Building COVID-19 Vaccine Confidence
San Francisco Department of Public Health

Vaccine Champions Training
Building COVID-19 Vaccine Confidence:
Helping People Make Informed Choices
San Francisco Department of Public Health

Community COVID-19 Vaccine Communication Training Model:

- **Ambassador Level (Level 1):**
  - Provides COVID-19 Disease, Vaccination, Distribution information and Communication tools material
  - Provides 60 minute training to community, stakeholders, or specific audiences as a trusted partner
  - Utilizes bi-directional communication to share back from community and quickly communicates updated information
  - Requirements:
    - Attends at least 1 COVID-19 Vaccination Ambassador Training as participant
    - Completes pre/post training survey information if relevant
    - Provides basic information on stakeholders or audiences trained

- **Champion Level (Level 2):**
  - Provides COVID-19 Disease, Vaccination, Distribution information and Communication tools material
  - Provides 90 minute deeper training to capacitate other trainers to become ambassadors or champions in order to support rapid capacity building
  - Utilizes bi-directional communication with TTT program to share back from trainers or community and quickly communicates updated information
  - Requirements:
    - Attends at least 1 COVID-19 Vaccination Ambassador Training as observer
    - Attends at least 1 COVID-19 Vaccination Champion Training as participant
    - Completes pre/post training survey information if relevant
    - Provides basic information on stakeholders or audiences trained
    - Participates in as-needed mini-trainings when training updates occur and updates training slides before presentations
Prepping to be a Vaccine Champion

- We want you to make this presentation your own so that it really speaks to the population you serve.
- During this presentation we encourage you to take notes as to how you would customize the message for your population.
- We will give you time to think about and practice throughout the training.
- You can also use the slide notes that were included in the template invite or sent along to registered attendees.

Intended audience for this presentation

- COVID-19 Vaccine Influencers AKA Champions
- CCC Community Branch group leads
- District neighborhood action plan leads
- Community Leaders
- Staff at CBOs
- Faith based Leaders
- Promotions/community health workers
- And more!

Welcome

- Mindful moment: focus on today’s purpose
- Welcome
- Why are you here?
  - Help our communities gain confidence in their vaccine choices
  - Learn COVID-19 facts and take back talking tools
- Why are we here?
  - To equip trusted community leaders (YOU) with the necessary resources to help others vaccine
  - To change the conversation around vaccine to one of choice
COVID-19 has Changed Everyone’s World

- Local Health Orders and Health Guidelines
- Sheltering in place/staying home
- Forbidding gatherings
- Closing places of worship, schools, restaurants, gyms, stores
- Many of these places are where we go for emotional, spiritual, and mental recharging
- Much more...
- All these changes have impacted many people's mental, physical, spiritual, and emotional health.
- We need to acknowledge how these changes impact us as workers and communicators.

Today's Agenda
1) Inequities & COVID-19: History and Current Reality
2) COVID-19 Overview
3) COVID-19 Vaccine Overview
4) COVID-19 Vaccine Distribution
5) Building Vaccine Confidence: Tools to Help People Make Informed Choices
6) FAQs
7) Resources & Next Steps

Champion Training Objectives
1. Participants will gain knowledge and skills to provide key COVID-19 vaccination information to the community for informed decision making and action steps.
2. Participants will learn to apply COVID-19 vaccination training in order to train and support additional trainers on this information.
3. Participants will have the knowledge and tools to become Vaccine Champions:
   - Facts about the vaccine
   - How to communicate it
   - Where to bring back questions and how to be updated with new info.
Acknowledge and Address Inequities: History & Current Reality

Mistrust of medical and public health institutions in communities based on centuries of:
- Unethical medical and scientific research in communities of color
- Decreased access to medical and public health services, people with disabilities, biopsychosocial issues, LGBTQI, racial/ethnic populations
- Ongoing discrimination and inequities in medical care

32% of African Americans,
25% of Latinos,
14% of Native Americans
reported experiencing discrimination when seeking care from a doctor or health clinic.

Racial Humility at the Forefront
- Recognize and acknowledge historical trauma
- Be racially humble in learning across lines of racial difference.
- Recognize you have one way of seeing the world and there are many other perspectives from people across races.
- If you are correcting false information, don’t try to correct history.
- Create space for people to voice their trauma.
- Provide support and acknowledgement.
- “I understand and recognize…”

Structural Barriers & Sanctuary Trauma

Structural Barriers
Obstacles that collectively affect a group disproportionately, perpetuating disparities in outcome:
- Insurance status
- Primary care access
- Accessibility of vaccine sites
- Provider suggestion

Sanctuary Trauma
Expecting a supportive, protective environment and instead experiencing racism, oppression, or micro aggressions further heightening existing trauma
Impact of Racism and Trauma on COVID-19 Outcomes

Highest Cases:
- Bayview Hunters Point
- Tenderloin
- Mission
- Outer Mission
- Excelsior
- Visitacion Valley

Red Dot = High Volume Vaccination sites

Disproportionate cases among Latinx and Black/African American
Disproportionate death rates among Asian, Black/African American, Latinx

Your Turn: Tailoring the Training Introduction for the Community You Serve

For the community you serve, what COVID-19 info would be most important?
- Take a moment to consider:
  - Are there data points important to include?
  - Are there relevant historical references to include?
  - Are there key structural barriers to include?
What is COVID-19?

- COVID-19 is a contagious respiratory illness.
- This infection is caused by a coronavirus. We have known about these types of viruses for years, but this is a new strain.
- COVID-19 and the flu cause similar symptoms, but they are different viruses.
- The virus causing COVID-19 spreads easily and is more likely to cause severe symptoms and death than the flu.

COVID-19: How it Spreads

- COVID-19 is mostly spread person to person, in the air through virus-containing droplets when a person breathes, talks, sings, coughs, or sneezes from up to 6 feet away.
- People are infected when they breathe in droplets or if droplets land in their eyes, nose, or mouth.
- Smaller droplets or infectious particles can float in the air and/or travel beyond 6 feet or indoor air currents, especially in enclosed spaces with poor ventilation.
- COVID-19 can also spread if a person touches their eyes, nose, or mouth after touching a contaminated surface, however this is less common.
- Someone may get infected if they are within 6 feet of an infected person for a total of 15 minutes or more over a 24-hour period and starting two days before illness starts.

COVID-19: Preventing Infection

- Wear a Face Covering. Cover your mouth and nose with a face covering in public and when around people you don’t live with.
- Avoid Close Contact. Keep at least 6 feet space from people you don’t live with.
- Avoid crowds.
- Open windows.
- Being outside or good ventilation is important.
- Wash hands often with soap and water for 20 seconds after touching your face or objects.
- Use hand sanitizer with at least 60% ethanol or 70% isopropanol, if no soap/water available.
- Routinely clean & disinfect high touch surfaces.
- Spend time outdoors.
- Increase ventilation.
COVID-19 Signs and Symptoms

Monitor Your Health Daily and stay home if you have symptoms or were exposed to someone with COVID

If you are experiencing any of these symptoms or were exposed, get tested and stay home.

• Fever or chills
• Cough
• Shortness of breath/ difficulty breathing
• Fatigue*
• Muscle or body aches*
• Headache
• New loss of taste/smell
• Sore throat
• Congestion or runny nose*
• Nausea* or vomiting
• Diarrhea

Symptoms that most impact children:

Wearing a mask protects you AND others.

Most transmission of COVID-19 is likely from people who show no symptoms (asymptomatic) and pre-symptomatic individuals.

COVID-19 101: Summary

• COVID-19 is a contagious respiratory illness.
• You can become infected with it if you breathe in droplets from an infected person.
• Most transmission of COVID-19 is likely from people who show no symptoms (asymptomatic) and pre-symptomatic individuals.
• Common symptoms: fever, cough, shortness of breath.
• Most common symptoms:
• Prevent COVID-19 by wearing face coverings, including your home, keep 6' distance from people not in your household, avoid gatherings, washing hands frequently, and good ventilation.
• Good news: another way to prevent getting sick from COVID-19 is to get a vaccine.

Your Turn: Tailoring COVID-19 Info for the Community You Serve

For the community you serve, what COVID-19 info would be most important?

• Take a moment to consider:
  What information is most relevant for your community?
  Have you shared what you would highlight with your community?
COVID-19 Vaccines Overview

Currently three approved vaccines

- Pfizer
- Moderna
- J&J

Others in process of being approved

Pfizer & Moderna: messenger RNA (mRNA) vaccines

- Pfizer & Moderna are all are effective against a person becoming ill with COVID-19
- Based on large clinical trials
- Every study, every phase, and every trial was reviewed by the FDA and a safety board.
- Serious side effects are rare.
- Each vaccine is given in 2 doses.
- Medical experts have been working on vaccines for the coronavirus family for years, so they did not have to start from scratch.
How a messenger RNA (mRNA) vaccine works. Scientists take some inactive virus genetic code that tells cells what to build and coat it in a lipid (fat) so it can enter the body’s cells. The vaccine enters the cells and tells the cells to produce the protein from the outside of the coronavirus so your body can recognize it later.

The immune system produces antibodies that recognize the protein from the outside of the coronavirus.

If your body comes in contact with a coronavirus, the immune system can now recognize it and fight the virus.

**Pfizer & Moderna Vaccines: How They Work**

- Pfizer: Two-dose vaccine
- Moderna: Two-dose vaccine
- Extremely effective in protecting against severe disease.
- Effective against moderate to severe COVID-19 infection in a multi-country study.
- No hospitalizations or deaths among people in large clinical trial.
- Not the same kind of vaccine as the mRNA.

**Johnson & Johnson Janssen Vaccine**

- Johnson and Johnson: Single dose vaccine
- Extremely effective in protecting against severe disease.
- Effective against moderate to severe COVID-19 infection in a multi-country study.
- No hospitalizations or deaths among people in large clinical trial.
- Not the same kind of vaccine as the mRNA. But it does cause your cells to make protein for your immune system to recognize.

**Vaccine Scientist Working to Eliminate Disparities**

- Kizzmekia Corbett, MD, an immunologist at the US National Institutes of Health (NIH), is one of the NIH’s leading scientists who in early 2020 helped to develop an mRNA-based vaccine for COVID-19.
- Dr. Corbett is part of a team at NIH that worked with Moderna to develop one of the two mRNA vaccines that has shown to be more than 90% effective.

Vaccines have the potential to be the equalizer of health disparities, especially around infectious diseases. I could never sleep at night if I developed anything—if any product of my science came out—and it did not equally benefit the people that look like me. Period.
Other vaccines are on the way

You may feel your immune system respond after the vaccine

All symptoms are short term
- When mild side effects occur, you are in fact aware that your body is building protection to the virus.
- Common side effects which go away in a few days include:
  - Fever
  - Chills
  - Headache
  - Tiredness
  - Joint or body aches
  - Pain, redness or arm pain (use a cold compress and move/exercise the arm)
- For most symptoms talk to your health care provider
- A severe allergic reaction is a rare side effect that occurs in 4 people out of 1 million who receive the shot.

Vaccines As A Key COVID-19 Prevention Tool

- COVID-19 vaccines are safe, effective, and free.
- It will take time for everyone who wants a COVID-19 vaccine to get one. It is expected that the general population will have access to the vaccine later in 2021.
- Currently, COVID-19 vaccines are not recommended for children under 16.
- Many people will receive the vaccine by:
  - Appointment at one of the high-volume sites
  - Open access and appointment at select community clinics
  - Pharmacies
  - Neighborhood vaccine access sites.

Even after being vaccinated: you still need to wear your mask, physically distance and thoroughly wash your hands
The hope is vaccine will bring an end to the pandemic.

In countries with high vaccination rates, we’ve seen less deaths.

We need a high percentage of people to get vaccinated in order to get to community immunity and achieve benefit for the rest who cannot/cannot or do not get vaccinated.

- Being vaccinated is someone’s personal choice
- Important to know if someone declines vaccination:
  - People will not lose their job
  - Our job is to respect that choice and encourage people to continue to practice safe distancing, masking, etc.

COVID-19 Vaccines: Summary

- Currently 3 approved vaccines, others in process of being approved
- All have been through all required FDA safety processes
- All are highly effective against a person becoming ill with COVID-19
- Serious side effects are rare
- Vaccines are free
- We believe the general population will have vaccine access later in 2021
- By the time it’s your turn millions of people in the world will have been vaccinated
- The hope is the vaccine will bring an end to the pandemic
- Being vaccinated is someone’s personal choice

Your Turn: Tailoring Vaccine Info for the Community You Serve

Tailoring vaccine information to the community you serve:

- Take a moment to think about:
  - What vaccine messages are most relevant for your communities?
  - What fears or worries need to be addressed?
  - Write down what you would highlight with your communities
COVID-19 Vaccine Distribution

• State and Federal Government are driving the prioritization and allocation process, but it’s not unified
• Federal Government allocates vaccines to State and the State allocates to Local counties.
  • Vaccine goes directly from feds to pharmacies and indirectly from state to local sites
  • Unclear how much will be allocated and when
• San Francisco must follow national and state recommendations.
  • SFDPH does not decide who gets vaccinated first
• SFDPH is responsible for allocating and administering a portion of the vaccines delivered to San Francisco.
  • There are many operational challenges

Vaccine Distribution

California Dept of Public Health Allocation Prioritization

Phase 1A
Healthcare workers
Long-term care residents

Phase 1B (tier 1)
Beginning March 15, healthcare providers may use their clinical judgment to vaccinate individuals aged 16-64 who are deemed to be at the very highest risk to get very sick from COVID-19.

Future phases

Phase 1A (now vaccinating)
Phase 1B (tier 1) (now vaccinating)

FOR UPDATED INFO on current Phase: https://covid19.ca.gov/vaccines
Community Vaccine Planning: Deploying all the resources of CCC and beyond to get people vaccinated

- More appointments
- More access, and bring the vaccine to communities

Vaccination sites underway

- Includes those who
  - Expanding beyond health care workers and those >65.

- Oakland Col.
- SF Market
- Moscone Ctr
- City College
- SFHN and other providers
  - Includes transport support

Allocation focus; DPH resources focus; population needs focus

Open to Phase 1b, Tier 1* as of February 24

Per Day By Vaccine Site/Program

High volume sites - Serving their own patients
- Max/day: 7,200
- Max/day: 2,400
- Max/day: 1,000
- Max/day: 650
- Max/day: 600
- Max/day: 2,000
- Max/day: 1,500
- Max/day: 1,000

Moderate volume sites - Standing sites with vaccine
- Daily target: 500
- Daily target: 500
- Daily target: 300
- Daily target: 200
- Daily target: 200

Low volume sites - Open access; affiliate staff not DPH
- Weekly target: 500
- Weekly target: 200
- Weekly target: 150

Percentage of Vaccinations:
- All PHNs: 11%
- SFHN: 11%
- Other: 3%
- Consortium: 5%
- Mobile: 8%
- Pharmacies: 6%
- Community Clinics: 4%
- Neighborhood sites: 6%
- Other: 4%
- Mobile units: 6%
- High volume sites: 4%

At peak distribution, more than 70% of vaccine in San Francisco will be administered via high-volume sites and pharmacies (navy + orange).

But most of our efforts at CCC and SFDPH — and 100% of our vaccine allocation — will be focused on reaching the additional ~25% of the population. These segments represent the most vulnerable in our communities.

At peak distribution, more than 30% of vaccine in San Francisco will be administered via high-volume sites and pharmacies (navy + orange).
COVID-19 Vaccine Distribution: Summary

- Federal Government purchases and distributes vaccines to states.
- States allocate vaccines at their discretion.
- The state decides who can be vaccinated at what point.
- Current healthcare workers, long-term care and ICUs, public health, emergency services, food and agriculture.
- The state distributes vaccines to multiple sites in San Francisco.
- SFHN receives a small portion of vaccines and does not have the capacity to distribute to other sites and healthcare systems.
- SFHN is partnering with large healthcare systems to provide vaccines at high-volume sites.
- Sign up to be notified when it's your turn.
- When it's your turn, make an appointment to get your vaccine.

Getting Vaccinated

1. Sign up to get notifications
   - In SF: https://sf.gov/get-notified
   - Outside of SF: https://myturn.ca.gov/
     - You can get notifications for yourself or for others.
   - Get notified when you're eligible for the COVID-19 vaccine.

2. After you sign up
   - You will get a confirmation message that you have signed up for notifications.
   - You will find out where you are in the State's vaccine priority list.
   - You may not be able to make an appointment immediately.

3. When it's your turn, make an appointment
   - COVID-19 vaccination: Find out if it's your turn.

Your Turn: Tailoring for the Community You Serve

For the community you serve, think about what phases of COVID-19 vaccine will impact your community.
- What barriers might your community encounter when the vaccine becomes available to them?
- Write down what you would highlight with your community.
Let’s take a break!

Building Vaccine Confidence: Helping People Make Informed Choices

Trainer Toolkit

- The following are types of approaches to discuss the vaccine
- Adapt the following tools in this section for use with your community
- Take what is helpful for your use as a trainer
- Adapt, delete, edit as they work for you and your community
CDC’s Vaccinate with Confidence Campaign

Messages from Trusted Sources

Focus on Facts rather than correcting false information

- Studies indicate that trying to correct false information:
  - reduced intent to vaccinate,
  - increased false beliefs after intervention
- If must address false information, avoid repeating it. Deemphasize the false information, emphasize the truth
- Use terms like "false information" or "false rumor" to stay away from "myth"
  - Myths are seen as positive in some cultures.
  - Myth: unchallenged, our facts available, impact of the "myths" around COVID can be proved false
- Before mention of false information, use text, visual or oral clues to warn that upcoming information is false
- Display core facts graphically
Try a “Truth Sandwich”

One approach to addressing misinformation, modified from George Lakoff, Retired UC Berkeley Linguistic Professor.

- Start with the truth. The first frame gets the advantage.
- Acknowledge the trauma.
- Call out the misinformation. Avoid repeating/amplifying the false language, if possible.
- Return to the truth. Always repeat truths more than false information.

Example: Concerns about vaccine safety

The COVID-19 vaccines are safe and effective. (Truth)

It can be scary, serious side effects from the vaccine are uncommon (address the misinformation while also acknowledging trauma)

COVID-19 vaccines have been thoroughly tested and were found to be safe. (Truth)

Your Turn: What communication strategies work best for the community you serve?

Focus on Concerns rather than shaming

- Aggressive attempts to “normalize” vaccination (with implications of shaming those who don’t vaccinate) may backfire by further boosting the groups hard work to ‘go against the grain’.
- “Solidarity with one’s people networks may be so important that outside challenges only strengthen beliefs.”
- Ex- Reappropriation of #TeamStupid (an anti-vax media label)
- Suggest: Rather than trying to change someone’s behavior, focus on what you can do to eliminate or decrease risk:
  - Extract self from situation
  - Wear masks
  - Create distance
Responding without Judgment

- Many people are inundated with too much data and information—help people wade through it
- Ask open-ended clarifying questions or prompts to understand specific concerns
  - "I’m curious to know..."
  - "Tell me a little bit more..."
- Equip people with info to make informed choices
  - Vaccines are the biggest public health innovation and resulted in significant health improvements
  - Vaccines are examined, studied and approved in most rigorous settings

Benefits of Getting the Vaccine

- Vaccines are the biggest public health innovation and resulted in significant health improvements
- All of the vaccines prevent severe COVID symptoms
- They are safe and very regulated
- Vaccines are examined, studied and approved in most rigorous settings
- Your family and community will benefit
- Those that can't get the vaccine will benefit from community immunity

Addressing Vaccine Confidence: Summary

- You know your audience—tailor your message to them
- Utilize trusted sources—include testimonials of respected figures (get my vaccine buttons, local media)
- Provide details on vaccine access
- Acknowledge people’s fears and concerns especially related to trauma and racism in healthcare
- Explain benefits of getting the vaccine, not just the consequences of not doing it
- Recognize people may need to hear the message multiple times
- Avoid judgment, embrace curiosity to understand
- Avoid shaming
- Don't talk about pharmaceutical companies; talk about people behind the vaccines: scientists & doctors
Reference what you noted earlier:
What vaccine messages are most relevant for your communities?
What fears or worries need to be addressed?

Case study 1: A 65-year-old African American woman tells her pastor neither she nor her family will get the vaccine because she doesn’t trust the system and wants others to be the ones it gets tested out on first.

Case study 2: A 25-year-old Asian woman is talking to her friends saying that she won’t get the vaccine because she’s trying to get pregnant and she doesn’t want the vaccine to interfere with her ability to get pregnant.

Roles: select roles and play out the scenario
A. influencer  B. vax hesitant person
Others: observe and note techniques being used

Case study 3: A 43-year-old Pacific Islander male tells his doctor at a regular visit to check on his cancer medications that he does not plan to get vaccinated because he’s concerned the meds will interact with his treatment.

Case study 4: A 20-year-old Latino male tells his co-workers at the restaurant not to get the vaccine because the government is trying to track people with the microchip that they implant in people—especially those who don’t have documents.

Roles: select roles and play out the scenario
A. influencer  B. vax hesitant person
Others: observe and note techniques being used
Pre Training
- Finalize participant list
- Create calendar meeting invite
- Review and update pre-registration
- Coordinate host virtual meeting link
- Establish pre-registration info/survey
- Draft agenda with timing
- Confirm with virtual meeting support team or people
- Confirm speakers
- Confirm Facilitator roles, and if needed Clinician roles for training
- Update presentation deck with any updated information since last presentation
- Coordinate with virtual meeting support team or people
- Identify translation need and coordinate with virtual meeting team
- Coordinate break out room logistics if needed
- Who will facilitate in each breakout room
- Identify interpretation need and coordinate with JIC VOT
- Finalize pre-training and post-training survey for last few minutes of training, update survey link
- Test any other platforms to be used
- Padlet for group interactions
- Break out room functions
- Conduct mock run through of training for estimated timing
- Coordinate admin or virtual meeting team to conduct note taking at training on questions

Post Training
- Send out follow up email within 1 business day if possible:
  - Recording
  - Slides & additional materials
- Post-training survey for feedback
- Receive registration information from virtual meeting team to document metrics for internal processes
- Conduct debrief on things that went well and things that could be improved for next trainings
- Create action plan on when to implement changes
- Follow up on FAQs that come out of training with communications team
- Read note taker notes to review
- Share back to CCC on # trainings held, # people trained, biggest questions or discussion points from trainings held
COVID-19 Resources
To Review Regularly

- COVID Vax general info:
  - https://sf.gov/covid-19-vaccine-san-francisco
- COVID Toolkit:
- COVID VAX Data:
- Where to get vaccinated:

COVID-19 Data Dashboard

FAQs

- Does immigration status impact ability to get a vaccination?
  - No – it doesn’t impact your ability to be vaccinated. SF is a sanctuary city, people can safely get health care through the city system. We want everyone to be vaccinated.

- How long will the COVID-19 vaccine last?
  - The research is not complete on this. Further research will tell us more about how long immunity lasts and if people will need more vaccinations in the future.

- Do the vaccines work differently or have different side effects for people of diverse ages, racial backgrounds, sexes, and other differences?
  - Trial results have shown that the vaccines are safe and effective for adults of all ages, races, genders, ethnic backgrounds and underlying medical conditions.

- Can I still get COVID-19 after I get the vaccine?
  - It’s possible. While current vaccines are highly effective in preventing people from getting COVID-19, you can still get COVID-19 and be sick even if you get the vaccine.

- Do I still need to get tested after getting vaccinated?
  - NO! Even after you get the vaccine, you can still get and spread the virus. We encourage you to test if you test positive in the future.

- Will the vaccine impact my fertility or ability to get pregnant?
  - Based on current knowledge, medical experts believe the COVID-19 vaccines are unlikely to pose a short or long-term risk to those who are or are wanting to become pregnant.

- How long will the COVID-19 vaccine last?
  - The COVID-19 vaccine is still under development and testing. More information will be available as research continues.

- Can I still get COVID-19 after I get the vaccine?
  - It’s possible. While current vaccines are highly effective in preventing people from getting COVID-19, you can still get COVID-19 and be sick even if you get the vaccine.
Next Steps

Now what’s next?

- Make a plan with your team/partners
- Review training slides, information, and resources
- Set up a meeting and deliver the information in the training to your community!
- Deliver the information and train your community with this slide deck
- Document delivery of trainings
  - How many people did you reach? What communities did you engage?
  - Share your training schedule with dph.doc.ops.community@sfdph.org
- Keep bi-directional flow of information going
  - Share for most updated information on COVID-19 vaccine
  - Latest vaccine info
  - Latest vaccination Phases
- Share what your community is talking about
- What are you hearing from your community members?
- Are there new/different concerns?
- How are you responding to those?

Please complete this brief survey, we value your feedback! [see survey link]
Questions

Thank you!

Questions? Dph.doc.ops.community@sfdph.org