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Community-Driven Solutions for Equitable Vaccine

Highlights from the Vaccine Equity and Access Program 2021-2025

Acknowledgements

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Introduction

Vaccination is considered one of the most important public health achievements of the twentieth century and continues to offer great promise. Vaccines save lives and improve the quality of life by preventing serious infectious diseases and their consequences. However, the benefits of vaccination are not realized equally across the population of the United States. Data shows that adult vaccination coverage remains low nationally and significant racial and ethnic disparities exist. During the Coronavirus 2019 (COVID-19) pandemic, the groups experiencing disparities were also disproportionately affected by COVID-19, at risk for serious illness from COVID-19, and/or at high risk for complications from influenza infection.

In 2021, when COVID-19 vaccines were made available and the importance of vaccination became more urgent than ever, the public health community acknowledged that community leaders must be equipped to develop vaccine confidence networks that enable individuals and families to absorb accurate, timely, and culturally appropriate information about vaccine options, including information that addressed questions and concerns people may have. These networks were also invaluable leaders in raising awareness about the need to improve vaccination access points in communities of color and in connecting providers with information and resources to better meet the needs of the communities they serve. Additionally, these networks were also well positioned to build partnerships at the community level (with health centers, pharmacies, and social service providers), with an emphasis on increasing the diversity and number of vaccination opportunities for American Indian/Alaska Native, African American/Black, Asian American, Hispanic/Latinx and Native Hawaiian and Pacific Islander communities.

Community-based organizations (CBOs) were essential in addressing racial inequities and reducing disparities in influenza and COVID-19 infection and vaccination rates across the country. It's largely thanks to their efforts that a significant number of people received their vaccinations. Community Catalyst's Vaccine Equity and Access Program (VEAP) played a vital role in supporting 123 CBOs across 41 states, the District of Columbia and Puerto Rico. By providing funding, resources, and technical assistance and training to CBOs, it allowed support for CBOs to improve vaccine education and access in communities of color.

Program Overview

From 2021-2025, Community Catalyst supported the Centers for Disease Control (CDC) and Prevention efforts of the [Partnering for Vaccine Equity \(P4VE\)](#) program which aimed to reduce racial and ethnic disparities in vaccination uptake and build trust in the safety and efficacy of recommended vaccinations for adults.

The CDC's strategic framework to strengthen vaccine confidence and prevent outbreaks of vaccine preventable diseases advanced three key priorities:



Protect communities by supporting states, counties, and cities to find unvaccinated communities and take steps to protect them.



Empower families by expanding resources for health care professionals to support effective vaccine conversations with parents and community members.



Stop myths by working with partners and trusted messengers to improve confidence in vaccines among at-risk groups.

Centers for Disease Control and Prevention (2021)

COVID-19 vaccines were made available to address the public health emergency to prevent more people from suffering from disability and death due to infection. Despite increased vaccine availability, persistent disparities in vaccination rates among racial and ethnic minority groups, low-income adults, uninsured individuals, and rural communities underscored inequities in vaccine distribution. The P4VE program made funds available to national, state, local, and community-based organizations to implement activities focused on vaccine awareness, access, availability, and confidence.

Community Catalyst's [Vaccine Equity and Access Program](#) (VEAP) had the goal to address health disparities and advance health equity by increasing vaccination coverage for adults in racial and/or ethnic populations experiencing disparities in the United States.

Through VEAP, Community Catalyst partnered with [community-based organizations](#) (CBOs) to develop and implement effective health communication and community engagement strategies designed to increase vaccine confidence and acceptance in racial and ethnic communities at increased risk of getting sick and dying from these illnesses.

This partnership supported the development of multidisciplinary and multi-level programs with a health equity lens that recognized the role of psychosocial and cultural factors, structural racism, distrust, and marginalization of communities, to:

- Equip and train a range of trusted community voices supporting vaccine education and delivery.
- Develop campaigns and materials to promote vaccinations to increase the availability of community or population-specific messages.
- Develop and maintain partnerships with other health providers, state and local health departments, CBOs, and other various partners using a multi-sectoral lens.
- Increase the number and diversity of vaccination opportunities in communities experiencing disparities.
- Increase the number and range of partnerships or collaborative activities between providers and community organizations.
- Increase the number and range of health care professionals recommending needed vaccines to adult clients.
- Host or support events to educate and promote vaccination.

In the first three years of VEAP, implementation priorities were protecting communities, empowering families, and stopping myths around COVID-19 and influenza vaccinations. As COVID-19 moved into an endemic, the scope of work expanded to all recommended vaccines across the life span.

The final year of the project focused on increasing vaccination awareness within communities beyond COVID-19, aiming to influence broader vaccine confidence and acceptance in racially and ethnically diverse communities. CBO partners continued to receive support in developing and implementing effective health communication and community engagement strategies with an emphasis of coalition building and leveraging the "[A Shot Towards](#)" [Communication Toolkit](#) to develop a targeted communications campaign.

The Network of VEAP Partners

Minoritized racial and ethnic communities have historically endured, and continue to experience, profound injustices that significantly contribute to pervasive health disparities and inequitable access to healthcare. These injustices encompass a range of systemic issues, including

- Medical systems with a history of racial violence and abuse.
- Discriminatory treatment from healthcare providers.
- A lack of research and information on health issues that disproportionately affect people of color.
- Deliberate underfunding of communities of color, including public health services.
- Healthcare services that don't meet community needs or provide care that respects different cultures.

The COVID-19 pandemic exacerbated these issues, creating new hurdles for communities of color to get reliable, timely, and culturally relevant information, as well as access to COVID-19 vaccines.

Community Catalyst intentionally supported community-based organizations (CBOs) that served these minoritized populations. Using the CDC's Social Vulnerability Index and Surgo Ventures' Precision for COVID data index, VEAP identified populations across the country with the greatest COVID-19 disparities. Further, understanding the barriers faced by grassroots, community-led organizations when seeking funding, particularly those led by people of color, VEAP aimed to select applicants deeply connected to their communities and seen as trusted leaders.

Over the course of the project, Community Catalyst partnered with a total of 125 community-based organizations in 40 states, the District of Columbia, and Puerto Rico (figure 1). to develop and implement effective health communication and community engagement strategies designed to increase COVID-19 and influenza vaccine confidence and acceptance in racially and ethnically diverse communities at increased risk of COVID-19 infection and death.

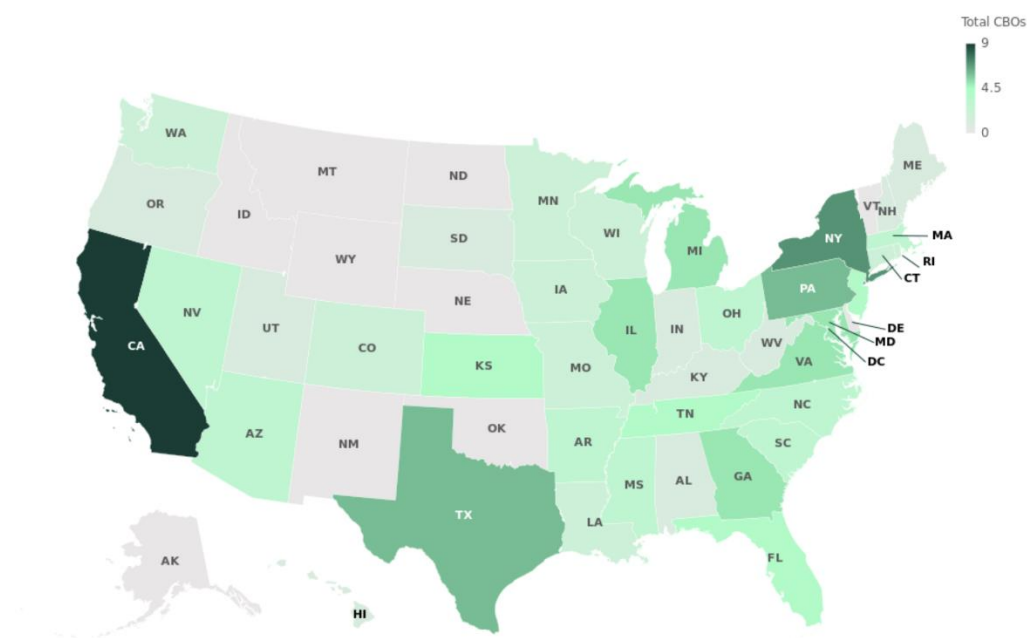


Figure 1: Vaccine Equity and Access Program CBO Locations

In addition to CBO partners, Community Catalyst also partnered with three national organizations to provide education and support across the United States to build confidence in and access to the COVID-19 and influenza vaccines. The organization included [Young Invincibles](#) (YI), [Leading Age](#), and the National Immigration Law Center (in its capacity overseeing the [Protecting Immigrant Families](#) coalition). All national organizations were recognized for their significant experience building and implementing community-based outreach, education, and engagement efforts and have regional offices or networks in areas of the country experiencing health disparities in racial and ethnic communities. Data presented in this paper excludes national partner data collection and activities.

Impact and Outcomes

CBOs proved highly successful in advancing overall program outcomes through collaboration with a wide variety of partners and community members to effectively increase the number of trusted voices in communities and to increase accurate and relevant vaccination messages and opportunities in their communities. Visual shown in figure 2.

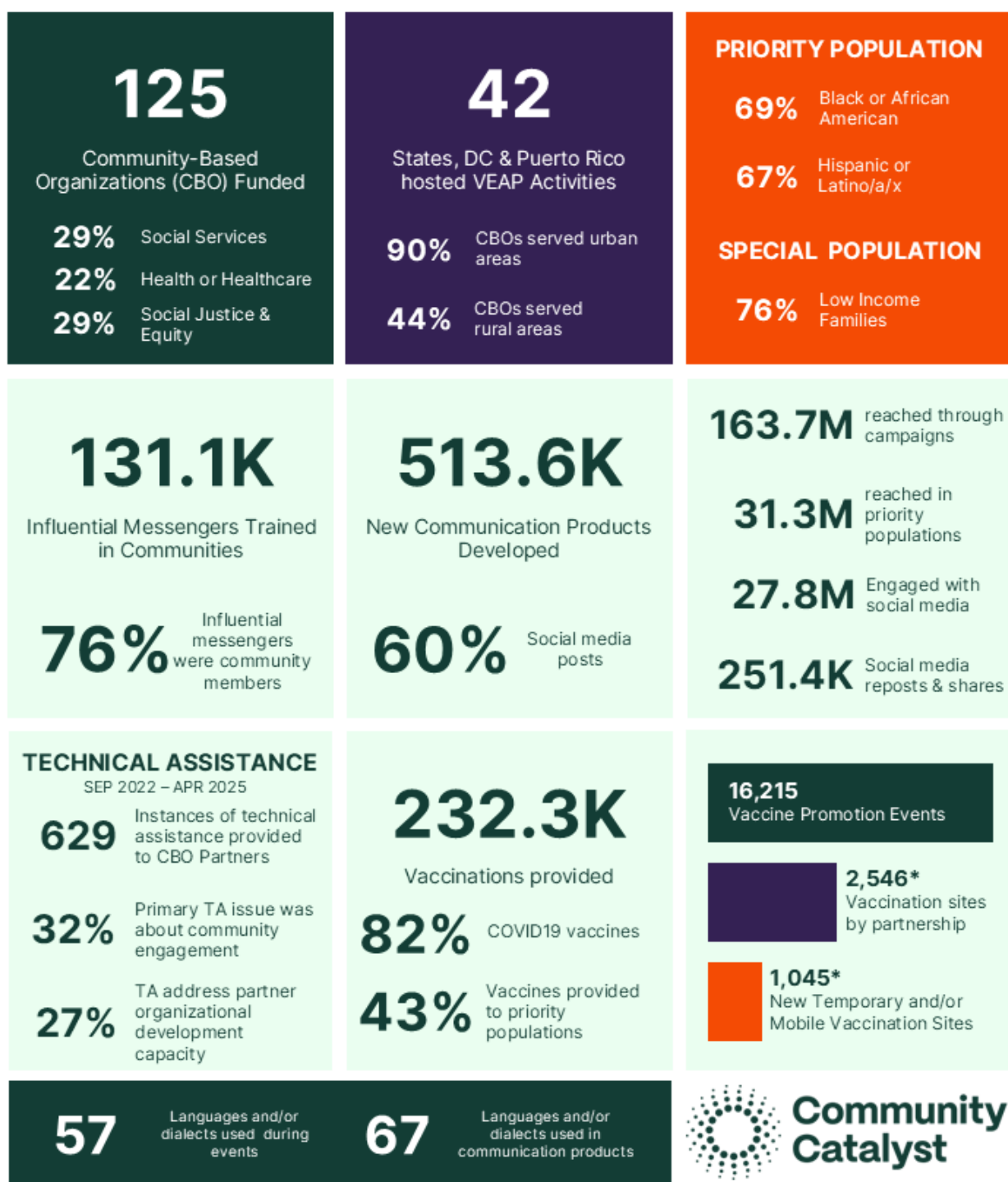


Figure 2: Vaccine Equity and Access Program 4-Year Outcomes

Economic Impact of VEAP

The outcomes of VEAP represent the real lives protected, and communities strengthened, through CBO-led public health efforts. Moreover, the project made an impact on the healthcare system, including healthcare costs for both individuals, communities, and the health system.

Through CBO efforts, 190,804 individuals were received a COVID-19 vaccination. Studies have shown that the vast majority of severe COVID-19 cases requiring hospitalization in 2021 were among unvaccinated individuals, leading to substantial and avoidable costs. For example, an analysis by the Kaiser Family Foundation (2022) found that over 690,000 COVID-19 hospitalizations from June to November 2021 could have been prevented by vaccination, and these preventable cases cost the U.S. healthcare system about \$13.8 billion in that six-month period (Amin & Cox, 2021; Farrenkof, 2022). This aligns with CDC data indicating that during the Delta wave in mid-2021, approximately 98.6% of those hospitalized with COVID-19 were unvaccinated. In short, unvaccinated patients dominated hospital admissions and drove billions in medical spending that might have been averted through vaccination (Farrenkof, 2022).

A 2023 study at a large U.S. medical center found that COVID-19 vaccination significantly reduced both the severity and cost of hospital care. Vaccinated patients had shorter hospital stays, were over 70% less likely to need ICU care, and had lower daily treatment costs compared to unvaccinated patients. After adjusting for age and health conditions, hospitalization costs were 26% lower for vaccinated individuals. Unvaccinated patients incurred nearly double the daily cost due to more intensive treatments. The study highlights the economic benefit of vaccination alongside its health advantages (Somani et al., 2023).

Considering the average cost of a non-ICU hospital stay ranges from \$10,000 to \$13,000 (Amin & Cox, 2021), VEAP potentially saved the healthcare system an estimated \$1.9 to \$2.48 billion. The potential cost extends significantly to ICU length of stay, shown in figure 3, further highlighting VEAP's substantial impact.

- For stays of 1-5 days (averaging \$68,261), VEAP's contribution amounted to the potential savings of \$13 billion.
- For stays of 6-10 days (averaging \$155,619), the potential savings reached \$29 billion.
- For stays of 11-15 days (averaging \$324,285), VEAP's influence could have saved a remarkable \$61 billion.

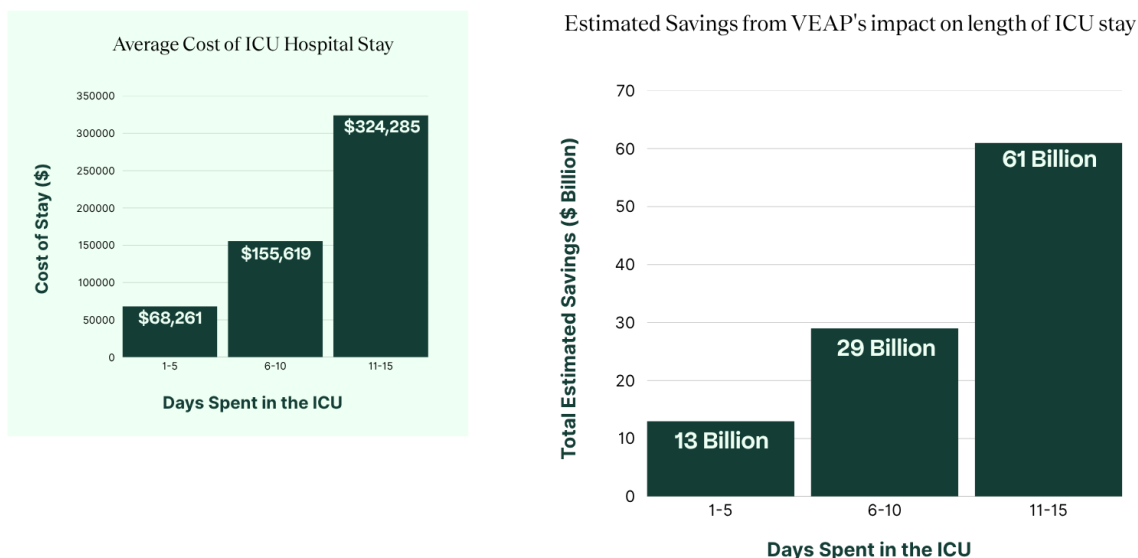


Figure 3: Potential Healthcare System Cost Savings

Beyond direct medical expenses, unvaccinated COVID-19 cases have imposed substantial indirect economic costs, particularly through lost productivity and long-term disability. Severe illness and post-acute sequelae of COVID-19 (commonly known as Long COVID) has diminished many individuals' ability to remain employed, resulting to increased disability claims, and has contributed to persistent workforce shortages. In 2022, lost earnings tied to Long COVID were estimated at \$211 billion, increasing to \$218 billion in 2023 (Van Beusekom, 2025). Although these estimates are not disaggregated by vaccination status, research indicates they were largely driven by severe cases—disproportionately occurring among unvaccinated individuals (Edwards & Hamilton, 2023). By reducing the risk of both acute illness and prolonged disability, vaccination offers significant economic value beyond hospital cost savings.

The Strength of Community-Level Strategy and Interventions

Public health outreach, education, and campaigns addressing vaccines in minoritized racial and ethnic communities are more effective when they were community-focused and culturally tailored. Trust was a crucial factor of success. Many individuals in marginalized communities have historical reasons to distrust traditional medical institutions, federal agencies, and pharmaceutical companies, due to past systemic abuse and neglect. Consequently, people in these communities were more likely to be

influenced by information about COVID-19 vaccines when it came from a trusted source within their own community (Strully et al, 2021).

To effectively address vaccine hesitancy, strategies capitalized on existing community infrastructure. This involved partnering with community-based organizations that had already built trust, such as places of worship, local school systems, and community centers. Another effective approach was to empower trusted community leaders with accurate information and resources. These "trusted messengers" were then prepared to answer questions and address concerns about the COVID-19 vaccine within their communities. Examples of such messengers included faith leaders, local educators, community health workers, patient advocates, and healthcare providers with strong community ties.

Engaging the community in vaccine education and campaigns offers valuable insights and feedback, making the campaigns more effective. Community leaders are often privy to the specific questions and concerns circulating within their communities. This direct feedback allows campaign messaging to be precisely tailored to address these particular worries (AuYoung et al, 2023). Furthermore, community leaders who share the lived experiences of marginalization can discuss vaccine hesitancy in a way that acknowledges the historical and social context that initially fostered distrust (Strully et al, 2021). This nuanced approach is crucial for building trust.

Strong partnerships have been crucial to the success of community engagement and vaccination efforts. CBO partners emphasized how collaboration with grassroots organizations, trusted local community organizers, and community support programs significantly boosted engagement and vaccination rates. These partnerships provided essential services and resources, including mortgage and home repair assistance, food, and medical aid.

Innovative Outreach and Community-Led Initiatives

VEAP CBO partners effectively implemented community-driven influencer recruitment and hosted events in non-traditional venues. They engaged with salon and barbershop owners, local "mom and pop" stores, and farmers' markets, bringing health information directly to where community members gather. For example, one partner, El Centro, ingeniously engaged families in vaccine education through creative materials like comic and coloring books.

CBO partners also prioritized direct community engagement through co-hosted dialogues, health fairs, and even community garden events. They seamlessly integrated COVID-19 education into their existing organizational activities. To ensure their programs were effective and responsive, CBO partners also conducted focus groups and distributed surveys to gather valuable community input.

Cultural and Linguistic Relevance: Key to Effective Communication

A critical factor in successful outreach was understanding and respecting local culture and language. CBOs played a vital role in ensuring that all outreach materials were both linguistically and culturally appropriate. Direct translations often miss crucial cultural context and linguistic nuances, as highlighted by AuYoung et al. (2023). By involving trusted community-based organizations in the creation of these materials, the content resonated more deeply and aligned with the values of each specific community.

Expanded Reach and Holistic Support

VEAP CBO partnerships facilitated the sharing of resources and best practices, enhanced training opportunities, and provided access to a wider network of influential messengers. This collaboration extended beyond just vaccine information, incorporating other preventive health messages and addressing social determinants of health. The fruits of these partnership-building efforts included increased resource and information sharing, more successful events, higher vaccination rates, and a greater number of influential messengers and outreach activities.

CBO partners also proudly highlighted the growth within their teams, welcoming community health workers, health equity and public health program coordinators, outreach specialists, and student interns. The positive influence of their leadership and the dedication of their bilingual and bicultural staff were instrumental. These diverse partnerships enabled CBOs to amplify their work, continue offering vaccination and health services, and distribute vital resources and information.

Furthermore, CBO partners have expanded their service areas, providing access to a broader range of valuable resources such as legal aid, dementia awareness, tobacco prevention, kidney disease risk assessments, food and housing assistance, menstrual equity, and oral health. This expanded, holistic approach allowed them to deliver comprehensive support, addressing not only vaccine disparities but also a wide array of

community needs, thereby fostering a more integrated and effective approach to overall health and well-being.

Success and Challenges

There were many challenges, success, and lessons learned throughout the project. At the start of the project, hesitancy related to fear of side effects, multiple boosters, and pandemic fatigue was reported. Partners also highlighted that communities continue to mistrust vaccines and government, citing instances of previous and current medical racism as a barrier to vaccination. Further, addressing influenza was an ongoing challenge in communities prior to COVID-19.

General challenges communicated to Community Catalyst over the past four years included:

- **Vaccine Hesitancy and Mistrust:** Vaccine hesitancy and mistrust continues to be a leading barrier to vaccine uptake in communities. CBO partners discussed the continued lack of trust in vaccines, fear of side effects, cultural and language barriers, distrust of the government and medical community, limited awareness of and access to vaccine education and resources, and hesitancy to engage with unfamiliar faces.
- **COVID Fatigue:** Covid fatigue was also highly reported, as restrictions have been lifted CBO partners are encountering people who are tired and apathetic when talking about vaccine uptake.
- **Managing Burnout and Fatigue from CBO Staff.** Managing burnout and compassion fatigue, though not new issues, remains a persistent and significant challenge.
- **Capacity to Implement Programs.** Internally, some CBO partners are grappling with space constraints, staff transitions, and challenges in filling roles, which complicate their ability to effectively host vaccine clinics.
- **Vaccine Commercialization.** The commercialization of vaccines and associated costs also presents significant external hurdles. Many local pharmacies have faced difficulties in providing affordable vaccines, and community reluctance to visit large chain pharmacies due to language barriers and insurance issues has further complicated access.
- **Vaccine Access Barriers:** CBO partners reported a common factor contributing to vaccine disparities was lack of access to vaccines, including transportation issues, limited or inaccessible healthcare services, and difficulty receiving vaccines due to

barriers such as language, health insurance, new patient registration, inconvenient scheduling or location, or limited clinic availability. CBO partners also note the limited and inequitable access to vaccinations, referring to communities that do not have resources such as insurance coverage and safe locations for vaccinations, populations such as immigrant, refugee, low-income, and homebound.

While there were many challenges, CBO partners continued to expand outreach efforts including educational campaigns, training, and classes. CBOs had overall successes that included:

- **Expanded Outreach Efforts:** CBOs partners were able to leverage and expand their current efforts by COVID education with their organizations' activities and events. Many CBOs also co-hosted community dialogues, such as town halls and engaged in health fairs and other community events. Further, their partnership-building efforts increased resources and information sharing, special events, and the ability to offer vaccinations. CBOs were able to add new additions to their teams, including community health workers, health equity and public health programs coordinators, outreach specialists, and student interns. They were proud of the positive influence of their leadership and bilingual and bicultural staff.
- **Trusted Messengers & Culturally Tailored Education.** CBO partners leveraged CHWs, barbers, stylists, and faith leaders as trusted messengers. They also developed and delivered multilingual, culturally relevant materials to immigrant, refugee, and racially diverse communities. Successful strategies included a focus on practical, relatable messaging to address vaccine hesitancy and health misinformation.
- **Strategic Partnerships & System Collaboration.** CBO partners built or deepened partnerships with local healthcare systems, governmental health and healthcare agencies, and immigrant-led organizations. They were able to adapt quickly when partnerships shifted, maintaining continuity of care and outreach. CBO partners also leveraged partnerships and collaborations to present their work at state-level conferences, which resulted in new funding and collaborative opportunities.
- **Cross-Sector and Interdisciplinary Engagement.** CBO partners engaged medical students, academic institutions, and advocacy groups in community-based learning and collaboration. These relationships allowed them to promote mutual understanding between clinical systems and communities through on-the-ground experiences.
- **Inclusive Reach & Equity-Focused Strategies.** CBO partners successfully engaged historically underserved populations such as the Haitian, Marshallese,

and other immigrant communities. Their expanded outreach to multilingual, low-income, and elderly populations with in-language resources and accessibility supports (e.g., transit cards, PPE, hygiene kits) enhanced trust within these communities. CBO partner efforts were also able to elevate vaccine access and education during public health emergencies (e.g., measles outbreak) with rapid, community-informed responses.

- **Data Collection and Tracking.** CBO partners enhanced their work through the creation and use of different data tracking and collection tools. For example, one CBO has an internal tracking system to keep track of the number of social media postings distributed per month and the topics covered. Another CBO report spotlighted a communication product they developed that has allowed community members to document their flu and covid vaccines

Key Lessons Learned from Community Partnerships

Over the course of the project, two primary lessons emerged across all community partners, in addition to individual [CBO-specific insights](#). A significant lesson from Years 3 and 4 of the project, particularly as communities experienced COVID fatigue, was the profound influence of social determinants of health on vaccine uptake. It became clear that shifting programs to offer wrap-around support for community members was essential. This holistic approach, which addressed underlying social factors, proved crucial for CBOs to effectively reach and serve their communities.

The ability to adapt to evolving public health needs is critical. The emergence of monkeypox in Year 2 presented an unexpected challenge and a valuable learning opportunity. CBOs expressed concern about its potential impact on their communities and how it would affect their ongoing COVID and influenza vaccination efforts. In response, they actively sought to provide health education and requested support regarding vaccination strategies. This demonstrated the vital need for agility and responsiveness, even when new public health concerns fell outside the initial scope of the project. The fact that CBOs were already operating in the vaccine equity space underscored their crucial role as trusted community health messengers, capable of adapting to emerging public health crises.

Conclusion

VEAP demonstrated that community-led initiatives are essential for achieving equitable public health outcomes. Over four years, CBO partners helped vaccinate more than 232,000 individuals and trained over 131,000 trusted messengers. However, a significant challenge remains, CBOs are often underfunded and under-resourced, which jeopardizes their ability to sustainably engage in public health. VEAP offers a scalable model for addressing health disparities through community-driven approaches, while also highlighting critical areas for improvement in resource allocation and program management. Moving forward, sustained investment in community infrastructure is vital if we want to effectively combat future pandemics and address inequities in future public health initiatives.

Community-Based Organization Abstracts

African Career Education & Resource, Inc.

<https://www.acerinc.org/>

Introduction

African Career Education & Resource, Inc. (ACER) is a community-driven advocacy organization dedicated to advancing equity for the African diaspora, particularly immigrant communities and, more broadly, the BIPOC population. Their work centers housing justice, civic engagement, economic empowerment, and health equity.

Program Activities and Outcomes

ACER centered their work around addressing social determinants of health, fostering authentic relationships and building trust in the community. ACER held clinics in various community settings, integrating vaccine education into meetings and partnering to share information. They also addressed crucial needs like housing, employment, and food insecurity, advocating for rent relief and supporting small businesses. ACER played a pivotal role in advocating for RentHelpMN, which provided rent relief for families in crisis. ACER also ensured that we had free groceries, food resources, legal aid information, rental assistance information, employment opportunities, etc. were made available at every vaccination and education event. From 2020-2022, ACER hosted or supported 121 vaccine events, resulting in 4,553 COVID-19 vaccinations. Our outreach, including trusted messengers, reached over 3,640 individuals, and we built over 36 community partnerships.

Conclusion and Recommendations for Practice

The COVID-19 pandemic highlighted that hard-hit communities faced more than just the virus, struggling with housing, food, jobs, and healthcare access. Our organization responded by bringing vaccinations and essential "wrap-around" services directly to community gathering places, rather than just providing education. This comprehensive, community-centered approach built trust and improved outcomes. Future public health efforts should adopt this holistic model, offering wide-ranging support to build trust and to ensure effectiveness.

ADAMS Compassionate Healthcare Network (ACHN)

<https://achnhealth.org/>

Introduction

ADAMS Compassionate Healthcare Network (ACHN) is a free clinic which serves uninsured, underserved and low -income communities with primary healthcare services.

Description of Program Activities and Outcomes

ACHN engaged in COVID-19 and flu vaccination efforts, aiming to educate, vaccinate, and protect communities, especially those facing vaccination disparities. ACHN achieved this through diverse outreach, expanded language access, and strengthened partnerships with CBOs and county health departments, focusing specifically on communities of color. The ACHN team conducted numerous in-person and virtual town halls with local leaders, doctors, and officials in Northern Virginia, educating communities on COVID-19 and flu. Collaborating with partners and local pharmacies, we organized seminars, distributed educational materials, and established vaccine clinics, leading to over 95,000 COVID-19 and flu vaccinations. We actively participated in community events, health fairs, and religious services to directly inform residents about vaccine benefits. Our marketing, including social media and print materials, reached over one million people. ACHN also onboarded vaccine ambassadors and local leaders to disseminate information and build community relationships for these vital health efforts. They also partnered with local leaders and organizations to build relationships for our joint community efforts and educating the community about COVID-19 and flu.

Conclusion and Recommendations for Practice

ACHN significantly boosted positive attitudes and uptake of COVID-19/Flu vaccines. We expanded reach to diverse communities through multilingual materials and utilized trusted messengers to combat misinformation, effectively reducing vaccine hesitancy. By removing access and cost barriers, ACHN achieved greater vaccination rates, particularly for uninsured and underserved populations. Future efforts should prioritize these strategies to ensure equitable vaccine access and acceptance.

Arthur Ashe Institute for Urban Health

<https://www.arthurasheinstitute.org>

Overview of Organization

The Arthur Ashe Institute for Urban Health (AAIUH), based in Brooklyn, NY, was founded to address the health disparities affecting historically underserved communities. Guided by its mission to reduce health inequities through innovative community-based programs, research, and education, AAIUH builds trusted partnerships to improve health outcomes in urban populations.

Description of Program Activities and Outcomes

AAIUH's core strategy empowers community leaders, particularly barbers and beauty salon stylists, as trusted health advocates. These trained individuals share accurate vaccine information with clients using culturally relevant materials. Over ten salons and barbershops participated, reaching an estimated 500 community members with messaging on COVID-19, flu, and adult vaccinations.

AAIUH also expanded its reach to over 1,500 individuals through social media, newsletters, and community health events, emphasizing culturally tailored education and addressing social determinants of health. The Health and Beauty Council, comprising barbers and stylists, provided crucial feedback.

Additionally, over 50 youth engaged in educational gaming workshops, becoming trusted messengers to their peers. Currently, AAIUH is refining outreach strategies based on updated community data and insights from coalition partners, ensuring community-informed approaches.

Conclusion and Recommendations

AAIUH's approach demonstrates the power of community-based, culturally tailored strategies to increase vaccine confidence and reach underserved populations. Sustaining partnerships, amplifying trusted voices, and integrating community feedback into future programming will be essential to building long-term health equity.

Boat People SOS-Center for Community Advancement

<https://bpsos.org/california>

Introduction

BPSOS-Center for Community Advancement (CCA) is a community-based nonprofit organization based in Orange County, California, that has served the community since 2000. Its mission is to “improve the lives of Orange County residents, especially members of the Vietnamese community, through the delivery of effective and sustainable services.”

Description of Program Activities and Outcome

BPSOS-CCA boosted COVID-19 and flu vaccination rates by distributing in-language materials via social and ethnic media, hosting workshops, and providing on-site vaccinations. They dispelled myths at community events, through ESL/Citizenship classes, and with door-to-door campaigns, building trust and sharing health tips. Translation services and strong partnerships with clinics ensured timely vaccine access, leading to a significant increase in vaccinated Vietnamese residents.

Conclusions and Recommendations for Practice

In conclusion, BPSOS-CCA’s culturally and linguistically appropriate outreach strategies, combined with strong community partnerships, played a vital role in increasing vaccination rates and promoting public health among Vietnamese communities in Orange County. Building on these successes, the following recommendations are proposed to enhance sustainability, expand impact, and support the development of similar community-based initiatives:

- Identify funding opportunities beyond COVID-related grants, including foundations that support immigrant health equity, health literacy, and emergency preparedness. Explore partnerships with health systems and insurers who benefit from improved community health outcomes.
- Train and employ bilingual community health workers (CHWs) from within the target population. This builds long-term workforce capacity and enhances community trust and program sustainability.
- Engage in local and statewide policy advocacy to promote sustained funding for community-based organizations working in culturally specific contexts.

East Bay Sanctuary

<https://eastbaysanctuary.org/>

Introduction

East Bay Sanctuary provides legal services, community organizing, and transformative education to support low-income immigrants and people fleeing violence and persecution.

Description of Program Activities and Outcomes

Our partnership with Community Catalyst focused on disseminating reliable vaccine information, primarily led by a dedicated team of Indigenous Mam *promotores* for our Voces Maya-Radio B'alam VEAP campaign. Recognizing the Mam community's strong oral traditions and limited English/Spanish fluency or literacy, our outreach emphasized oral communication through radio programs, Facebook, a multilingual hotline, in-person engagement, and video content.

To maximize vaccine education, we produced seven radio programs, hosted three pop-up vaccination fairs, attended over 40 tabling events, and developed 14 educational videos in Mam and Spanish. Four volunteers also conducted phone calls to 300 past attendees, providing vaccine updates. Our outreach and radio programs were led by young Indigenous and Latinx immigrants. They created on-site, news-reporting-style shows on Radio B'alam, an internet-based Facebook Live platform with over 63,000 followers. These shows, averaging 5,600 views, featured *promotores* visiting clinics live, showcasing facilities, interviewing providers, and demonstrating vaccinations, which familiarized audiences with healthcare and reduced fears. We also strengthened community ties by partnering with over 50 organizations.

Conclusion and Recommendations for Practice

Radio B'alam and Voces Maya significantly increased their community presence, earning recognition including a prestigious ethnic media award. Our experience underscores the importance of language-accessible outreach, especially in communities with strong oral traditions. Further, programs that prioritize trusted messengers, multimedia communication, and strategic partnerships to successfully engage marginalized populations and reduce vaccine access barriers.

Hmong and Hispanic Communication Network

<https://h2nwisc.org/>

Introduction

The Hmong and Hispanic Communication Network (H2N) is a network of community health workers (CHWs) and community collaborators that developed organically in central Wisconsin at the onset of the pandemic to improve bidirectional communication between Hmong and Hispanic communities and health systems/public health/resource agencies to prevent and mitigate COVID in these communities that were being disproportionately impacted.

Description of Program Activities and Outcome

As COVID vaccinations became available, access was difficult for Hmong and Hispanic communities because of language, literacy, cultural and other barriers such as historical trauma, fears and mistrust. The VEAP partnership allow H2N to start organizing pop-up vaccination clinics across the community, meeting people where they felt more comfortable and safer. We partnered with a variety of COVID vaccinators who were willing to travel to these locations in an 8-county area that is largely rural. CHWs are trusted messengers in their communities and were very successful in their outreach about influenza and COVID vaccinations. Additionally, CHWs are very aware of the role of social determinants of health (SODH) and from the beginning knew that assisting people with basic needs was important for building relationships, credibility and further trust.

H2N worked with young adults to engage their peers through a video called “Let’s Get Vaxxed”. The campaign was picked up by a local TV station and was seen by over 70,000 people. Along with weekly updates, public service announcements [about vaccines] were made in Spanish, Hmong, and English and run on Hmong radio and Hispanic internet radio. Hmong and Hispanic health personnel were featured on regular livestreamed events. With VEAP funding, over 1,000 influenza vaccines and approximately 2,000 COVID vaccinations were given through H2N pop-up clinics.

Recommendations for Practice

Key takeaways from our work: CHWs are trusted messengers. To reach communities, listen to their voices and meet them where they are. Also, integrate efforts to address the social determinants of health.

Highwood Library & Community Center

<https://highwoodlibrary.org/>

Introduction

The Highwood Library & Community Center is located in Highwood, Illinois -- home to approximately 5,000 individuals and close to 50% identifying as Latine. The geographic surrounding area is known as the Northshore area, which is known for its financial wealth. However, the reality for residents in Highwood is very different, as they face several barriers that prevent them from accessing services to address the social determinants of health.

Description of Program Activities and Outcomes:

This opportunity with VEAP provided Highwood Library & Community Center with the tools and financial support to successfully vaccinate more than 3,000 individuals and share vaccine education to over 5,000. Without this support, people would not have received the education and protection that they deserve. Thousands of uninsured and underrepresented community members would continue to be neglected and exploited.

The library team has served its community with purpose and commitment, using a trauma-informed approach that demonstrates empathy, resilience, and cultural sensitivity. Also, community health workers were instrumental in expanding the impact of vaccine equity starting with distributing personal protective equipment (PPE), COVID-19 tests and food essentials. They amplified their work through programming that was engaging, personal, approachable and in the preferred language of the target audience. The strategic plan included in-person and social media outreach with marketing that resonated with the community. Additionally, we planned weekly health conversations (Charles de Salud), community walks, Zumba and physical screenings through our partnership with Rosalind Franklin University. This work was supplemented with the assistance of case management, counseling, coaching, and support groups that addressed the emotional and mental health contributing factors to vaccine uptake.

Conclusions and Recommendations for Practice

Ensure outreach content is available in multiple languages and that training focuses on the long-term mental health effects of the COVID-19 pandemic.

Korean Community Services of Metropolitan NY, Inc.

<https://kcsny.org/>

Introduction

KCS' mission is to be a bridge for Korean immigrants and the wider Asian community to fully integrate into society and overcome any economic, health and linguistic barriers so that they become independent and thriving members of the community.

Description of Program Activities and Outcomes

KCS diligently worked to increase vaccine awareness among vulnerable populations, addressing hesitancy and misinformation while ensuring equitable access to vaccination resources. In collaboration with community-based and faith-based organizations, outreach events were conducted throughout Queens, including Flushing, Long Island City, Astoria, and Bayside. Overall, KCS held 51 educational or virtual/in-person outreach events, reaching more than 4,224 individuals in high-risk communities.

As an effective strategy to engage the younger generation, KCS launched successful social media campaigns in multiple languages, including English, Korean, Chinese, and Spanish, to address cultural, linguistic, and economic barriers to vaccination. Weekly social media updates provided vaccine-related news, FAQs, and direct community engagement, combating misinformation with credible sources like the CDC and NYC Health. This helped reach a broad audience and disseminate accurate vaccine information and resources.

Conclusion and Recommendations for Practice

Despite challenges such as vaccine hesitancy, pandemic fatigue, and misinformation, KCS observed an overall positive shift in community perceptions about vaccines. These community members became more open to learning about the importance of staying up to date with vaccinations. KCS's efforts have proved vital in prioritizing vaccination and strengthening vaccine confidence.

Make the Road New Jersey

<https://maketheroadnj.org/>

Introduction

Make the Road New Jersey builds the power of immigrant, working-class & Latinx communities to achieve dignity and respect through community organizing, high-quality legal services, policy innovation and transformative education. Their work focused primarily on reaching Spanish-speaking immigrants with culturally responsive messaging to promote vaccine equity and increase uptake.

Description of Program Activities and Outcomes

Through our bilingual staff, we supported immigrant communities by providing vital vaccine information. A key part of our strategy was the monthly New American Welcome Center resource fairs, which provided free on-site vaccinations and reached thousands with the help of up to 20 community partners. We also reached tens of thousands through neighborhood canvassing by trained youth leaders and culturally resonant social media videos. Youth leaders played a vital role in the canvassing effort, allowing us to engage both adults and high school students in meaningful conversations about vaccination.

Our partnership with Community Catalyst was crucial to the campaign's success, providing adaptable marketing materials like the "Risk Less, Do More" campaign to combat vaccine messaging fatigue. We also gained critical insights by hosting a Spanish-language focus group, which emphasized the importance of listening to diverse community concerns to sustain engagement.

Conclusion and Recommendations for Practice

Vaccine outreach must be rooted in cultural competence, trusted community relationships, and bilingual communication. We recommend that organizations involved in this work continue to deploy "credible messengers" to share factual information and engage in meaningful dialogue. Further, it is essential to listen to community needs with empathy and curiosity. By meeting people where they are, we can foster trust and provide vaccine information that is both linguistically and culturally appropriate, ensuring our messages are effective and resonate with diverse communities.

New Horizon Ministries, Inc.

<https://www.nhcms.org/>

Introduction

New Horizon Ministries, Inc. (NHMI) aimed to help ensure equitable access to vaccines within Hinds County, Mississippi.

Description of Program Activities and Outcomes

Through targeted education and outreach efforts, NHMI worked to address vaccine inequities and advance health equity across the region. These initiatives were designed to build vaccine confidence among residents by delivering accurate information in culturally appropriate and accessible ways. In collaboration with local health agencies, community organizations, churches, businesses, and influential messengers, NHMI focused on educating and increasing vaccination rates throughout the community.

To achieve our goals, NHMI implemented a variety of outreach strategies. We provided remote educational sessions and conducted mini-seminars at both large public gatherings and smaller community events, ensuring that vaccine information was widely disseminated. We also developed community-responsive messaging that directly addressed common questions and concerns from the community, making sure our information was both relevant and responsive.

Our organization also focused on hosting and partnering in community health fairs. These events not only offered valuable resources but also helped us grow our network to over 200 community partners. Recognizing the power of trusted voices, we engaged influential messengers such as church leaders, faith-based organizations, healthcare providers, and salon operators. We provided them with training and educational sessions, which allowed them to effectively amplify vaccine education within their own spheres of influence.

Conclusion and Recommendations for Practice

Through its strong partnerships and community-centered approach, NHMI successfully reached a broad and diverse population, which resulted in increased vaccine uptake and a decline in COVID-19 cases, hospitalizations, and deaths in the community. These efforts demonstrate that collaborative, community-based outreach is highly effective in reducing vaccine hesitancy and promoting equitable access to vaccines, including those for COVID-19 and influenza.

YWCA San Antonio

<https://ywcasa.org/>

Introduction

Grounded in their mission to eliminate racism and empower women, The YWCA San Antonio has focused on delivering culturally competent education and vaccine access to historically underserved communities—especially Spanish-speaking immigrant populations, uninsured families, and communities of color.

Description of Program Activities and Outcomes

YWCA San Antonio hosted hundreds of pop-up vaccine clinics in trusted community spaces, including churches, low-income housing complexes, senior centers, and our city's Mexican Consulate. These clinics provided COVID-19, flu, and immigration-related vaccines, while our bilingual outreach and strategic partnerships ensured our services were accessible and responsive to community concerns. Education remained a cornerstone of our work, facilitating dozens of pláticas, or small-group health sessions, to create space for honest conversations about vaccine safety and myths, which built trust and addressed hesitancy with empathy. YWCA San Antonio also conducted a listening session to better understand evolving community concerns around child vaccine safety.

These combined efforts, YWCA San Antonio helped thousands of residents make informed health decisions and receive life-saving vaccinations. Our model prioritizes relational trust, accessibility, and deep community engagement, demonstrating the effectiveness of community-based organizations (CBOs) in addressing public health disparities. This approach serves as a powerful example of how to successfully engage with and support vulnerable populations.

Conclusion and Recommendations for Practice

YWCA San Antonio's experience demonstrates that advancing health equity is not only possible, but also achievable when the community leads the way. The success of our work, in partnership with VEAP, reinforces the need to:

- Invest in CBOs as trusted messengers and providers of care.
- Prioritize bilingual, culturally tailored education and outreach.
- Continue flexible, low-barrier vaccine delivery models such as pop-ups.
- Center community voice through listening sessions and feedback loop.

List of Community-Based Organizations

Organization Name	Location
A Compass Project, Inc.	KS
Abounding Prosperity, Inc	TX
Adams Compassionate Healthcare Network	VA
AenEmmaan Inc	AR
African Career, Education and Resources, Inc.	MN
AIDS Healthcare Foundation (AHF)	OH
AIDS Taskforce of Greater Cleveland, Inc.	OH
Area Five Agency on Aging and Community Services, Inc.	IN
Arkansas Coalition of Marshallese	AR
Arthur Ashe Institute for Urban Health	NY
Asia Pacific Cultural Center	WA
Asian American Health Coalition of the Greater Houston Area	TX
Asian Community Development Council	NV
Asociacion Puertorriquenos en Marcha. Inc (APM)	PA
Baltimore Healthy Start, Inc.	MD
Baptist General Convention of Virginia	VA
Bay Area Women Coalition, Incorporated	AL
Benevolent Society	MI
Black Ladies in Public Health Foundation	TX
Black Mental Health Village	TN
Black Voters Matter Capacity Building Institute	GA
BlaqOut, Inc.	MO
BPSOS Center for Community Advancement, Inc.	CA
Brooklyn Perinatal Network, Inc	NY
Building Healthy Communities (formerly Community Initiatives)	CA
Cambodian Association of Greater Philadelphia, Inc.	PA
Caribbean Women's Health Association, Inc.	NY
CASA, Inc	MD
Center for Health Progress	CO
Christ Congregational Church, "ONWARD, WOMEN OF COLOR!"	MD
Community Clinic of Maui, Inc. dba Malama I Ke Ola Health Center	HI
Community Education Group (CEG)	WV
Detroit Recovery Project	MI
Dolores C. Huerta Foundation	CA
Doulas Latinas International	OR

East Bay Sanctuary Covenant	CA
El Centro, Inc.	KS
ELFA Empowerment Through Learning Friendship and Assimilation	AZ
EverThrive Illinois	IL
Faith in Science Coalition DBA Ministers Alliance of Rhode Island	RI
FB Foundation	SC
First Presbyterian Church Wausau Free Clinic	WI
Friends of the Highwood Public Library	IL
GOTVax - Get out the Vaccine	MA
Hamkae Center/NAKASEC Virginia	VA
Hispanic Community Services, Inc.	CA
Hmong American Center, Inc	WI
ICNA Relief USA Programs Inc	AZ
Illinois Coalition for Immigrant and Refugee Rights	IL
Immunize Kansas Coalition	KS
Institute on National Social Inequities and Gaps in Health and Health Treatment	MI
InterCommunity, Inc	CT
Knock and Drop Iowa	IA
Korean Community Services of Metropolitan New York, Inc.	NY
Korean Resource Center, Inc.	CA
La Casita Center, INC.	KY
La Clinica de La Raza, Inc.	CA
Latino Network	OR
Make the Road Nevada	NV
Make the Road New Jersey	NJ
Make the Road New York	NY
Make the Road States, Inc., DBA Make the Road CT	CT
Melinated Moms	NJ
Men Stopping Violence	GA
Miami Workers Center, Inc	FL
Michigan Disability Rights Coalition	MI
Mid Florida Area Agency on Aging Inc	FL
Migrant Clinicians Network	TX
Mississippi Faith Based for Community Renewal	MS
Nashville Health Disparities Coalition	TN
National Black Leadership Commission on AIDS	NY
National Hispanic Council on Aging	DC
New Horizon Ministries, Inc.	MS
New Life Connection	NC
New Voices for Reproductive Justice	PA
North Colorado Health Alliance	CO
Northeast Ohio Black Health Coalition	OH

Nueva Esperanza, Inc.	PA
Pacific Islander Health Partnership (PIHP)	CA
Palmetto Project, Inc.	SC
Patients R Waiting, Inc	PA
Peletah Ministries	NC
Planned Parenthood of Michigan	MI
Planned Parenthood of Northern, Central and Southern New Jersey	NJ
Randolph County Caring Community Inc	MO
RIVA: Refugee and Immigrant Voices in Action	IA
Rural Women's Health Project	FL
Salvation and Social Justice	NJ
SGA Youth & Family Services, NFP	IL
Social Capital Inc.	MA
Somali Community Resettlement Services of Olmsted County	MN
Somali Health Board	WA
South Carolina Association of Community Action Partnerships	SC
South Dakota Voices for Peace (SDVFP)	SD
Southwest Louisiana Area Health Education Center (SWLAHEC)	LA
Special Service for Groups, Inc	CA
Sunflower Community Action	KS
Tennessee Health Care Campaign	TN
Tennessee Justice Center	TN
The Balm In Gilead, Inc	VA
The Black Church and Domestic Violence Institute, Inc.	MD
The Common Project FL	FL
The Concilio	TX
The LGBT Center of Raleigh	NC
The Roberti Community House	IL
Total Lifestyle Change, Inc.	GA
Trans Housing Atlanta Program Inc.	GA
Trans(forming)	GA
Tribal Minds, Inc. dba Alliance for a Just Society	NV
Tutwiler Community Education Center	MS
United Way of Rhode Island (Faith and Science)	RI
United Way, Inc.	CT
Utah Health Policy Project	UT
Valle Del Sol Inc	AZ
Vietlead	PA
Virgen de Guadalupe Catholic Foundation	TX
Virginia Interfaith Center for Public Policy	VA
Vital Access Care Foundation	CA
Wabanaki Public Health and Wellness	ME
Waves Ahead Corp	PR

We Get 2 Give, Inc.	MD
Westside Sponsoring Committee (Together Louisiana)	LA
Woburn Council of Social Concern	MA
YMCA of Greater Nashua	NH
Young Women's Christian Association	TX