

Black and Hispanic communities are lagging in getting vaccinated. How these organizations are trying to change that

Healthcare organizations are using personal connections and non-medical endorsers to convince hold-outs to get COVID-19 vaccines.



Close up of a young woman getting vaccinated

At the height of the COVID-19 pandemic, Ruth Clements worked 18 hours a day for Quest Diagnostics as the leader of a \$100 million initiative, Quest for Health Equity, to close healthcare gaps exposed by the virus.

“I know everything that you could think of when it comes to COVID-19,” says Clements, who also serves as GM of the company’s infectious disease and immunology section.

Even though Clements, who is Black, was so dedicated to encouraging people of color to get a COVID-19 vaccine, she has not been able to convince her own daughter and some other relatives to get the shot. That’s even after a cousin, who declined to get vaccinated, died from the virus.

That struggle is not unique to Clements’ family. Compared to white people, people of color have died at a higher rate from COVID and gotten vaccinated at a lower rate, according to [data from the Kaiser Family Foundation](#) and [The COVID Tracking Project](#).

That lower vaccination rate can be attributed at least in part to a lack of trust in the American healthcare system because of systemic racism, as well as the spread of misinformation, Clements and others in public health say.

Even though the vaccination rate disparity exists this long into the pandemic, those trying to reach underserved communities say they still have confidence in their strategy of partnering with leaders outside of the health realm. That plan can include working with Black clergy, and discussing people's concerns in a culturally sensitive manner.

“We are actively looking for other partners within the communities we are trying to impact to make sure that we can support that message of the importance of vaccination,” said Clements, who built partnerships with Black churches in five cities to set up COVID-19 testing sites and vaccination clinics.

Vaccine advocates say they must overcome lingering mistrust from decades-old scandals such as [the Tuskegee study](#), a federally funded experiment involving Black men with syphilis that began in the 1930s.

During a September 2020 town hall organized by the Black Coalition Against COVID-19, people asked about the experiment and the common misconception that the men were injected with syphilis. (The experiment was condemned for many reasons, including because the men were not told they had syphilis and did not receive treatment for it).

Such questions have helped the coalition tailor their messages, said Jewel Jones, health equity and justice practice leader at Real Chemistry, which has partnered with the coalition.

After the town hall, the coalition produced a video with the Ad Council featuring the descendants of the Tuskegee study discussing its legacy and their confidence in the COVID-19 vaccines.

But Thomas LaVeist, a sociologist and dean of the School of Public Health and Tropical Medicine at Tulane University, thinks the impact of the Tuskegee study has been overstated. LaVeist authored a 2005 *Journal of the National Medical Association* study that found [most Black and white survey respondents had not heard of the study](#) or knew little about it.

LaVeist said the distrust in the healthcare system is more due to Black people being “treated in a discourteous way at the hospital” that they “suspect was racially tinged.”

To overcome that, the Allergy & Asthma Network added COVID-19 testing and vaccination to an initiative, Not One More Life, that offered free asthma screenings and patient education at Black churches.

When a local pastor shares information about COVID-19, it has “almost instant credibility,” said Tonya Winders, president and CEO of the Allergy & Asthma Network. “This is not just another doctor, another healthcare provider, another vaccine manufacturer.”

The network also tried to make materials shared at church clinics “culturally competent” by putting the documents before focus groups of Black and Latinx people, she said.

GCI Health tried to reach Hispanic communities, which have also been vaccinated at a lower rate than white counterparts, by leveraging Hispanic influencers and patients, said Dawn Christian, EVP of inclusion, equity, diversity and cultural marketing at the healthcare specialist firm.

“We have seen the value of connecting with the actual lived experience or a personal appeal from someone people can identify with,” Christian says, in an email. “We have found that top-down messaging is not terribly effective.”

Even though less than half of the Hispanic and Black population are fully vaccinated, Winders is optimistic because many people who discuss their concerns with staff at the church clinics decide to

get the shot on the spot, she said.

“It is having a 20- to 30-minute trusted messenger conversation that is tailored to that individual’s concerns that’s going to move the needle, and that takes a lot of effort and resource and time,” said Winders.

LaVeist, the Tulane professor, disagrees. While he thinks it’s important to continue to educate people about the vaccines, he now says mandates are the key.

“I don’t know where that idea that we can persuade people [comes from] — I don’t see evidence of that,” he said. “Frankly, I don’t think there are many carrots left. I think we need sticks.”

This story originally appeared on [PRWeek](#).