

VIEWPOINT

Partnering With the Faith-Based Community to Address Disparities in COVID-19 Vaccination Rates and Outcomes Among US Black and Latino Populations

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The latest data from the Centers for Disease Control and Prevention (CDC) document that Black and Latino individuals in the US are 3 times more likely than White individuals to be hospitalized for COVID-19 and twice as likely to die from the disease.¹ Of the US population of approximately 330 million individuals, more than 100 million are Black or Latino individuals, who comprise 32%.² Nevertheless, Black and Latino individuals account for only 25% of the 184 million people in the US who have received at least 1 dose of the COVID-19 vaccine, whereas White individuals account for 59% of those who have received the vaccine.³ Similarly, Black and Latino individuals comprise only 24% of the 159 million persons in the US who are fully vaccinated against COVID-19, whereas White individuals account for 60% of those fully vaccinated.³

The proportion of White individuals who have received a COVID-19 vaccine (47%) is about 1.4 times higher than the proportion of Black individuals (34%) and 1.2 times the proportion of Latino individuals (39%) who have received a COVID-19 vaccine.⁴ A consistent pattern continues with communities of these

such as the George Floyd killing, have underscored, systemic racism continues to be a major challenge for the US health care system and for US society. In addition, Black and Latino individuals have understandably low levels of trust in the federal government and medical care due to egregious past events involving ethically unacceptable studies and programs such as the US Public Health Service and CDC 40-year Tuskegee Study of Black men with untreated syphilis, unethical development of the HeLa cell line from Henrietta Lacks without her permission, and decades of forced sterilization of Latina women in Puerto Rico and California. It is not surprising, therefore, that myth-based concerns exist among these communities that deter their willingness to receive COVID-19 vaccination, such as beliefs that these vaccines contain microchips to track Black individuals or that the vaccine registration process will be used to deport Latino individuals.

How is it possible to overcome the triple burdens of impaired access to care, systemic racism, and distrust of the federal government and health care systems to eliminate COVID-19 vaccine disparities among Black and Latino communities?

A promising and powerful strategy is to partner with the faith-based community, a highly trusted resource and frequent central gathering place for communities that are composed of racial and ethnic minority populations. The National Black Church Initiative (NBCI) is a coalition of 150 000 Black and Latino churches aiming to eradicate racial and ethnic disparities in health

care, technology, education, housing, and the environment.⁵ The mission of the NBCI is to provide critical wellness information to all members, congregants, churches, and the public.

In 2021, NBCI announced a 5-year plan that offers the CDC its 150 000 Black and Latino churches across the US as vaccination centers. The plan will include a national advisory committee of 9 prominent Black and Latino physicians who have evaluated the effectiveness of each COVID-19 vaccine; will leverage approximately 1000 Black and Latino US medical professionals to administer vaccines; and will mobilize several million volunteers to raise awareness among and communicate to underserved communities, provide transportation to vaccination centers, and ensure that communities of racial and ethnic minority populations obtain their second vaccinations (when indicated). The NBCI plan has been designed to seamlessly integrate with the efforts of local and state governments and health

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racial and ethnic minority groups having substantially lower vaccination rates in relation to their share of the population and their overrepresentation among COVID-19 infections and deaths. In California, Latino individuals have received only 29% of COVID-19 vaccinations, although they account for 63% of those with COVID-19, 48% of deaths related to COVID-19, and 40% of the state's total population.⁴ In the District of Columbia, Black individuals have received 43% of vaccinations, but comprise 56% of those with COVID-19, 71% of deaths related to COVID-19, and 46% of the total population.⁴

Several factors appear to be driving these concerning and unacceptable disparities in COVID-19 vaccination. Decades of published research has documented that Black and Latino individuals have substantially worse access to primary care and specialty care and are much more likely to lack health insurance than White individuals. As the medical literature and recent events,

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departments and build communities and networks of cooperation and trust.

To date, NBCI has engaged 2.5 million volunteers and held more than 157 vaccination events. In addition, NBCI will soon distribute a half million copies of *VACCNEWS*, a newspaper-style single sheet in simple language (at an eighth-grade literacy level) that describes COVID-19, COVID-19 vaccines, and the importance of getting vaccinated. The information will be distributed in NBCI's 150 000 churches, focusing on low-income Black and Latino communities throughout the country. *VACCNEWS* additionally will be posted on social media and disseminated nationally as a supplement to 274 Black newspapers and regional dailies targeting Black and Latino communities.

The NBCI plan also will provide assistance and navigation for Black and Latino individuals to ensure that they obtain patient-centered medical homes for primary care, enhance access to care by collaborating with clinics and hospitals in both urban and rural areas, launch African American National Health Week during the last week of July every year, aim to increase childhood and adult vaccination rates for all diseases by 60% over the next 10 years, and create special emphasis programs for patients with diabetes, obesity, or cancer. In addition, NBCI's approximately 2.5 million nationwide volunteers will ensure that Black and Latino individuals receive culturally appropriate guidance and education in language they can understand and trust. It will also ensure that vaccine administration at churches is an optimal fit with their beliefs, lifestyles, communities, and cultural values.

The NBCI's national advisory committee of 5 Black and 4 Latino physicians (the NBCI COVID-19 Data and Information Committee) is doing more than just evaluating and reporting on vaccine effectiveness and safety. NBCI national advisory committee members will publicize the plan via Black and Latino radio stations, write articles targeting Black and Latino newspapers and magazines,

leverage social media to eliminate vaccine myths and correct misinformation, directly address the concerns of Black and Latino populations, and mobilize neighborhood influencers, civic groups, and local public health officials to advocate for vaccination.

Additionally, the NBCI plan will involve sending critical response teams to zip code-based locations with the highest proportions of impoverished residents, those living in public housing, or both. Critical response teams will consist of a local team leader, Latino and Black health professionals, a community representative, 5 to 10 outreach workers/volunteers, and mental health specialists. Critical response teams will develop and disseminate culturally and linguistically diverse multimedia outreach programs about COVID-19 vaccinations; promote use of best practices for disease prevention, detection, and treatment; and identify future COVID-19 health care priorities for Black and Latino communities.

NBCI estimates indicate that the total cost of implementing this plan is \$100 million, equivalent to less than \$1 per person to ensure that all 100 million Black and Latino individuals in the US are fully immunized against COVID-19. Although the NBCI plan is ambitious, it would be money well spent. If successful, the NBCI initiative could help ensure progress in the following ways: dispel COVID-19 vaccine myths, reduce vaccine hesitancy by having culturally relevant information delivered by trusted health care professionals and volunteers of racial and ethnic minority groups, administer COVID-19 vaccines equitably to those at greatest risk and with the least access, eliminate COVID-19 hospitalization and mortality disparities for Black and Latino individuals, and empower communities of racial and ethnic minority populations to help themselves. Indeed, the NBCI plan of leveraging a network of 150 000 churches to advance the public's health could prove to be a potent national model for eliminating Black and Latino racial and ethnic disparities in health and health care across the US.

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