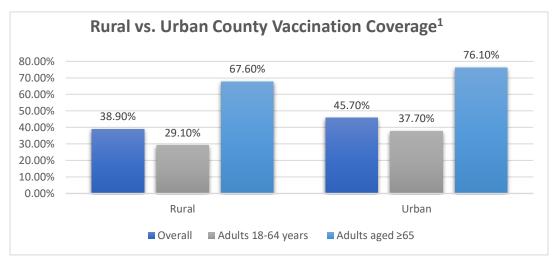
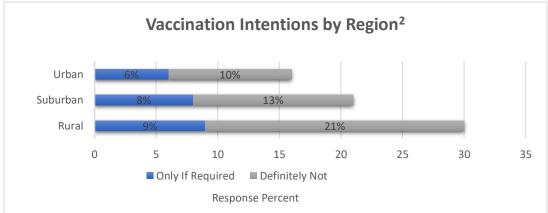


COVID-19 vaccination rates in rural communities have lagged slightly behind urban communities overall, and hesitancy in rural communities remains high. Counties can leverage federal tools, best practices, and local public health officials to work to overcome hesitancy and increase rates of vaccinations in their communities.





Quick Stats:

- First-dose COVID-19 vaccination coverage was lower in rural than in urban counties for adults overall (CDC, 2021)
- **86% of rural residents** reported that they trust their own health care providers for information on COVID-19 vaccines. (CDC, 2021)
- More rural residents traveled outside of their county for vaccination than urban counties.



Q&A

What should rural communities know about COVID-19 vaccine distribution efforts?

As of May 12, all individuals aged 12 and older are eligible to be vaccinated. In addition to the federal, state, and locally run vaccination sites, more than 40,000 pharmacies are participating in the Federal Retail Pharmacy Program and about 950 federally qualified health centers serving medically underserved communities receive and administer vaccines. As a result, about 90 percent of people live within five miles of a location to get vaccinated.

What is being done to ensure that vaccines are being distributed equitably?

The CDC has been using the Social Vulnerability Index (SVI) to inform the nationwide vaccination campaign. The index, which uses census data on socioeconomic status, ethnicity, housing/transportation measures, and other data to create the metric, has been used by to identify communities that need extra support.

What are some of the challenges facing rural communities in getting vaccinated?

Many communities face limited access to healthcare services, due to healthcare professional shortages or hospital closures. Public health services also may be strained as a result of large regions supported by a single public health department. Additionally, rural communities are challenged with limited access to broadband, making scheduling appointments difficult and transportation continues to create access barriers. Vaccine hesitancy poses an additional threat in rural communities as more information is needed by local residents to inform vaccine decision making.

What do rural communities need to consider in terms of their vaccine communication efforts?

Each community needs a tailored, multilayered approach to inform the public. For rural communities in particular, it may be best to use many communication platforms (such as radio and local newspaper articles) based on where people regularly get their information and identify trusted leaders to deliver messages. A recent CDC study revealed that the overwhelming majority of rural residents trust their health care provider for COVID-19 vaccine information, a key indication of the important role that local health and public health practitioners play in increasing vaccine confidence in rural communities.



County Best Practices

Wise County, VA



The Health Wagon, a mobile clinic in Wise County, hosts a drive-thru vaccination clinic and goes door-to-door to businesses (to vaccinate employees) and to houses (to vaccinate homebound people and their caregivers). The organization has completed 2,500 vaccinations so far. The Health Wagon has a 99% vaccination rate among employees, thanks to employee culture and buy-in from leadership, and posts videos about these vaccinations to encourage community members.

Greenbrier County, WVa



The Greater Greenbrier COVID-19 Task Force holds a virtual meeting at least once per week (since March 2020) to coordinate, collaborate, and communicate local COVID-19 response efforts across governmental, nonprofit, business, and grassroots organizations; this "task force" model has been replicated in nearby counties. The Greenbrier County Health Department — with support from many community organizations and 50-60 weekly volunteers — administers a large-scale, weekly vaccination clinic at the State Fair of West Virginia with capacity to vaccinate 75 people per 1/2 hour. The West Virginia School of Osteopathic Medicine Center for Rural and Community Health assists the Health Department with information and data management linked to evolving vaccine response needs including: hotline and database management system for scheduling and coordinating vaccination appointments, onsite clinic information management, and online map data integration to assist with building routes to coordinate vaccinations for homebound people throughout the county.

Lewis County, WA



Twin Transit, Lewis County Public Health and Social Services, Bird's Eye Medical, and United Way of Lewis County are providing mobile vaccine clinics. Twin Transit manages a hotline so people can schedule vaccination appointments over the phone. This approach reaches people who don't have transportation to attend a mass vaccination event, are homebound, and cannot or struggle to access an online scheduling portal.

See more best practices for rural communities here <u>RHIhub's Rural COVID-19 Innovations</u>: <u>COVID-19 Vaccination</u>



Federal Resources

- <u>COVID-19: Rural Communities</u> (CDC)
- <u>COVID-19 Vaccine Considerations for Rural Health</u> (CDC)
- <u>Community-Based Organizations Education Toolkit</u> (CDC)
- How to Build Healthcare Personnel's Confidence in COVID-19 Vaccines (CDC)
- Rapid Community Assessment Guide (CDC)
- We Can Do This: Rural Community Toolkit (HHS)
- Guide for Faith-Based and Community Organizations (HHS)

Additional Resources

- <u>COVID-19 Vaccination in Rural Areas</u> (Rural Health Information Hub)
- Rural COVID-19 Innovations (Rural Health Information Hub)
- Key Considerations for Counties in COVID-19 Vaccine Distribution Plans (NACo)
- NRHA COVID-19 Technical Assistance Center (National Rural Health Association)
- Ensuring an Equitable Distribution of COVID-19 Vaccines in Rural Communities (National Rural Health Association)
- <u>Local Public Health: An Integral Partner for Increasing Vaccine Confidence</u> (NACCHO)
- <u>Building Vaccine Confidence Through Community Engagement</u> (American Psychological Association)

Data Source(s):

¹Murthy BP, Sterrett N, Weller D, et al. Disparities in COVID-19 Vaccination Coverage Between Urban and Rural Counties — United States, December 14, 2020–April 10, 2021. MMWR Morb Mortal Wkly Rep 2021;70:759–764.

DOI: http://dx.doi.org/10.15585/mmwr.mm7020e3external icon

²Kirzinger A, Sparks G, Brodie M. KFF COVID-19 Vaccine Monitor: Rural America (March 15-29, 2021). April 9, 2021. DOI: https://www.kff.org/report-section/kff-covid-19-vaccine-monitor-rural-america-findings/