and
- Madison County (Illinois).

Criteria for selection included geography, size representative of the six designated LHD sites, and also LHDs with a dedicated REACH immunization program. [REACH](#) is a national CDC-funded program to reduce racial and ethnic health disparities. Funding through this program allows some recipients to implement strategies to increase awareness, confidence, demand, and access to flu, COVID-19, and other routinely recommended adult vaccines.

Findings

Designated LHDs: Takeaways from a review of six designated LHD websites and social media sites

All six designated LHDs promote vaccination on their websites and social media platforms. The sites varied in how much vaccine-related information is presented:

- Some sites included vaccine-related information more prominently on the entry webpage.
- Some focused on educational opportunities for the public regarding vaccine recommendations and vaccine-preventable diseases.
- Others focused on informing the public where to find vaccines and when vaccine clinics were occurring.

LHD sites relay all public health information; hence, vaccine-related information is one of many presented.

Constraints for the LHD may include:

- vaccines are only one aspect of the LHD public health services/activities. Competing priorities may limit the space allotted for immunization-related messaging and information on program websites and social media platforms.
- the political climate and receptivity of immunization-related messaging of the target communities.
- staffing and budgetary constraints of the LHD to consistently include vaccine-related posts.
- limited understanding of the public's use of the website and social media platforms and the information the public may seek on these platforms.

Non-Designated LHDs: Takeaways from a review of four non-designated LHD websites and social media sites

- The four non-designated LHD websites are similar to the six NACCHO-funded LHD sites in that they focus on all public health issues, and not only immunization.
- The REACH-focused websites of [Multnomah](#) County and of [Lowell](#) Community Health Center are good examples of how a web page/microsite can be created and dedicated to vaccines and vaccine-related information if funding/capacity allows. The REACH-focused websites:
 - are concise and easy to navigate,
 - highlight vaccines on their front pages,
 - include vaccine education resources: vaccine recommendations, and information about the diseases,
 - include vaccine campaign materials ([REACH Multnomah Flu Vaccine Campaign](#)) that are downloadable for use by their partners,
 - provide updates on the COVID-19 pandemic and COVID-19 vaccination,
 - provide information on upcoming community events,
 - provide examples of including information in different languages—particularly when there is dedicated funding and capacity, and
 - provide clear information on obtaining vaccines, including details of upcoming clinics, clinic hours and the cost of vaccines.

Opportunities

The environmental scan revealed opportunities to enhance the presence of immunization-related information across all LHD websites and LHD social media platforms. It's important to acknowledge that LHDs have competing priorities as they attempt to deliver trustworthy, credible public health information to their partners and the community. Information on immunization is only a part of their overall health communication strategy.

Suggested Improvements

If funding and capacity allow (staffing, etc.), then ideally, we recommend the following strategies to improve vaccine-related websites/webpages:

1. Website design

Ensure mobile responsiveness for access on all devices.

2. Interactive Features

- Include online appointment scheduling and service request forms.
- Integrate chatbots or live chat for real-time assistance.

3. Regular Updates

- Consistent vaccine-related monthly posting across all social media channels is recommended.
- Consider a monthly newsletter with articles, health tips, preventive care, and wellness advice.

4. Content

- Repurpose the same post/message theme for the website and sharing across all social media platforms.
- Maintain immunization information on the front page (banner message).
- Share information on the recommended vaccine schedules for families (all ages).
- Share information about vaccine-preventable diseases, with emphasis on diseases that are seasonal.
- Provide links to other sites with trustworthy and reputable content, such as the [CDC](#), [Vaccinate Your Family](#), [Families Fighting Flu](#), and more.

5. Multilingual Support

- Provide information in multiple languages to cater to diverse populations.
- Include easy-to-find language selection options.

6. Search Functionality

- Implement a robust search tool to help users quickly find relevant information.

7. Resource Directory

- Develop a comprehensive directory of local health resources, including clinics, pharmacies, and support groups.

8. Data and Transparency

- Publish health data and reports to promote transparency and community trust.
- Provide dashboards for tracking public health metrics and trends.

9. Feedback Mechanism

- Implement a feedback form to gather user opinions and improve services.

Social Media Improvements

1. Consistent Branding

- Ensure consistency in visual branding and messaging across all platforms.
- Use a recognizable logo and color scheme.

2. Regular Posting Schedule

- Develop a content calendar for regular updates and posts.
- Determine and utilize social media engines best used by the community of focus, e.g., What's App, Instagram, Facebook, Twitter, or others.

3. Interactive Engagement

- Host Q&A sessions, webinars, and virtual town halls to interact with the community.
- Encourage community participation through polls, surveys, and contests.

4. Timely Responses

- Monitor social media channels and promptly respond to inquiries and comments to provide accurate health information.

5. Collaborative Campaigns

- Partner with local organizations, influencers, and community leaders for joint campaigns.
- Promote events, health fairs, and initiatives through collaborative efforts.

6. Analytics and Improvement

- Regularly analyze engagement metrics to understand what content resonates most.
- Adjust strategies based on data insights to continuously improve outreach and engagement.

Sustainability: Even as immunization program capacity is potentially impacted by reduced funding, LHDs can continue to strive to identify opportunities to promote vaccination among their communities via communication channels including web and social media content. Best practices for this include:

- For organizations that support LHDs, including NACCHO, to continue to provide technical assistance on a broader scale to LHDs to help promote vaccine confidence—particularly support with developing messaging (for example: enhance skills in designing and implementing listening sessions, and focus groups) and communication products for their communities.
- Utilizing other communication channels to promote vaccine confidence, such as partnering with FBOs that already have existing channels that they use to reach their communities (e.g. newsletters, social media channels, weekly meetings, webinars, etc).
- For organizations that support LHDs to provide opportunities for peer-sharing, such as:
 - development of a resource hub to include a repository of tools, campaigns, and stories developed by LHDs to be shared with other LHDs that will assist them as they develop strategies to promote vaccine confidence in their own communities.
 - opportunities for LHDs to meet with one another virtually at regular intervals to share best practices, successes and challenges and learn from one another (eg. affinity groups, based on community demographics, or types of partners, e.g. faith-based organizations, corporate entities)
- Foster and maintain collaborations with external partners, including corporate entities, private industry, and school systems to assist in providing some of the tangible communication needs of the LHD.

Review of Faith-Based Organizations (FBOs): Vaccine-Related Activities

Methodology

Between April 1-May 5, 2024, an internet search of 10 faith-based organizations was conducted. The purpose was to understand best practices,

lessons learned, successes, and challenges experienced by FBOs who have partnered with LHDs and other community health organizations to deliver vaccines and provide health care. Sources of information included newspaper articles and posts on social media with publication dates from 2019 to the present.

Below is a sampling of faith-based organizations across the country, including the six counties/states where the six NACCHO LHDs designated for this project sit. These six counties/states were selected to seek out existing and also potential new opportunities for collaboration between LHDs and FBOs.

The information is organized as follows:

- Vaccine-related activities at places of worship in counties of the six funded NACCHO sites
- Additional examples of places of worship partnering with county/local health agencies (health departments, hospital systems)

Findings

Vaccine-related activities at places of worship in counties of 6 funded NACCHO sites (Trumbull County, OH; Durham County, NC; Monongalia County, WV; Mobile County, AL; Rockland County, NY; Grant County, KS)

Trumbull County Combined Health District (TCCHD), Ohio

Numerous FBOs partnered with TCCHD to host vaccine clinics throughout the pandemic by setting up vaccine events at churches and places of worship. Numerous faith-based organizations held COVID-19 [vaccine events](#) between 2021-2022.

Strengths identified through these partnerships:

- Addressing access issues by providing clinics during the evening hours to address access for community members who work during the day.
- Walk-in clinics with no appointments necessary to remove barriers to setting appointments.
- Incentives, including gift cards of up to \$100, were provided. [Warren church offers vaccine clinic, health district offers \\$100 - WFMJ.com](#) [News weather sports for Youngstown-Warren Ohio](#). Some places of worship combined COVID-19 vaccine clinics with food giveaways to meet all the needs of the community, not only vaccines. [Warren church holding COVID-19 vaccine clinic and food giveaway](#).

Durham County, North Carolina

In Durham County, a pre-existing partnership, called the [Durham County Health Ministry Network](#), welcomes faith-based organizations in Durham County that desire to partner with the Durham County Department of Public Health to impact *“the health of congregation members through resources and planned efforts and to integrate faith and health.”*

Strengths of these partnerships:

- Places of worship affiliated with the network receive vaccine-related capacity building resources, tools, assistance with planning vaccine events, and have access to handy communication aids such as worship bulletin inserts, as well as training, and webinars.
- This network allowed multiple FBOs of differing denominations to collaborate and provide COVID-19 vaccines to their communities who expressed feeling “overlooked” at the time. [8 Durham churches team up to vaccinate 500 parishioners neighbors](#).
- Places of worship utilized their platforms as trusted pillars in the community to host forums to dispel COVID-19 vaccine myths earlier in the pandemic. [Durham church holds forum about to dispel COVID-19 vaccine myths – CBS17.com](#).

Monongalia County, West Virginia

In Monongalia County, places of worship partnered with the local health department to host COVID-19 vaccine clinics beginning in 2021.

Strengths of these partnerships:

- The ability of FBOs to meet the needs of their communities at varying times during the pandemic. In late 2022, when community health workers noted that COVID-19 cases were still ongoing despite a reduction in media attention to it, the Partnership of African American Churches (PAAC) COVID-19 Surge Team hosted a free COVID vaccine and testing [clinic](#) in Elkins, West Virginia.
- Combining vaccine events with other health-related activities in order to bring needed health care into underserved communities. An example of this was providing adult vaccines and blood screenings for chronic medical conditions at a church event. [MCHD will provide blood screenings, adult vaccines at Community Health Fair](#).

Rockland County, New York

Strengths noted amongst places of worship in Rockland County:

- Longstanding history of promoting vaccine confidence and hosting vaccine events and clinics. These existing capacities and interest in promoting vaccines by FBOs allow for easier galvanizing in times of crisis. Examples include:
 - the Christ Episcopal Church in Suffern, in collaboration with county health officials, offered measles vaccination during a [measles outbreak](#) in 2019.
 - A respected leader in the Orthodox Jewish Community in Brooklyn, NY, was instrumental in promoting the polio vaccine in his community in 2022. [Williamburg's Hasidic Community Gets Vaccinated for Polio](#). Likewise, the same article shares how the Met Council on Jewish Poverty, the country's largest Jewish charity, set up COVID-19 testing and vaccination sites across the city and ran ads in Yiddish, Russian, and Hebrew.
 - A French-speaking Baptist Church in Rockland County was one of the earliest venues for providing COVID-19 vaccine in 2021 to help improve vaccination rates in low vaccine coverage areas: [Church gives COVID shots in Spring Valley where vaccine rates are low](#).

Mobile County, Alabama

- Numerous places of worship in Mobile County, Alabama, partnered with local health agencies to provide COVID-19 vaccines throughout the pandemic: <https://mchd.org/2022/01/>
- Places of worship were able to help decrease COVID-19 vaccination disparities in African American and low-income areas where vaccine distribution rates to minority communities were [lacking](#) in 2021 by setting up vaccine clinics at the church. Per the cited [source](#), at that time, the COVID-19 vaccine coverage rates were 55% for white Alabamians state wide and 12% for Black Alabamians, even though Blacks comprise 27% of the State's population. Strengths of these relationships:
 - Improved access to vaccinations for older adults who lacked transportation to vaccine clinic sites in the city.

- o Trust that the congregation had in pastoral leadership who organized the event at the local [church](#) in February 2021 despite a history of “distrust which still permeates among Black Alabamians over a history of racist and abusive medical practices underscored by the 40-year government-led Tuskegee syphilis study.”
- o Collaboration with public health entities, satellite vaccination clinics continue to be held routinely at places of worship churches in partnership with the Mobile County Health Department.

Impact Ulysses, Grant County, Kansas

Places of worship in Grant County throughout the COVID-19 pandemic partnered with public health entities to bring vaccines to the community.

Strengths included:

- Multi-organization collaboration between a place of worship, a local health department, and a health entity.
- Use of trusted messengers, such as Black nurses, to administer vaccines in a predominantly African-American community in Sedgwick County. This was noted as a vital way to provide vaccines in a trusted manner to this particular population. The Wichita Black Nurses Association partnered with the local health department to provide COVID-19 vaccines at a [local church](#) in 2021.

Additional examples of places of worship partnering with county/local health agencies (health departments, hospital systems)

Miami, Florida

[Jackson Health System](#) partnered with 25 places of worship (churches, mosques, and synagogues) to vaccinate 65-year-old and older adults, mostly people of color, with the COVID-19 vaccine. The selected church has a history of partnering with the health system for health fairs and back-to-school immunizations.

Strengths of this partnership:

- A hospital system partnering with FBOs to help decrease vaccine inequities in harder to reach populations. Addressing the access needs of the population, by choosing a recurring specific day of the week to host vaccine clinics and organizing multiple vaccination sites throughout the county.

- Realizing that pastoral influence and involvement were important to the members; hence the contact list for the faith community was created by the pastor. Pre-registration was essential as this process allowed the partners' congregations to be prioritized. The faith leaders aided by creating vaccine appointments for members.
- Addressing the specific access needs of the older adult population through direct outreach to families of those 65 years and older and text messaging to older adults in Jackson to improve vaccine uptake.

Chatham County, Georgia

In Chatham County, a multi-organization [collaboration](#) between places of worship, a health system, and the local health department, facilitated a total of 130 people receiving COVID-19 vaccinations at clinics held at African-American/Black and Hispanic/Latino churches.

Strengths of this partnership:

- Involvement of church leadership in the planning and execution of the vaccine events.
- Church leaders set an example for others by getting vaccinated first.
- Understanding by the health system that vaccine hesitancy exists. The health system had experience with addressing vaccine hesitancy in its own staff. This helped the health system to engage the places of worship differently, by first utilizing surveys to understand the basis of church members' hesitancy and then arming the pastoral leaders with science-based information the pastoral leaders could then use to combat some of these hesitancy concerns.
- Because the health system did not have their own vaccine supply at the time, they were still able to provide vaccines through their partnership with the health department.
 - o Churches in partnership with the local hospital and the Chatham County Health Department, joined in the COVID-19 fight by vaccinating the community. Church members throughout the county received vaccination, including the staff and advisory groups.

District of Columbia

The local health department of Washington DC collaborated with FBOs, in a [pilot](#) program to provide COVID-19 education and vaccines to their communities. Strengths of this partnership:

- LHD collaborating with FBOs to promote COVID-19 vaccine through pre-existing partnerships with the FBOs
- Using a variety of communication avenues to encourage clinic attendance, including radio and social media influencers
- recognizing the need for a pilot program prior to instituting a wider based program, *"D.C. Health Director Dr. LaQuandra Nesbitt said the goal of the pilot, rather than open a mass vaccination site in the District, is to "see if we can make it work with some limited number of faith-based institutions who have the ability to have operations supported on-site with a health care provider who has also been providing vaccinations in their clinical operations."*
- utilizing FBOs with the operational capacity to host a vaccination clinic event - and also the presence of health care providers who were already versed in giving vaccines.
- Reducing any access issues by bringing the vaccine to the church site, realizing that some members in the African-American community may not go to scheduling websites, utilize call centers, etc not because of an inability to use technology, but rather the perception that the process of scheduling was difficult.

Atlanta, Georgia

Churches in the Atlanta area [teamed](#) up with Walgreens for a three-day vaccine clinic to provide the COVID-19 vaccine to underserved communities of color.

Strengths of this partnership:

- Walgreens' expertise with immunization was not a new one and hence the ability to quickly roll out vaccine events.
- Walgreens pharmacy's initiative was a good-faith effort to educate those who might be hesitant, suspicious, or fearful about the vaccine by having trained pharmacists available at vaccine events.
- Two out of the three churches who partnered with Walgreens were of different denominations (Baptist and A.M. E) - this meant cross-collaboration between denominations was possible. Vaccines were offered to underserved communities of color to help decrease vaccine coverage disparities.
- Ridesharing with Uber was provided, allowing free rides to and from the sites to help address access issues.
- Access issues were also addressed by policies at these clinics such as: no appointment necessary, no need to show identification and, no

need to show proof of insurance, or other information in order to receive vaccines.

- Staff scheduled follow-up appointments for patients after they received the first vaccine dose to help ensure participants returned.

Dekalb County, Georgia

New Birth Missionary Baptist Church, located in Dekalb County, Georgia, in an innovative collaboration between the church and private industry. It opened a health clinic on one of the church campuses to provide health services to the underserved and address health disparities.

Strengths of this partnership:

- Helping to bridge the gap between those who need care and the significant barriers to quality healthcare, providing medical care, preventative health services and multi-specialty medical clinics (primary care, urgent care, disease prevention, and podiatric medicine) in South DeKalb County.
- Collaboration between a FBO and private and public entities.
- The church has already been a pillar in the community known for providing annual blood drives, wide-scale medical testing and drive-thru COVID-19 vaccination events at the church.

Findings: Takeaways of Review of Faith-Based Organizations as Vaccination Sites or providing vaccine-related information and activities

- Historically, places of worship have served as sites to host vaccine events and as spaces to provide vaccine-related education by trusted leaders to their congregations and communities.
- During the COVID-19 pandemic, we saw an even greater number of these opportunities, where faith-based organizations, on their own and some in partnership with other community-based organizations, found innovative ways to educate their communities about the disease, dispel myths about the vaccine, and, in some instances, serve as COVID-19 vaccination sites.
- Though the majority of these practices occurred as a result of the urgency of the COVID-19 pandemic, and the need for many institutions to develop innovative ways to get vaccines into the arms of the public

safely in the context of the pandemic, there are many opportunities here that we can learn from and continue in communities post pandemic to foster vaccine confidence and encourage vaccine uptake.

- Faith-based organizations are viewed as trusted leaders in communities.
- Sustainable partnerships between faith-based organizations and public health agencies, local health departments, other community-based organizations, health systems, pharmacies and more are integral to vaccine promotion, improving vaccine confidence and uptake in communities. Opportunities for ongoing and new partnerships with faith-based organizations in specific counties/states can be located using the CDC's Tool, the [Vaccine Activity Planner](#). The planner may be utilized to discover nearby places of worship and layer them with vaccine providers in the same area while allowing for search criteria by income level, race, ethnicity, and more, addressing the social determinants of health and common barriers to vaccination in underserved communities.

References:

1. Partnerships Between Public Health Agencies and Faith Communities
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