COVID-19 Vaccine Equity: Best Practices for Community and Faith-Based Organizations



Tailor and share information and materials that:

- Include images of people from or representative of the community
- Address community-specific concerns and misinformation, such as vaccine side effects or risk, what will happen at vaccination provider sites
- Address the benefits of immunization
- Provide details on vaccine appointments and administration, including how its free of cost, the ways to make an appointment, who will be delivering vaccine, languages offered at vaccination sites, and personal information to be requested and how it will be used



- Use messaging/tone that is culturally relevant and in predominant languages
- Communicate vaccination sites, hours, locations, and transportation options and cost

Use methods and platforms to conduct outreach that community members use, such

as:

- Flyers, postcards, ads, or outreach at popular or common community sites
- Social media (e.g., Twitter, Facebook, and Instagram) and other frequently used online



platforms, such as newsletters, listservs, local news, and websites

- Text message campaigns to promote vaccination benefits and in formation
- Text and call reminders to share information about appointments and eligibility
- Popular radio or TV stations in the community
- Community-dialogue opportunities, such as town halls, Q&A sessions, and small group discussions
- Conversation opportunities between community members and trusted healthcare staff at clinics or pharmacies

Conduct outreach and deliver vaccines at popular venues and locations, such as:

- Frequented community centers and spaces (e.g., barbershops/salons, local shops, recreation centers)
- Faith-based institutions (e.g., churches, mosques, synagogues)
- Schools and other educational institutions (e.g., local schools, community colleges, HBCUs) Page 2 of 2
- Social or community service locations that community members access
- Pharmacies in the Federal Retail Pharmacy Program, including local/independent pharmacies
- Local health sites, such as community health centers, mobile clinics, and temporary/off-site clinics
- Employers where community members work, especially frontline essential workers



such as:

- Local radio, TV, and social media personalities/influencers
- Local businesses, groups, neighborhood or recreational groups, employers where community members work, and organizations
- Local chapters of legacy civil rights organizations or fraternities/sororities
- Volunteers or residents from nearby nursing or medical programs that represent the community
- Local or national celebrities that the community trusts or supports



• Trusted community leaders and healthcare staff that represent and look like those in the community

Ensure vaccination appointments and sites are accessible to and trusted by community members, considering:

- Locations useful for or accessible to community members
- Nontraditional clinic sites and hours (e.g., nights, weekends) to work around work or family responsibilities
- Sites that bundle vaccination with other services



community members seek or need, including social services, shelters, food banks, churches, and more

- Subsidized and accessible transportation, including public transportation, and ride-share services (e.g., Uber, Lyft)
- Coordination with local or state health department to reach out to community members to schedule appointments
- Trained vaccine schedulers, workers, and translators who are the same race/ethnicity and speak the same languages as those in the community
- Sufficient healthcare staff who can administer vaccines who look like the community