Workshop inputs - Barriers and enablers

Text in blue

- "Workshop-ready" wording
- Should be written in a self-explanatory way that participants can understand easily

Text in grey

- Context for the facilitator's benefit and understanding
- Can be used to explain **text in blue** to participants, or to help synthesize workshop outputs

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Section 1: Barriers / "roadblocks" in health equity

Defn. These are things that prevent community members from accessing and using public health resources.

1. **Lack of investment in health infrastructure**
    a. Historically under-invested in health services
    b. Health departments were struggling with a number of deficits before the pandemic
    c. Funding is categorical
    d. Most of the population lives far from mass vaccination venues
2. **Historically, residents have traveled to neighbouring counties for hospital care**
    a. Historic patterns persist even as new healthcare systems have opened up in the county
    b. Using COVID to market themselves and increase visibility
3. **Persistence of racial and ethnic disparities in healthcare exposed by the pandemic**
4. **Lack of trust in community health systems**
5. **Lack of trust in government entities**
6. **Unpaid sick leave**
    a. Fear of losing jobs
7. **Child care is very expensive**
    a. Children may have to stay home alone when they're sick.

8. **Public transportation does not extend to vaccination centers**
9. **Public transportation does not extend to Food Supplement Program offices**
    a. Multi-part benefit system for food stamps: in this county, people have to apply and drive down south in-person for a 45 mins interview to a government office. Helps people get resources but serves as a barrier.
10. **False narrative of vaccine hesitancy from leaders (blaming the community)**
11. **Active effort to misinform on network channels and social media**
12. **Disproportionate vaccine allocation by race**
    a. Narrative of hesitancy from political leadership (Governor): "Black people in this county don't want the vaccine"
    b. This is affecting the way the vaccine is allocated
13. **Black communities are the most likely to suffer the consequences of COVID-19 but least likely to have easy access to vaccines**
14. **Pre-registration requirement for vaccination requires access to internet**
15. **Housing is expensive**
    a. Social conditions that have contributed to COVID case counts, especially among Hispanic families
16. **Insurance is expensive or difficult to qualify for**
    a. Social conditions that have contributed to COVID case counts, especially among Hispanic families
17. **Lack of attention to "underlying conditions" (obesity, diabetes, heart disease etc.) that make people of color more vulnerable to the consequences of COVID-19 infection**
    a. Affect African Americans more than other racial ethnic groups
    b. E.g., hypertension, heart disease, diabetes
18. **Information about the vaccine is rapidly changing**
    a. J&J vaccine: used fetal tissue to create vaccine
    b. Two mRNA vaccines were *tested* using fetal lines
    c. Assumption that fetal tissue must come from aborted fetal tissue
19. **Lack of access to vaccine information that has been culturally tailored**
    a. Overconfidence among younger citizens ("I don't need the vaccine")
    b. Residents are expected to seek out the information
    c. Information that accommodates to different learning styles
    d. Infographics, highly visual created by **Hip hop public health**

Section 2: Enablers / "Bridges" in health equity

Defn. These are things that help or facilitate community members in accessing and using public health resources. Initiatives or solutions that allowed the community to respond and meet the challenges magnified by COVID-19

20. **Hotlines and helplines that provide information in English and Spanish**
21. **Community health workers**
22. **Walk-ins and same day registrations make vaccinations easier**
23. **Workers' unions**
24. **Local paper distribution at metro stations**
25. **Faith leaders**
26. **Local government**
    a. Prominent leaders taking vaccine on camera
    b. Trusted messengers with consistent messaging
27. **Megachurches serving as mass vaccination clinics**
    a. Safe / trusted environment
    b. 10K members plus: serve as mass vaccination clinics in partnership with local health authorities
28. **Hospitals are invested to ensure their community is healthy**
    a. Hospitals are penalized for patients who return repeatedly - so they are, by definition, invested in community benefit programs and health promotion to ensure that their community is healthy
29. **Radio stations tailored to local Black/African American populations**
30. **Easy-to-use onboarding tools: QR codes**
    a. Restaurant menus, ordering food
    b. Controlling TVs as remote control
31. **Access to technology / internet**
32. **Social media platforms to engage with the community**
33. **NextDoor: well-integrated communication platform**
34. **Official Twitter accounts provide current info on COVID19**
35. **Podcasts: how we create our own social media tools**
36. **Food banks**
37. **Free lunch programs for adults**
38. **Local intramural sports**
39. **Trusted community organizations**
40. **Standardized collection of race ethnicity data**

41. **Public libraries**
42. **Zoom town halls**
    a. The most effective way to engage with the community
43. **AMA-style sessions with healthcare professionals**
44. **Megachurches partnering with local health authorities to create mass vaccination sites**
    a. New partnerships - tapping community infrastructure
    b. Leveraging safe and trusted environments
45. **Trusted community organizations invite people to vaccination sites**
46. **Lyft and Uber offering free rides to help people get vaccinated**
47. **Identifying and training Community Health Workers**
48. **Mobile health clinics and vaccination sites**
    a. Collaboration with public health
    b. New health infrastructure
49. **Visual methods of debunking vaccine misinformation**
    a. **COVID-mitigation graphic novel**
        i. Blow up images in a barbershop, get people to put a caption
    b. **Using Tiktok to inform and engage younger audiences**
        i. Tiktok information campaigns
50. **Community co-creation workshops**
51. **Government-funded community innovation challenges**
    a. Contests created by the federal government to encourage individuals and/or groups to help promote vaccine confidence in their communities.
    b. 20 finalists will each receive $25,000 to create and implement their campaign. At the end of the campaign, one winner will receive a grand prize of $100,000.
52. **Public flyers and ads tailored to local sentiments**
    a. Public outreach campaigns slightly tweaked to fit local sentiments: e.g., “Are you *worried* about COVID-19 vaccinations?”
    b. Framing as an economic challenge and regaining independence
53. **Use of electronic billboards and bus stops to promote vaccination**
54. **Direct to consumer marketing for COVID-19 vaccines**
    a. On the radio or spotify
    b. Need wifi to access the channel (streaming), not a public station
55. **Conduct risk assessments while people wait in line to get vaccinated**

a. Nutrition
b. How to address diabetes

56. Urban farm on the same location as a health clinic

a. Indirect way of engaging people
b. Leave a card about COVID in food baskets (vaccinations and mitigations)

57. Using QR codes to find resources