

**TOGETHER  
WE PROTECT**



**Vaccine Equity Fund**

**JUNTOS  
PROTEGEMOS**



**Fondo de Equidad  
de Vacunas**

In early 2021, a change in the pandemic's course became a reality with new vaccines available to protect people from COVID-19. Recognizing a need to disrupt traditional vaccine approaches, Caring for Colorado initiated conversations with vaccination experts Immunize Colorado and the Colorado Vaccine Equity Taskforce, other funders, and leading public health officials to see how Colorado might drive innovation and equity in COVID-19 vaccine outreach and access.

Working quickly, the ever-growing group enthusiastically agreed to collaborate and formed Together We Protect (TWP). Altogether, 13 funding partners and two nonprofit organizations made up this unique partnership. TWP assembled an advisory group that included youth, community, advocacy and health voices to provide expertise and community insights, and to make grant award decisions.

Collectively, funding partners provided \$6.8 million over two years (2021-2022) through 167 grant awards to 132 community-based organizations.

This final report from evaluator OMNI Institute documents significant impact by these community-based organizations. Collectively, 8,024,761 individuals were reached (some were reached multiple times) through outreach and education on COVID-19 vaccination information, and vaccinations were administered to 96,960 youth (under 18 years of age) and 308,721 adults, the majority of whom represented Latino residents, immigrants and refugees, people of color, Colorado's indigenous communities, LGBTQ+ individuals, and people experiencing homelessness. The commitment of these individuals and organizations, their ability to work together in new and different ways, to shift power and trust community leadership, helped to mitigate the disproportionate impacts of the pandemic and prevent widening disparities.

**Caring for Colorado  
FOUNDATION**



**S&P Global  
Foundation**



**COMMUNITY FIRST<sup>®</sup>  
FOUNDATION**



**Uber**

DELTA DENTAL OF COLORADO FOUNDATION



**ROSE  
COMMUNITY  
FOUNDATION**



**The Denver  
Foundation**



**The Colorado Health Foundation<sup>™</sup>**

# Together We Protect Grant

Grantee Close-Out Survey Results 2022





# Together We Protect Grant Grantee Close-Out Survey Results 2022

Submitted to:

Colleen Church, Chief Strategy Officer  
Emma Carpenter, Philanthropy Specialist  
Caring for Colorado  
August 2022

Author(s): Jason Wheeler, Ph.D.

Project Team: Ailala Kay, M.A., Ona Crow, M.S., Clara Kaul, B.A., Danielle Walker, MPA

For More Information:

Project Code: TWPEExt  
[projects@omni.org](mailto:projects@omni.org)

## Acknowledgements

The OMNI Institute wants to thank the Together We Protect grantees, Caring for Colorado, and Immunize Colorado for their contributions to the creation of this report.



# Table of Contents

|  |          |
|--|----------|
| <b>Together We Protect (TWP) Grantee Close-Out Survey Results 2022 .....</b> | <b>1</b> |
| Introduction .....   | 1        |
| Outreach and Education, and Vaccinations .....                               | 3        |
| <b>Outreach and Education .....</b>  | <b>3</b> |
| <b>Vaccinations.....</b>   | <b>3</b> |
| Grantee Experience .....   | 4        |
| <b>Success Stories .....</b>   | <b>4</b> |
| <b>Advice .....</b>  | <b>5</b> |
| <b>TWP Grant Process.....</b>  | <b>6</b> |
| <b>Additional Comments .....</b>   | <b>7</b> |
| <b>Appendices.....</b>   | <b>8</b> |



# Together We Protect (TWP) Grantee Close-Out Survey Results 2022

## Introduction

Co-created by thirteen funding partners, Immunize Colorado, and the Colorado Vaccine Equity Task Force, the Together We Protect Grant (TWP) was launched in March 2021 and administered by the Caring for Colorado Foundation to support organizations working in communities disproportionately affected by the COVID-19 global pandemic to ensure that people who face systemic barriers have the most appropriate and accessible information about the COVID-19 vaccine and can access the vaccine through low-barrier opportunities.

In February, June and July of 2022, Caring for Colorado, with the assistance of OMNI Institute, surveyed TWP grantees on their efforts regarding implementation of vaccinations, and vaccine outreach and education. This survey served as a “close-out report” for grantees who had completed their vaccine equity efforts and expended their TWP funding. Completing this final grantee survey was a requirement of funding, and organizations were eligible to receive a \$250 incentive in recognition of their efforts and survey completion. Though they are listed here, survey participants’ and their organizations’ identities are kept separate from their responses, and/or de-identified.

**120** unduplicated responses yielded viable survey data from the following organizations:

|  |   |   |
|--|---|---|
| 9Health:365; 9Health Fair                | Boys & Girls Clubs of Metro Denver                    | Colorado Association for School-Based Health Care       |
| A Little Help                            | Boys and Girls Clubs of the San Luis Valley           | Colorado Black Health Collaborative                     |
| Adelante Community Development           | Bright by Text  | Colorado Community Health Network                       |
| African Chamber of Commerce Colorado     | Broomfield FISH                                       | Colorado Cross-Disability Coalition                     |
| African Youth Advocate                   | Brother Jeffs Cultural Center                         | Colorado Ethiopian Community                            |
| Amanda Blaurock, Village Exchange Center | Center Consolidated School District                   | Colorado Statewide Parent Coalition                     |
| Archway Housing & Services               | Center for African American Health                    | Community Equity Coalition/Chaffee County Public Health |
| Ardas                                    | Center for Immigrants and Immigration Services (CIIS) | Compañeros  |
| Atlas Preparatory School                 | Colectiva Creando Cambios                             | CREA Results  |
| Aurora Community Connection              | COLOR   | CU Sheridan Health Services                             |
| Aurora Economic Opportunity Coalition    | Colorado Alliance for Health Equity and Practice      |   |
| Bayaud Enterprises                       |   |   |
| Bent County Public Health                |   |   |

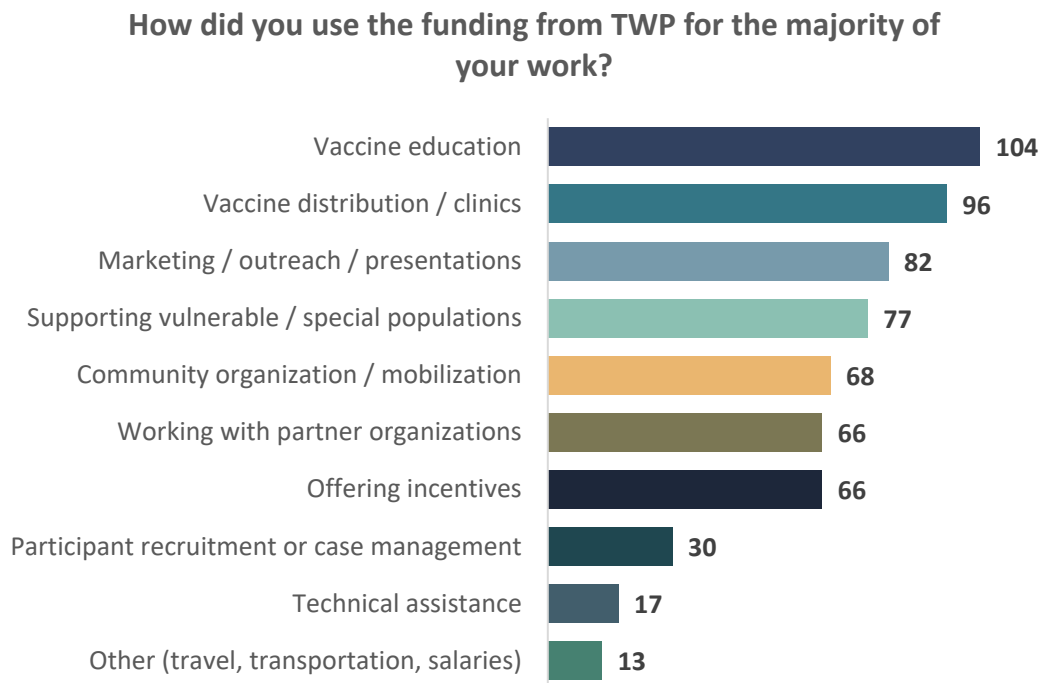
|   |
|---|
| Cultivando  |
| Dayton Street Opportunity Center                    |
| Denver Health & Hospital Authority                  |
| Denver Indian Center Inc.                           |
| Denver Indian Family Resource Center                |
| Doctors Care  |
| El Centro AMISTAD                                   |
| El Comité de Longmont                               |
| Every Child Pediatrics                              |
| Family Resource Center                              |
| Filipino-American Community of Colorado             |
| Focus Points Family Resource Center                 |
| Garfield County Public Health                       |
| Grand County Rural Health Network                   |
| Gunnison County Public Health                       |
| Health District of Northern Larimer County          |
| Highline Academy                                    |
| Homeward Pikes Peak                                 |
| Hope Communities                                    |
| Hopelight Medical Clinic                            |
| Inner City Health Center                            |
| Integrated Community Jefferson Center               |
| Julissa Soto - Independent Health Equity Consultant |
| Kids At Their Best                                  |
| Kids First Health Care                              |
| KUTE, Inc. DBA KSUT Public Radio                    |
| La Cocina   |
| La Plata Family Centers Coalition                   |
| Lake County Build a Generation                      |

|   |
|---|
| Land Rights Council                                     |
| Larimer County Department of Health and Environment     |
| Las Animas Huerfano Counties District Health Department |
| Living Water Christian Center Church                    |
| MarillacHealth  |
| Metro Migrant Education Program                         |
| Mi Familia Vota   |
| Mile High Connects                                      |
| MIRA (Mobile Intercultural Resource Alliance)           |
| Moffat Consolidated School District No. 2               |
| Mongolian School of Colorado                            |
| Montbello Organizing Committee                          |
| Mountain Family Health Center                           |
| Mountain Resource Center                                |
| Movement 5280   |
| Movimiento Poder  |
| Muslim Youth for Positive Impact                        |
| New Life Christian Center (NLCC)                        |
| North Colorado Health Alliance                          |
| One Colorado Education Fund                             |
| Otero County Health Department                          |
| Out Boulder County                                      |
| Pikes Peak Library District Foundation                  |
| Project Protect Food Systems Workers                    |
| Pueblo Department of Public Health and Environment      |

|  |
|--|
| RISE Colorado                                    |
| River Valley Family Health Centers               |
| Rocky Mountain Public Media                      |
| Rocky Mountain Welcome Center                    |
| San Juan Basin Public Health                     |
| San Miguel County                                |
| Scholars Unlimited                               |
| Second Chance Center                             |
| Senior Hub                                       |
| Servicios de La Raza                             |
| Soul 2 Soul Sisters                              |
| Southern Colorado Harm Reduction Association     |
| Springs Rescue Mission                           |
| St. Benedict Health and Healing Ministry         |
| Summit Community Care Clinic                     |
| The Family Center/La Familia                     |
| The Foundation for Sustainable Urban Communities |
| The Gyedi Project                                |
| The Powerhouse                                   |
| The Road Called STRATE                           |
| Thriving Families                                |
| Tri-County Health Network                        |
| Una Mano Una Esperanza                           |
| Venezia Innovative Services                      |
| ViVe Wellness                                    |
| Voces Unidas de las Montañas                     |
| Voces Unidas for Justice                         |
| Vuela for Health                                 |
| Westwood Unidos                                  |
| Zion Senior Center                               |

## Outreach and Education, and Vaccinations

The chart below shows the number of responses per category for how grantees used their TWP funding:



Grantees were asked to estimate the extent of their TWP-funded efforts for both youth and adults.

### Outreach and Education

Grantees reported a **total of 8,024,761 individuals** (*includes duplicates*) were reached through outreach and education on COVID-19 vaccination information, which equated to **66,873** individuals reached **on average** per grantee organization.

### Vaccinations

Grantees reported a **total of 96,960 youth** (under 18 years of age) received COVID-19 vaccines because of their efforts, which equated to **808 youth** reached **on average** per grantee organization.

Grantees reported a total of **308,721 adults** (over 18 years of age) received COVID-19 vaccines because of their efforts, which equated to **2,573 adults** reached **on average** per grantee organization.

# Grantee Experience

## Success Stories

Grantees were asked to share one brief story that best describes the success of their efforts. Below is a summary of the most common themes mentioned in responses, listed in order of most to least frequent:

(See Appendices for all responses)



## Advice

Grantees were asked what advice they would give to someone, or another organization who is taking on vaccine equity or community education work.



**Respect.** Know and respect your target audience and their needs and preferences, not just about vaccinations but about social issues; listen and talk with them to develop trusting relationships. Refrain from judgment and meet people “where they are at.” Connect in person rather than solely with flyers, and ensure services and information are available and accessible. Ensure the demographic being served is well-represented by the people who serve them.



**Cultural competency.** Engage vulnerable groups through a culturally competent lenses; acknowledge the added burden underserved populations experience when accessing health due to systemic oppression.



**Connect.** Identify community partners, leaders, and champions and establish relationships with them. Additionally, keep partners accountable for their reciprocity of efforts.



**Organize.** Properly and effectively plan, coordinate, and organize. Be flexible, patient, persistent, and diligent, especially when working with hesitant groups or individuals.



**Persevere.** Be patient with results, and be prepared for, and steadfast in the face of anti-vaccination adversity and vaccine hesitancy. Do not become discouraged.



**Be informed and agile.** Stay current on research and information about changing health issues, as well as changing events, people, needs and barriers.



**Celebrate.** Be celebratory and engage in culturally-appropriate recognitions of individual and community achievements. Make it fun and stay positive.



**Communicate.** Rely on multi-channel, multi-method communication, such as visual, vocal, and social media communication platforms and messaging.



**Incentivize.** Use effective and appropriate incentives.

## TWP Grant Process

The TWP Vaccine Equity Fund used a pooled funding mechanism and a streamlined application process to provide a highly accessible, low barrier, easy-to-navigate and responsive process to aid grantees. Grantees were asked to describe their experience, compared to other grant processes they had experienced.



**Convenience and clarity.** The TWP application process was easy to understand, concise/clear, fast, streamlined and enabled grantees to avoid excessive paperwork, spend more time and resources on vaccine equity work and celebration of efforts. This also applies to the reporting aspects of receiving the grant funds.



**Flexibility of funds.** Funds were able to be used flexibly with multiple timely disbursements, and no excessive reporting, barriers, nor “interference” by grantors. This enabled grantees to innovate their strategies, adjust for changes in the situation, and work with their communities in ways that served them best.



**Equity.** The equitable TWP funding process enabled grantees to work effectively with organizations that serve traditionally underserved or at-risk populations.



**Community of practice.** The community of practice, be it connecting with partners, attending the grantee meetings, or using the educational and supporting materials that were collected and offered, was very helpful and gave grantees support and ideas for implementation of their efforts.



**First time grantees.** Several grantees mentioned that the TWP funding mechanism was their first grant experience, or that they would not have engaged in seeking TWP funds if the process had not been so accommodating.

## **Additional Comments**

Grantees were asked if they had anything to else to share regarding their vaccine equity work. Due to the individualized nature of these responses, no overall themes were organized. All responses can be found in the last appendix of the report, starting on page 39.

# Appendices

Actual responses to four open-ended survey questions are below. The responses have been de-identified to ensure the confidentiality of survey participants' and their organizations' identities. **Responses that are particularly exemplary to the themes identified in the report are bolded.**

**Thinking about your COVID-19 vaccination and outreach efforts, what is one brief example or story that would describe the success of your efforts? Please share below. This could be about a successful clinic, partnership, or individual interaction that you experienced.**

**Our partnership with [a community partner] extended our reach into underserved communities. We vaccinated 604 children. 83% indicated they were of Hispanic or Latino ethnicity. The [community recreation center] clinic drew the most attention with [an elected civil servant] in attendance and vaccinating his own children, however it was not an equity clinic.**

In the first four weeks of vaccine access services, [our organization] provided 40 rides to vaccine appointments for older adults. We helped our older adult members to navigate the (at first) challenging process of scheduling a vaccine appointment and then scheduled transportation so members had the peace of mind that they could make their appointments and receive their dose.

Successful vaccine efforts were definitely the partnerships established with [property management organizations], local churches, and small businesses. In addition to [state and local health partners] and founders like [nonprofit organizations and local government agencies]. [Our organization] has gained the community's trust because of the local grassroots efforts and that was the most successful opportunity to meet the community where they most needed us to be present. Challenges varied from lack of knowledge of the health industry, best practices, collaboration opportunities, establishing new protocols, and having a new mindset of how to do community outreach during a health crisis where we could not be in person. Several of our challenges relied on funding since we lack the technical assistance to hire staff and plan for more vaccination events where the community needed it the most. In addition, the vaccine distribution was confusing by age groups and the health mandates did not help gather where we needed to create a positive impact. [Our organization] relied on effective messages by trusted stakeholders to inform about vaccination efforts and testing opportunities. [Our organization] addresses mistrust, misinformation, and lack of adequate information for the Spanish-speaking community members across the state. [Our organization] continued to involve [a local health department] with ways to improve relationships with the Spanish-speaking community to address the vaccination disparities and access to accurate information.

**Youth speaking and outreaching to their peers made our engagements more successful.**

Our vaccination and outreach efforts were a success because of our implementation of two key strategies: 1) engaging local youth in vaccination and education efforts and 2) incentivizing hard-to-reach populations. First, [our organization] has held vaccine clinics for the past 2 years. Because of the funding that CFC provided we've had about 10-15 students every Thursday volunteering, helping us get resources out, setting up and tearing down the "clinic", and directing individuals to the appropriate staging areas. Students have been enthusiastic about volunteering every Thursday including bringing their own friends to participate. Second, to increase the vaccination rates among vaccination-hesitant communities, [our organization] provided cash incentives to individuals who got vaccinated. This strategy was especially key in reaching Latinos/Hispanics, a critical population that has had persistently low vaccination rates. In the month of May, 90% of the shots given were to Hispanic/Latinos and 44% of the shots given were either 1st or 2nd doses.

One thing rural communities know how to do will is to collaborate! Our organization successfully partnered with [a public health agency] as the vaccine provider for each of the vaccine distribution events that we supported. We worked together to establish PODs at accessible times and locations throughout our community. However,

as transportation is a major barrier in our vast rural community with no public transportation and extremely limited access to Uber, Lyft, etc., our organization worked to reduce this barrier on multiple fronts. We purchased and distributed gift cards to support the cost of gas to and from vaccine appointments for those with vehicles. We partnered with a private transportation provider that typically operates as an airport shuttle, to utilize TWP funding to cover the cost of transportation for individuals without any other means of transportation. [The transportation provider] provided our organization with a discounted rate for any individual in need. We also partnered with [an organization that provides human services] in outreaching members of our community with disabilities to provide vaccine education and access, including transportation assistance to [a public health agency's] scheduled Equity-focused Vaccine Clinics in 2021. Our organization supported the education of the medical volunteers to increase understanding around mobility/accessibility needs, and we were able to equitably accommodate the various mobility needs of vaccine clinic participants, including providing vaccines to individuals while they remained in their vehicle. One individual in particular stated she was incredibly grateful for the transportation supports and additional accessibility accommodations that were made in order for her to receive her vaccine, as she reported she was "homebound" and was very anxious and eager to receive a vaccine due to being immunocompromised. These transportation supports were so successful in our community that when capacity arose for our local EMS to travel to individuals' homes to provide vaccine for those in need, it ended up not being necessary because all those that desired the COVID-19 vaccine had been able to access it with these vital supports.

Through our efforts we were able to reach dozens of unhoused individuals who were able to get vaccinated at one specific clinic we hosted in downtown Denver. We partnered with the [a public health agency's] mobile vaccination clinic bus so we could do outreach and actually have the shot administered at the same time. It was impactful to our team to reach so many people and to have received such a positive response from the community.

We are still doing 1st doses. That's a story right there! That means people are still slowly getting persuaded to do a 1st dose

Our outreach to the Spanish speaking community has been amazing. with the TWP money we were able to hire 3 employees that are primary Spanish speakers. they do PERSONAL outreach every day that we have a vaccine clinic. this has made a huge impact on our numbers vaccinated

On January 10, we hosted an educational event with [a physician] to help our community understand the benefits of vaccination. This is a success because the event was a new partnership that provided a benefit that our community may otherwise not have had access to if it were not provided by [our organization].

[Our organization] leveraged its community advisory board (CAB) to realize this vaccine equity project. CAB members supported the project through outreach and education efforts about the COVID-19 vaccine and also by volunteering at [our organization's] health fairs. During [our organization's] first health fair a CAB member noticed a man standing near the clinic. It appeared as though the man wanted to participate in the health fair, but he looked hesitant. This CAB member, a proactive community organizer, went over to ask the man if he needed any help. The man confided in her that he wanted to participate in the fair, but he was afraid to because he didn't have health insurance or a social security number. Judith explained that there were no restrictions to participating in the event and that to the contrary, everyone was welcome. This put the man at ease, and he confided in the CAB member that he had been very sick for the last year, struggling with diabetes and high blood pressure. In addition to receiving a COVID vaccine that day, this man also had a health screening completed by [a local clinic], and was referred to [another clinic], where he would be able to receive long-term care at an affordable cost.

Our organization started out with vaccinating our 400 plus members, most of who are undocumented Latino Day Laborer's. We have held over 15 vaccine clinics, onsite and on other off-site locations. We have partnered with [health departments], Elementary Schools, [a law enforcement youth outreach program] and many others. One of the best experiences for me was educating our members on the importance of getting vaccinated and their overwhelming response to get vaccinated.

The availability of these funds strengthened our collaborative efforts with community partners whose clientele are focused on those with disabilities and underserved populations in the Denver Metro Area.

Had a couple different Coloring contest about COVID each time we received about 40 drawings.

Through this effort to educate, provide resources, and vaccine access we were able to build a continuing partnership with [two health agencies]. We hope to keep these connections for future partnerships to serve our families.

With this funding [our organization] was able to send over 18,500 text messages to Colorado families containing educational information about the COVID-19 vaccine specifically related to children aged 5-11. In addition, we shared 3 vaccine messages on [our] social media channels connecting families to local information. Because [our organization] serves as an educational resource and communication channel we rely on anecdotal information regarding the impact of this outreach on actual vaccinations administered. After the November 10th message was sent, [a local health agency] reported 100 appointments were made overnight which could have vaccinated one or more family members at the clinic. These 'hyper-localized' messages sent to specific Denver zip codes had very high click through rates indicating that this was valuable and timely information families acted upon.

**One of the successes we found in our COVID-19 vaccine outreach efforts was in the positive reaction from the community when we created stories that centered marginalized communities, such as LGBTQ, Native and Indigenous populations, and older adults. For example, we wrote a story about several drag performers who identify within the LGBTQ spectrum advocating for others to get vaccinated through performances and encouraging signs outside of vaccine clinics. One of the drag performers told us, "A lot of people are scared to get the vaccine right now, so [we] are out here trying to give you a friendly face, make it a little easier for you to come on in, feel a little bit more comfortable".**

**At [our organization's] vaccination clinic in Spring 2021, there was an older adult community member in her 90's who was feeling very apprehensive about the COVID-19 vaccine. Her daughter had recently been vaccinated, which made her feel more comfortable about the idea, so her daughter drove her to the [our organization] to attend an event. Our Chief Operating Officer went out to the car to greet and talk with her, and she expressed her concerns and asked to talk to a health professional. Two nurses working at the clinic went out to the cars and sat on the curb while she sat on her mobile walker. The three of them talked for at least 20 minutes. By the end, the nurses were crying and expressed that she reminded them of their own grandmothers. After giving her the vaccine, they sat with her for the required 15 minutes and ensured she was feeling ready to go home. As a wonderful surprise and coincidence, when the older adult community member returned for her second dose, both of the nurses were there administering vaccines and she remembered them both by name!**

During the life of this project, community and faith-based leaders and individual refugee and immigrant family members were very accommodating and helpful in assisting [our organization] to get youths and adult family members to go out and take the COVID-19 Vaccine. The cash incentives that we gave to out to each household and family member, was also key to helping youths and family members to go out and take the COVID-19 Vaccine in all the communities we outreached.

[Our organization] was able to distribute the CoVid vaccines at several farms in [our] counties. Pop-up clinics (either tents were used, and on one farm, the team was able to use one of the farms outbuildings to distribute the shot), were held at the request of the farm owners for their employees. Several of their employees are migrant workers who come here to work from Mexico. Some of the migrants had received one shot, and some hadn't received any. Our department has a translator, and the vaccine was given to all who agreed to get one.

Uno de nuestros grandes exitos fueron las vacunaciones realizadas en horas de la tarde se realizaron 6 vacunaciones en horarios de 4: 00 pm a 10:00 pm en el mes de enero febrero, Se logro poder apoyar a personas por limitaciones de tiempo y horarios de trabajo que no pudieron acceder a centros de vacunaciones en horarios tradicionales poder hacedor a la vacuna , se logro que recibieran primeras dosis para la mayoría de ellos con una participación de 8,000 vacunados en el transcurso de las 6 semana. *[One of our great successes was the vaccinations carried out in the afternoon, 6 vaccinations were carried out from 4:00 pm to 10:00 pm in the month of January and February. We were able to support people due to time limitations and work schedules. Work that could not access vaccination centers at traditional times to be able to do the vaccine, it was possible for them to receive the first doses for most of them with a participation of 8,000 vaccinated in the course of the 6 weeks]*

[Our organization] was able to partner with [a county health agency] and bring a Vaccine Mobile Bus at [an annual Latino culture/health event]. Through this effort we were able to vaccinate 22 people that day which was a testament to our marketing and community organizing in the Latinx community. This was in March when

vaccination numbers began to drop, this was also our first clinic that we held, and we were happy with the success that we had.

**One 5-year-old who was hysterical during first vaccine, refused at first. However, with support from the parents, we were patient and kind, and the child was more willing to work with us but also a great example to other children present. At the same event, another 7-year-old was terrified as well and refused to get vaccinated. We gave him a syringe to take home to play with so he wouldn't be scared of it. When he came for his vaccination the following week, he was not scared and was eager to show how he was not afraid of the ordeal. We vaccinated teachers of the same school and the kids loved to see that.**

The clinics have embraced quality improvement efforts to increase the efficiency of comprehensive wellness checks that increase overall vaccination, including COVID. It has been beautiful to empower clinics to improve their systems to better serve their communities and increase their efficiency.

In the middle of the year, when vaccine numbers were particularly low, we checked-in with all our partners. [A partner] reported that with our financial partnership, they were consistently vaccinating 50-100 people each clinic, mostly at trailer home communities. They shared how they would personally interact with folks identified as leaders within those communities. They would go door-to-door, go into people's homes to vaccinate if there was a mobility issue, use the school district's robo call function to promote clinics, team up with other organizations running events at the same time (ex- a group was doing bike repairs and ended up joining the vaccine clinic). All of this information gave us great feedback and direction as we spoke to other partners and helped us to form an enduring partnership that will endure after all Coloradans are vaccinated.

We announce to community social media outlets with native language, the community has built a trust on our previous social activities, so that the church leaders and community Elders also encourages the communities

We held Vaccine equity clinics in areas of Jefferson County with high population concentrations of Latino and Vietnamese families. Our volunteers made sure that the people who came to the clinics were met with folx who spoke their language.

We were able to partner with a local LGBTQ+ organization for several vaccination days and outreach efforts to this community.

We held a community clinic along with a clothing drive earlier this winter and had several dozen community members show up in person and get their shots from health department personnel. It was a great day and a smashing success!

**For our youth engagement efforts, we brought together a group of young people from across the Denver Metro area. They were interested in addressing medical misinformation, in addition to having accessible vaccines in their neighborhoods. To complement our Covid-19 vaccine clinics, the group developed an outreach campaign for their community. The youth used the Surgeon General's Community Toolkit for Addressing Medical Misinformation, to develop and disseminate two posters that encourage critical thinking and strategies for identifying and stopping medical misinformation. Over 100 posters were distributed and posted in Denver Health's [school-based health centers] and community health centers and shared on social media.**

I would love to share a story of a Native American's family (two parents and teenagers) that were able to get their first vaccines this weekend. They mentioned that they did not get it before due to their culture and beliefs. They got Covid early this year, had a hard time and believed that their bodies can fight the virus and heal itself. They heard about the variants and Parents wanted to be an example to their children, protect them and others. Thus, they came together to support each other and got their first shot. We also gave them the Walmart gift Card and they were very thankful and blessed us multiple times.

During our vaccination efforts in the fall of 2021, [our organization] was performing an average of 30-35 vaccines per day. However, during the 3 days prior to Thanksgiving, there was an increased demand for vaccination. With families preparing to gather and days off being had, receiving the covid vaccine became of high importance. At this time, our facility knew that this demand needed to be met and so action was taken. A collaboration between multiple disciplines was organized in preparation for a goal of 50 vaccines to be given each day for the 3 days of the week. With the help of practitioners and students alike, nearly 150 vaccines were given during this time all the while maintaining the high-quality care given on a normal day to day basis to our patients. The collaboration between staff and students proved to be not only a successful avenue for vaccinating patients and the community, but also was a largely encouraging experience for student in which

they provided an essential service and learned the power of interdisciplinary collaboration. This experience was a display of success in vaccination efforts, education of students, and initiative of the organization. We have been extremely successful by scheduling events for vaccine administration and engaging the community ahead of time through canvassing door-to-door and going to businesses and organizations. Resultantly, we are actually recognizing the faces of people that come. During outreach, we approached a gentleman coming from a convenience store with his breakfast to talk about the vaccine. At first, he quickly dismissed me but after we had mentioned a few things about the importance of vaccination, he came back to me to tell me that he has been looking for a place to get his covid vaccine and did not know which vaccine was the safest. We told him about the mobile bus and how long it was going to be there. The gentleman returned and we guided him through the registration process with the paperwork and received the J&J vaccine.

Our promotoras have been very active in having a presence in community spaces such as grocery stores, churches, and schools while distributing 415 Covid-19 related flyers with vaccination and testing resources. Our outreach has been successful because our promoters have physically attended vaccination events in order to have the community feel welcomed. Many community members shared their appreciation for our promoters, and for their willingness to answer questions and advocate for them at vaccination site. Many of these vaccination sites are not Spanish speaking friendly and having our team there has proven to be important for our community. We are also proud that through our outreach efforts we reached farm workers in Adams County and provided testing and vaccination resources for their youth.

**The biggest success was developing Vaccine Ambassadors--youth, representatives from our Latinx population, organizations working with low-income, BIPOC families--to help create culturally relevant messaging and to promote and organize COVID vaccine opportunities. We are particularly proud of the clinics we did on-site at low-income housing developments and working with our monolingual Spanish speaking population. One family thanked us profusely for offering the pop-up vaccine clinic at their mobile home park in the evening. They said they would not have been able to get the vaccine otherwise.**

We partnered with [a local Indian cultural health center] and hosted 5 clinics.

We hosted a [public health agency's] vaccination bus on 11/20/2021 that provided 189 individual COVID-19 and flu vaccinations and had a visit by [an elected official].

Conversations with individuals about getting the vaccine

[Our organization] developed and conducted a culturally appropriate COVID-19 outreach and awareness building campaign to keep day laborers in Northwest Aurora (and Northwest Aurora's Latino community) informed and safe. [An employment assistance center], registered 400 registered members and equipped these members with accurate information regarding COVID-19. This had a large ripple effect throughout the Northwest Aurora community. [Our organization] was able to almost triple the number of individuals, in the community they serve, who understand what the virus is, how it spreads, the status on vaccinations, and why it is important to get the vaccine. The organization worked with be well to implement a tried and tested organizing model to engage community members in implementing the campaign versus just posting COVID-19 information on the [our organization's] social media sites. Moreover, the group also had success securing buy-in from key partners, including [a public health agency and an elected official].

During vaccine clinics, we had the opportunity to ask children why they were getting the COVID-19 vaccine. Not all answers were, "because my parents are making me." Some of these future leaders spoke to the importance of getting the vaccine and how receiving it meant they could go back to school. They seemed eager to receive the COVID-19 vaccine and genuinely wanted to work towards a normal life again.

We use our Promotora program to outreach families and individuals by visiting different neighborhoods and business and we provided equity access to Latino families in Boulder County by collaborating with [a public health agency] and [a local non-profit] implementing the Equity Vaccine Clinics in Boulder County.

We had a group of about 6-8 men who recently came to the U.S. from Mexico and had received the AstraZeneca vaccine 1st dose come to our vaccine clinic on July 17th to see if they could receive their 2nd dose. Though, the healthcare workers were providing only Moderna and Pfizer 1st doses and did not feel comfortable mixing the types of vaccines. So, we had them come back for our 2nd vaccine clinic on August 14th, where people were receiving their 2nd doses of Moderna/Pfizer or the one-dose J&J vaccine. The nurses said the men could safely receive the one-dose J&J vaccine and would be fully vaccinated. We were able to get all of the men fully vaccinated that day! This shows that even when a small issue presented itself, our staff, along with the help of

the healthcare workers, were able to figure out a solution. Our vaccine clinic as a whole was a success! We were able to fully vaccinate 33 clients.

As a pediatric practice, our target population is children and youth - ages 0 to 21. Still, most educational and outreach campaigns are directed to their parents/guardians, especially when we talk about vaccines. Except for some specific situations with the influenza vaccines, we do not offer any vaccines to parents or family members. But with the COVID-19 vaccine, we understood the urgency of increasing access to all parents and family members who needed this vaccine. We adapted our registration protocols and created specific protocols for documenting the administration of this vaccine to adults, making sure that we were able to collect required data points for state and federal reporting requirements. Although we were expecting pushback from some parents and families, the conversations that the medical providers are having during the medical encounters of their children yield great results in educating and debunking some of the misinformation that adults were hearing elsewhere. We were pleased to see that over 25% of the population that received the COVID-19 vaccines were adults. We also want to highlight the commitment of our staff to implement additional protocols to ensure access to the vaccine for any person that comes to our clinics.

Our t-shirt project was initially not well received in our community, but we remained determined to try to reduce hesitancy about the vaccine. By the end of 2021, people were coming to our center to request t-shirts after being vaccinated.

As a leader of an Asian community, it was obligation to reach out to other Asian group to participate and get the word out to other leaders the importance of the Covid-19 vaccination. I took few tries and convincing. The elders in the community are the hard ones to convince. All I did was educate and got someone to translate how safe the vaccine. Making them comfortable and having it at our community made a lot of difference. We made our community welcoming to everyone. With every event we made some Filipino food, offered snacks and we advertise them. Everybody loves Filipino food that's an advantage for my community.

At a recent mobile clinic hosted by [our organization] at [a community partner's] office parking lot in January, a young community member was signing up to receive their first COVID-19 vaccine. He was very nervous and said, "I've never gotten COVID, but I am getting this vaccine because I know it's the right thing to do for my family." This was an incredibly beautiful moment for our team to witness.

We hosted a vaccine clinic at our drive-thru holiday reunion, which raised awareness about the vaccine among families enrolled in [a social service program], the majority of whom identify as Latine and who are often monolingual Spanish speaking and recent immigrants. Many of those who we reached at [our holiday reunion event] said they would not have gotten vaccinated if it hadn't come from us.

[Our organization] used the TWP funds for several different types of outreach activities. [Our organization] hosted vaccine fairs with Catholic Churches and Hispanic-owned businesses, offering incentives selected by the community (haircuts, barber shop gift credits, bouncy-house entrance tickets). One of the most successful activities was a vaccine mini-grant project. [Our organization] created an application open to any group that submitted a strong proposal for vaccinating youth, with a focus on equity. Among the funded proposals, three initiatives stood out. [A local education] campus held a [Hispanic event] in November. They had many community offerings including the COVID-19 vaccine bus. The [Hispanic event] was well advertised and had engaging activities including a mariachi band. They vaccinated more than 200 Latinx community members. [Another education center] received a mini grant which they used to have students build campaigns to promote the vaccine amongst the student body. They did this despite some parent pushback. They also learned about viral transmission and air quality and used some of the funds to build scientifically supported air filters for each classroom. [Another community partner of ours] received a mini-grant and partnered with [a partnering school district's] schools to offer vaccines in schools during the school day. They offered first and second doses on two different occasions, vaccinating youth who returned a permission slip and family members wishing to come. By making it easy to get a vaccine, they vaccinated over 1000 individuals. A local radio station with a youth DJ program used funds to underwrite public service announcements promoting vaccines for ages 12-17. Other efforts focused on education, promoting the vaccine, and offering assistance locating a vaccine provider.

As we were planning our December pop-up vaccination clinic, we were collaborating with [public health department] to ensure that our clinic would be in a high-visibility area for LGBTQ Coloradans and their families in the Denver Metro area. Because of lower participation in previous clinics, we wanted to maximize our reach by heavily promoting the clinic and hosting it in a highly trafficked area to encourage walk-ups. The outreach

and planning for that clinic led to 250+ vaccinations, and we were lucky to witness multiple LGBTQ families with their children receive both vaccinations and their booster ahead of the holiday season. It was a reminder of the impact and importance of our collective efforts.

Worked with [a family medicine partner] at the [its location] to get migrant and former refugee children to receive their vaccine.

[A health district] and [our organization] worked closely to promote and facilitate COVID-19 vaccination clinics. [Our organization] used HMIS (Homeless Management Information System) to track vaccine status and set reminders for upcoming doses. In addition, we shared data collaboratively between our organizations to ensure that guests had copies of their COVID-19 Vaccine Record by keeping them in their files at [a health center] and on the HMIS database. [Our organization's] guests quickly learned that the best way to protect themselves from severe illness was to get vaccinated, as they had watched several of their friends experience COVID-19 infections before vaccines became available and during the outbreak last winter across our community shelters. Word travels fast in this community as many members know and trust each other. Therefore, we relied heavily on trust-building between peers and encouraged and incentivized guests to talk to each other about how easy the vaccine process was and to build advocates within our target population to address the myths, rumors, and misunderstandings circulating about the vaccine. People experiencing homelessness often experience severe mental illness that prohibits them from engaging in healthcare services, especially vaccinations. We adopted a "harm reduction" approach to vaccine distribution by meeting people exactly where they were on that day. If they were hesitant and needed time to think about it, we provided them with information and facts, asking that they attend future clinics to chat more about any questions they had. Often, guests were willing to get one dose and were not interested in completing their series. We never pressured or coerced people into vaccination. Instead, we presented the facts and helped them get to where they wanted to be, even if it meant they didn't finish the vaccine series. Most of our guests were reached through our monthly on-site vaccine clinics and expressed how thankful they were that they received their vaccinations. The majority also inquired about when they could receive their second shots or boosters. One guest, in particular, was excited to be vaccinated at the [the health center partnering with our organization] since they had received their first dose through the department of corrections. We provided them with their second dose and had a record of their vaccine when they needed to share it. This client was so proud of getting their second dose and was grateful that we could support them by keeping a record of their vaccination status. Our staff also heard several guests say they were grateful they could go to the [the partnering health center] and other places where they access resources and be vaccinated. In addition, a couple of guests had shared with our staff that they were worried about hanging around with their group of friends or staying in a shelter because they might get COVID. Therefore, they were so relieved to be vaccinated that they planned to return for second doses and boosters.

We held our vaccine clinics on two Saturdays. Families from the school came out to get vaccines for their children. We gave away snacks. Many families were very grateful that the vaccines for their children were available at their school campus.

Story shared by [a medical center]: At [this medical center] we have been using small media and social media to provide outreach to our community. This includes information on our website about resources to obtain COVID-19 vaccinations and flyers hung in our exam rooms and shared with the local school districts. Our providers are also providing education to our patients who are under 18 regarding the COVID-19 vaccinations and what is available and where to obtain the vaccination. You can see by the number of youth from 3/1/2022 – 6/13/2022 [our medical center] hasn't given many COVID-19 vaccinations, but we have not had many of the Pfizer vaccines in our clinic. Our providers have referred the youth in our community to our county office for the Pfizer vaccine. In [our county] the percentage of our community is 86.5% fully vaccinated and this number includes individuals living in [our county] 5 years of age and older.

We hosted an MD from [a health center] to come and speak to a client group of pregnant and parenting women that was highly skeptical of the vaccine and had many health questions. As a result, two of the 8 went and received a vaccine within a month. We were able to partner with our local fire department in order to use our relationships with our clients to encourage them to receive vaccinations on the spot. Every day that we conducted this outreach, all of the vaccines brought (10-15/time) were successfully administered to people on trails and in encampments.

|  |
|--|
| We had several successful clinics reaching out to undocumented Hispanic individuals in our area. We partnered with a local Hispanic support group and worked on helping patients see that we simply wanted to give a vaccine and nothing else.   |
| [A promotora] from [our locality] still encountered fear about the vaccine, but the workers were always willing to listen and receive more information from her. When delivering food to workers in the region people expressed their gratitude for the groceries and she was able to continue conversations about COVID tests, vaccines and COVID safety. Overall, it seems that fear of the vaccine has been ebbing as many regions report that the community is looking to vaccines to protect themselves from getting sick. [Another promotora] from the [another region] reports that many community members are afraid of becoming sick with COVID and therefore are seeking promotores' help with vaccine appointments. Through her outreach she has been scheduling many families for second doses or booster shots. |
| Email received from one of the parents that attended our pediatric vaccination clinic. Thank You and Great Vaccine Event for our Kiddos [TWP grantee], I just want to say thank you for setting up last night's second dose clinic at the community center. You folks make this way too much fun for my son, he never wants to go back to his regular Doctor and said from now on he is going to the community center for his medical work/shots. Must have been the suckers, popsicles, books, stickers, pizza, or maybe the gift card that swayed his future decisions on his new medical office! Really appreciate your hard work and community event ([signed])  |
| With a focused pharmacy and support staff, there were many examples of individuals who would appear at the clinic who were initially vaccine hesitant. In one such case, a client arrived but then declined to follow-through on the vaccine due to extreme phobia of needles. After connecting with pharmacy staff, this individual did return and received both doses after assurances from the center's staff that pain would be minimal, and the process would be quick. This was a regular occurrence, especially among younger individuals.  |
| We sponsored several language-specific community events that offered food or incentives as well as interpreted info sessions. People really needed to be convinced 1:1 or see their community embrace the information before taken seriously. Our favorite event was at a small mosque with about 60 youth. Once a year, during the month of Ramadan, the community will fast from sun-up to sun-down. They take time to pray, but also learn. We sat with 60 young people for almost 2 hours and talked about COVID-- what they knew about it, what they thought they knew, and how to protect themselves. They learned about self-testing and when to wear masks. Then we had dinner. It was a great opportunity to promote youth leadership and public health to a receptive and respectful audience.                     |
| Once we vaccinated a family of eight, the grandma, parents, and five children.   |
| <b>I have many stories. Once a started organizing clinics in a cultural relevant way many immigrants started participating in vaccines. One of the stories that was really impactful was when I saw a 80-year-old monolingual Spanish speaker walking to our clinic. First time getting vaccinated, but she did not had transportation. So, she walk to get her vaccine in the middle of snowstorm.</b>  |
| We had 65 attendees at a screening of our short video and held a community conversation where over 20 people asked questions that were creating hesitation for them receiving the vaccine.   |
| Our youth created Tiktok and social media videos dispelling rumors around the vaccine in addition to their one-on-one talks. Although only one was put on Tiktok they have all made rounds within the social circles of our youth, which was our goal.   |
| We were able to partner with and develop a better relationship with one of the school districts where we serve kids.   |
| The women/Promotoras who were organizing and promoting the clinics were so proud of their work. They were talking about and displaying a dignified sense of empowerment. They worked hard to get the vaccine bus and the people to the vaccines. They celebrated every person who got their shot.  |
| With 10 total testimonials from respected [Colorado Native American] tribal members, we heard feedback from several listeners that they had a direct impact on their decision to get vaccinated or boosted.  |
| <b>While there are dozens of stories that we could share in this grant report, one story that comes to mind when thinking about the difference we made comes from a small encounter with a woman who received both her first and second dose of the vaccine at our clinics. Our clinics were set up to have the 15-minute waiting area face a live mariachi band so that folks could enjoy a cultural performance while they waited. After their 15 minutes were up, they would exit out of the back of the gymnasium and were greeted by our volunteers</b>   |

offering horchata and sandwiches free of cost. In this encounter, a woman exited the gym and when she walked out our team of volunteers cheered and applauded, exclaiming congratulations for her! She paused and took a moment to take in the scene of our team celebrating her. She said, “no one has ever congratulated me on getting a vaccine”. Our volunteers responded by saying that we were proud of her and wanted to celebrate the beginning of the end to a very hard journey through the pandemic. She took a moment to reflect and responded with “You’re right!” While this encounter was small, it fully encompassed the effort, energy, and empathy all of our work accumulated to on the micro, personal level of impact.

Partnering with the [a partnering agency's family center parent network] has proven effective in reaching out vulnerable community members from the immigrant populations. Having the opportunity to partner with local people who act as ambassadors and represent the fabric and language of our communities has been instrumental for the implementation of the Together We Protect initiative. The overall experience has been very positive for everyone involved in the process.

This funding allowed us to create consistent messaging around supports and resources across our community. We were able to work with our local public health experts, staff in the school district, our local emergency food provider, and our resource center to reach our community members where they were already seeking services or information. Our community has always collaborated strongly, and the pandemic brought many organizations even closer.

In November 2021, we started hosting clinics that dispensed pediatric doses. We were able to secure therapy dogs to attend these initial pediatric clinics. At a clinic a dog was the main reason our first pediatric clinic was so successful. For his two-hour shift, [the dog] patiently let every kid (and a few adults) hold him while they got their vaccination. In some cases [the dog] helped a kid not cry. In other cases, [the dog] let the kid cry on him. [A local partnering organization] hosted a clinic in Southeast Colorado Springs where a mother and her trans daughter were tickled to not only get their vaccinations together but were relieved to be able to talk to a medical professional about any potential negative side effects related to the vaccine and the hormone therapies the daughter was taking. I had watched the daughter grow up in [a specific location within our organization]. It meant a lot that they felt so comfortable and safe in the [specific location] and with our staff.

Successful clinics were held in [our county] where the mobile clinic bus was parked in very rural areas. We had volunteers from the local communities that helped to facilitate the check in process of individuals seeking COVID-19 shots. Most were bilingual and reached out to walk-in individuals. They also answered questions and gave encouragement. The elderly were treated with great respect and we helped them to be comfortable and answered all of their questions. The state bus team were very encouraging and helpful to our communities.

With the diverse population we offered mobile vaccine pop up clinics weekdays and weekends that decreased barriers to get vaccines. These were well attended and appreciated.

We hosted two mobile vaccination clinics with [a local health agency].

We were able to reach many of the homeless partnering with [two local partnering health agencies].

Every vaccination in [our county] is a success as its constituents are generally vaccine-reticent. Just over half (53-55%) of the population five and older have received at least one COVID-19 vaccination dose as of February 2022. In May 2021, the vaccination rate was less than half of that. [Our organization] is proud of the work that the team has done to reach out to, inform, and uplift the Latinx population in [our county]. A unique collaboration between [a local workforce center] [Hispanic network], and [local health department] produced the region’s first [local recreation event] and vaccine clinic. We secured the presence of the [a public health agency's] mobile vaccination bus in addition to over ten local teams to play in the tournament. Many Latinx families came to watch the event, get vaccinated, and enjoy the free food, music, and family entertainment.

Among other partnerships within this grant opportunity, we had two successful partnerships with two local entities providing vaccine access supports such as bus passes, visa gift cards, and grocery cards to aid them in their outreach efforts. Because of this on-the-ground approach, our partners learned more specifically about causes of vaccine hesitancy from residents including fear of the vaccines, lack of information, inability to take time away from work, lack of transportation, and not being treated with respect. [One partnering entity's] community coordinators realized they could ride transportation with folks and discuss the vaccine with them - just even providing a listening ear was engaging for them. We learned that many adults ended up getting their second vaccine because of the outreach and vaccine access support resources combination. Additionally, we

|   |
|---|
| learned that several parents became more open to getting their kids vaccinated as younger ages became eligible. Some families went to get vaccinated together using the vaccine access resources provided to them.  |
| [Our organization] conducted the very first drive through vaccination clinic in [our county]. We partnered with the local humane society--they brought a (grant funded) mobile unit and provided free pet exams and annual vaccinations to all persons receiving a COVID vaccination. We had zero experience doing a drive-through vac clinic, but the series of 3 clinics went smoothly.   |
| We have a COVID-19 hotline. Cell phone dedicated to answering questions about our clinics and COVID vaccines and resources. I had multiple people thank us for the hard work we are doing in the community. I had a lady call and ask if there was someone who I knew that could talk to her daughter, because she had vaccine hesitancy and the rest of the lady's family had been vaccinated besides her daughter. I appreciated that fact that felt comfortable enough to share her story with me and to ask for help. I referred her to the vaccine champions with [a local health agency]. An older lady called our office and asked if I would talk to her daughter to encourage her to get vaccinated. She was the only one in their family who had not been vaccinated. I was able to connect to the [local health agency's] vaccine champions program. |
| We held 3 vaccine clinics in collaboration with [two local community partners]. In those clinics we vaccinated a total of 300 people. In addition, we made 158,341 calls and sent 98,245 text messages and knocked on 2413 doors.   |
| [Our organization] hosted a health and wellness fair in October of 2021 and invited over 15 community organizations to participate. During this event, we offered flu and COVID vaccines. Although we had an unexpected snowstorm that day, the participation from the community and the amount of COVID shots administered that day were great.  |
| Partnering with our local Public Health has improved collaboration and support. Organizing a meeting with [a local public health agency] where concerned community members could come to ask questions and receive information.   |
| We provided homemade traditional Mongolian dishes and tea to all participants. This made them feel more than welcome. We tried to make a party environment. Vaccine was just a side bonus.  |
| An example of our coalition's success was sheer amount of individuals who were previously so against getting the vaccine-- getting vaccinated because of the strategic outreach we conducted. We sought to reach all age groups and have them go back to their reluctant partners, siblings, parents, or grandparents about how easy and safe it is to get vaccinated.  |
| Over a year into [our organization] administering vaccines, today while loading up our vaccine supplies into my truck, I had a family walk up asking for vaccines. They drove 45 mins to get a vaccine and they were late. We unloaded our supplies, drew up additional vials of vaccines and administered their vaccines. Not only did we find out they were all 1st doses today, but 2 of them had been eligible to receive the vaccine since day 1 of its release, they were just afraid to get it. This lets us know that we are still reaching people, and to not give up, keep promoting, keep trying and that we are making a difference.  |
| We had an autistic youth with severe anxiety attend our pop-up vaccination clinic. Our family advocates and the medical team we partnered with were welcoming and gentle, allowing for a calm experience where the child was successfully vaccinated.   |
| <b>In October 2021, our organization held a vaccine clinic where over 70 people were vaccinated. During the event, an organizer asked why he chose to get vaccinated today. The answer was simple: this was the first vaccine event in his community. As an elder, he did not have the resources to go farther than his neighborhood for a vaccine. That short conversation really highlighted the importance of making vaccines accessible to all and meeting community members where they are, not where we are!</b>  |
| [Our organization] worked closely with [a community partner] to help support vaccination efforts in the Afghan community. The community was greatly impacted by COVID-19 and some key community leaders lost their lives to COVID-19 complications. Working with the mosque leadership, we struck a partnership with [a local health agency] to have their vaccination bus on-site. We recruited youth volunteers that spoke Farsi and Pashto to help us promote and facilitate the clinic. We also had volunteers support with rides to the mosque for vaccinations. Together, we were able to resolve a number of vaccination barriers to vaccinate more than 200 individuals in one day.   |

**Collaboration is key to having a successful COVID-19 vaccination clinic. Each organization working efficiently and effectively together allowed for individuals of all ages, ethnicity and cultures to know about the need for vaccinations.**

**Our major successes continue to be the community collaborations that we have continued to form as we are bringing outreach, education and vaccinations to many communities across north- eastern Colorado.**

[Our organization] partnered up with several agencies from our community to help during the Pop-up vaccine clinic. We had the EMT's from (several health agencies, local businesses, and non-profits). With their support we had interpreters, people helping wipe chairs, people helping with paperwork, [our organization] was talking to the people so that they wouldn't be anxious. The [non-profit] went to the radio station and made a Qanjobal commercial about the vaccine clinic. [The local business] was baking pizzas in their trailer to give to families so that they didn't have to worry about getting home and making dinner. We are very grateful for all these agencies that helped us get this vaccine clinic to happen in our community.

The success of our clinic has been based on a model that begins with community outreach and education that addresses misinformation firsthand and also learns about access barriers in BIPOC communities. This information is used to plan and execute low-barriers clinics that meets the needs of ethnic minority/BIPOC communities. One important piece is recruiting a diverse team of community health educators and vaccination clinic staff to complement the [local health agency's] clinical crew. Having a diverse team as community-facing was important in creating rapport and making the community more comfortable with engagement and addressing vaccination challenges as they came up.

We created a youth vaccine survey that reached over 420 vaccinated and unvaccinated youth ages 11-24 throughout Colorado. We partnered with [a Hispanic community partner] to reach Spanish speaking members of the community to offer information and education in Spanish, resulting in a larger Spanish speaking turnout for vaccines!

One example of success from our TWP work was a gathering of high school students who came together to promote the youth vaccine across social media accounts from our agency, the local school district and other youth-centric agencies. The youth who participated were very good representatives of promoting the youth vaccine. They were kind, thoughtful and engaging in their encouragement toward their peers.

Our county has a bunch of seasonal workers that come mostly from Mexico. Within a week of them arriving, our community outreach specialist was able to connect with them to answer questions about covid, covid vaccines, and schedule them for appointments. The outreach specialist also coordinated time off with the employers to facilitate this.

**There are two experiences that stick out to me. One was to strengthen the partnership with [a medical doctor from a partnering health agency] and build on the partnership with [a non-profit health agency] in working together to execute very successful clinics. The second is when we were talking to a client before her vaccination, answering questions explaining the process and follow-up steps. After the vaccine, she called her family and friends to come to get the vaccine there more than 14 people showed up and got vaccinated. The impact of being able to serve a population of those that are justice-involved, undocumented, and underrepresented has a far-reaching impact on community health.**

Our outreach team reached an African refugee who came in for vaccination. When he came back for his 2nd shot, he brought an elderly African couple with him. We gained his trust, and he used his influence to recruit another hard-to-reach individuals.

[Our organization] has been connected to culturally relevant information in their native languages through [our organization's] organizers and community navigators, COVID testing sites, transportation vouchers, vaccination clinics in their neighborhoods, and provided with evidence-based information about the pandemic so families can make informed choices about their health. [Our organization's family specialists] from the Latino community shared that it was enormously beneficial for them to have access to local clinics like those hosted at [a local church], as many of them experienced being placed on long waitlists for the vaccine, and this neighborhood option increased their opportunity to protect themselves and their families on the early end. One [of our organization's family specialists] from the Latino community shared, "I was very impressed with the connections [our organization] makes with other local organizations to help [our organization's] family leaders get their needs met...Thanks to [our organization] and their staff and their ability to make those necessary connections, my husband, brother-in-law, sister, and my mother were able to get vaccinated at a vaccine clinic

being hosted at a church in our community very close to home. It was convenient and fast, and the fact that [our organization's] staff was there to receive us and offered services in multiple languages made it so equitable for all in the community to get vaccinated... [our organization] allowed us to have access to a service we wouldn't have otherwise had access to in our language so close to home if [our organization] wouldn't always be looking out for our best interests and health and well-being. I am so grateful to all the staff, the person that made that connection with that resource, and all the challenges and barriers they took out of the process in my family and I getting vaccinated." A family leader from [our organization] from the Bhutanese Nepali community wrote, "[Our organization] has been playing a very active role to control the pandemic by participating with [a community partner] to provide vaccines to all our members. [Our organization] also helped by providing information about COVID testing centers and coupons for those who needed it. The work of [our organization] is very valuable to the community and to the State." Another family leader from [our organization] from the Burmese, Karen, and Karenni community shared her experience. "It took me a while to get a COVID-19 vaccine. At first, I was scared of the side effects of the vaccine. I was not sure if I should get it because some of the people in the community got sick after they got the vaccine. I also did not trust the vaccines. I saw from social media that some elderly people die after they get the vaccine. The COVID-19 Vaccine education workshop [hosted by our organization] helped me a lot. They showed us the data and the benefits of getting a vaccine. The presenter told us that if we got the vaccine, it would protect our lives and our family from getting the COVID. Because of the workshop and the encouragement from [our organization's] staff, slowly, I started to gain courage, and finally, I got my vaccine. Now I feel safe and protected. Thank you for providing me with the COVID education. It is very helpful for me and my community. I appreciate your patience and understanding." [Our organization] continues to provide culturally relevant and responsive support, education, information, and assistance to family leaders as they navigate pediatric COVID vaccines, booster shots, and periodic COVID testing.

In addition to weekly vaccine clinics at our 3 primary care clinics in [the localities we serve], [our organization] hosted 11 free healthcare clinics for Migrant and Seasonal Agricultural Workers (MSAW), serving 350 workers. Prior to the events, the bilingual MSAW Director traveled to the farms to provide information on COVID prevention and the vaccine and enrolled workers in the health center's sliding fee scale program for any needed follow up appointments. At the healthcare clinics, MSAW received health screenings, vaccines\* (TDAP and COVID), a full medical encounter, health education, and a bag with hygiene supplies. 176 MSAW received the COVID-19 vaccine (either Moderna or Johnson & Johnson). Those that chose the Moderna vaccine, received both doses. \*Employers did not mandate the COVID vaccine for workers; however, it was highly encouraged.

[Our organization's] team collaborated with the local children's science museum where we exhibited [social media projects], made by youth for youth. The participants had created clips and posters about why getting vaccinated is beneficial and addressed common misconceptions to educate their peers. The exhibit lasted a month, and the museum offered a weekly vaccine clinic at their location. Youths presenting a vaccine record showing they were fully vaccinated, received a free one-year admission to the museum. The youths who exhibited their social media artwork, received a monetary incentive as well as a one-year admission. [Our organization] continues to exhibit the artwork at their lobbies in both [of the counties we serve].

Our first vaccine clinic was in [a local community] and was so successful we had to get another bus later in the week to meet the demand of the community. We anticipated giving out 40 gift cards in the community but ended up giving out 135 cards. These cards were specifically for the school community.

The COVID 19 video that we produced utilizing [our staff] and board members was very successful! We launched the video across all [of our organization's] social media platforms, and it was shared by clients, participants and community partners alike. Many persons connected with the range of stories we told in our videos, personal and life changing as multiple board members lost friends and loved ones to COVID 19. We presented a robust cross section of messages, age, race, ethnicity and lived experiences. Additionally, we launched posters with strategic messages that were placed in community partner spaces.

The following is an example of our weekly news outreach. It is critical that messages be repeated again and again: [link to vaccination promotion media]

We did a great deal of community outreach and education throughout each week and in our communities. Many individuals were quite wary of the shot, and the education made a tremendous difference. We also had wonderful nursing/EMT support at our clinics who provided vaccine education. I remember one day when a

family we had been talking with about getting vaccinations still had concerns. We asked them to come to the clinic to talk with the real experts. They did and the nursing staff from the clinic quelled their fears. Three of four family members got shots that day. We also hosted a couple of clinics in the Walmart parking lot at [a local location]. We had people getting off the bus, and several people who were experiencing homelessness who were in the area and stopped when we called out to them. I talked with one man who described himself as homeless. He had been wary about the vaccine even though his daughter had died from COVID the year before. After talking with me, he talked with the nursing staff about side effects and decided to get the shot that day. We were able to provide a gift card for basic needs and offer both resource navigation and referrals, to help him start the path for meaningful work (which we said he was ready for) and a more stable housing situation. It was a very impactful engagement.

**We have been successful in achieving vaccine equity because over 90% of those we vaccinated had socioeconomic circumstances and/or a disability that made receiving the COVID-19 vaccine a challenge.**

On September 13, 2021, three Black Women-led entities launched the COVID-19 Vaccination Incentives for Black People program to ensure that more Black people in Colorado have access to vaccines. Since the launch of the program, 480 Black people have received a COVID-19 vaccination and a \$100 Visa gift card incentive! Through the COVID-19 Vaccination Incentives for Black People program, each Black person ages 5 and older receives the following: Uber codes for two free rides to and from [a local pharmacy] for a cost up to \$25 per ride. The Pfizer or the Moderna COVID-19 vaccinations \$100 Visa gift card incentives for each Black person who is receiving their FIRST vaccine shot and is 5 years of age or older - young people ages 5-17 must be accompanied by their parent or guardian to receive the vaccination and incentive. [Our organization] ran an impactful digital campaign that engaged and reached over 16,000 people. Through weekly email updates, digital ads, print ads that included flyers, postcards and a full-page ad in [a local periodical], social media messaging, marketing, and media outreach, [our organization] helped educate and engage Black families throughout Colorado to promote vaccine uptake. We have heard countless stories of how the incentives programming has encouraged and allowed for folks to get vaccinated and tell their friends too!

The consistency and placement ([organizations of our type]) of our clinics helped the community know where they could get a quick and easy vaccine. We also had a great deal of success when we were able to hand out gift cards. Especially for the kids. Last summer a couple that were anti vaccination shared they were against getting vaccinated but kept seeing our bus and watching their neighbors get vaccinated and changed their minds. This was also when we were giving out \$100 Walmart gift cards.

[Our organization] partnered with [a local health agency] to provide COVID-19 testing and COVID-19 vaccinations on [our] campus, where homeless clients have easy access to safe shelter, nutritious meals, and a full spectrum of homeless recovery services. With the partnership between [us], and the fact that [this local health agency] serves clients on [our] campus, those receiving vaccines had access not only to COVID-19 vaccination, but also to medical and behavioral health services offered in the same location. With this model, [our organization] offers comprehensive health services to an underserved population, including COVID-19 vaccines.

We have several families who live in a shared house with multiple family members from all different age ranges. I remember one family being so excited/relieved that they could get everyone vaccinated because it meant that the oldest member of their family, their grandmother, would be protected. She was obviously very loved and respected by her family and the fact that they would leave the house every day to go to work meant an increased risk to exposing their grandmother. They were very grateful to be vaccinated against COVID-19 and relieved that she would be protected as well.

One of several outreach efforts was around canvassing to the local businesses [in the local area we serve]. Most of these businesses are "mom & pop", small, locally owned. Some employ family or workers who are undocumented. One of the local restaurants sent over several workers to be vaccinated who did not have insurance, ID and were undocumented. This not only protected them but the patrons of their local business. Our efforts made it so easy for them to walk down the street and get vaccinated in a matter of minutes and without fear of needing money or ID.

We had a client living with chronic conditions who did not know where to get the COVID-19 vaccine. She was also too hesitant to go into an enclosed facility, one of her friends told her about our drive-thru vaccination clinic which made her feel safer, and she got her vaccine!

The biggest success of our effort was the profile we brought to confronting a small but vocal group in our community who have been actively spreading vaccine misinformation. We hosted a three-part series on the science of COVID vaccines and the public health response to the crisis that reached an audience of at least 900 viewers but had a much bigger impact when anti-vaccine activists organized to falsely report our Facebook site as a source of misinformation. The resulting attention allowed us to reach a much larger audience through local media coverage, including an article in our local newspaper [\[link to article\]](#) and an editorial confronting logical fallacies of the anti-vaccination community. In planning this project, we heard from several healthcare providers who have felt threatened to stand up for science and our project served as the most visible example of the campaign to deter parents from choosing vaccination as an option for their children.

We held several successful clinics at [\[a local church\]](#) together with [\[a community partner\]](#). Together we held 20 clinics, 10 first shot and 10 second shot. Primary, we served African Americans, but many Latinos. We gave out free backpacks and school supplies twice at two events. On three occasions we gave out \$100.00 gift cards and we noticed that several people did not come back for the second shot, so we decided to give \$60.00 gift cards and then \$40 when they came back. All these events were slow to get people to attend.

La confianza de las personas con nuestra organizacion. Que esbimos platicando con las personas que no querian vacunarse. *[People's confidence in our organization. We were talking to people who did not want to vaccinate.]*

Individual interaction such as door to door interaction with families. Getting youth involved in the vaccine campaign. Education about what to take from social media.

Our children vaccine clinic at [\[a local library\]](#). It was ran by our youth leaders, we prepared a brief interactive presentation to describe the vaccine to young people and it was a fun and successful event.

One of our effective educational efforts was the radio ads that we created for Spanish media in the form of short novellas. These ads were very specific and localized to the communities that lived in the mountain region and would even mention local people or stores. These ads were well received in the community and helped to spread the word about the clinics in an entertaining way [\[link to radio ad\]](#).

We had a youth with autism attend one of our clinics to receive his first COVID vaccine. He was so nervous that he started to sing. Many people around him joined in and sang with him. It was beautiful.

Because we have such a high poverty rate, the gift cards we offered really helped the families in our community. We were able to bring vaccines to the students by partnering with our [\[local health authority\]](#) and with [\[an elected official's\]](#) vaccine equity team to do vaccine clinics at school. This was so helpful and really why we had so many students get vaccinated.

When the vaccines first became available it was both overwhelming and inspiring to coordinate with the number of people in the initial age group (seniors 65+ years of age). Many of those who came to those initial clinics were primarily people of color who were often in frail health and were visibly both motivated and grateful to be able to receive the vaccinations.

When vaccines first became available to youth, we hosted a clinic that vaccinated the first 12-year-old. His excitement, while trying to be "cool", was captivating. He served as a role model for his peers.

## What advice would you give to someone, or another organization who is getting ready to take on vaccine equity or community education work?

[Our organization's] team would give the advice meet people where they are. Many folks of color do not have the resources (car, money, time) to travel to vaccine clinics or schedule vaccine appointments. By entering their community to provide services you can create true equity.

1) Identify your closest partners such as schools, community health centers, trusted pediatricians, public health  
2) Know your target audience- Make sure your messaging and communication is understood by the population you serve  
3) Take the time to talk to your clients when they have questions. Use personal stories to continue creating trust  
4) Work on giving educational resources such as Q&A materials  
5) Use mass texting, social media, email, radio, newspaper to do outreach  
6) Identify key leaders in neighborhoods where your clients live to help you do outreach  
7) Make it fun/ Think outside the box (offering food always brings families together)

1. Be flexible in shifting your strategies Initially, we launched an educational campaign separate from the actual clinics. However, we quickly realized the need to capture people's attention and provide vaccinations when they were on site. Therefore, we pivoted our strategy to conduct outreach and education on the days that clinics were actually happening. We found this approach to be much more efficient and successful. Often with this population, being in the right place and capturing their attention at the right time is everything. Unfortunately, with our initial strategy, we missed some people who were educated and interested in getting vaccinated but then never returned for their vaccine. 2. Using a non-clinical approach with outreach and engagement is critical We hosted our vaccine clinics in street clothes to be more approachable and build trust. In addition, we kept paperwork to an absolute minimum and offered to keep vaccine record cards for guests to ensure they did not get misplaced. Additionally, our clinical team (nurses) would go onsite to [a local health center]. They were familiar with the population, approached every single person with a trauma-informed lens, and listened to every concern. The staff was also compassionate and patient, which is essential when engaging and providing care to people experiencing homelessness. 3. Make the most of inclement weather days. [A city we served] declares "inclement weather days" whenever it reaches a specific temperature. On these days, guests are allowed to stay within the shelter all day. We hosted a vaccine clinic that happened to land on an inclement weather day. We were overwhelmed as we saw an unusually high level of interest and engagement across our guests on that day. 4. Don't underestimate the resourcefulness of people experiencing homelessness who want to be vaccinated. We were often surprised by guests who had sought and accessed vaccines elsewhere in the community on days we did not have clinics available. They traveled to local pharmacies, the jail, churches, and hospitals. These sites were not always easy for them to access.

Addressing inequities in hard work that takes cultural competency, patience, and flexibility.

Always respect the client's self-determination and provide reliable and easy to understand information. Do it because you really care for the community's wellbeing. Celebrate and honor all cultures!

At this point I'd ask them to continue to provide accurate information about the COVID virus, and especially the emerging variants, and how the vaccine can greatly reduce the risks of either becoming infected with COVID or having more serious negative health outcomes. I think we should never underestimate the capacity of people who may not have formal education (in some cases in our community basic literacy is an issue) to understand relevant information that is truthful, clear and straightforward in how it is presented. For this reason, it is incumbent upon the organization doing the outreach to become very well versed in the science related to the virus, the pandemic and the vaccines. Establishing and maintaining trust in the community being served is paramount. Being able to counter dis or misinformation is also important. Finding trusted community leaders who have well developed networks of relationships is part of the array of tools to promote vaccine equity.

Be flexible and adaptable to the needs of the grassroots organizers that know their communities well.

Be organized up front with a good support team to help.

Be patient with the results and don't become discouraged by the resistance from some.

Be persistent and creative. This work has shown that so many barriers exist. They include misinformation about the effectiveness of the vaccine, fatigue over mask mandates and conflicting details from public agencies. Despite these challenges, organizations have to remain informed, educated and committed to the work at hand.

Be prepared for the imbalance in the passion and loudness of those opposed to vaccinations and know that they don't reflect the balance of the community. We received some very strongly worded emails from a handful of

|  |
|--|
| people when announced the project but many times more people chose to participate and later expressed their appreciation for our efforts to lower barriers and provide a conduit to trusted, local information to help inform family-level decisions.  |
| Be prepared for the situation to constantly change.  |
| Because of the urgent nature of the efforts, using a multi-channel communication approach provided multiple sources of information and families were quickly informed. [Our vaccine outreach program] was able to get vaccination information dispersed rapidly by utilizing established partnerships with vaccine clinic providers, an engaged parent/caregiver audience, and our technology platform capable of targeting delivery of local resources to specific communities. Families look to a variety of sources for this type of health guidance and [our vaccine outreach program] is pleased to contribute to providing valued and consistent messaging on this critical topic. |
| Build and leverage trusted partnerships with community leaders and stakeholders to advance health and vaccine equity. Demonstrate empathy, listen without judgment, and share messages using credible local spokespeople and leaders who are easy for audiences to relate to. Try to correct any misinformation about the vaccine.   |
| Certainly, take overall data and information about the community into consideration, but just as important, be involved in the local community you are working with and cater your efforts to make receiving a vaccine as easy as possible. Instead of expecting people to come to you, go to them. This might mean quite literally setting up a traveling clinic outside their place of work. Take barriers and cultural competency into account and be proactive about helping the community feel comfortable to come to you.  |
| Combining public health information and resources with community organizing through vaccine equity has given [our organization] a different point of view of how to fully engage community. Also, there is still a need for this education and work, and it is important to provide culturally competent resources in different languages.   |
| <b>Community collaboration is the best way to reach the individuals. This work can't be done without it.</b>   |
| Community Outreach is difficult to get people to come out to the events, especially in the Black community. Plan, Plan Plan use as much media outreach as possible.  |
| Community partnerships are essential. In addition to local schools, we partnered with faith communities. Faith communities have a built-in trust with their congregation.  |
| Contact the folks on the ground who are most trusted and personally involved with the community. Use incentives, if possible, create community events where people are talking and getting to know each other, and keep yourself accountable. Also, keep [community partners and their programs] accountable by reporting challenges and inappropriate interactions.   |
| Coordination for volunteers and staffing is crucial. We anticipated that we would have a slower demand at the beginning, but we were encouraged to see a steady line throughout the day. It is also strongly encouraged that if there a link to sign up to make sure that the link is given to the community before the event. We found that many of our community members had to wait in line while people from outside the community found the link and drove to the clinic.   |
| Do a comprehensive effort that supports how the community receives services and improves the delivery system.  |
| Do not force someone to get a vaccine. Educate them, give them time to understand what is best for them. Give them the dates that you will be back. Be kind, be respectful. I spent 45 mins with a patient educating her on the vaccine. She has come to me personally for all 3 of her vaccines. Time well spent.   |
| Do your research and hire people for outreach.   |
| Education, trust-building, and a safe place to receive services are all driving forces in successful outcomes. The in-person outreach events worked well because people could see that you/ your organization are a part of the community.   |
| El consejo que brindaría a las organizaciones que están preparándose para emprender un trabajo de equidna seria trabajar con horarios en las tarde eso apoya a llegar a familias que no an sido alcanzadas por horarios de trabajo, llevar el cento de vacunas a sus comunidades. <i>[The advice that I would offer to organizations that are preparing to undertake vaccine work would be to work with schedules in the afternoon that supports reaching families that have not been reached by work schedules, bringing the vaccine center to their communities.]</i>  |

|   |
|---|
| Ensure that one person organizes and runs the entire equity clinic and knows everything that is going on. That central point of contact needs to know where vaccine and supplies are. Training on how forms are to be signed and how to sign them. Have very easily readable and clear labels when vaccinating with several vaccines (Moderna, Pfizer). There should be no opportunities for misunderstanding by ensuring that everything is properly labeled. Clear age-appropriate instructions on how much to administer, how much to dilute. In general, we have observed that support of parents, teachers and community leaders has been quite important. Respect for language, race and ethnicity is essential and as such the support of community leaders goes a long way in encouraging participation of each community. Health equity has been an important attribute for all these events and should not be overlooked.   |
| Every community is different and has different styles of learning and communicating. Not everything can be translated or interpreted-- context matters and you must meet people WHERE THEY ARE. Do not expect certain communities to trust what you say--the community needs to be part of the messaging. Do not expect communities of color to work for free in the interest of public health-- they deserve to be paid for their time and cultural competence.  |
| Find people from within the community that you are targeting that are passionate  |
| Focus on community led efforts  |
| Focus on the youth involvement. They understand the reality easily than most parents, especially the fake news on social media. They want and thrive for change.  |
| For community education work, provide updates throughout the year to reflect new guidance or address misconceptions and use culturally relevant messaging where applicable.   |
| Get to know the needs and believes of the people you are targeting. You may want to combine their interests with yours. Be patient, listen to the community you trying to reach out so you can address any issues, give appropriate feedback and be prepared to the possibility of resistance.  |
| Go to the people and decrease barriers to get vaccines. Offer clinics in remote areas to decrease transportation barriers. Offer free vaccines to decrease insurance and payment barriers.  |
| Have a solid plan for where your clinics will be and be diligent in using social media, community partners, etc. to spread the word. Be willing to hit the pavement talk to people and listen to their concerns.  |
| Have information available in multiple languages and have multi-language speaking adults on hand  |
| Having access to up-to-date information is critical. It often felt like we were one-step behind on misinformation or changing federal or state guidelines/safety information.   |
| Hire champions from the community and support them with time and finances. Some harder to reach groups require more support and creative ways to outreach, be flexible and inclusive when planning events. A one size fits all approach does not work.  |
| I think the advice I would give is to deliver the education and messaging in a variety of formats and feature diverse voices, you never know exactly what will connect the best and resonate fully.   |
| I would advise someone or another organization to work collaboratively to maximize efficiency by everyone playing to their strengths to yield an overall positive outcome.  |
| I would suggest that the person or organization taking on vaccine equity/community education work is aware of the demographics of the community they are working within, so that they can cater their messaging and outreach to the cultural and language needs of the community. It helped us to be connected to and understanding of the Latino community we were mainly working with for vaccine equity, because we were able to ensure our vaccine clinic was set-up in a way that would encourage more people to get vaccinated. For example, we spoke with [the local law enforcement agency] and asked that they not stop by or drive by the vaccine clinic as many of our potential vaccine clients have fear of police due to their undocumented status. We were aware of the rumors going around that ICE or police were going to be at vaccine clinics to detain undocumented immigrants. We told all our clients that would not be an issue at our clinic and no police would be present. |
| <b>Identifying the most appropriate community members who could act as conduits and represent the targeting population is crucial in advancing vaccination equity. Including incentives and recognition for all efforts has been also very helpful. We also feel that meeting people where they are at and keep sharing concrete facts</b>  |

**and data has been helpful to address vaccination hesitancy. Persistence, kindness, compassion and cultural competency should be at the front end of all efforts to advance vaccination rates.**

If we were to provide any advice, we would recommend following the verified research and suggestions for effective COVID-19 education efforts. [A health organization] released a report mid-Summer of 2021 on how to message COVID-19 vaccinations to individuals who are vaccine-hesitant, and that work guided our efforts. National and regional LGBTQ advocacy organizations, who work in both civic engagement and health education, released reports on the vaccination status of LGBTQ Americans and provided additional research on hesitancy in our community, which helped inform our approach to this work. We would also recommend taking the time to speak with community leaders and community members to better understand the unique impact of COVID-19 on different communities and why some individuals may be hesitant to get the vaccine.

In designing programs that focus on equity, we need to take the time to reach out to our patients/clients, listen to their challenges in accessing the vaccines, and utilize that information to adapt our services and approaches to better connect with them to the larger population and address those barriers.

In the northeast hesitancy is the biggest challenge. It took us months of individual talks and coaxing to get kids to participate in the program (which I didn't expect). The most effective tool we found was one on one conversations, with both children and adults. They take time and can be frustrating but seem to be the most successful approach. Don't give up!!!!

In-person outreach is an essential part of promoting health equity and community education. The [cultural vaccine promotion program] pairs educational outreach with resource distribution to ensure agricultural communities are not sacrificing other aspects of health to protect themselves from COVID-19.

**It is imperative to have employees or volunteers share information and participate in the clinics that represent the community you are reaching out to. We had cultural navigators who spoke many languages for [our] community. They helped with education, outreach, and with navigation during the clinics themselves. Interpretation and translation are very helpful. Finding and sharing success stories of area residents or people of influence can be helpful. We found incentives (principally gift cards, healthy food, basic needs) to be important. We realize that some people don't agree with the concept of incentives, but the people we were serving had very low incomes and offering something tangible to help with basic needs was a great way to get current and new clients to our sites. Once there, we could provide all kinds of other supports that would help them to stabilize and perhaps change the trajectory of their lives. In addition to gift cards, we often offered goods such as free healthy food; hot meals; covid testing; other wellness services; distribution of shoes; and school supplies. We approached the clinics as a means to build relationships and to build a platform for sustained improvement of health and quality of life. We included a full-time, temporary position in the TWP budget which was imperative. That person coordinated activities between cohort organizations, did a great deal of community outreach/education, and helped to set up most clinics. It was a great investment.**

**It is imperative you thoroughly understand the communities you aim to engage. Knowing the trusted community leaders will help you secure the needed messengers that will help promote upcoming clinics. Hosting clinics at known community spaces will ensure comfort and access. When facilitating those clinics, it is important you have staff from the community carry-out the key, front-facing aspects of the clinic.**

It is important to approach the topic from multiple perspectives and involve communities of concern who are not getting vaccinated compared with other groups. For example, data at the onset of widespread vaccine availability showed that people of color, and Black and African American people in particular were hesitant about the vaccine due to multiple factors including historic health mistreatment and systemic inequities. We prioritized and amplified the voices of Black and African American people when we produced stories and resources about the vaccine and addressing hesitancy, meeting this community where they are instead of assuming a one size fits all approach. It's also important to use multiple methods to get your message out, consider social media advocacy if you can. We found that frequently posting and vaccine sites and resources about the vaccine created a sense of trust and people were more likely to turn to us for this information as the pandemic went on.

It is important to cater messaging to the population being served. Spanish language radio has been a big help to us, as have ads pushed on social media in Spanish via the local newspaper. Also, important to cater messaging to the barriers experienced by different populations.

|  |
|--|
| It is important to go to the communities you want to engage with and spend time with them listening and understanding their concerns, struggles and barriers as well as their joys, celebrations and strengths.  |
| It is important to have partnerships in place to get vaccine and have a place to store it. Make sure you have locations identified for each clinic before you begin so you can promote your events in advance. It is also important to have staff and volunteers who are committed to helping at each clinic as missing one person can change the whole flow of the event.   |
| It is of utmost importance to cultivate and maintain community trust. An organization should also strive to make all community members feel welcome and accepted. All volunteers should have sufficient training and resources to adequately complete their tasks. This includes the most up to date health information about COVID, and clear procedures to follow in case of an emergency. This will help community members feel that their health is being taken seriously. When completing outreach and education tasks, don't be judgmental to people who have different views on the pandemic, but be sure to provide them with reliable sources of information on the latest vaccine and public health knowledge.   |
| It takes hard work to reach some segments of the community, but the efforts are worth it as you begin to see equal access to vaccine.  |
| It was difficult to combat the misinformation available online. We found that it was most effective to have our MSAW (migrant and seasonal agricultural workers) Director talk one-on-one with migrant workers and with our Hispanic/Latino patients. She would have a conversation and listen to their concerns with no judgement and then explain to them why she decided to get the vaccine. In the end, 50% of workers chose to get the vaccine.   |
| It's been difficult but even know there are opportunities. We hosted a couple of educational events in June aimed at reducing the 'summer slide'. We had a mobile vaccination clinic come and people still got booster and some their first vaccine.   |
| Know the needs of the community they want to impact. It is important not only to touch on the topic of vaccination and its importance, but also to talk about other social issues that concern people. They will be more receptive to learn about the COVID-19 vaccine if they are presented with information and programs that benefit them. Once they identify us as a trusted source of information and resources, they are likely to open their doors and ears to hear more about how they can stay healthy and keep their families safe. Adequate staff training both in an informative way (facts about the vaccine) but also in an emotional way, so that they can handle difficult conversations with members of the community where they can create a relationship of empathy and trust. In our experience, motivational interviewing techniques worked for some scenarios. Validate the point of view of the person with whom we are interacting and share the information in a respectful way that allows a dialogue that invites them to reflect more than a discussion. Some populations were against vaccination. So please be prepared to hear NO. Apart from that everything went well.  |
| Lean hard into your strengths and trust the strengths that others bring to the table. As non-medical professionals, we trusted the medical providers we were partnering with, and we did not answer questions we were not qualified to answer. As information and resource professionals, we used our ability to vet resources to help our patrons find the answers and information they needed to feel safe with the vaccine. Capitalize on existing trust – [our type of organization], as whole, tends to be a highly trusted organization. However, community work tends to be one on one. Many [of our organization's] staff found themselves sharing their own personal experiences with COVID and the vaccine with patrons. Things can change quickly – we found ourselves adjusting how we staffed and advertised clinics. We started attending festivals, farmers markets, trunk or treats with vaccines resources and nurses. Our initial plans were hosting and staffing clinics like we staffed our service desks. [Clinics hosted by our organization] were successful, but we found we needed to include clinics and resources in events and settings that were just different. We tried to make the clinics part of what we did or normal but not the main focus. |
| Listen to the community. Through our partnership with [a local news agency], we answer questions on the air that are asked earlier by community members. For our youth art contest, we had youth creating the messages to reach other youth. Everything must be community-driven to be successful.   |
| Make sure the demographic being served is well represented by the people who serve them  |
| Make the environment welcoming. Have someone available to advise of pros and cons. Know the demographic to make sure you have somebody available to translate.   |

|   |
|---|
| Meet people where they are at. Don't assume people don't want to be vaccinated they maybe barriers preventing them from getting vaccinated. Meet people where they are. Not everyone has a phone or knows how or wants to use technology. Be patient and help people the way that works best for them to get vaccinated.  |
| Meet the community where they are at in the vaccine uptake continuum.   |
| Meeting folks where they are and earning their trust. Also respecting their decisions on either getting vaccinated or needing more time to make a decision.   |
| Most of our people who get vaccinated are getting their second, third or fourth shot. Really hard to reach the vaccine hesitancy group. More tailored messages are needed and work with the state to identify low vaccination rates and then do door to door canvassing.  |
| One barrier we encountered was the accessibility of vaccine registration websites for Spanish speakers. We advise organizations getting ready to take on this work to ensure you have plenty of bilingual staff available to help people walk through the registration process. Also, use a variety of media to reach out to people and publicize the event (Facebook, email, phone, website, etc).   |
| <b>Our advice to another organization taking on vaccine equity and community education work is that listening is as important as speaking. Vaccine hesitancy in the African American/Black community is a reality for valid reasons. Our approach needed to be open, empathetic, nimble, and patient. Representation matters and some of our most compelling comments come from the experts who are African American/Black and leading the medical research and development of vaccinations as well as those providing care to the sick. Having open and transparent dialogue about our own experiences with hesitancy and those experiencing it is key in breaking down walls to hear the facts that vaccinations are a key tool to surviving COVID-19. The heart of our message is that we want to preserve the lives of loved ones in our community.</b> |
| Our advice would be to invest in snacks or drinks that provide an incentive for people to engage. Also, we would recommend partnering with nearby business to promote the vaccine clinics on their social media platforms. We reached out to a few of the business when we hosted clinics in [a local park] the nearby shelters downtown to help boost awareness and attendance.  |
| Our first piece of advice would be to listen to the needs of the community you are serving. Our COVID-19 programming has evolved and expanded as a result of requests and expressed needs of our programming participants. Secondly, [our organization] fights white supremacy culture by trusting historically marginalized communities to engage in their own continued care, all vaccine participants have returned for their second dosage. Do it! We can reach more people together.   |
| Outreach in the language they speak, understanding of different concerns and try to answer with respect. Offer different registration service, other than just link sharing.  |
| Partner with a reliable vaccine provider  |
| <b>Partner with trusted local programs, communities, and schools for vaccination events. Make the events as accessible as possible. ie: in a community center, outside a church, in a school. Host events outside of work hours, especially on evenings and weekends. Ensure staff working these events are members of the community they are meant to serve. Identify barriers to vaccination and engage community leaders to address these barriers.</b>  |
| Partnerships are key! [Our organization] has been so lucky to have maintained some key partnerships through our vaccination education efforts. Specifically, partnerships with [several community partners] have been critical to achieving our goals. I would suggest making these types of partnerships a priority when taking on vaccine equity.   |
| Partnerships are key. Stay focused on the equity piece of health equity.  |
| Patience and individual conversations are key. Messaging from formerly vaccine hesitant people about their journey to get the vaccine is most powerful for other hesitant folks.  |
| Patience is key. Being able to relate to individuals (beyond just the clinic/pharmacy staff) is also important when combatting false narratives and helping individuals (and by extension, those feeding them false information) understand the efficacy and importance of these vaccines.  |
| Personal connection and relationships must be relied upon when organizing a successful vaccination clinic. Flyer distribution is great, but personal conversations and talking points about how vaccines are safe are necessary.  |

Prepare the team before on all that will be needed to gave an event, if working with the LatinX community be prepare to make many many calls, have bilingual staff, a nurse o doctor for references. It is a lot of hours leading up to it and during but very rewarding.

Principally, anyone launching such a campaign should be prepared to set up every student and volunteer for success. Setting them up for success means 1) providing age-appropriate tools such as having promotion/marketing tools ready for distribution on their personal social media accounts; 2) continuously engaging students and volunteers by texting or emailing them; and 3) and training them to discuss and share facts regarding COVID-19 in everyday language. Additionally, it is important to make sure volunteers understand their role and responsibilities in the vaccination campaign. For students, it's critical to be very clear about what incentives they can earn and how they can earn these incentives by having a straightforward process they can understand and follow.

Que escuchen las preocupaciones de las personas y les agan preguntas sobre lo que dicen. que el uso de un flyer es bueno pero al mismo tiempo tenemos que explicar lo ya que muchos de ellos no saben leer ni escribir y para todo dicen si. (*Listen to people's concerns and ask questions about what they say. that the use of a flyer is good but at the same time we have to explain it since many of them do not know how to read or write and for everything they say yes.*)

Reaching those hesitant to receive a COVID-19 vaccine is challenging. The most significant results came from clinics earlier on in the effort as there was greater interest from parents/youth. As the project continued it became harder to reach families to persuade them to receive a vaccine. Later clinics were more successful when held in locations where individuals were already present. [Our organization] worked with a number of community partners to offer vaccines at health fairs, catholic churches, and in parking lots of popular businesses on the weekends or after-hours. Making the vaccine 'easy' was the strategy [our organization] found most compelling. Partnering with Latinos for Latinos groups was imperative and generated the strongest turnout. [Our organization] also formalized an internal equity task force that planned several vaccine events targeted for the Hispanic community. The group will continue to meet after the TWP grant ends and is already working on additional projects beyond the COVID-19 vaccine. The group is focusing on becoming more equitable throughout all [our organization] programs and services. I already submitted a report and I responded to this question, but I asked our Hispanic outreach coordinator what she felt was the greatest advice she could offer when stepping into equity work. I felt it was worthwhile to share her response. "It's important to consider who the target audience and area is. Asking who is at the table and if we are being inclusive, if we are reaching out to the Latino/a community we need representation from that community- decision makers- that look like them, speak like them. Recruit people that are trusted members of that community, people that can find volunteers, someone that has skills to raise funding if needed, someone that has community connections and is good at planning and looking at logistical situations. There are so many roles to fill. Collaboration and "who" you know is key in making events happen. Sharing out and advertising methods are great- but sometimes they don't get the results we need; we need human bodies doing the work."

Religious reasons for not getting vaccinated are so, so strong. Targeting priest, ministers, and pastors to be pro vaccine is key.

Stay diligent, don't get discouraged if some people are against your actions.

**Take a good assessment of the DNA of your community. Ask yourself a lot of questions. How many people are unhoused in your school district, on your streets or living in a motel. How many are refugees, undocumented or do not have insurance? How many small business owners are in your community that have a hard time closing their business to get themselves and their employees vaccinated? How many in your community are "working poor" where they make too much to get Medicaid but too little to afford insurance? How many in your community do not have transportation? Is your vaccination site close to these in order for them to walk? Is it very visible if people were driving by to know you are having a clinic? Who are your close partners in your area that you can collaborate on this effort with (churches, [county] liaison at school district, local food banks, homeless agencies, domestic violence shelters, local nonprofits of various races and identity? Are the times and days you are scheduling your clinic the most appropriate for those in your community? Engage volunteers to canvas these areas.**

Talk to individuals who actually live and work in the community. Listen to others. We found that selecting certain times for offering vaccines was critical to our success.

|   |
|---|
| The best advice is to take the time to talk to families and individuals face to face and providing as much information regarding the myths about the vaccines and shared real information and facts.  |
| The [local government council] wanted to check up on our communities in the villages around [the county we serve] after COVID-19. We wanted to see how our neighbors had overcome the COVID-19 isolation and sickness. We chose to do a phone survey and called them using a list of 240 persons that the [local government council] had. We advise that if an organization is coming into our rural communities of color that they follow up and see how folks are doing post COVID-19. Our community felt like they had not been forgotten even though we are isolated by living in rural Colorado. We also advise that Spanish speaking individuals be part of the teams. This was critical in [the areas we served]. Use those folks who live in the community to conduct a survey, talk to individuals or perform the work you need to get done. Outsiders will have a difficult time navigating our communities of color as well as rural areas.  |
| The most important aspect of the work is to meet people where they are and to provide as much support as possible to make the experience comfortable. We have found that with hesitations, work and other discomforts associated with vaccination that it pays to have a clean space, set up well, a proper flow, and plenty of staff to help.  |
| The need there and the desire to learn and receive resources is abundant. Our community is looking for trusting partners.   |
| The partnerships that we made and enjoyed through the TWP initiative made a huge difference in our ability to be successful.  |
| This work takes relationships and trust. And food!  |
| Throughout the fall months of 2021 when the COVID numbers were high, we had a lot of teens seeking testing at our school-based health center. With this captive audience, it was a great opportunity to counsel them face to face about the safety and efficacy of vaccinations and to provide a hand-out.  |
| To partner with other community organizations.  |
| To stay positive, due to the controversy involved with CoVid vaccines, it's essential to keep up with all [state and federal regulations]. Also use a lot of encouragement and be prepared to answer your community members questions regarding receiving the vaccine.  |
| Trust your people to get the word and the work into their own/your own communities. We don't need others to come and tell us how to do it. But being given the resources and the time and space, with meaningful support, will get us close to the mark.  |
| Understand the need and barriers before you begin your marketing campaign.  |
| Use testimonials from trusted individuals in your own community vs. talking heads.  |
| Use trusted sources to provide information. I would emphasize the importance of relationship and trust. Our clients in particular are very untrusting of people and organizations. Therefore, being able to link vaccination in with a deeper relationship was very important for us.   |
| Vaccine equity requires language justice. For example, if you have a Spanish speaking demographic in your town/city, ensure that you have bilingual literature (vaccine registration forms) and a bilingual team member available at every vaccination event. When sharing information on flyers or in social media posts, we have found it useful to make each post bilingual, as opposed to creating two separate monolingual posts.  |
| <b>Vaccine hesitancy is nuanced, personal, and complicated. We found that it took a lot of patience to learn how to best engage with folks on timely and fraught topic such as COVID19 vaccinations. While patterns of fear, lack of access, lack of understanding, lack of trust, and lack of interest emerged among residents across our region, we learned that we couldn't reach everyone through zoom trainings and online surveys. We learned we needed to meet folks where they were - literally on the bus or walking out of the grocery store - to connect with and check in on them. We also learned that we were sharing a lot of very rich information that was competing with other information, too incomprehensible, and was never followed up on because the systems and/or resources did not appear to be accessible to many folks. As for advice in the future, we must get ahead of the misinformation through localized social networks that are undergirded by local nonprofits and institutions and supported by long-term financial assistance from philanthropy and government. We must take time to develop and sustain these networks in order to activate information and resources related to the next crisis. On the institutional side, we must apply an equity lens to everything we do, including</b> |

**vaccine equity and community education work. All programs must be centered on benefitting BIPOC and low-income communities. This includes ensuring that all outreach includes listening. We must understand the nuances of local neighborhoods in order to equitably and responsively address them, rather than trying to solve things with a blanket approach across the region. The more buy-in one has to the process, the more likely they will support that process and play their part.**

Vaccine is to protect ourselves and the community from incoming pandemics. need to be always on a safe side than confronting the risk without protection.

We exceeded our outreach expectations with this grant, and we are proud to know that our community values our efforts and has placed their trust in our organization and most importantly our [community health workers]. Trust is very important when reaching out to the Latinx community especially when doing outreach for youth efforts. If the community does not feel welcomed or supported, outreach efforts can fail. Most importantly, is it essential that the information or outreach method performed is culturally and linguistically relevant to the community.

**We experienced more success reaching "hard to reach" populations by working with a consultant that was a trusted member/leader of the community that we were trying to reach. For example, where possible we would recommend another organization to not just hire a consultant or staff member that speaks Spanish fluently, but rather hire a Hispanic/Latinx identifying community member that is more deeply rooted in the culture and community.**

We found, among the homeless population served, waning interest in the vaccine as time went on. Our largest vaccination numbers were accomplished early in the project. Understanding the competing order of needs for people experiencing homelessness is an important factor to project planning and execution. There have been seasons in the pandemic where the population viewed COVID-19 as a threat to health and wellbeing, but that view became less over time.

We have heard positive feedback from community health centers who partnered with school districts to advance their vaccine work. This partnership allowed community health centers to reach students as well as their families and was found to be a successful location for vaccine work.

We must have after hour clinics. 5-10:00pm Friday, Saturdays 1-8:00pm and Sunday's 6-8:00pm

We realized that this effort was more labor intensive than anticipated. The sign-up and confirmation process for vaccines was also labor intensive.

We used Instagram ads, targeted towards the market we were wanting to reach with our vaccine clinics and survey. Partnerships are key. Stay focused on the equity piece of health equity.

We will strongly encourage every agency or organization to first and foremost know their community, the leaders and family members they are wishing to outreach, encourage and serve. Building trust and respect in the community and with the people is key to success or failure. Above all else, be the ambassador of your agency and organization.

**We would advise another community organization to be genuine when outreaching out to the community. It is important to be transparent and trustworthy, to say what we know when we know, and not give half-truths of avoiding sharing important information with the community. We also recommend listening to the community about what they feel and need before creating a path of support. We do not always know everything about the community we want to positively impact, and we could miss the opportunity to learn more about creating long-lasting support. Do not rely on the government to open the doors to bring all the resources needed. It's important to establish great communication with stakeholders to identify the collaboration opportunities but also to hold each other accountable for the deliverables. We also encourage to use of culture and traditions when outreaching the Latino community. Be prepared to bring food and make everyone feel a part of the solution. Have everyone in your team have empathy and compassion with the community and be prepared to answer questions about other community resources needed in addition to the covid testing and vaccinations. Follow up with community members that might need additional resources and or to have doubts about getting the vaccine. Make sure that you are a reliable organization or individual and are able to deliver on the promises made. Be humble and take the opportunity to listen to what concerns people might have. Show gratitude and respect for the community that shows up regardless of how they show up to get vaccinated.**

We would strongly advise any organization or individual working on vaccine equity and education work to be patient, understanding, and listen to the community. [Our organization] was able to overcome vaccine hesitancy by having conversations with individuals and listening to and acknowledging their concerns instead of being dismissive. Once we were able to identify the root of hesitancy, such as vaccine safety, we would present educational information that would help them understand the vaccine and overcome such hesitancy.

**We'd definitely recommend working in partnership with other organizations that are local to the community. Because the organizations in our coalition have deep roots in the community, it was easy to combine our efforts in a united front. It provided the credibility needed to do this work on a grassroots level. There had been a lot of organizations pop up that have NEVER worked in our community before. They tried to do the same work as us but weren't nearly as successful and eventually came to us to ask for advice. Instead of undermining a community's autonomy to take care of itself, look to see how local organizations can be supported to do the work they've been doing for years.**

When working with historically overlooked populations, patience is key. Even with medical providers giving education around the COVID-19 vaccine's efficacy, safety, and importance, [our organization] still received push-back from many patients and caregivers due to misinformation and general distrust of the vaccine.

While many folks in local leadership said they were interested in vaccine equity, our coalition found that the brunt of the work was put on our small organizations' shoulders. As such, we ended up doing a lot of the work the county had committed to doing. Furthermore, our team was hyper exposed to the systemic inequity at play in many executive decisions, thus we experienced both mental and physical fatigue from working overtime to ensure our Latinx community did not fall further between the cracks. In essence, cross-organizationally, many of us doing vaccine equity work found ourselves working two jobs at once. One for our actual position, in our case mental health professionals, and then another as vaccine champions for the Latinx community. Our advice is to form a coalition of BIPOC organizations like we did. This helped us know that we were not alone and that our communities were not forgotten. In addition, together we have power, and we can use that power to keep the focus on changing how the government often puts the onus of health literacy on black and brown communities, rather than changing what they are doing at an executive level. Our work has shifted the approach of both the [city] and of [county] to health equity and we are extremely proud. One final piece of advice is, make it a celebration, make it fun, and make it cultural. La Cultura Cura! Our culture heals us!

Work WITH and NOT FOR your underrepresented populations who have been disproportionately impacted by COVID. Listen. Build relationships. Ask questions. Be curious.

Working with other organizations/agencies provides networks that might not have been considered, this will open up new ideas and concepts that could be used for vaccine clinics or getting vaccine education out to families. Our advice is to work with these organizations/agencies to help you promote or assist you during your vaccine clinics or community education. They are truly a big help!

You have to meet the community where they are. That is why we knocked on doors in Latino neighborhoods, called and sent text messages and held 3 events where Latinos shop. One of the biggest barriers to vaccination is accessibility.

You will have people who have been misinformed. State the facts and give reliable resources so they can do their own research.

**The TWP Vaccine Equity Fund used a pooled funding mechanism and a streamlined application process to provide a highly accessible, low barrier, easy-to-navigate and responsive process to aid grantees. We are interested in understanding: how did the TWP process work for you or your organization, compared to other grant processes you may have experienced?**

As an organization serving families across the entire state, it was convenient to have a single, simple application and quickly be awarded funding to support work in any/all counties. Submitting via Google Form is simple. It is helpful to have a template of application questions to craft responses prior to submitting online via multi page form.

[Our organization] applied for this grant opportunity as a response to the need of our collaborative partners during the COVID19 crisis. Earlier in the pandemic, we had some success with connecting our partners with PPE supplies including [transportation] and maintenance workers with locally manufactured face shields and local artist-made cloth face masks, immediately filling a need among partners. After we shared the TWP opportunity with our network, we decided we could play a capacity building role for many of our partners, many of whom were already engaged with local residents about COVID precautions, treatment, and vaccines. When we heard that not many of our partners were going to take advantage of the opportunity, we engaged a listening session with the community connectors cohort that [a community partner] had just initiated in response to the need to provide deeper and broader support to community navigators, educators, case workers, etc., and learned that many community connectors were burnt out and felt like they were getting nowhere with conversations about vaccines. They indicated they wanted more training, resources, and access. [Our organization] applied with the intention of filling this gap, but with the understanding that the funding could go directly to those doing the work on the ground. In weighing the balance of our capacity, we found the ease of the TWP process to be highly motivating in taking the time to apply for something that was out of our direct mission related work but was highly responsive to the moment. While we were slightly surprised to receive the funds, we were honored to help our community organizing partners in such materially supportive ways to enhance their efforts. This was one of the most clear, accessible, and easy grant processes we've experienced, and we say that as equity-focused community organization that also provides grants.

[Our organization] appreciated the flexibility of this application process, and appreciate that we were able to create a simple application process for our members to request funds from those we received from TWP.

Access to flexible funding is very appreciated, especially in situations like the pandemic, where organizations are trying to flex and address the emergent needs in our communities in creative ways that might not fit 100% with our current protocols and processes.

**Applying for the grant was not cumbersome. We were able to navigate the application process. There was lots of support to help get the application done right. Also, the final report is so much better. We have a story to tell, but the numbers speak for themselves. We are proud of our efforts, our community and young people that responded to our request to vaccinate. Reporting is uncomplicated and saves us time. Also, making the report has been easier than we've ever experienced. This in turn has made us want to help again should a national medical emergency come up again. The questions we answered are easy and to the point. Thank you for making it workable and easy to comply with.**

Community partnerships are essential. In addition to local schools, we partnered with faith communities. Faith communities have a built-in trust with their congregation.

**Compared to other grant application processes, the TWP's approach was remarkably simplified. It greatly facilitated access for underrepresented applicants with limited staff and resources. Smaller organizations, such as ours, were able to be competitive in the application process.**

Definitely, simpler and more time sensitive and responsive. Other funders and grants happen just once a year according to their board meeting schedule etc, which is difficult when small nonprofits need the support yesterday.

During the pandemic, staffing was impacted and [our organization] was burdened by additional screening and testing. The simplified application process was very much appreciated and reduced administrative burden.

Easy to apply and receive monies. It simplified the process and reduced the administrative time requirement.

For [me] personally, this is my first grant here at [my organization]. It worked very well for me, and I am encouraged to try for different grants in the future. The TWP team was very supportive and helpful that entire time. [Our organization] is very grateful [that] we were able to receive a grant from TWP.

For a first timer completing grant reports, the process was very easy. I am very grateful that the application and reporting process was very straightforward. Other grants are very complicated and have many components making it impossible for first timer Grant writers to be able to complete them.

Que fue un proceso facil y claro. para mi fue un proceso dificil porque no lo entendia pero una vez que me explicaron todo fue mas facil este proceso *[For me it was a difficult process because I did not understand it but once everything was explained to me, this process was easier]*

From a program perspective, the ability to change gears often was incredibly helpful. We changed our game plan for the funds a few times. We found ourselves moving away from structured clinics and events. We found our best reach was increased radio marketing and community event attendance. Vaccine equity and clinic hosting was not exactly something we had trained for as [workers of our type]. The ease and flexibility of this process made failure less scary and really encouraged experimentation and collaboration. The Grantee Meetings were also helpful. Since we are not done with this work, we would be interested in meetings or any way to continue collaborating and learning from fellow grantees.

**Goodness-- this was one of the easiest applications we've ever applied for. It was definitely more of the fastest application processes too. The conditions of this grant allowed us to be flexible in how we know this works needs to be done within our community.**

Honestly, this was one of the best grant processes we've seen. Clear expectations, minimal extraneous questions, and focused on impact. Thank you!

I found TWP's process to be very easy to use and understand...thank you!

I haven't had too many grant processes, but this was easy

I like the fact that this was very straightforward and did not present with the usual many weeks of waiting for decisions as grants were awarded as and when applications were received.

I really appreciated the flexibility in how we could use the funds. Funding from other grants prevented us from using the money to provide incentives to encourage people to get vaccinated.

In my experience, it was very easy.

It seemed to be a somewhat expeditious process.

It was a smooth process. the application was easy to complete, and the information required was clear and concise. Compared to other grant processes it was simpler.

It was a very smooth process to apply.

It was an easy process

It was easier than other grant processes.

It was easier to navigate and apply

It was easy to apply and provided flexibility to meet the needs of our local demands in our bi counties.

It was easy, and While I could never make the monthly check ins because they were during another standing meeting, we were still able to take advantage of the learnings and materials.

It was excellent. We need to apply our time and attention to the community and the streamlined application process respected that. That also includes this simple survey as well.

**It was extremely easy and helpful. Connecting with other organizations was very beneficial. Listening to their struggles and stories gave us a lot of perspective. The grant process was very easy and allowed us to put all our efforts into serving our community.**

It was great to have funding that focus solely on vaccines

It was helpful and refreshing to have a grant that provided support for important work and did not require overly involved reporting. Thank you so much for that. I was also able to make a budget adaptation about ¾ of the way into the grant as we realized we would need to divert more time and money into personnel to extend community reach and add additional clinics. The process to shift the budget was easy with the justification of the changes. That was incredibly helpful for us and allowed us to continue on a path that we thought would be most successful.

|  |
|--|
| It was one of the easiest grants we have had in terms of administrative processes  |
| It was so easy and quick!  |
| It was very easy to submit for the grant and we did not find it cumbersome.  |
| <b>La experiencia con el proceso del TWP fue gratificante facil de entender y se nos brindo el apoyo necesario cundo fue requerido, se nos trato con profesionalismo en todo momento, En experiencias con otros subsidios el TWP fue sumamente sencillo. [The experience with the TWP process was gratifying, easy to understand and we were given the necessary support when it was required, we were treated professionally at all times. In experiences with other subsidies, the TWP was extremely simple.]</b>  |
| Much more streamlined, faster, and down to business.   |
| N/A. The grant writer is no longer with our organization, but we truly appreciate and value this grant that made the covid clinics possible. Plus, it aligns with our mission and vision.  |
| On these applications, we felt that we had more opportunities to share our thoughts and ideas in a less formal application that let out words shine. We were able to easily articulate our plan and saw huge success! Thank you  |
| Organizations can learn from the TWP process. In October of 2021, we decided to host a last-minute vaccine event. We submitted a funding proposal for the event and heard back quickly. It was also incredibly helpful that the application itself was simple and accessible. Application lengths are often a barrier, but TWP made the process easy! We are incredibly appreciative!  |
| Our [organization director] was the one responsible for applying for the funding, so I stipulate that I am not as knowledgeable about this as she would be. However, from what I understand, the application and disbursement processes were clear and effective, and we had no major hurdles accessing these funds.   |
| Our [organization] appreciated that the grant was relatively easy to apply for and that the funding was made available rather quickly so our work could begin.   |
| Process was very easy to navigate and communication with minimal barriers and responsive follow-ups. Very smooth.  |
| SO easy! and we are so thankful  |
| Super smooth. Easy to apply. Easy to report. Great job!  |
| Thank you for the grant funding and the ease of reporting -- this was a breeze!  |
| The TWP process was very smooth and offered time for organization to create or build on plans to serve the community. This was an easy process to navigate.  |
| The 2 TWP grants we have received are the only 2 grants that I have been a part of for [my organization] and I have been quite impressed.  |
| The application process was easier than most grant processes, however in many cases there were long periods of not knowing if your organization was funded or not.   |
| The application process was similar to prior grant applications we have navigated, so it felt seamless as we navigated through the process with our specific LGBTQ lens.   |
| The easy-to-navigate and streamlined grant application and reporting process were effortless to complete. During the pandemic, [our organization] listened to the community and responded to the immediate needs. Vaccine education and access became an immediate priority for the organization as vaccines were rolled out to the broader community. In those moments of designing and implementing a culturally responsive vaccine outreach program, the opportunity to apply for funding through a streamlined process helped make the program possible. |
| The flexibility in funding allowed funds to be pivoted to create more innovative solutions and also address emerging challenges. In traditional grant processes, funds are ear-marked for tasks which makes it difficult to be innovative with solutions or changing circumstances.  |
| The funding priorities were clear but flexible enough for us to get creative. Our county subcontracted with our local public health nonprofit and medical centers to leverage the resources and trusted community members to further our outreach.   |
| The funding process was easy as compared to other grants.  |

|  |
|--|
| The grant application process seemed very well done in terms of streamlining access to the needed resources. Thanks to all those involved in the design and implementation.  |
| The grant process and reporting has been streamlined and much less time intensive which allowed us to spend more time helping people get vaccinated.   |
| The grant process was super easy and very adaptable to our needs. We felt that we had a lot of flexibility to use funds in the way worked best for our community. We were not able to participate in the networking as much as we would have liked given staff workloads and staffing shortages.   |
| The online application was easy. The monthly calls did feel like a burden at times. the newsletters were helpful and effective. The process was very accessible and simple. We also very much appreciated all the support that we received along with the grant, and really felt as though it was a community effort.  |
| <b>The process that led to [our organization] soliciting, writing, submitting its project and receiving the grant funds to empower [our organization] to outreach and encourage youths and adult family members to go out and take the COVID-19 Vaccine was simple, accommodating and void of much complicity. We did not have to sit and wait for 90 or more days to receive the funds to implement our project. Our staff, community members and leaders are grateful.</b>   |
| The process to apply for and implement the project was clear, concise, and low-barrier. We were able to apply quickly and received notice of award within a few days.  |
| The process was an extremely easy system which was greatly appreciated. We were so busy trying to get locations, vaccine and volunteers in place for our clinics that requesting the funding was one of the easiest parts of the process, which is not typical with most grant processes. Thank you!   |
| The process was done very professionally, and the respond was fast.  |
| The process was easy and comparable to other application processes we have encountered with other funders.   |
| The process was empowering and helpful. Super easy to access. The ease allowed us to focus on the work of the matter. We would highly recommend and ask for using this approach again.   |
| <b>The process was much simpler and quicker than other grant processes. A small nonprofit like ours often struggles to complete successful applications without outside professional assistance. This process worked for us.</b>   |
| <b>The process was so responsive and easy to access. Thank you for placing trust in community-based organizations to meet the needs of our community in the pandemic in a responsive way without heavy administrative burden.</b>  |
| The process was very accessible and easy and in times like now with this pandemic having access to funding with a fast tune around process it makes our work easy and more effective   |
| The process was very straightforward and a reasonable time commitment to complete and submit the application. I thought the questions included were valid and clear and I do not remember having any challenges when moving through the process.   |
| The streamlined application process was very appreciated, placing most emphasis on the work and not paperwork.   |
| The TWP application and implementation process has been very smooth and flexible, which helped our organization launch an effective campaign, despite some staffing changes during the grant period. Our team has been able to be accessible to the refugees and immigrants served by our organization. These community members need a space where they feel comfortable and welcomed and [our organization] has worked hard over the years to build this foundation of trust within the community. Our staff talk with individuals one on one, building trust over time. The fact that we're still bringing in significant numbers of first-dose patients is an indication that this slow and intentional effort will eventually reach those who have been most hesitant. |
| <b>The TWP grant and reporting process, in comparison to most other grant processes our organization has experienced, was incredibly flexible, accessible, accommodating, understanding, responsive, compassionate, and easy to navigate. We could not have been/be more grateful for how easily and seamlessly our organization was able to apply for and utilize this necessary funding to support our rural community during a time when our organizational capacity was stretched thin. The process enabled our organization to remain nimble and responsive to the evolving needs of our community in regard to COVID-19 vaccine equity, education, and access.</b>   |

|  |
|--|
| The TWP grant process was extremely easy and convenient. This approach is so appreciated, as it reserves time for the work that must be done and that is most important.   |
| The TWP grant process was very user-friendly. [Our organization] had staffing changes mid-way through the grant. If there were statewide group grantee meetings that occurred after this staffing shift, [our organization] was not aware. However, even after the staffing vacancy, [our organization] found the TWP grant support staff very responsive and helpful.   |
| <b>The TWP process has been the most flexible funding this grant writer has ever experienced. This experience allowed [our organization] to be flexible and try different approaches with different ethnic communities. Unique incentives were used to engage different communities, which allowed for a broad outreach strategy--social media, posters, radio and community engagement within small groups. We are so grateful this process did not require cumbersome reporting--but instead allowed us to SERVE and PARTNER. The work we have accomplished has been impactful beyond COVID outreach and has allowed [our organization] to work alongside many smaller ethnic communities seeking organizational capacity and resources for their communities. Many of the communities served by [our organization] are not aware of how the public health system works and lacked access to trustworthy information. We feel we made a huge community impact because of the flexibility of the funding.</b> |
| The TWP process was easy to navigate and flexible. We appreciated being able to adapt our plans as the pandemic progressed, to change target zip codes as we saw the vaccination rates shift in certain neighborhoods. We also appreciated the flexibility in how we were able to spend the funds. Compared to other grant processes we have experienced, the reporting and application process reduced administrative burden on our staff.  |
| The TWP process was fairly easy and accessible compared to other grant processes. The application was straightforward, and funding was sent out in a timely manner. We appreciate you!   |
| The TWP process was highly accessible, low-barrier, and more responsive than other many grant processes with which we are familiar.  |
| The TWP process was more simplified than other grant processes. There was flexibility to cater to our respective communities. Additionally, [Our organization] appreciates the additional funding/assistance provided to our organization, such as the Uber partnership. Easily supported our needs within our community.  |
| The TWP process was simple, transparent, and convenient compared to other grant processes that are complicated and cumbersome. The application was easily accessible and streamlined leaving more time for creating a thoughtful grant application.  |
| The TWP process was very easy-to-navigate and highly accessible to our organization. We appreciated knowing that we did not need to have a designated grant manager, an expense we cannot afford at this time, to just apply for the grant. We also appreciate how readily available TWP staff were throughout the process, and the steps they took to connect all grantees with one another.  |
| The TWP process was very smooth and responsive. Unfortunately, we do not have many funders that provide needed grant funds upfront but rely heavily on a reimbursement model, which is very process laden and time consuming. It can also cause cash flow challenges as we have to perform the work of numbers served, outcomes and metrics reached, prior to receiving payment.   |
| The TWP process was wonderful and very easy to follow and implement.   |
| The TWP process worked phenomenally well. We learned about the opportunity after the initial funding rounds, but when we submitted the application, we received approval quickly.  |
| The TWP process works perfectly, due to their follow up, their informational advice and the sharing of the information from other organization during the process to help get improve what is being done at our end. They do not interfere in our strategy being used but bring new ideas for improvement.   |
| The TWP streamlined application is much better than other applications, it was easy to fill out, did not require a lot of other information that is hard to figure out.  |
| The TWP Vaccine Equity Fund application process was extremely low-barrier and easy to navigate. When the application launched, we were in the initial stages of planning our COVID-19 vaccine strategy for people experiencing homelessness with our partners. Only because the application was brief and forward-thinking were we able to apply and effectively meet the actual needs to outreach and vaccinate this population during the grant term. We have also greatly appreciated the reporting requirements and process, as taking on  |

|  |
|--|
| vaccination has been an enormous undertaking for our organizations. This entire process allowed us to focus on how best to be effective in this work and the flexibility to make adjustments to reduce vaccine barriers.   |
| The TWP Vaccine Equity Fund was easy and convenient. We had requested an extension, and we were able to accomplish this with just a few emails. This allowed us to concentrate more on the outreach projects and spending less time on paperwork.  |
| The TWP vaccine equity fund was well utilized in our case. We appreciate the streamlines application process that provided efficiency in submission and evaluation of proposals. The TWP process worked quite well for us as it was not cumbersome and also did not insert long delays in selection and start of funding cycle. In addition, the pooled mechanism was a good idea and one we hope can be utilized again in the future.                   |
| This is probably one of the easiest one to apply for. This grant helped us so much with less hassle in process. I appreciate the process and everyone in TWP was so helpful, knowledgeable and have such great attitude. Until now TWP still supports the grantees and always stay in touch. It helps me and my community since we are still offering the vaccine in our community at least once a month.  |
| This process was fantastic and easy to navigate. It allowed our organization to focus on the task of outreach and vaccinations instead of paperwork. This was greatly appreciated.   |
| This process was heaven! It was so simple and gave us much more time to focus on our work instead of panicking about deadlines and paperwork. It really helped to be able to focus all of our efforts into the projects and getting the word out   |
| This process was user friendly. Other processes are more complex and can be frustrating to maneuver through.   |
| This was a simple quick process which was much appreciated. It covered our marketing, staff time and operating costs to be able to do this.  |
| This was extremely streamlined and easily accessible which was very helpful in this time of navigating COVID and rapid response  |
| This was our first experience with any types of grants.  |
| TWP was easy to understand and accessible to all. TWP reporting felt more about the importance of engagement and centered the populations we work with.  |
| TWP's grant process was more streamlined and easier to access than a more typical grant application process, which got vital funding into the hands of community organizations more quickly to carry out this important work through trusted messengers at the local level.  |
| TWP's process was very intuitive and easy to navigate.   |
| Very easier to administer.   |
| Very easy, minimal barriers and minimal reporting which is often very time consuming and difficult for smaller practices like ourselves.   |
| Very good, we really appreciate the ease on this process.  |
| Very well, easy and streamlined - and the staff were responsive and supportive.  |
| <b>We applaud The TWP Vaccine Equity Fund for the streamlined funding proposal process. Especially for communities of color and the work that is critical yet underfunded often due to the amount of time, capacity, and technical skill needed to apply for grant funding. The simpler application and quick turnaround time on funding decisions were greatly appreciated and is essential to truly advancing equity in meaningful ways.</b>           |
| We appreciate the streamlined application and reporting process. In comparison, this was a much lighter lift. I would estimate our team spent less than 2 hours on the application and reporting compared with 5-10 hours on other grant proposals and reporting.  |
| We appreciated an uncomplicated application and reporting process. That is a kindness, particularly in a season when non-profits are adjusting to so many obstacles. We are grateful for the funding and to be a partner.  |
| <b>We appreciated the ease and simplicity with which we were able to apply for and leverage TWP Vaccine Equity Funds. The flexibility we were given to use the funds was very useful as our strategy shifted with shifts in the pandemic. We believe we were able to have more impact thanks to the ease of accessing these funds and the flexibility that was granted in expending the funds towards the ultimate goal of achieving vaccine equity.</b> |
| We appreciated the streamlined application process, which allowed us to spend more time helping people as we were already in the midst of our vaccine equity clinics.  |

|   |
|---|
| We are most grateful for the process and the streamlined application and reporting component. We would encourage other funders to follow this effective model. Thank you for thinking of the front liners and boots on the ground. We are able to allocate more time and efforts to advance shared vaccine goals.   |
| We are thankful for partners like TWP/Caring for Colorado, who have supported us in reaching community, providing resources that are linguistically relevant, and help support the health and wellness of our children and youth. We appreciated the simple and direct process to apply for these funds. Compared to other grants, TWP has been a smooth and easy to navigate. We always seek more meaningful, long-term partnerships with funders and businesses and thankful for this partnership.  |
| We felt supported to help the clinics design their implementation and data gathering processes and showcase their impact, including back-to-school efforts. We'll be ready to deliver a richer summary at the end of August.  |
| We found it to be very manageable and the support from the Vaccine Equity Fund allowed us to take on an impactful project that we would otherwise have lacked the funding to initiate.  |
| We found the grant process to be very accessible and easy to work through. The entire process has been easy, and we have felt very supported.   |
| We loved your process. You made it easy. It was very effective for us to apply, receive funding and execute the vision of providing highly accessible, low barrier vaccinations. We entered this process not knowing the outcome. Many times, other grants require you to report out on metrics first. Though we had a game plan, we didn't know how many would even come. We were very thrilled that 893 were vaccinated over the course of 6 clinic days with several being in cold weather or snowstorms   |
| We really appreciated the streamlined grant application and reporting process, as well as being able to access funds from multiple funders using a single application. We found the grant proposal and the grant report format much simpler and less time consuming than other grant applications, which allowed us more time to spend working in our community to increase vaccination rates versus working on reporting and grant writing.  |
| We think it made the application process easier. We also enjoyed the willingness of other grantees to collaborate and coordinate on events and outreach.  |
| <b>We were grateful for this process. [Our organization] was never involved in health and wellness resources, and it was very hard to put budget and scope of work. Having little guidance, it was very hard to compete with medical experts that had experience in grant writing and health services. We knew that our organization needed to get involved in vaccine distribution early on because that was going to be the main solution for Latinos to have access. We had no time to waste in learning best writing grant practices to identify all the financial opportunities to address the current situation. We did not know how much the entire project was going to cost and all work around vaccine hesitance, education, and cultural validation really put us in the right place to achieve our goal. Had we not had your support we could not have helped the community the way we did. We felt empowered to have the funds needed to do our urgent work. This grant model should be utilized more often especially with grassroots and trusted organizations like [our organization] to really create an impact.</b> |
| Yes!!! SO easy to do!   |
| Yes. We appreciated the flexibility to innovate and work with our community to serve them best.   |
| <b>You did exactly what you set out to do. The process was easy, quick, and you supported us when we had to change and adjust our process to better meet the needs of our community. THANK YOU!</b>   |

## Is there anything else you'd like to share regarding your vaccine equity work or experience with the TWP fund?

[Our organization] is extremely grateful for the support it received from the TWP fund to help promote vaccine equity. Through these efforts, [our organization] was able to revitalize our health fairs. This project helped us strengthen the foundation upon which we will continue to offer health fairs/vaccine clinics to the community we serve.

[Our organization] is extremely thankful to have received supportive funding for our vaccination delivery and outreach/promotion.

[Our organization] is greatly appreciative to TWP for assisting with the Black community being vaccinated for COVID-19

[Our vaccination program] continues to work with [a community partner] on communicating COVID vaccine information to families and will leverage this experience as new guidance is released for children under age 5. We have been intentional about continuing to deliver information regarding routine childhood immunizations and flu vaccines while balancing with COVID vaccination messages. [Our vaccination program] would value TWP input regarding if there are other vaccine partners across the state who would like to send text messages to families. Further examination of balancing messaging fatigue and thoroughly distributing messaging is an important consideration in public health communications.

A large percentage of the population we served were Spanish speakers. The challenge is to get enough staff at the clinics that speak Spanish.

Agradecemos el apoyo brindado con el subido llegamos a serbia a nuestras comunidad con mejor rapides la epidemia nos enseñó a trabajar en colaboración como decimos en nuestro equipo !ESTAMO EN ESO JUNTOS!!! Gracias. *[We appreciate the support provided with the upload, we arrived in Serbia to our community faster, the epidemic taught us to work collaboratively as we say in our team! WE ARE IN IT TOGETHER!!! Thank you.]*

Although no TWP funding was used, [our organization] would like to share the success of our [COVID-19 vaccination] project which started June 19, 2021. [Our organization] provided up to \$350 to residents of Colorado who identify as Black Woman, and in need of financial assistance due to challenges relating to the COVID-19 pandemic. Although we had anticipated approximately 100 responses, within one week we'd received 749 applications for direct assistance from Black Women across the state. This unexpected outpour resulted in [our organization's] team shifting to a fundraiser to ensure that all 749 Black Women were gifted with up to \$350 in financial support. Additionally, every Black Woman who applied for support also received a warm and loving check-in call from one of [our organization's] staff members during a time when so many of us were struggling to survive and meet our basic needs, all while navigating these challenges in isolation.

As the state's largest LGBTQ advocacy organization, [our organization] understood the heavy responsibility of using the TWP grant funds to ensure more LGBTQ Coloradans and their families had access to and information about the COVID-19 vaccine. We used a variety of tactics, which included sharing resources through our website, hosting pop-up vaccination clinics with partner organizations, and mobilizing communities across the state. [A health organization in Colorado's] report on communicating with individuals who are vaccine hesitant informed and redirected our outreach on COVID-19 and vaccine information. Instead of using [our organization's] staff or the [LGBTQ population's representative group] as spokespeople, we pivoted to highlight leaders in our movement from specific regions of the state. We elevated known, trusted leaders to share their insights on how they have grappled with the COVID-19 pandemic and vaccine distribution. Geotargeting the educational outreach mail allowed us to widely broadcast factual information with reliable sources and provide messaging from leaders within their community. In a loud and busy information environment, we knew that our messaging needed to be targeted, relatable and relevant to the LGBTQ community. [Our organization] used our supporter network to send information to 36,000+ Coloradans and provide resources to live safe and healthy lives. Early on in the planning process, we were unsure if our community spokespeople would be open to publicly sharing their story, and we were relieved when every individual shared that if they could also help other people, they would step up.

Because of this funding I was able to reach out to communities in a non-traditional way. Thankful for this.

[Our organization] appreciates the support of TWP for [our organization's] work to provide vaccinations and vaccine-related outreach to their communities. To date, three [organizations of our type] have received funds:

[medica centers]. We continue to work to distribute the funds we received to [organizations of our type], especially with the pending approval of the vaccine for children under 5, and to gather data from them. The data submitted for this grant report is incomplete - we will share more complete data via email. Based on information [organizations of our type] provided to [a public health agency], since March 1, 2022, [organizations of our type] have provided at least 18,167 COVID-19 vaccinations, including first and second doses and boosters. The data provided for outreach in the first question is from one [organization of our type].

Collaboration is key. And we collaborated with a variety of organizations.

[Our organization] is appreciative of the support of Caring for Colorado through the TWP fund. Our continued efforts to increase access to healthcare for the medically underserved are enhanced by your support and helps us continue providing quality and affordable services, including life-saving vaccinations, for more members of our community.

During the grant period, [our organization] administered 2,683 COVID vaccines to 1,728 individuals. We are only able to offer the Moderna and Johnson & Johnson vaccines due to our freezers, so we only vaccinated adults. We encouraged our patients with children to attend the children's vaccine clinics offered by the local pediatrician where kids could receive the Pfizer vaccine. Of the adults vaccinated, 39% were uninsured, 21% Medicaid, 24% Medicare and 16% had commercial insurance. 58% of the adults vaccinated were Hispanic/Latino. We are grateful for your support of our work!

Going through a health crisis with the Latino community and small businesses was hard and it is still not over. We have heard of so many struggling and it has brought our organization to focus on the importance of health education, prevention, and awareness for Latino families and entrepreneurs. [Our organization] has gone through the theory of change, and we have decided to add a health and wellness department and have hired a new Health Equity Director that is helping us put together a health and wellness plan. We believe Latino entrepreneurs and their families are totally out of the medical system and they really need an organization to champion their needs at this level. We just got awarded 1.8M from [county funds] to develop this new health and wellness program and we look forward to continuing the collaboration with your organization and other partners to really champion the current health disparities among the Latino entrepreneurs and their families. Thank you.

Happy to be a part of this effort. Thank you!

It was a rewarding experience for our staff and [organization] and clients.

It was very valuable for our organization to take on this work. We learned about the community around us, and it really took us to new heights in our work of equity in more than just health and vaccine equity. This experience has helped to continue to shape our organization in equity for all in our work.

It was very beneficial to our organization as we provided vaccination opportunities to traditionally marginalized populations.

Just following up on a phone call with [a staff from a funding agency] about final spending. We had moved most of our funds in 2022 to marketing. Due to some staffing challenges, we did use about \$1400 to cover some staffing expenses in our Marketing Department.

My overall experience with TWP was very positive and I look forward to many collaborations in the near future.

No, we had a great experience working under TWP!

Our model for clinics, which highlighted culture and celebration, was one of the most effective strategies we used in our design process. The narrative we chose to employ for vaccine clinics was one of resilience, celebration, culture, and unity. When people arrived for their vaccines, they were met with familiar smiling faces, people who spoke their language, balloons, banners, art, free food, a live mariachi band, a free drive-in movie, and recognizable community leaders cheering them on! We wanted our community to know that we valued them, heard them, and wanted them to thrive. Our expression of care was our greatest and most effective strategy. As a result, our coalition, [and several community partners], independently hosted 5 community clinics (4 in [one city] and 1 in [another city]), carrying the entire effort from design to promotion to registration, reminder calls/texts, staffing and follow up with no shows. It felt amazing to celebrate this effort with our community.

Our vaccine equity work is still ongoing. Our community has a ways to go. Unfortunately, it seems that vaccine averse mindsets are growing for all vaccines, and not just COVID-19 vaccines. Our staff and community

members are involved in a workgroup to develop targeted messaging and efforts in order to support increased vaccine uptake in our community. Our organization will utilize guidance, messaging, and materials that arise from this workgroup.

Over the course of the pandemic we have been able to get 2,363 shots in arms, 333 of these vaccinations were for youth up through age 18. Even today as new COVID cases are being reported throughout congregate settings and the community, our work continues to try to convince our patients to get vaccinated. Thank you for your support.

People experiencing homelessness in Colorado Springs.

Prior to the funding, [our organization] and its staff have always had in place a unique community outreach and engagement program to provide support and assistance to refugee and immigrant families residing in Colorado. In our nearly 13 years interaction with this vulnerable and unconnected population, we built trust and respect amongst the refugee and immigrant communities we served. So when COVID-19 came, it brought new challenge. Many members of our community questioned why should they and their family members take the COVID-19 Vaccine and how harmful was the vaccine to their overall health and life. But with our outreach effort along with the trust and respect that we built over the years, we were able to encourage youths and their adult family members in our community to go out and take the COVID-19. In short, we were own ambassadors to making sure that youths and adults in our community were vaccinated and kept healthy.

Receiving this grant allowed [our organization] to now only reach as many community members as possible to receive the vaccine, it also allowed our department to redo two immunization rooms, one is in our [one regional] office, and the other is in the [other regional] office. The rooms were very outdated and needed to be made more assessable and safe. I received permission from the TWP team to use part of our grant monies to have this work done, and it has been completed.

Simply that as we ([our organization]) complete this work, we would like to ensure that the disabilities community is taken care of and supported. We are sharing our experience and contacts with [our community partner] so that they fill some of the gaps that disabled folks face as they get vaccinated. We ask that TWP partners support [our community partner's] efforts and keep our community in mind as they plan clinics and outreach.

Since April 2021, we've learned many lessons and best practices regarding COVID-19 Vaccine administration, outreach, and education. Providing COVID-19 vaccine clinics within our community's shelter spaces and offering incentives were the primary factors to our success in educating and vaccinating as many people as possible. Gift cards were especially critical in furthering our efforts. If someone was undecided about getting vaccinated, the gift card was an excellent way to give the extra push to consider it or engage in learning more before committing to being vaccinated. We also provided snacks, breakfast burritos, donuts, and little gift bags, making the clinics more fun and approachable. [A local health agency and our organization] also engaged other key community service providers for people experiencing homelessness ([a local food bank], additional shelters, and housing providers within our community) to further our vaccination efforts. We found that some service providers were more engaged in supporting vaccination efforts than others. Much of this may have been due to capacity strain. We noticed that if the staff within these provider organizations were actively engaging with clients/guests about receiving a COVID-19 vaccination, it was more likely that guests would show up to the scheduled clinics. If the commitment and buy-in at the staff/agency level were not as strong, it was challenging to reach and engage their clients. Therefore, [our organization] took the lead in supporting and coordinating messaging, outreach, and education. In addition, their staff consistently provided outreach materials for service providers to help address capacity challenges and ensure materials were available at key partner sites.

Thank you for all your support and trust and for being a partner in keeping our communities safe

Thank you for investing in trusted community-based organizations to support community efforts in addressing barriers to accessing vaccines and vaccine information. We also appreciated the opportunity to interact with other grant partners who share the responsibility to reach all communities and specifically address barriers.

Que gracias por dejarnos ayudar a la comunidad a que se vacunaran y quisieramos hacer mas. *[Thank you for letting us help the community to get vaccinated and we would like to do more.]*

Thank you for making this opportunity available. It's allowed us to move forward as a county in our equity work and demonstrate the value of hiring outreach specialists.

|  |
|--|
| Thank you for the ability to provide our families with a convenient, local pop-up clinic. We also appreciate the support received concerning how best to talk about vaccination with vaccine-hesitant individuals.   |
| Thank you for the opportunity. It was an eye-opening experience to realize that there are many barriers people face to getting vaccinated. The system is geared towards technology (i.e., everyone having a cell phone, being comfortable with technology, being able to read and write, being able to see, and etc.). At some of our clinics we had to actually help people register to get vaccinated because of different issues.   |
| Thank you for this flexible & responsive grant to support communities of color! The staff and the team for TWP was pleasure to work with.  |
| Thank you for this investment in the community. This initiative increased inclusion and equity in the community with regards to access and distribution of public health related funds and resources.  |
| Thank you for this opportunity and giving us more support and financial flexibility to meet the needs of our communities.  |
| Thank you for this opportunity. Because we saw such great success and need from our first round of funding we applied for another round of funding. We will be holding vaccine clinics at two [local public schools] this week ([dates of clinics])!   |
| Thank you for this opportunity. We enjoyed being able to work with new partners in the community. The funding gave these partners an opportunity to get creative and feel as if they could contribute towards making a difference in the pandemic at a time when many felt hopeless.   |
| Thank you for your generous support, which empowered more older adults to receive vaccinations. We are so grateful for this impactful grant.   |
| Thank you for your support   |
| Thank you so much for giving us this opportunity and the funding to make it happen. I think the lessons learned will resonate for years to come.   |
| Thank you so much for the support to execute our goals related to vaccine equity and education. This was a new landscape for [our organization] but we will continue doing this work as these types of health equity efforts are now becoming embedded in the fabric of our mission and strategic vision for the organization.   |
| Thank you so much for this opportunity to serve our community!   |
| Thank you so much for your support   |
| Thank you so much for your support and belief in our work! Thanks to this grant we were able to support multilingual and multiracial families in Aurora that are most impacted by the pandemic. We look forward to our continued work together!  |
| Thank you so much!   |
| Thank you so much! You have no idea how much this has helped our families!   |
| Thank you supporting our efforts to impact our community in such a meaningful way during this pandemic. From our project presentation at [a Colorado health conference], we shared the success of our efforts. There is the opportunity for grassroot organizations to support health equity work in the community with the needed funding and support. TWP demonstrated this possibility and success.   |
| Thanks again for this opportunity and for seeking to do this work equitably. There were just as many organizations as there were funders to jump at the opportunity to support vaccination efforts. While additional resources were needed, the ways in which others have distributed these resources often harmed communities because they were given to institutions with no connection to communities or created restrictive processes that local organizations couldn't navigate. Thank you for leading the way within the funding sphere and taking the time to be intentional in how these funds were distributed--fairly, equitability, and place-based. Thank you for creating an opportunity for communities to build themselves up during this time. |
| Thanks for addressing health disparities and promoting vaccine equity!   |
| Thanks for helping us reach out with vaccines!   |
| The flexibility and responsiveness of the grant was greatly appreciated!   |
| The funding allowed us to continue vaccinating our most vulnerable communities we will be hosting our final clinic on June 24th many in our community knows where to get their vaccinations as well as their boosters.   |

[Our organization] learned a great deal more about our rural villages around [the communities we serve]. We learned that we are resilient, that we appreciate an opportunity to serve our communities in the villages and in southern Colorado. [Our organization] learned that talking to our communities with medical facts reduced stress and fear. Our work with making our community and Southern Colorado safer meant a great deal to our board and members of [our organization].

The ongoing meetings with the many groups throughout the state were very helpful. The direct support and responsiveness of the team members has been very positive experience. Links to related informational webinars, etc. were a valuable part in the shared experience: in one case reaching out to a panel member during a nationwide Zoom meeting based in D.C. resulted in a great working connection to another organization the provided materials that were especially effective in reaching out to the immigrant community we serve. All in all, the TWP experience was a great combined effort that in many ways represented what the state (& State!) of Colorado is capable of doing by bringing its people together to address a critical issue.

The purpose of this grant was to increase the capacity of community navigators/connectors and community-serving entities in metro Denver by addressing practical barriers, vaccine hesitancy, and other issues keeping folks unvaccinated. In the end, we accomplished and learned a lot along the way in partnership with small, local organizations. We understand more intimately the value of providing resources at scale to address common needs among our partners, alleviating some of the financial and administrative burden of community-serving entities and allowing them to focus on their core mission work. Among other activities, with the TWP funding, [our organization] was able to provide Zoom pro licenses to local organizations to host community townhalls and conversations with local doctors about vaccines. We worked with a local research hospital to provide motivational interview training to community connectors across the Denver region to help them engage more successfully with folks regarding vaccine hesitancy. We consistently listened through feedback of our partners and the residents and business owners with whom they were engaging, and because of the flexible nature of this grant, were able to be flexible and responsive with other technical assistance such as translation of event information and interpretation during online sessions of our community partners. In listening we also know that any community health program needs to be rolled out with those most impacted at the center and with more comprehensive supports to help those folks actually benefit from the program - like ease-of-access through transportation options, flexible hours, multilingual resources, etc.

[Our organization] is very thankful to have been a grant awardee, the community we serve was extremely impacted and highly vulnerable to COVID 19. Ongoing factual education, community engagement, relevant messaging, and the grass roots coordination of vaccine outreach led to our success and was made possible by TWP funding. I am encouraged and hope to see more funding like this, robust, accessible, partner driven with common sense reporting.

The TWP fund helped us to explore venues we may not have taken otherwise. Due to the generosity of allowing the extension, we were able to reach out to a very diverse audience, thank you.

The TWP fund provided us a significant opportunity to support our communities. At this tumultuous time in our nation when the inequity experienced by people of color has come to the forefront, it is important we recognize the fact that - education, money, and power tends to provide access to good health. People of color have experienced the historic and systemic injustices. The opportunity to live a healthy life should be a matter of fact, not a matter of privileges. The data show that factors like your race, income, and zip code have a bigger impact on your health than your behavior, your medical care, or your genetic code. As part of our mission (at [our organization]) we work diligently to provide health-equity for all.

The TWP Grantee Meetings were useful on multiple levels. We gained creative ideas for outreach, identified novel ways to promote the COVID-19 vaccination, and utilized TWP Resource Hub resources to educate the public. The cohort was supportive, and each Grantee Meeting informed and improved our outreach strategy.

The vaccine numbers in Q2 and Q3 can't be directly linked to our project but did occur during the timeframe of the promotion and education portions of our project.

The work continues and we are proud to do it!

The work we were able to accomplish with this grant was a tremendous start. The pandemic continues and the African American/Black community is still under-vaccinated. We hope that opportunities such as this will continue so that the work to, with gentle kindness and patience, move those who are struggling to make a

|   |
|---|
| decision towards the path of protection against COVID-19 can continue. We appreciate this effort and look forward to continued opportunities to work together in advancing health equity.   |
| There was a community wide sense of powerlessness in knowing how to respond to COVID. It was gratifying to have the funds to respond to the inequities of COVID, particularly for a chronically underserved population.   |
| These two grants were incredibly impactful. Below are a few press clips that demonstrate that: [links to media]   |
| This turned out to be a bit more costly and challenging project than anticipated.   |
| This was a great experience, and we hope to get more funding through this organization in the future  |
| This was a great experience, and this grant allowed us to build on what we already do. Helping give vaccines in encampments and on trails was rewarding.  |
| This was a great experience. Our people would be willing to help again and even asked to continue to do the clinics.  |
| TWP offered great resources on the front end as time went on other TWP grant recipients offered some best practices, marketing ideas and additional education information. One area to look at is the ability to access additional funds to implement some of the new ideas and best practices that came up on the monthly calls and partnering with other organizations. We learned some valuable information after the grant funds had already been earmarked to establish and execute the clinics.   |
| We appreciated the opportunity to serve BIPOC with these resources. Family health and wellbeing is critical to the equitable treatment of people of all ages and stages of life.  |
| We are eager to continue promoting health equity among agricultural worker communities across Colorado as we move into an endemic state of the COVID-19 crisis.   |
| We are greatly appreciative of these funds. This funding source was particularly helpful to us as it helped to foster a relationship between us and partner organizations in our community. It provided the incentive for us to coordinate our messaging so that it was consistent across the community. This was a big success and laid the groundwork for additional collaboration on vaccine efforts. Thank you!   |
| We are having a clinic at our festival tomorrow. If anyone in the community would like to collaborate or need a space to hold the event I am willing to have it at my community center.   |
| We are most grateful for your ongoing support and guidance during these trying times. We believe our efforts have benefited primarily the Spanish speaking immigrant community in rural Colorado. Thank you so much for your investment and trust.  |
| We are pleased with the outcome of the initial funding. The availability of weekly seminars and workshops provided opportunities for conversations with other grantees. The ability to exchange ideas and to learn from the community and grantees helped to promote inclusiveness in program implementation.   |
| We are very grateful in knowing that the Muslim community was seen as a special interest population in this vaccine equity approach. Our community is 100,000 strong with more than 20 languages spoken and quite a wide income spectrum. Working with youth from the Muslim community, we were able to carry-out vaccination efforts throughout the state in a way that spoke to the Muslim community.   |
| We are very grateful to have received the Together We Protect funding because we were determined to work toward vaccine equity for our gente who were contracting COVID-19 at alarming rates, and we were able to commit to that necessary work thanks to the resources your funding provided our agency. Thank you for the work that you do! We also would like to acknowledge the amazing work that our (then) resource specialist, [staff name] did during this grant period. She worked extremely hard getting nearly everyone who contacted [our organization] about the vaccine a vaccination appointment. She made sure they had their appointment information and assisted many clients in resolving any technical difficulties they encountered upon signing up for appointments. We are proud to have a dedicated staff member like [her]. She has now transitioned into our lead case manager role, due in part by the abilities and motivation she showed us during her vaccine equity work and all the skills she learned during that time. Thanks [staff member]! |
| We became a vaccine provider for individuals who are homebound because of our work with our TWP partners. [Our organization/coalition] knew of the need, we are a mobile clinic and responded with yes - we will help when the need was presented to us. Now we are the only COVID-19 vaccine provider for homebound individuals in [our county].   |

We believe we were able to make a tremendous impact as a result of this grant. We reached a large number of people in the equity neighborhood [our locality], with education, vaccines, introduction to other wellness opportunities, basic needs, and other resources. Even the people who chose not to get vaccines received other types of support to improve the quality of their lives. This was a very important enterprise. We did not receive funding for our first grant request, which also included [another of our localities] neighborhood but were able to find private funding to host clinics there. That community, principally African American, was just as wary about the vaccines. Education and outreach by people they trusted was extremely helpful. Thank you for endorsing and funding our project. We did our best to provide exceptional service and use the funds judiciously. You helped us to make a real impact.

We continuously look to partner with organizations that support the vision and mission of [cultivating health]. We welcome the sharing of additional skills and resources from our partners as well as additional opportunities to learn more about each other's work. We value innovation and creative ways to continue to support our community.

We estimate that we reached at least 35,000 people. Below are some statistics on the reach of a sampling of our digital stories about the vaccine and resources (this does NOT include social media engagement, or our 3 broadcast shows and 2 radio shows on the topic) • [website address] • 12,421 • [website address] • Viewed by 1,514 • [website address] • Viewed by 779 • [website address] • Viewed by 1,116 • [website address] • Viewed by 5,272 • [website address] • Viewed by 564 • [website address] • Viewed by 5,202 All of the numbers entered on the survey regarding how many people were vaccinated because of our efforts are estimates, because our platform is public media we are unable to confirm how many people utilized the information to become vaccinated.

We greatly appreciate the funding provided by the TWP fund, as well as allowing us to change our target zip codes and extending the funds through May 31, 2022.

We greatly appreciate the opportunity and would love to be part of another grant. Thank you

We had a great experience with the TWP funding for this youth outreach campaign. We've been able to target communities that are looking for a trusted partner and we feel that this has been accomplished. More importantly, the communities we serve are getting vaccinated. We look forward to continuing our efforts. [Our organization] requested an extension on this grant beyond the original end date. As such, our campaign is still active and will continue until the remaining funds are spent.

We really appreciate the flexibility of TWP in recognizing the shifting landscape and supporting our broader focus on health equity as the pandemic evolved.

We really enjoyed working with TWP, so much so that we have re-applied for another grant. We will be using the funding to increase vaccine education and increase vaccine participation. In doing so we have started a [youth specific program] that will provide immunization education, sites where the mobile vaccine bus will be at, and plan events to increase vaccine participation. We are really excited about this new project and so are the community partners in our community. [Our organization] will be mentoring the interns and [partner organizations] are helping them by providing resources.

We so appreciate your support allowing us to ensure that vulnerable populations were able to get their COVID-19 vaccinations in a safe and welcoming manner. We could not have reached nearly as many people of color without your support.

We so appreciate your support of [our organization]!!

We want to thank you for all the support during this pandemic

We were surprised by how skeptical our community is and found it difficult to overcome the misinformation that exists - especially around the topic of children and vaccines.

We would like to thank the Caring for Colorado Foundation for the support they provided to us to reach our goal and to the other grantees for their willingness to collaborate.

We would not have been able to help vaccinate the hard-to-reach Latino communities in the mountains without this fund. Thank you!

Working with the community for vaccine program helped us to better understand the community in depth, their healthcare needs, and concerns. It is essential to keep the team of promoters motivated during the outreach activities and establish realistic goals. Ongoing education for the outreach team is essential to appreciate how

valuable one-on-one conversations are for successful community engagement. The learning sessions were helpful to build unity among grantees so that each agency had support and resources. Now more than ever we have realized the value of the drive to say, "Together we can do more".