

## **INCREASING VACCINATIONS THROUGH TRUSTED MESSENGERS**

A resource guide to recruit and train trusted messengers prepared by the National Alliance for Hispanic Health for the Vacunas para todos: National Hispanic Network





## BACKGROUND

The Partnering for Vaccine Equity (P4VE) is a CDC program that was launched in 2020 with the goal of increasing equity in adult vaccination. The National Alliance for Hispanic Health is one of the grantees and is focused on increasing vaccine equity particularly in the Hispanic Community. The program's methods include developing local partnerships, organizing vaccine events, and using a variety of communication strategies including social media. The efforts of the *Vacunas* network and the extraordinary work of trusted messengers made the difference in access for Hispanic communities and as a result the 2021–2023 vaccination campaigns delivered close to a million vaccinations and provided information to tens of millions.

An integral part of effective communication around COVID-19 outreach involves the use of trusted messengers and spokespersons who can communicate effectively to their communities and increase COVID-19 and influenza vaccination rates. This brief guide is designed to be an overview to help *Vacunas para todos*: National Hispanic Network partners recruit and train trusted messengers.

Hispanic adults vaccinated against the flu

**32.3%**

in 2010-2011

**38.6%**

in 2020-2021

Non-Hispanic White adults vaccinated against the flu

**43.2%**

in 2010-2011

**55.5%**

in 2020-2021

For decades Hispanic adult flu vaccination rates were the lowest among all racial and ethnic groups. As indicated **in this chart** from the CDC, in 2010–2011, only 32.3% of Hispanic adults were vaccinated against the flu compared to 43.2% of non-Hispanic White adults. In 2020–2021 the disparity continued with 38.6% of Hispanic adults obtaining flu vaccinations compared to 55.5% of non-Hispanic White adults.

During much of the COVID-19 pandemic, COVID-19 vaccinations for Hispanics lagged behind vaccination rates for non-Hispanic White adults. However, by January 2022 the disparity for initial COVID-19 shots was eliminated, with the percentage of Hispanics receiving at least one dose approaching the percentage of non-Hispanic White persons, as seen in **this chart** from the Kaiser Family Foundation. As of February 25, 2023 the **CDC estimated** that 88% of Hispanic adults have received at least one dose and 83% have received the primary series, which is similar to the rates for non-Hispanic white adults.

## Some Key Points

1

There has been a consistent disparity in **flu vaccination** with 38.6% of Hispanic adults getting vaccinated compared to 55.5% of non-Hispanic White adults.

2

While community-based efforts effectively reduced disparities in COVID-19 vaccination for Hispanics, State data show that disparities continued in getting booster shots. Experience with both flu and COVID-19 vaccination has shown that even in geographic areas with high vaccination rates there are areas that remain underserved.

While the percentage of Hispanic persons obtaining primary COVID-19 shots has improved, fewer Hispanics have kept up-to-date on their COVID-19 vaccines. With the introduction of the bivalent booster in September 2022 and the CDC's updated guidelines in April 2023, all adults need at least one bivalent dose to be considered up-to-date and protected against the more recent variants. As of Feb 25, 2023, the **CDC estimated** that only 27% of Hispanic adults had received a bivalent booster compared to 39% of non-Hispanic white adults.

While the data discussed here is based on national and state data, it is important to know that vaccination rates may vary within local geographic areas, so even if rates are high in a county or zip code, vaccination rates in a particular neighborhood may vary due to factors that affect vaccine equity.

88%

of Hispanic adults have received at least one dose of COVID-19 vaccine

83%

of Hispanic adults have received the primary series

## TRUSTED MESSENGERS ARE ESSENTIAL

When contemplating whether to get vaccinated, people are exposed to an abundance of information from a variety of sources including friends and family and social media. People are also exposed to as much misinformation through the same sources. Unverified information and conflicting stories in the media make some people believe that vaccines cause more harm than good. While misinformation is an issue with vaccines, some people in the community may not get vaccinated due to lack of health insurance and not being aware of their eligibility for low-cost options for a vaccine primary dose or booster shot. Others may not get vaccinated due to logistics issues, such as lack of transportation or time off from work.





Trusted messengers can encourage vaccination by providing accurate information as well as practical assistance to promote vaccination in their communities. People are more likely to trust someone they know or who is a respected member of the community than strangers. When communicating, trusted messengers can share their own personal positive experience with vaccines, empathize, address questions, listen to concerns, and provide accurate information to counter misinformation.

Most recently, for some adults, vaccine fatigue has emerged as a barrier. Some persons have expressed being tired of hearing about the need to get a vaccine and are reluctant to follow suggestions even when it is in their own self-interest. In those instances, trusted messengers may need to frame the interaction in a way which is supportive rather than placing a demand on a person who may feel overwhelmed. Follow-up will be essential to make sure they receive the message at a more appropriate time.

While some trusted messengers are medical experts or healthcare providers, others may be lay health workers or community members who have been trained on the value of vaccines and are able to communicate effectively with members of their communities. Trusted messengers can also reach people in community settings who otherwise would not be reached with positive vaccine messaging and contribute to vaccine equity. These include personalized community efforts such as one-on-one interactions, door to door visits, and at community sites. Trusted messengers can also work at health fairs or vaccination events in the community, create online video testimonials and share their own social media accounts. At work, trusted messengers can incorporate vaccine messaging into regular clinical or other workflows to make vaccine conversations part of the services that an agency provides the community. See the section below called “Strategies for Healthcare Providers” for more suggestions on incorporating vaccine messaging into clinical workflows.

# RECRUITING TRUSTED MESSENGERS

Where can you find local trusted messengers?

## ■ Community health workers

Do you have community health workers at your agency who promote health in your community and could be trained in vaccine messaging? These could be staff who promote health on other topics such as diabetes, healthy eating and active living, cancer prevention, or health care access.

## ■ Leaders from within your agency

Key staff in leadership roles at your agency can be trained in vaccine messaging and could speak at community events or staff meetings about the importance of COVID-19 and flu vaccinations.

## ■ Clients of your agency

Your patients (if you provide healthcare) or clients (if you provide social or community services) who receive vaccines through your efforts may be willing to speak to others about the benefits of vaccination. These messengers directly from the community could be influential with their friends, families, and neighbors.

## ■ Healthcare providers

Clinicians, pharmacists, nurses, and other healthcare providers can become vaccine champions, ensuring that every patient they interact with is offered appropriate vaccines during regular healthcare visits.

## ■ Community leaders

These could include elected officials or faith-based leaders who could speak to their constituents or faith groups about the importance of vaccines. Many people will trust these community leaders by virtue of their office.

## ■ Community members

These could include staff at nonprofits, wellness professionals, or other community members who are interested in improving the health of their community.



## COMPENSATING TRUSTED MESSENGERS/ SPOKESPERSONS

While many of these trusted messengers may volunteer their time or include vaccination messaging as part of their job duties, some agencies may wish to compensate trusted messengers who are recruited from the community. This can be in the form of nominal gift cards or could be certain amounts of money that are offered when trusted messenger tasks are completed. If you would like to explore this in your grant budget, please check with the Alliance.

## TRAINING TRUSTED MESSENGERS/ SPOKESPERSONS

Trusted messengers should first be trained on fundamental information about COVID-19, influenza, adult routine vaccines, and how to respond to misconceptions or misinformation. As these topics are regularly changing and guidance is being constantly updated, the CDC is the best source for up-to-date information regarding vaccination. The goal for trusted messengers is to increase vaccine confidence (the concept that vaccines are safe and beneficial to individuals, families, community, and society) and increase the likelihood the person will get the vaccines they need.



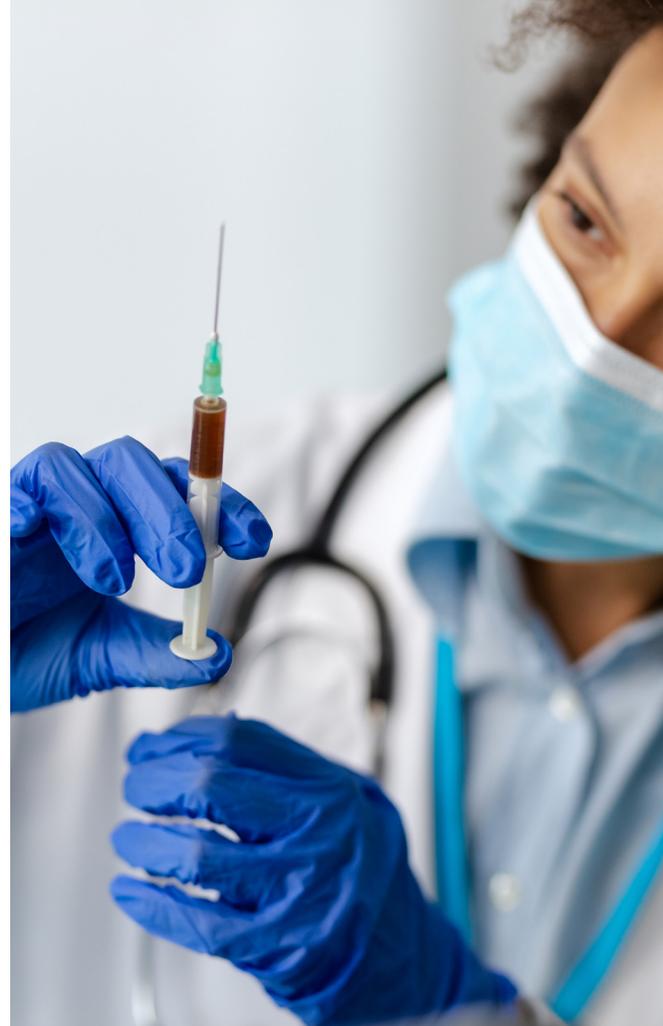
## COVID-19 Vaccines

The current **guidance from the CDC** regarding COVID-19 vaccination states that:

- COVID-19 vaccines are safe and effective.
- COVID-19 vaccines available in the United States are effective at protecting people from getting seriously ill, being hospitalized, and dying. As with other vaccine-preventable diseases, you are best protected from COVID-19 when you stay up to date with the recommended vaccinations, including recommended boosters.

**Staying up to date** with COVID-19 vaccination:

- Everyone aged 6 years and older should get 1 updated Pfizer–BioNTech or Moderna COVID-19 vaccine to be considered up to date.



### Guidelines for children under 6:

**Children aged 6 months–5 years who got the Pfizer–BioNTech COVID-19 vaccine** are up to date if they are:

- ▶ Aged 6 Months–4 years and you get 3 COVID-19 vaccine doses, including at least 1 updated COVID-19 dose.
- ▶ Aged 5 years and you get at least 1 updated COVID-19 vaccine dose.

**Children aged 6 months–5 years who got the Moderna COVID-19 vaccine** are up to date when they get 2 Moderna COVID-19 vaccine doses, including at least 1 updated COVID-19 vaccine dose.

Further messaging from the CDC regarding how to stay up-to-date with COVID-19 vaccination can be found here:

<https://www.cdc.gov/coronavirus/2019-ncov/vaccines/stay-up-to-date.html>



**45 per  
100,000**  
Hispanic or  
Latino persons  
rate of flu  
hospitalization

**38 per  
100,000**  
Non-Hispanic  
White persons  
rate of flu  
hospitalization

Further messaging from the CDC regarding flu vaccination can be found [here](#).

## Flu Vaccines

Similarly for the flu, the **CDC states** that:

- Everyone 6 months of age and older should receive a yearly flu vaccine.
- Flu vaccination is recommended as long as flu viruses are circulating.
- Certain groups, such as older adults, children under 2, persons with certain health conditions, pregnant women, and certain racial and ethnic groups, are at higher risk of flu complications. (For example, according to **CDC data** from 2009 to 2019, Hispanic or Latino persons had a rate of flu hospitalization of 45 per 100,000 compared to 38 per 100,000 for Non-Hispanic whites).
- Certain high-dose flu vaccines are preferred for persons who are **65 and older**.

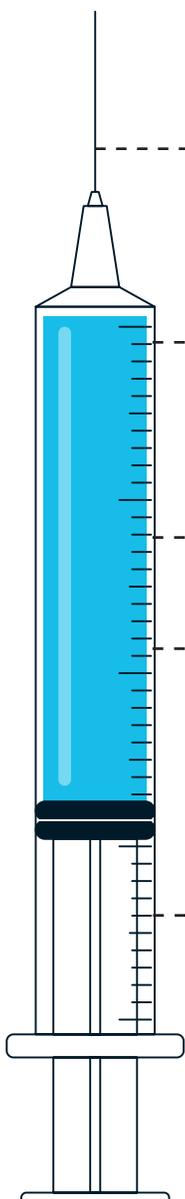
## Adult Routine Vaccines

Starting in October 2022, the *Vacunas para todos* program added adult routine vaccination to the scope of work for trusted messengers working under this grant. Hispanic adults obtain adult routine vaccines at rates far below the rates for non-Hispanic whites. The CDC maintains data on vaccination equity for Pneumococcal, Shingles, and Tdap vaccines at the national, state, and some local levels. You can check to see the rates of immunization for these vaccines in your state or locality (if available) in the [AdultVaxView page](#) on the CDC website.



## Resources to determine eligibility for adult vaccines:

To help people determine what vaccines they may need, the CDC offers an **Adult Vaccine Assessment Tool** that asks a series of questions to determine which vaccines a person may need based on their age and risk factors. The CDC also offers an **app** that healthcare providers and community health workers can download that has a comprehensive chart of adult vaccines and eligibility based on age and risk factors. Vaccinate Your Family, a key organization working nationally to promote a culture of vaccination, maintains a comprehensive list of adult routine vaccines with helpful infographics **here**. The most common adult routine vaccines that we are promoting through the Vacunas project include the following:



Disease or Virus(es)	Vaccine name(s)	Adult age eligibility*
Human Papillomavirus (HPV)	Gardasil-9	Adults through the age of 26 who were not vaccinated as children. In some cases, a healthcare provider may recommend this vaccine through age 45
Tetanus, Diphtheria, Pertussis	Tdap (Adacel® or Boostrix®)	Every 10 years for all adults Pregnant people in the 3rd trimester to confer protection to the fetus/newborn child
Shingles	Shingrix	Adults 50 and over
Pneumococcal	Pneumococcal conjugate vaccines or Pneumococcal polysaccharide vaccine.	Adults 65 and older and 19-64 with certain medical conditions or risk factors
Hepatitis B	HEPLISAV-B, PreHevbrio, Engerix-B, Recombivax HB, or Twinrix	Adults 19-59 as a routine vaccine and those 60+ with certain risk factors who have not previously been vaccinated.

*\*Some persons such as those who are immunocompromised or have other disease-specific risk factors may be eligible for vaccines at other age ranges.*

## COMMUNITY-BASED COMMUNICATION STRATEGIES

Once they are grounded in the basics of flu, COVID-19, and other adult vaccination, trusted messengers need to adapt their messaging based on their audience and consider how their audience responds. For example, your messaging and communication styles will vary depending on whether you are speaking to family, friends, community members, parents of children, patients of your health center, or clients of your nonprofit agency.

The CDC has a guide that includes information on twelve different **Community Vaccine Strategies** to increase vaccinations in communities. Several of these are strategies that community-level trusted messengers can adopt to increase vaccination in their communities include:

### Vaccine Ambassadors

People who have been vaccinated can share their positive stories about vaccination with family, friends, and other community members. This sharing can happen informally or as part of campaigns at health centers, faith-based locations, social media, or other venues. The interaction illustrated in the University of Southern California produced video **Of Reasons and Rumors** demonstrates how Vaccine Ambassadors can have a positive influence about vaccination on those around them, and this **video by America Ferrara** shows an example of sharing personal positive stories about vaccination.

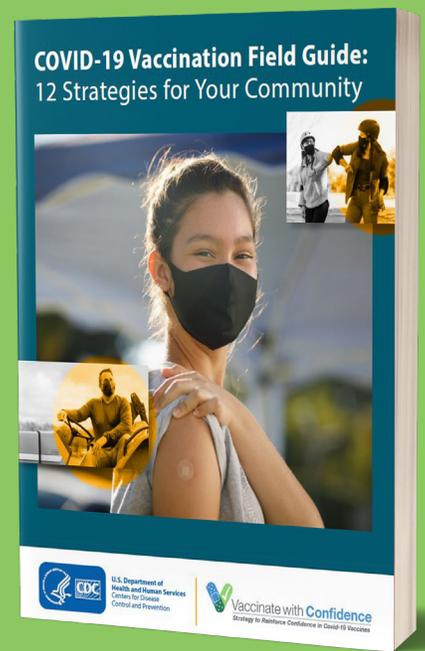


### Messaging by Trusted Messengers

In this strategy, Trusted Messengers are “seen as credible sources of information”, especially persons those that are viewed as experts, such as scientists and physicians. For example, this **video by Dr. Edith Bracho-Sanchez** discusses her personal experience regarding COVID-19 vaccines and the fact that they do not hurt fertility. Some groups of people may not trust scientists and doctors, so trusted messengers can also be trained as Vaccine Ambassadors who can positively influence their community.

### Combating Misconceptions

Misconceptions result from misinformation (information that is false or misleading based on current evidence) and disinformation (false or misleading information that is created and disseminated with malicious intent). Trusted messengers need to use empathy and provide facts and be aware of the latest trends in vaccine misinformation and find messages that may help their audiences. **Project VCTR** is a useful platform that monitors social media and reports on trending posts that promote both positive and negative messages around vaccines in English and Spanish social media and can be a tool to find what misinformation is currently spreading. Another helpful tool regarding misinformation is the US Surgeon General’s **Toolkit for Addressing Health Misinformation** and the CDC page on **Addressing Misinformation**.



## VACCINE PROMOTION STRATEGIES FOR HEALTHCARE PROVIDERS

Many of our partner agencies in the Vacunas para todos network are either healthcare providers or partner closely with healthcare providers to provide COVID-19 vaccinations. The CDC suggests the following three methods that healthcare providers can use to promote vaccinations in their **Community Vaccination** guide:

### 1 Medical Reminders Strategies

Messages can be sent to patients by text message, automated phone calls, or phone calls from outreach staff to promote vaccinations and booster shots. Since healthcare providers have access to patients' medical records, this strategy can be targeted toward those who are unvaccinated, are eligible for booster shots, or to encourage take-up of seasonal flu shots. Reaching pockets of underserved communities even in geographic areas with high vaccination rates.

### 2 Provider Recommendation

This strategy involves healthcare providers recommending vaccinations and including these recommendations as part of the delivery of health care, such as during regular office visits.

### 3 Medical provider vaccine standardization

This involves healthcare providers standardizing how vaccines are presented in the practice, basically making the default option that patients will get vaccinated during visits.

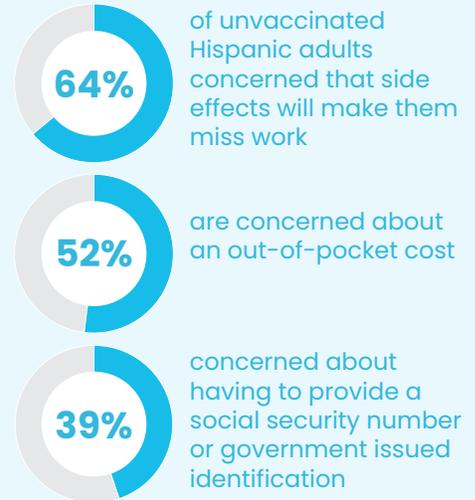
The American Academy of Pediatrics has prepared a **20-minute video** on how to promote COVID-19 vaccination at healthcare practices that demonstrates how to incorporate these concepts.

# HAVING VACCINE CONVERSATIONS

Several resources offer suggestions on how to talk to family and friends such as this [guide by the US Department of Health and Human Services](#), as well as this [guide to Motivational Interviewing](#). An example on how to have these difficult conversations with friends and family is the USC Film School produced video [Team Player](#).

Made to Save, a CDC P4VE grantee, promotes the **TEO method** to facilitate vaccine conversations. This involves:

- T** Building **Trust**. This involves listening to understand, finding shared values, and sharing your own vaccine story.
- E** Expressing **Empathy**. Messengers can acknowledge concerns and ask empathetic questions, while avoiding making assumptions.
- O** Help them find their **Own** reason for getting vaccinated. It is important that the person finds what could motivate them to get vaccinated.



Click for more details about [using the TEO method when talking to friends and family](#).

For many families, access barriers are a greater obstacle to vaccination than vaccine hesitancy. Rather than vaccine hesitancy, issues cited by Hispanics center around a cluster of logistics issues including 64% of unvaccinated Hispanic adults reporting they are very or somewhat concerned that side effects will make them miss work; 52% citing concern about an out-of-pocket cost; and 39% citing concern about having to provide a social security number or government issued identification.

## Common access barriers and potential solutions

Concerned about cost	Share that vaccines are free in many cases*.
Don't know where to go	Ask their pediatrician or family doctor. Call local pharmacies. Visit <a href="#">vaccines.gov</a>
Lack of transportation	Check if their school is offering a vaccination clinic, offer a ride, and let them know that Lyft is providing free rides to vaccine appointments
Undocumented	Share that vaccines are available to anyone regardless of immigration status
Uninsured	Share that vaccines are available for everyone.* Check <a href="#">healthcare.gov</a> to see if they qualify for free or low cost health insurance.
Working extensive hours/Worried about taking time off for side effects	Help find a vaccine site with extended hours, share that side effects are less likely in kids 5-11

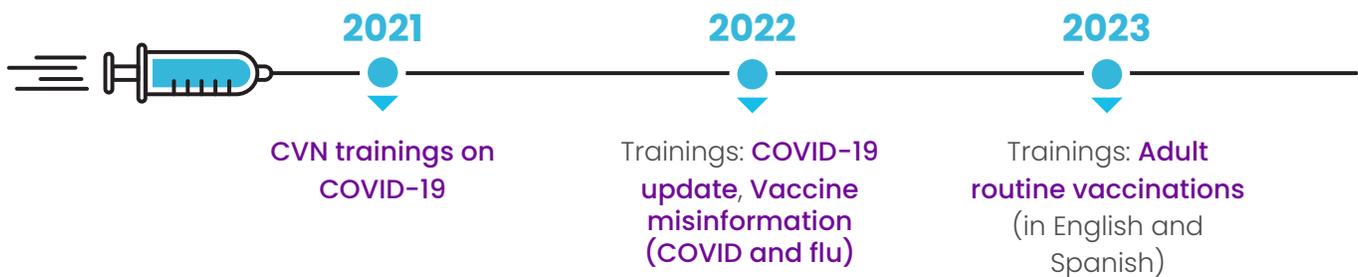
This graphic, from Made to Save, suggests ways that trusted messengers could address some of these common barriers.

(From [Talking to Parents](#))



## TRAINING RESOURCES

Alliance webinars/recordings by year:



### Vaccinate Your Family University

On demand free 5–6 hour training in English or Spanish for community health workers working to promote vaccines.

### Voices for Vaccines Vaccine Quest

Interactive self-paced training in English designed to create vaccine literacy for anyone promoting vaccines in their communities.

### Immunize.org guide to adult vaccines

This is a manual covering all aspects of promoting adult vaccines, including vaccine event logistics, standing orders, documentation, and how clinics and patients can bill and pay for vaccines.

## PAYING FOR VACCINES

Since the Public Health Emergency ended on May 11, 2023, bivalent COVID-19 doses that the federal government has purchased are still available to the public at no charge. However, it is likely that in the fall of 2023, COVID-19 vaccinations will be reformulated, and these new vaccine doses will be made available on the commercial market, similar to other vaccines such as the flu vaccine and other adult routine vaccines. The federal government intends to **develop a bridge program** to continue to facilitate COVID-19 vaccine access for the uninsured.

Given that we are working to promote vaccine equity, we are likely to be promoting vaccines to people that may have difficulty paying for them. How do we address this?



- 1** Check to see if the patient has insurance that covers the specific vaccine needed.
  - a. Most commercial insurance plans cover vaccines** with no cost sharing, and
  - b.** As of January 1, 2023, **people with Medicare** should be able to receive all preventative vaccines with no out of pocket cost.
  - c. People with Medicaid** may be able to receive vaccines at no cost or with low copays. However, this varies by state and the type of eligibility for Medicaid.

- 2** For uninsured persons, there are several ways to obtain vaccines, but these vary depending on your location. You can try:
  - a. Local health departments.** Many states use federal funding from the Section 317 program to fund vaccines for adults and provide free or low-cost vaccines to local health departments. You can conduct an internet search for your local health department to see whether they provide subsidized vaccines for adults and what the cost to the patient would be.
  - b. Federally Qualified Health Centers (FQHCs).** Some FQHCs are able to provide vaccines to patients at low or no-cost. This availability varies due to state policies that govern how much each FQHC is reimbursed for vaccines, and whether the state participates in a vaccine for adults program that distributes vaccines to FQHCs. If you work at a FQHC or partner with a FQHC as a vaccine provider, please get informed on the FQHC's vaccine policies for uninsured persons so that you can refer people for vaccination and can advise them of their potential cost.
  - c. Pharmaceutical Assistance programs:** Most vaccine makers offer patient assistance programs that make vaccines available to persons who meet certain guidelines, such as income or insurance status. In some cases, vaccine providers can get supplies of free vaccines to serve these patients. **Merck's patient assistance program** is one example and one of the Alliance's funded local partners, Puentes de Salud in Philadelphia, PA is an affiliate of that program.
  - d. Philanthropic sources.** You may be able to raise funds or obtain vaccines from local, regional, or national non-profit agencies who may be willing to support community vaccination. Locally or regionally, you can check with nonprofits such as Community Foundations, Rotary clubs, or similar agencies that may be willing to support specific local vaccination drives. In some cases, local pharmacies may be willing to donate some of their purchased vaccines to underserved communities.

# RESOURCES FOR TRUSTED MESSENGERS

The Alliance has a vaccine website at [vacunashelp.org](https://www.vacunashelp.org) with resources around COVID-19, flu, and adult vaccines at <https://www.vacunashelp.org/>

## CDC

- P4VE specific resources: <https://www.cdc.gov/vaccines/health-equity/resources.html>
- COVID-19 main page: <https://www.cdc.gov/coronavirus/2019-nCoV/index.html>
- Flu main page: <https://www.cdc.gov/Flu/>

## HRSA

- COVID-19 Resource Guide: <https://www.hrsa.gov/coronavirus/community-basedworkforce-resources>

## Made to Save

- **Talking to Adults:** <https://madetosave.org/wp-content/uploads/2022/05/FINALTalking-to-Your-Friends-and-Family-about-the-COVID-19-Vaccines-Slide-Deck.pdf>
- **Talking to youth:** [https://madetosave.org/wp-content/uploads/2022/05/3Kjbs0luRqpZlgWhAzCuekSRIn5PJ\\_jE6Kx96EB5QpU.pdf](https://madetosave.org/wp-content/uploads/2022/05/3Kjbs0luRqpZlgWhAzCuekSRIn5PJ_jE6Kx96EB5QpU.pdf)
- **Talking to Parents:** <https://madetosave.org/wp-content/uploads/2022/05/Talking-to-Parents-and-Guardians-about-the-COVID-19-Vaccines-for-Kids.pdf>

## American Academy of Pediatrics

- Vaccine Confidence Conversations: <https://www.aap.org/en/pages/2019-novelcoronavirus-covid-19-infections/covid-19-vaccine-for-children/covid-19-vaccineconfidence-mini-series/>

## Other Resources

- <https://www.immunize.org/> has a wealth of helpful information about vaccines with links to vaccine information sheets that are available in English and Spanish
- <https://vaccineinformation.org/> is the public facing site of immunize.org with helpful talking points and guides for each vaccine in easy-to-understand language.
- Vaccinate Your Family has an adult vaccine guide at <https://vaccinateyourfamily.org/adults/>

## Vacunas and Sesame Street in Communities

- COVID-19 *Promotores* Guide: You can find resources we've collaborated on to support families in asking questions and getting the answers they need to keep themselves and their communities safe from COVID-19. This suite of downloadable Spanish and English resources are located conveniently on a [Google drive](#); including a guide for *Promotores* (Community Health Workers), Posters, Videos featuring Muppets, Elmo and Rosita and their friend Sophia talking about COVID-19 and answering questions; and a Social Media Guide.
- Healthy Families / Familias Saludables: [this special video loop](#) of Sesame Street themed healthy stories, messages, and games is intended for use in waiting rooms and other locations where families with young children may be in order to provide information in Spanish and English in a fun and engaging way.





## THE ROAD AHEAD

As COVID-19 vaccination shifts to becoming an annual vaccination a person needs to get similar to the flu vaccine, we do know that timely and accurate information provided by trusted community messengers will be key to facing future challenges, such as helping uninsured persons find free or low-cost vaccines. The skills that we have implemented to promote COVID-19 and flu vaccination can be extended to increase vaccine equity for other adult vaccines.

**Thank you for being an essential part of Vacunas and helping to create a healthier future for all.**

## FOR MORE INFORMATION



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healthyamericas.org



202-387-5000

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