



NEWARK EQUITABLE VACCINE INITIATIVE



NEWARK EQUITABLE VACCINE INITIATIVE

For 11 months, 14 organizations worked to provide education, outreach, support, events and free vaccination opportunities to increase COVID-19 Vaccinations for Newark residents. They came together in May to reflect on their work, including initiative highlights, lessons learned, and the work moving forward.

The following bullets represent the overarching themes from the conversation; all themes and direct quotes can be found on page 22 of this report



- **THE COMMUNITY IS MORE EMPOWERED WHEN THEY ARE EQUIPPED WITH INFORMATION, WHICH IS BEST DELIVERED THROUGH MULTIPLE COMMUNICATION METHODS, CHOSEN BY ORGANIZATIONS EMBEDDED IN THE COMMUNITY RATHER THAN DEFINED BY OUTSIDERS.**
- **INVESTING THE TIME AND RESOURCES TO HEAR THE COMMUNITY WHERE THEY ARE IS CRUCIAL TO SUPPORTING THEM.**
- **NOTHING IS MORE EFFICIENT THAN WRAP AROUND, HOLISTIC, PLACE-BASED SERVICES.**
- **FINANCIAL INCENTIVES ARE VERY POWERFUL, AND ESPECIALLY EFFECTIVE FOR WORD-OF-MOUTH COMMUNITY REFERRALS.**
- **STRONG, CONSISTENT RELATIONSHIPS WITH THE INTENTION OF BUILDING DEEP TRUST SIGNIFICANTLY IMPROVE SERVICE DELIVERY AND OUTCOMES.**
- **COLLABORATIVE PARTNERSHIP AND COMMUNICATION BETWEEN ORGANIZATIONS DRAMATICALLY INCREASES THE CAPACITY OF ALL ORGANIZATIONS TO PROVIDE SERVICES.**
- **COMMITTED COMMUNITY HEALTHWORKERS FROM THE COMMUNITY HAVE THE PATIENCE AND EXPERTISE TO CHANGE MINDS AND EDUCATE.**
- **THIS WORK HAS PERMANENTLY CHANGED THE WAY THESE ORGANIZATIONS OPERATE, AND WILL CONTINUE DESPITE CONTINUED RESOURCE NEEDS AND LACK OF CONTINUED FUNDING.**

“Before the past 2 and a half years, people really didn't pay our organization attention.

WE WEREN'T ESSENTIAL UNTIL WE WERE... AND THE COMMUNITY AND THE COUNTRY DIDN'T REALIZE HOW MUCH THEY NEEDED US UNTIL THEY

DID... and so I want everyone to keep that same energy going forward because it's gonna take about 10 years for us to get out of what we're into what has happened with Covid. Because it's not just about the virus... it's not just about the medical issues... **it's all of the things that it affected. We have children who are behind in school, we have families that are adversely affected financially, you know so many different things including jobs and housing.”**





COVID-19 in Newark

Newark's population is likely to suffer some of the most devastating long-term effects of the pandemic. Newark is the second-most racially diverse city in New Jersey, with a population 50% Black/African American and 33% Hispanic or Latino (Okoh, 2020). The coronavirus (COVID-19) pandemic has revealed deep-seated inequities for communities of color and amplifies social and economic factors that contribute to poor health outcomes (SAMHSA, 2020). *Outcomes and effects on people's lives include areas such as educational attainment, ability to work, reduced economic opportunities and more.* While recent studies have focused on the spread of the disease nationally and identifying risk factors, little is still known about the effects of COVID-19 on underserved and historically disenfranchised populations in the United States.

According to Substance Abuse and Mental Health Services Administration (SAMHSA) Office of Behavioral Health Equity (OBHE) in 2021, People of color are:

- *At an increased risk for serious illness if they contract COVID-19 due to higher rates of underlying health conditions, such as diabetes, asthma, hypertension, and obesity compared to Whites*
- *More likely to be uninsured and to lack a usual source of care (a significant barrier to accessing COVID-19 testing and treatment services)*
- *More likely to work in the service industries such as restaurants, retail, and hospitality that are particularly at risk for loss of income during the pandemic*
- *More likely to live in housing situations, such as multigenerational families or low-income and public housing that make it difficult to social distance or self-isolate*
- *Often working in jobs that are not amenable to remote work and are more likely to utilize public transportation, putting them at a higher risk for COVID19*

Miller (2020) found that COVID-19 related mortality was increased for the following groups:

1. Those living in correctional facilities
2. Those living in health care-related group quarters
3. Those without health insurance coverage
4. Those with family incomes below the federal poverty level
5. Those in occupations with limited work-from-home options.

All of these subgroups are over-represented in Newark compared to its neighboring cities and the rest of New Jersey.

COVID-19 Impact in Newark

In April 2020, more than 8,000 polymerase chain reaction (PCR) tests were conducted for adults (age 18 or older) living in Newark. In that same month, over 4,700 tests were positive (59%). See Figure 3 below for monthly rates of positive PCR tests in 2020, which fluctuated from a low of 6% to a high of 58% (reported by *Advocates for Children of New Jersey*). Of course, an even higher number of Newarkers were plagued with the burden of potential exposure which included taking precautions such as swab testing, quarantining, self-isolation, and possibly feeling sick. For many, this meant loss of holiday or vacation days, wages, loss of learning, loss of emergency funds, and other significant negative effects.

Figure 3: 2020 PCR COVID-19 Tests, Adults Ages 18 and Older

	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Total
Total Tests	1,391	8,037	13,383	16,539	11,600	11,617	8,479	14,081	20,295	22,345	127,767
# Positive	804	4,736	1,870	941	732	815	579	2,095	4,093	4,234	20,899
% Positive	58	59	14	6	6	7	7	15	20	19	16

Source: City of Newark, Coronavirus (COVID-19) Dashboard. <https://newarkcovid19.com/data>. Data reflect the number of tests for the period of March-December 2020. Data may include duplicates, as each figure represents the number of tests and not unique test recipients.

Before the pandemic, from 2015-2019, Newark’s unemployment rates were decreasing in alignment with both the county and state rates. But in April 2020, Newark’s unemployment rate went from a low of 6% in 2019 to an astonishing high of 19.7%. See the chart (Figure 2) from *Advocates for Children of New Jersey* below for the monthly unemployment rates for the year 2020.

Figure 2: 2020 Monthly Unemployment Rate



Source: U.S. Department of Labor, Bureau of Labor Statistics, Local Area Unemployment Statistics. Rates are not seasonally adjusted. Data retrieved February 21, 2021 from <https://www.bls.gov/data/>.

The unemployment data and the number of positive cases within the city are two of many indicators of a bleak 2020, leading into very similar conditions for all of 2021. These extra layers of socio-economic burden and extenuating circumstances have posed new barriers in a time that was already challenging for many.

Newark Equity-First Vaccination Initiative Background

The Equity-First Vaccination Initiative (EVI), supported by The Rockefeller Foundation, aimed to reduce racial and ethnic disparities in COVID-19 vaccination rates in the United States and, over the longer term, strengthen the public health system to achieve more-equitable outcomes. Building on prior place-based investments, the foundation committed \$20 million over one year to fund five demonstration sites—Baltimore, Maryland; Chicago, Illinois; Houston, Texas; Newark, New Jersey; and Oakland, California (Figure 1.2)—to plan and implement hyper-local, community-led strategies to increase vaccine confidence and access for BIPOC communities.

The EVI has identified anchor partners in each site that, along with other key partners, have provided subgrants to more than 80 community-based organizations (CBOs). The CBOs are leading the implementation of hyper-local strategies to increase equitable access to COVID-19 information and vaccination. Anchor partners at each site (represented in Figure 1 by networks of organizations in each city) plan and coordinate CBO efforts, implement strategy, track progress, foster communities of practice, and ensure the CBOs have the resources they need to be successful.

Figure 1.2. EVI Demonstration Sites and Anchor Partners



The Process for Newark

United Way of Greater Newark (UWGN) meets weekly with a team of experts to plan and implement its EVI approach. This team includes staff at UWGN; local experts in marketing, design, and public relations who serve as key partners of the EVI (e.g., the Tara Dowdell Group and Medina = CITI); the Vice Chancellor of Rutgers Medical School, who serves as UWGN’s medical expert and has expertise in communications, public health, and health care; and staff from The Rockefeller Foundation. UWGN also hosts monthly community-of-practice meetings where all grantees come together to share feedback, challenges and successes. The medical expert also presents the current public health information at each meeting and provides space to better align intervention efforts. CBOs also bring vaccination questions directly from the community for the expert to answer, which promotes a clear and consistent message about the vaccine. CBOs also have access to UWGN’s communication experts and additional resources to effectively inform the community.

Key Principles of the NEVI

The NEVI is guided by three key principles:

1. The equity-first programming must be delivered at a **hyper-local level**—at the level of neighborhoods and ZIP codes, not states, counties, or cities.
2. Efforts to increase access to COVID-19 vaccinations and accurate information about them should be **led by the communities** in which they are implemented.
3. The goal of the EVI is not simply to achieve equity in vaccination rates but rather to take a **holistic approach** and promote equitable outcomes across all sectors of society, including, but not limited to, health, education, housing, and economic opportunity.

As the pandemic continues to evolve, EVI partners have recognized that they must reach deeper and deeper into their communities to identify individuals who may face multiple barriers to getting vaccinated, such as not knowing where to go, what the benefits of vaccination are, or not having transportation or child care to access services. Partners have also recognized that they must intensify their wrap around models and become increasingly creative with strategies to provide trustworthy, evidence-based, and relevant information to people as they weigh their vaccination decision.

	Information	Physical accessibility	Trustworthiness	Technology	Cost
Sharing accurate, trustworthy, and accessible information	◆		◆	◆	
Providing transportation assistance		◆		◆	◆
Maximizing convenience of receiving the vaccine		◆	◆	◆	◆
Making registration and appointment processes streamlined and inclusive	◆			◆	
Offering incentives					◆

MISSION STATEMENTS OF NEVI PARTNERS

Bridges Outreach	Bridges ends homelessness through volunteer-driven outreach and individual case management focusing on health, housing, and independence. We form relationships with those experiencing homelessness while meeting their most urgent needs.
Clinton Hill Community Action	Our mission is to partner with residents to revitalize the Clinton Hill neighborhood, ensure that development is equitable and just, and advocate for what the community needs and deserves.
FOCUS	Provide community leadership by developing a variety of health and human development initiatives which advance the community toward self-sufficiency, growth, empowerment, and a better quality of life.
Greater Newark Healthcare Coalition	GNHCC's mission is to work collaboratively to improve systems and community and individual conditions for optimal health and well-being.
Ironbound Community Corporation	Ironbound Community Corporation's (ICC's) mission is to engage and empower individuals, families, and groups in realizing their aspirations and, together, work to create a just, vibrant and sustainable community.
La Casa de Don Pedro	La Casa de Don Pedro's resident-centered agenda empowers people and builds their self-sufficiency. Through education & economic development strategies, neighborhood revitalization initiatives, and family stabilizing programs & services, this agenda works to ensure that Greater Newark's residents engage in and benefit from the region's growth. It also guarantees that they may continue to enrich this dynamic region with their vibrant and diverse cultural identities that make the region unique.
Newark Emergency Services for Families	To provide assist and support families and individuals in crisis. Assisting the homeless, low income and unemployed with their basic needs and support to gain self sufficiency.
North Jersey Aids Alliance/NJCRI	Our mission is to empower our clients by reducing social and health disparities in the greater Newark area.
Project Ready	We work to close the opportunity gaps and improve life outcomes by amplifying issues at the intersection of social justice, public health, educational inequities, and civic engagement. We empower communities to reshape harmful policies and demand social justice. We highlight, uplift, and restore the narratives of Black and Brown voices.
Sarah Ward Nursery	Sarah Ward Nursery is a Private Preschool located in Newark, NJ. Preschool is an educational setting that provides learning and play experiences for young children, ranging anywhere from 2-5 years old. These programs offer opportunities to gain early physical, social, and intellectual skills through play and creative activities.
South Ward Promise Neighborhood	Mission of the SWPN Collaborative: To provide a coordinated pipeline of services and resources that guides and supports families so that their children can live in healthy homes, succeed in school, contribute to their communities, and thrive in life.
Tree House Ent Cultural Arts Movement	We aim to improve sustainability, accessibility and health in families and communities across New Jersey.
Unified Vailsburg Service Organization	Unified Vailsburg Services Organization's mission is to create a stable and compassionate community in the Vailsburg neighborhood of the City of Newark, New Jersey.
United Community Corporation	Guided by service, compassion and fairness, UCC's mission is to assist low-income, disadvantaged and at risk individuals and families, including seniors and youth, to become self-sufficient and self supporting; while enhancing their quality of life and standard of living.

To date there have been 76,345 positive cases in Newark, and 1,167 COVID-19 related deaths. Without the intervention of vaccination, there is no telling what the positive cases and death rates in Newark would be .

Per the CDC, at the start of the Newark Equitable Vaccine Initiative in May 2021, the vaccination rate was 16%. By the end of the program, the vaccination rate is 83% partially vaccinated and 68% fully vaccinated. NEVI Partners accounted for over 10% of all vaccinations in Newark.

Newark Vaccination Rates as of May 2022			
Partially Vaccinated		Fully Vaccinated	
All Ages	83%	All Ages	68%
5 through 11	36%	5 through 11	26%
5 and over	89%	5 and over	73%
12 through 17	86%	12 through 17	70%
12 and over	95%	12 and over	79%
18 and over	96%	18 and over	80%
30 and over	98%	30 and over	84%
65 and over	98%	65 and over	84%

New Jersey COVID-19 Information Hub, 2022.



916,464
REACHOUTS TO
THE COMMUNITY



\$1M
DONATED
FUNDS



14
LOCAL
ORGANIZATIONS



1541
EVENTS HOSTED



96,585
BAGS OF GROCERIES
DISTRIBUTED

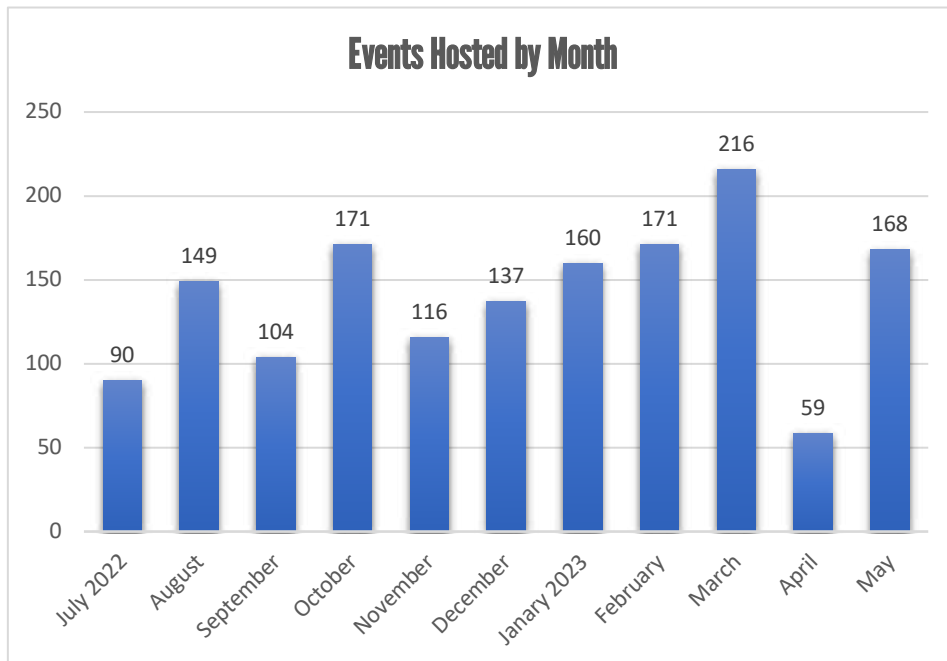
27,247
VACCINATIONS



90,759
REFFERALS, CAR RIDES,
INTERPRETERS AND
OTHER ASSISTANCE
TOWARDS VACCINATION

NEWARK EQUITABLE VACCINE INITIATIVE

THE NEWARK EQUITABLE VACCINE INITIATIVE HOSTED A TOTAL OF 1,540 EVENTS, PROVIDING ACCURATE HEALTH INFORMATION, SUPPORTIVE INCENTIVES AND VACCINES TO THE NEWARK COMMUNITY.



The NEVI partner organizations hosted a total of 1,540 events. Over a third (36%) of events were vaccination clinics, two in ten (22%) were through street outreach, and the rest included organizational events, faith based events, health fairs, food distribution events, community fairs/BBQs and more.

Specific events include: Food Giveaways, Senior Education Event, Substance Use Disorder Facilities, Little League Baseball Games, Movies in the Park, garden classes, Carnivals, Wellness Fairs, Friendsgiving Events, Coat Drives, Family Education Nights, and more.

	Food Distribution	Community BBQs	Vaccination clinics / days	Street outreach	Organization-based Outreach	Faith-based Outreach	Health Fairs	Recreational Programming	Other
July	5	3	53	7	0	0	5	3	14
August	4	7	99	1	5	16	2	15	0
September	3	13	34	39	1	0	6	8	0
October	7	0	44	110	0	1	2	7	0
November	5	0	77	5	19	0	0	10	0
December	4	0	47	18	53	10	0	5	0
January	7	0	32	80	2	14	0	1	24
February	3	0	76	30	20	18	0	14	10
March	0	0	78	47	53	11	4	4	18
April	3	0	16	4	11	4	2	2	17
May	3	1	51	14	57	7	5	12	18
TOTALS	44	23	556	341	164	74	21	69	101

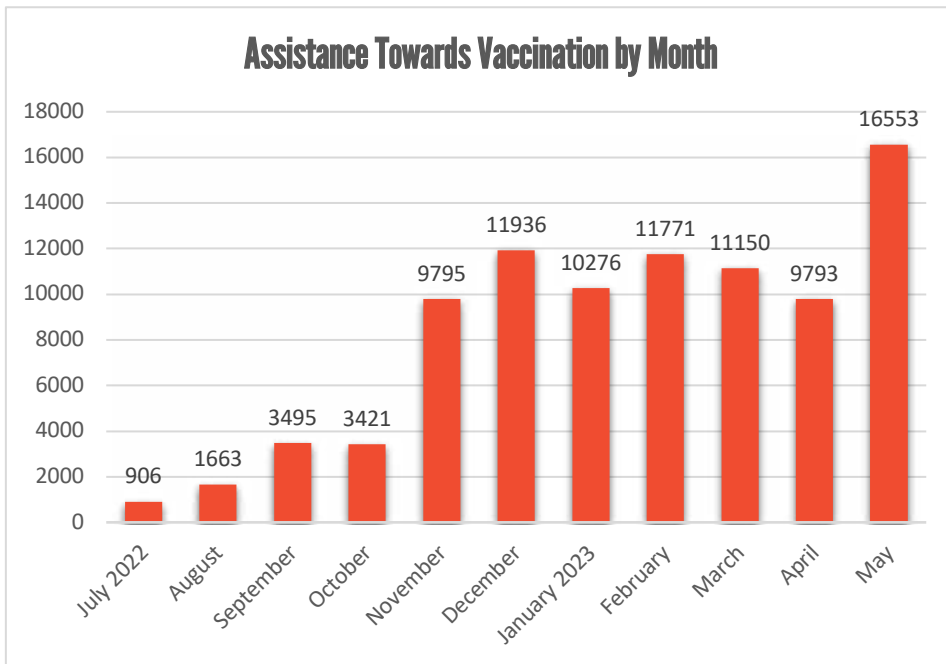
TOTAL EVENTS BY ORGANIZATION

NJCRI hosted the most events with vaccination opportunities and health education. This included drop-in events at the organization location, street outreach in hard-to-reach places, and pop up mobile vaccination sites at faith based organizations, schools, and other community locations.

Community-based Organization	Event-days
NJCRI	670
South Ward Promise Neighborhood	312
La Casa de Don Pedro	186
United Community Corporation	124
Greater Newark Healthcare Coalition	67
Clinton Hill Community Action	37
Unified Vailsburg Service Organization	36
Sarah Ward	31
Ironbound Community Corporation	22
Newark Emergency Services for Families	20
Tree House Ent Cultural Arts Movement/Tree House Cares	15
Project Ready	14
Bridges Outreach	6



THE NEWARK EQUITABLE VACCINE INITIATIVE interfaced 90,759 times with INDIVIDUALS around GETTING VACCINATED through services such as translation, TRANSPORTATION, EDUCATION, EMOTIONAL SUPPORT AND MORE.



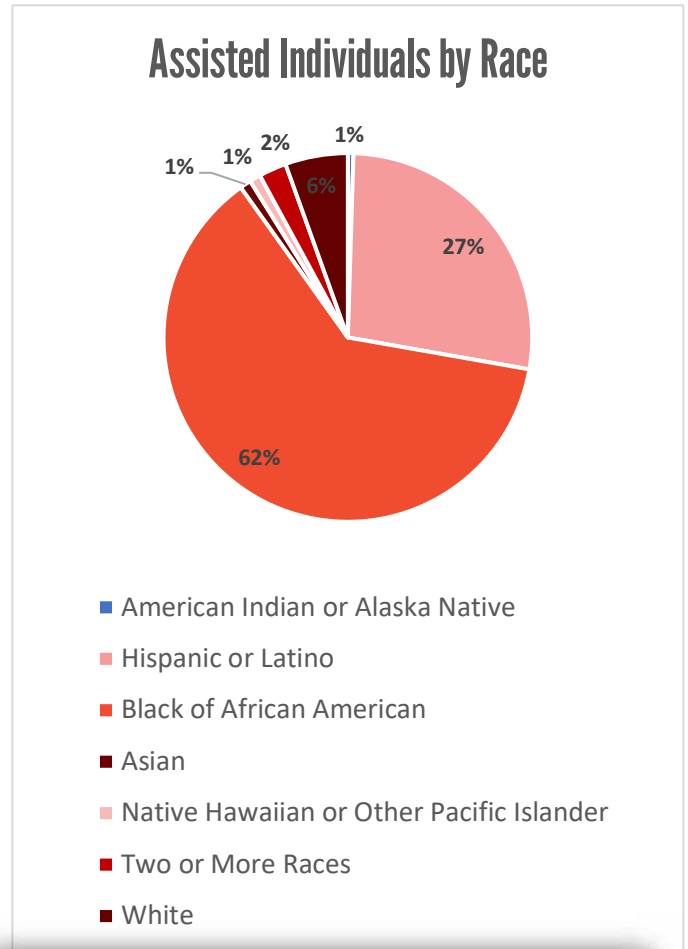
The Newark Equitable Vaccine Initiative made 90,759 contacts with individuals to support them getting vaccinated. The major increase in numbers from October to December is due to providing and counting all educational information given to food distribution recipients at United Community Corporation. **While a line cannot be drawn directly from each interface point to a vaccination, each one of these interactions planted a seed or supported movement towards a decision to vaccinate.**

	Referrals to vaccination sites	Trasportation to vaccination sites	Facilitated vaccination signups	Interpreter services	Emotional Support	Health Education / Information
July	243	32	8	580	43	0
August	32	29	176	354	602	470
September	80	170	88	933	6	2218
October	244	220	613	319	0	2025
November	84	27	21	622	0	9041
December	44	237	11	824	120	10700
January	29	73	14	1004	63	9093
February	63	468	160	432	43	10605
March	386	44	8	845	47	9820
April	0	0	167	159	0	9467
May	318	70	0	1296	0	14869
TOTALS	1523	1370	1266	7368	924	78308

ASSISTANCE TOWARDS VACCINATION - DEMOGRAPHICS

Out of the over 90,000 individuals that received assistance through the Newark EVI, more than six in ten (63%) are women, nearly four in ten (37%) are men, and less than 1% identified as non-binary or another gender. The composition of race served closely aligns with that of Newark overall, specifically the population targeted by the initiative.

Assisted Individuals by Age			
	0-17 years	18-64 years	65+ years
July	4%	84%	12%
August	1%	75%	24%
September	6%	74%	20%
October	3%	86%	10%
November	3%	82%	14%
December	3%	82%	14%
January	8%	81%	12%
February	7%	79%	14%
March	5%	82%	13%
April	3%	82%	14%
May	5%	77%	17%
TOTALS	5%	81%	14%



ANY NEWARK RESIDENT WHO NEEDS A RIDE TO A VACCINE APPOINTMENT IN NEWARK CAN CALL 2-1-1 AND SCHEDULE A FREE RIDE WITH LYFT.



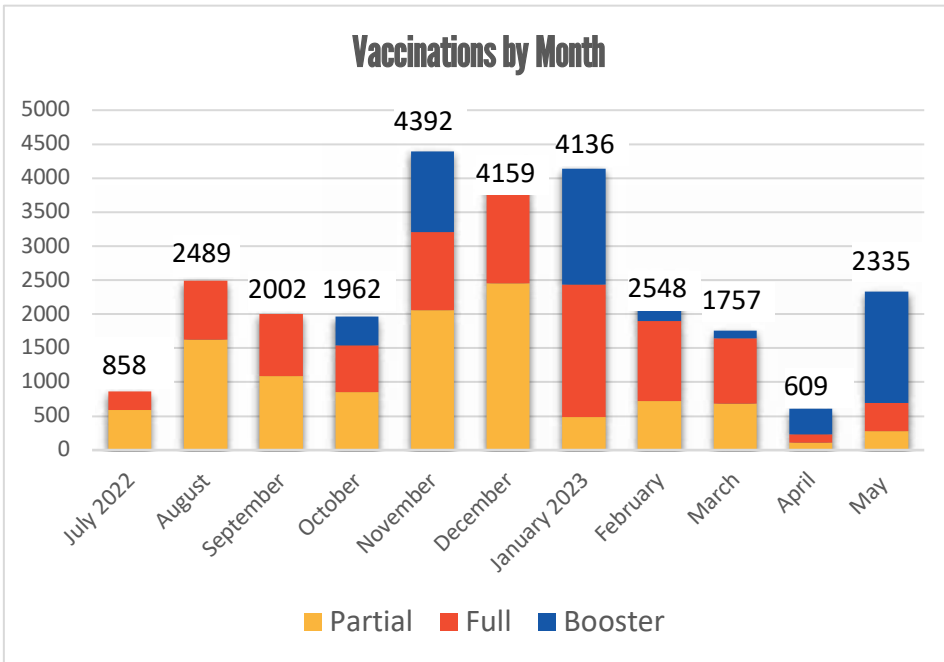
TOTAL ASSISTANCE TOWARDS VACCINATION BY ORGANIZATION

United Community Corporation provided the largest assistance efforts by engaging the many community members they serve through their food pantry. They called recipients directly to provide accurate vaccination information and gave out health access information in every bag of groceries they distributed over the course of the initiative. Their grand total of assistance by health information provided or other support towards vaccination totaled over 62,400.

Community-based Organization	Assistance	Event-days
United Community Corporation	62405	124
North Jersey Aids Alliance , Inc. D/B/A NJCRI	6562	670
FOCUS	3677	0
Project Ready	2440	14
South Ward Promise Neighborhood	1834	312
La Casa de Don Pedro	958	186
Clinton Hill Community Action	808	37
Bridges Outreach	681	6
Ironbound Community Corporation	661	22
Greater Newark Healthcare Coalition	328	67
Unified Vailsburg Service Organization	188	36
Newark Emergency Services for Families	148	20
Tree House Ent Cultural Arts Movement/Tree House Cares	146	15
Sarah Ward	130	31



THE NEWARK EQUITABLE VACCINE INITIATIVE WAS RESPONSIBLE FOR THE DIRECT VACCINATION OF 27,247 INDIVIDUALS, WHICH IS AT LEAST 10% OF NEWARK.



The Newark Equitable Vaccine Initiative directly vaccinated 27,247 individuals, which is at least 10% of the Newark population. Among this 10% were some of Newark’s most vulnerable community members, already familiar with these CBOs due to receiving food assistance or supportive services through them. More than 14,400 recipients were for full vaccinations and boosters, keeping more Newarkers safer from fatal COVID-19 health complications and slowing down the spread statewide. More than half (54%) of the vaccinations distributed were Pfizer, more than a third (36%) were Moderna, and one in ten (10%) were Johnson & Johnson.

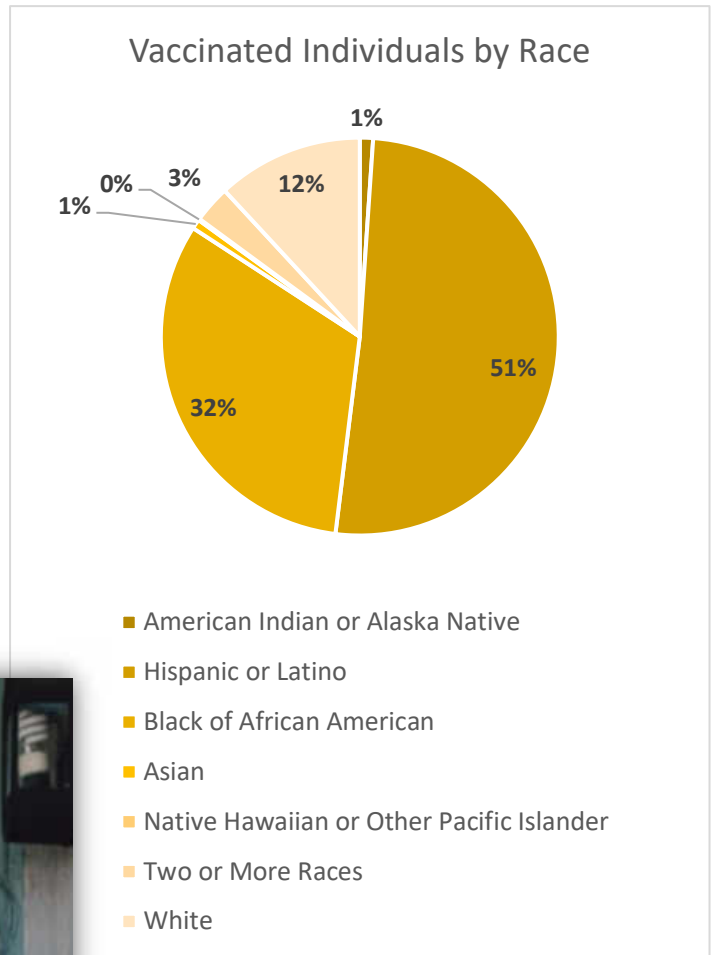
	Pfizer	Moderna	J&J
July	225	586	35
August	1003	894	591
September	1055	620	327
October	1023	623	303
November	2081	1734	574
December	2195	1712	249
January	2690	1262	172
February	1730	687	130
March	1144	517	95
April	317	263	27
May	1165	1138	33
TOTALS	13463	8897	2503



VACCINATION – DEMOGRAPHICS

Out of the 27,000+ individuals that received assistance through the Newark EVI, more than half (55%) are men, slightly less than half (44%) are women, and 1% identified as non-binary or another gender. The composition of race served closely aligns with that of Newark overall, specifically the population targeted by the initiative. The proportion of individuals assisted by age stayed fairly consistent over the 11 months, but the percentage of children (under 18) increased as the grant progressed, which aligned with vaccinations becoming more normalized for children.

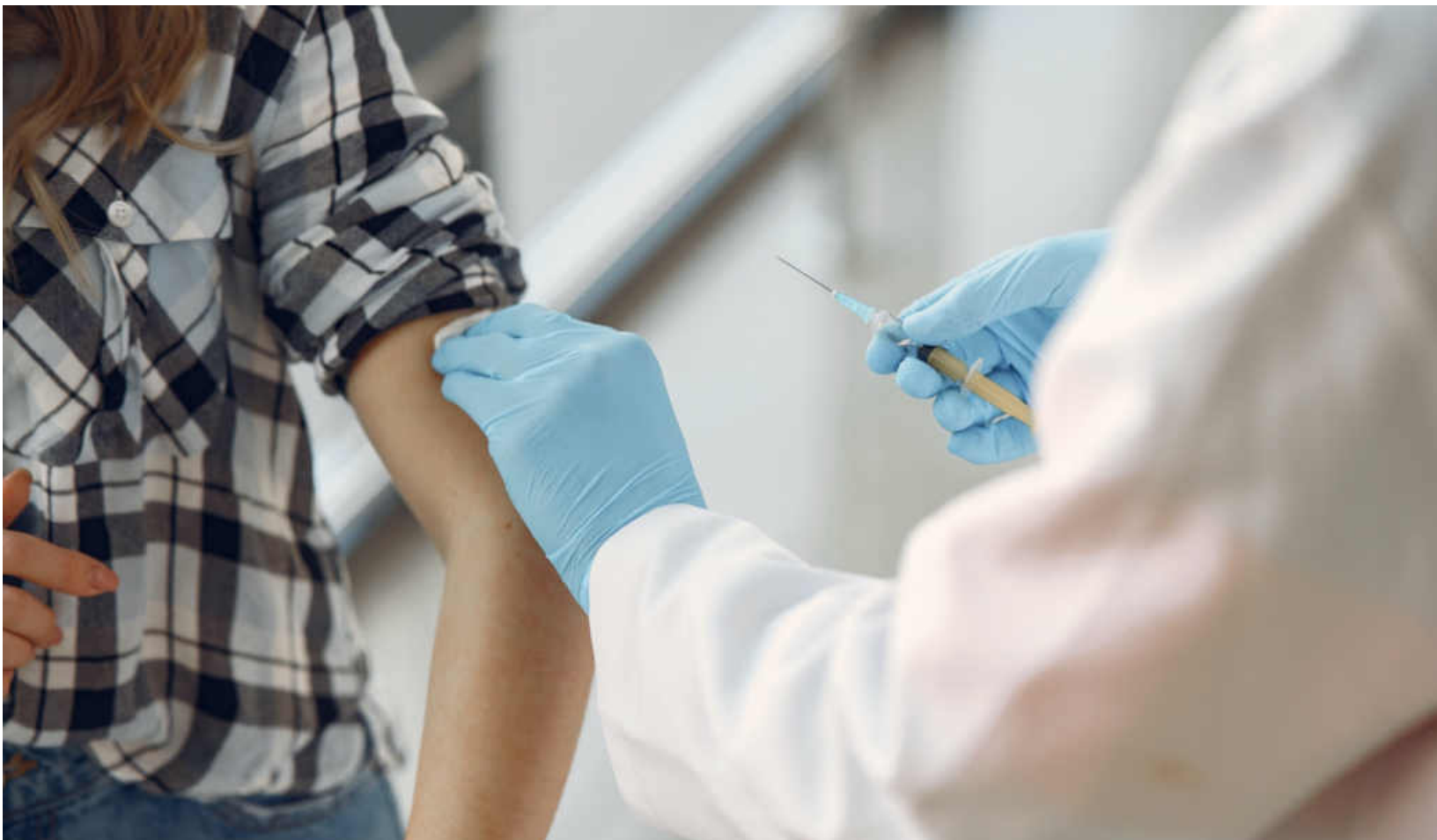
Vaccinations Individuals by Age			
	0-17 years	18-64 years	65+ years
July	3%	87%	10%
August	7%	68%	25%
September	14%	65%	21%
October	8%	74%	18%
November	12%	71%	16%
December	20%	67%	13%
January	36%	62%	2%
February	25%	61%	14%
March	20%	67%	13%
April	14%	63%	23%
May	18%	48%	33%
TOTALS	19%	67%	14%



TOTAL VACCINATIONS BY ORGANIZATION

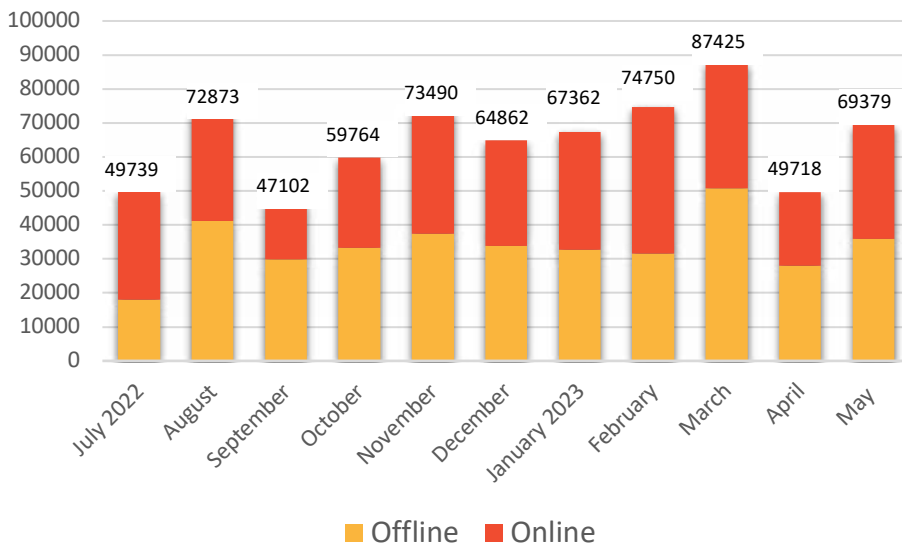
Community-based Organization	Total Vaccinations	Event-days	Assistance
NJCRI	10670	670	6562
South Ward Promise Neighborhood	8738	312	1834
La Casa de Don Pedro	3575	186	958
United Community Corporation	1871	124	62405
Ironbound Community Corporation	765	22	661
Newark Emergency Services for Families	380	20	148
Tree House Ent Cultural Arts Movement/Tree House Cares	319	15	146
Sarah Ward	299	31	130
Greater Newark Healthcare Coalition	11	67	328
Clinton Hill Community Action	8	37	808
Bridges Outreach	2	6	681
FOCUS	0	0	3677
Project Ready	0	14	2440
Unified Vailsburg Service Organization	0	36	188

NJCRI and South Ward Promise Neighborhood were the top vaccine distributors, giving out a total of over 19,000 vaccinations. Many other organizations partnered with them or referred directly to them for distribution efforts.



THE NEWARK EQUITABLE VACCINE INITIATIVE WAS RESPONSIBLE FOR REACHING CLOSE TO ONE MILLION INDIVIDUALS THROUGH FLYERS, SOCIAL MEDIA, CANVASING, TEXTS, AND VIRTUAL EDUCATION EVENTS.

Outreach by Month



The Newark Equitable Vaccine Initiative was responsible for reaching over 916,464 individuals through various methods of online and offline messaging. **These messages were a key part of reinforcing the message that vaccinations were safe, accurate information was available from trusted sources, and it is never too late to get vaccinated.**

**Not shown in Outreach by Month chart is 200,000 individuals reached by a special social media campaign from United Community Corporation in October.*

Outreach by Type

	Social Media	Flyers	Virtual Education	Information Tables
July	28,484	3,236	14,767	689
August	27,867	12,602	15,111	13,019
September	2,121	12,700	15,865	2,395
October	226,595	15,150	1,882	4,816
November	36,143	15,651	1,797	5,421
December	27,654	15,673	3,427	1,744
January	34,594	16,189	2,474	3,158
February	3,573	15,634	2,042	5,071
March	10,131	13,004	3,395	25,590
April	3,751	11,118	4,264	4,579
May	4,022	15,171	4,938	5,947
TOTALS	404,935	146,128	69,962	72,429



TOTAL REACH BY ORGANIZATION

Community-based Organization	Reach	Event-days	Assistance	Total Vaccinations
United Community Corporation	456,118	124	62,405	1,871
La Casa de Don Pedro	171,632	186	958	3,575
Tree House Ent Cultural Arts Movement/Tree House Cares	42,403	15	146	319
South Ward Promise Neighborhood	38,895	312	1,834	8,738
North Jersey Aids Alliance , Inc. D/B/A NJCRI	30,852	670	6,562	10,670
FOCUS	28,696	0	3,677	0
Ironbound Community Corporation	24,855	22	661	765
Project Ready	21,057	14	2,440	0
Unified Vailsburg Service Organization	19,952	36	188	0
Newark Emergency Services for Families	10,463	20	148	380
Greater Newark Healthcare Coalition	8,931	67	328	11
Clinton Hill Community Action	8,680	37	808	8
Sarah Ward	2,906	31	130	299
Bridges Outreach	1,306	6	681	2

Our top outreach was from United Community Corporation and La Casa de Don Pedro, together reaching over half a million people with flyers, social media, canvassing, texts, and virtual education events.



GROCERIES

Food insecurity has doubled overall from pre-pandemic levels and has tripled among households with children. As businesses shut down and people lost wages, feeding the family became the most pressing need. Black and Latinx households struggled even more, experiencing food insecurity at about twice the rate of white households. Many families had to seek help from food pantries for the first time. **In response, the Newark Equitable Vaccine Initiative was able to provide Newarkers with nearly 100,000 bags of groceries which all included vaccination information and access options.**

July	August	September	October	November	December	January	February	March	April	May	TOTALS
2,563	3,552	1,953	11,321	14,478	16,364	10,947	8,870	8,716	7,974	9,847	96,585



Reflections from the NEVI Partners

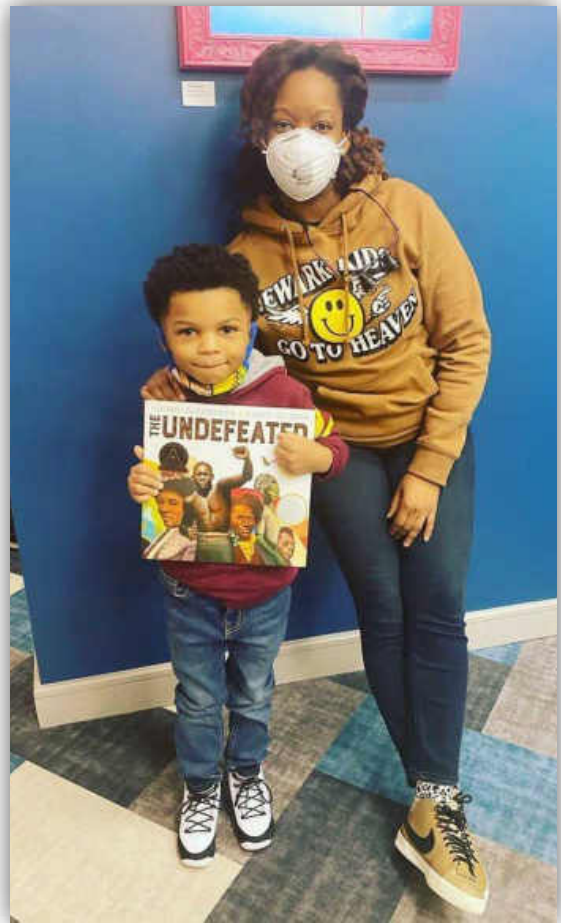
After 11 months of collaboration providing education, outreach, support, events and free vaccination opportunities to Newark Residents, Community Based Organizations came together to reflect on their efforts

Communities are empowered when they are equipped with factual information, delivered through multiple communication methods which are chosen by organizations embedded in the community rather than defined by outsiders.

“With this particular grant we were allowed to use various modes of communication with our clients to ensure that they know where sites are to be vaccinated. We were able to employ some of our residents to canvas, and so they were able to go out and spread accurate information about vaccine safety, efficacy, and access. In addition to that, we provided door knockers - that was the coolest thing to be able to still leave information. With the flexibility of the grant we were able to deliver information with different modes of communication which made a huge difference in reaching our community.”

“We quickly realized that we had to make some changes in our approach to communicating with the community, and having a strong presence on social media was super helpful to us, sending our blast on a weekly basis.”

“It’s 2022 we’re still seeing first doses and you might think Whoa... Why?...and you know it’s because there’s still a lot to do in terms of providing the information.”



Taking the time and resources to hear the community where they are is crucial to supporting them.

*"We were out in the community at these vaccination events, and while there, we were able to gauge the needs of people. It was interesting that we were in those spaces to give health education, but people had an opportunity to voice all of their concerns. Covid has been hard, and **it was clear that some community members have had little in-person support most of the pandemic.** And yes, Covid and Vaccine hesitancy was an issue, but they had so many more concerns, and they had so much more needs, and we had the opportunity to help them navigate those things and provide programs and services that we already provide here at awith staff that are already trained to address those other concerns. Most other concerns were related to health and medical issues. People wanted help with substance abuse, mental health, general physical health concerns."*



"In the beginning, when we really didn't know answers to things, we wanted to know who the community was listening to. So we got the clergy together. We knew that they had people on their platforms because of their positions as community leaders and activists. We didn't want to put them in the hot seat, but we wanted them to be accountable. We took the position: 'we are going to give you all the information that we can give you, so that that there would be equity, that you would be able to make an informed decision'. We invited them to our information sessions, and we grew together. Then we gave them each a day on our social media platforms and we invited their community. We wanted them to understand. People are listening to you. And if your congregations want to know what position you stand on, we want you to have the right information."

"We had to make sure that we met people where they were, that we were able to communicate with them in their language, in their home, where they are most comfortable in a way that they would receive it."

Financial incentives are very powerful, and especially effective for word-of-mouth community referrals.

"The incentives did work, because the population that we serve is in need. Our partners offer \$25 gift cards for vaccination, and \$20 for HIV testing. Our community members ended up with \$45 and two medical things taken care of. Now they go and tell all of their friends to come to the mobile unit, so it helped a whole lot. Once the word got out that 'they're giving out \$45', people were willing to get vaccinated and tested."

"The flexibility provided has allowed us to switch gears and change tactics. We were building the bicycle while we were riding it and figuring out what worked and what didn't work - the incentives were key to getting our community vaccinated. So again, the flexibility that was provided in terms of the grant has been key to the success that we've all had over the past year."

Strong, consistent relationship building to develop deep trust improves service delivery.

"We have a food pantry, and we have a clothing pantry, so it was pretty easy for us to get the word out. Of course, social media was my strongest outlet. It always is. But what I found that was a little bit of a hurdle for us was the language barrier. We serve a very diverse population of clients. About 30% of them are from the Haitian community. It was hard to reach because some of them are not documented and they have fears being deported. Even with the Hispanic community. And then once you deal with a with a community, a lot, they grow to trust you. So you build up that relationship with them, they begin to trust you. So the people we're serving, started translating for us. Individuals who visited the pantry quite often volunteered to help us communicate for an hour or 2 every day."

"We encountered a lot of people that are looking for homes. There's this huge homeless population out there that are looking to be linked. Our mobile unit that was a huge success because we're able to go to places that people often you know don't want to go. Most fear the environment, but once you develop that trust with the community the community opens their gates to you, and you're definitely welcome, and they actually become sort of like your security. They're always there waiting for you, they're always providing you that sense of - we're here, we want you here and we will continue to provide everything that you need."

Collaborative partnership and communication between organizations dramatically increases the capacity of all organizations to provide services.

"The partnership was primarily for the vaccine, but it just grew into something that right now we have to continue. Everybody provided so much to the collaborative and to the community in different ways: assessing needs, and actually communicating with us, like hey... I need this. We all helped each other so much and we can take that away from this work."

"A really big turning point for us was when we created a partnership. Instead of kind of giving people flyers in hundreds of bags of groceries saying 'here's where the vaccine sites are throughout the city'. It was more like, 'Hey, go around the corner and you can get the vaccine right there today'."

"The 4 C's communication, collaboration, coordination, cooperation that's really what has made all of this work."

ARE YOU READY TO GET VACCINATED?
GET YOUR FREE COVID VACCINE

- LOCATION -
Greater Little Rock Baptist Church
10201 Dwyer Road
New Orleans, LA 70127

- DATE & TIME -
Friday, December 17
11:00 AM - 3:00 PM

- AGE GROUPS -
Adults and children 5-16

- TYPE OF VACCINES -
1st dose, 2nd dose, and Boosters

- BRING YOUR -
ID
Health Insurance Card
Vaccination Card

MICHOUB PHARMACY | CHOOSE HEALTHY LIFE | United Way
United Way of Southeast Louisiana

Nothing is more efficient than wrap around, holistic, onsite services.

"We started with just providing the vaccines because there was so much immediate need. Later, we incorporated HIV testing and a mental health component because we have always provided holistic integrated services. We also have a nurse with us that can deliver any care needed right away."

"We provide wraparound services and really holistic services. So we've been invited back to places where we've done vaccines to do eviction protection rental, counseling, immigration services... all of the things that we provide we've been invited back to places. This has helped us inform the community with what's available."

Committed Community Healthworkers from local neighborhoods have the patience and expertise to change minds and educate.

"It has to be diverse community workers that are really passionate about the work that they're doing, because every day is a different adventure that you're going to encounter. You might have to spend maybe 15 minutes, 15 to bring down all that misinformation to a point that someone is going to say "Okay, I'm ready to get vaccinated" or still be respectful because not everybody is going to be at that point that they are ready for a vaccine. You have to navigate around them and you have to constantly be providing the facts and the information knowing that many are going to challenge you."

"Some of our community members don't know how to read or have certain different capacities so when you're providing that information not only relying on flyers or social media. Especially spreading news about the boosters, not everyone is savvy in terms of social media, so they will be left out. We still see some flip phones. So again, community health workers are definitely huge."



**GET VACCINATED
NEWARK
SPREAD LOVE**

DR. CHRIS PURNELL

"I DID IT FOR MY FAMILY AND MY COMMUNITY AND TO HAVE A FIGHTING CHANCE TO BEAT BACK THIS PANDEMIC. WE'RE ALL IN THIS TOGETHER AND EACH OF US MUST DO WHAT'S IN OUR POWER TO SAVE LIVES AND PROMOTE HEALTH, HEALING AND SAFETY."

CALL 855-568-0545 OR VISIT NEWARKVACCINENOW.ORG POWERED BY NEWARK EQUITABLE VACCINE INITIATIVE

This work has changed the way these organizations operate, and it is not stopping because funds have stopped.

"Our partners are still with us and committed to the end of the year, offering their services. And so they are in it with us. We're in it, and the community still wants and needs the support. We had some first timers for the vaccine yesterday."

"We didn't just talk about vaccinations. We have a food pantry, we provide rental assistance, we have reentry programs, we have a preschool, so were always talking about all the services we provide."

"We did a lot to better understand the community in ways we hadn't before, what their thoughts were about the vaccine, as well as making sure people were vaccinated. The phone, banking, the canvassing, the television commercials. We continue to ask folks what they think and what they want, in a research-based way. We did 2,000 post surveys during the last year to see what the community members were thinking, and what they wanted. Now we are thinking about how we circle back with those community members that gave their input, and how do we continue that conversation as well."

"The testing services are no longer free even for myself. For most places. you have to have insurance, and out-of-pocket fees that they're charging right now at even local pharmacies are the \$175 for the PCR and \$125 for the rapid, and most of these people can't afford that."

"We found out that we needed to have correct, real-time information because there were so many myths out and so much different data. So we've been hosting information sessions. The community wants an outlet to talk about the effects, the mental health. As long as they want to talk, we're having them. I don't even know how to stop it, you know, cause it's just turning to something much more long-term and meaningful."

"There's a lot of other things that we need to do and find money to do those things. because people kind of act like they're just holding up their tent and going home, and everything is over and it so is not. And so the only way that I think that we're all gonna survive is if we stay together, we continue to partner, we continue to collaborate, we continue to share information and leverage resources. Because if we go back into silos, we're gonna all die and that's just the truth. We're not gonna be able to survive cause the pie is shrinking as far as it getting chopped up and shared as far as as funding and different things are concerned. You know, in the height of covid that we're able to keep that moving forward and work together in an intentional and focused way. And I think you know, if we do that, then we will be successful in helping our people in our communities move their lives forward"

Looking Ahead

While many of Newark's previous challenges will still be visible post pandemic, an entirely new set of challenges will likely prevail. To better understand what these challenges might be and how UWGN can prepare to address them, we look to insights from focus groups conducted with Community Fund Grantees earlier in the pandemic. Listed below are some highlights of potential future concerns, of course far from a comprehensive list.

Exacerbated & Ongoing Basic Needs

Newark had food insecurity issues prior to the pandemic, and these needs have only increased due to the continued impact of the pandemic. Local pantries have stated they are now serving 50-60% more families on a regular basis and that increased need shows no signs of slowing down or decreasing.

Continued Barriers to Slowing the Spread

Effective self-isolation and quarantining are still inaccessible to many individuals. There is a lack of appropriate shelter for symptomatic Covid-19 positive Newark residents who are not ill enough to be in the hospital, and sometimes without addresses or living in residential group settings.

Mental Health and Isolation Burnout

The burden of pandemic protocols have increased mental health challenges and symptoms such as depression, anxiety and Isolation. These stressors have also caused an increase in domestic violence, family conflict and demonstrated significant need for more work in schools providing SEL support. Obvious challenges to engage overextended parents persist and the need for community based services has increased.

Education & In Person Engagement

Concerns for the holistic development of school age children and young adults are paramount to parents and service providers alike. However, parents and teachers are tired. Newark parents have no choice but to work to put food on the table and survive, therefore often not able to supervise children during school hours. Students become disengaged, or absent altogether, from school and resources to support families. Losing out on so much in-person instruction and interaction with peers threatens their academic and social development. Younger children especially need and benefit from in-person instruction. Fears that students will not meet testing standards this year have been exacerbated because academic engagement and achievement level is poor, which has already been an annual concern in Newark.

Services to mitigate learning loss and school disruption, such as afterschool and summer programs provided in the community, saw a significant decrease in enrollment post pandemic. Many providers report that young people are tired of being in front of the computer and even when logged on, students are disengaged and not paying attention.

Parents need additional support with childcare for this new need of supervising and engaging kids who are at home. School aged children also need increased opportunities for personalized interaction to continue developing social skills, offered either virtually or outdoors. School and peer socialization are the lifeblood of kids' development and they have been severely restricted throughout the pandemic and have not resumed to pre-pandemic levels of socialization.

Housing Instability

Currently, there is a temporary moratorium on evictions which has slowed housing instability. However, when it lifts people could be more than nine months behind on their rent or mortgage and unable to catch up. This is an anticipated huge influx of individuals needing services and no way to accurately estimate the future need. As a result, timely support will be imperative to prevent people from losing their housing and becoming homeless.

City Services

Every local government relies heavily on residents having the ability to pay property taxes to maintain civil services. If people are behind on basic needs and subsequently taxes, the city services such as public transportation, repairs and public health efforts suffer.

Economy & Job Landscape

Local food pantries report that many recipients of support have lost hours or have been terminated from their jobs. Some of those jobs, such as support teachers, aides and bus drivers, may not return due to the shifts in post pandemic work . While emergency funding is crucial, people with jobs in significantly impacted industries won't be able support their families unless they successfully change careers.



COVID-19 VACCINATION PULSE SURVEY INSIGHTS

*As part of The Rockefeller Foundation's Equity-First Vaccination Initiative, United Way of Greater Newark partnered with **Project Ready** to collect and analyze survey data about Covid-19 vaccination with support from Mathematica. The black, indigenous, and people of color (BIPOC) communities' monthly vaccination pulse survey served to support the Equity First Vaccination Initiative by providing up-to-date evidence about community members' knowledge, attitudes, and behaviors related to Covid-19 vaccination, as well as potential motivators for vaccination and barriers to access. This evidence was used to inform the strategies on how to encourage vaccine uptake and allowed all partner organizations adapt their work to the specific and changing needs of Newark.*

From July 2021 – April 2022 Project Ready conducted 2067 surveys through phone banking, pulling from active voter lists and other contact lists, and connecting with other community members at in-person events.

Key Findings:

- Compared to vaccinated respondents, a larger share of unvaccinated respondents were in younger age groups.
- Similar shares of vaccinated and unvaccinated respondents were female.
- Compared to vaccinated respondents, unvaccinated respondents reported having lower education levels.

Across all months, vaccinated respondents reported:

- preventing death/severe illness and protecting household/family members was a motivator to get the vaccine.
- Vaccine access was not a major issue. Many respondents reported it was easy to make a vaccine appointment and reported it took 20 mins or fewer to get to the vaccine location.
- Each month, more respondents received their booster shot; confidence that booster shots prevent death/severe illness and get life back was similar across months.

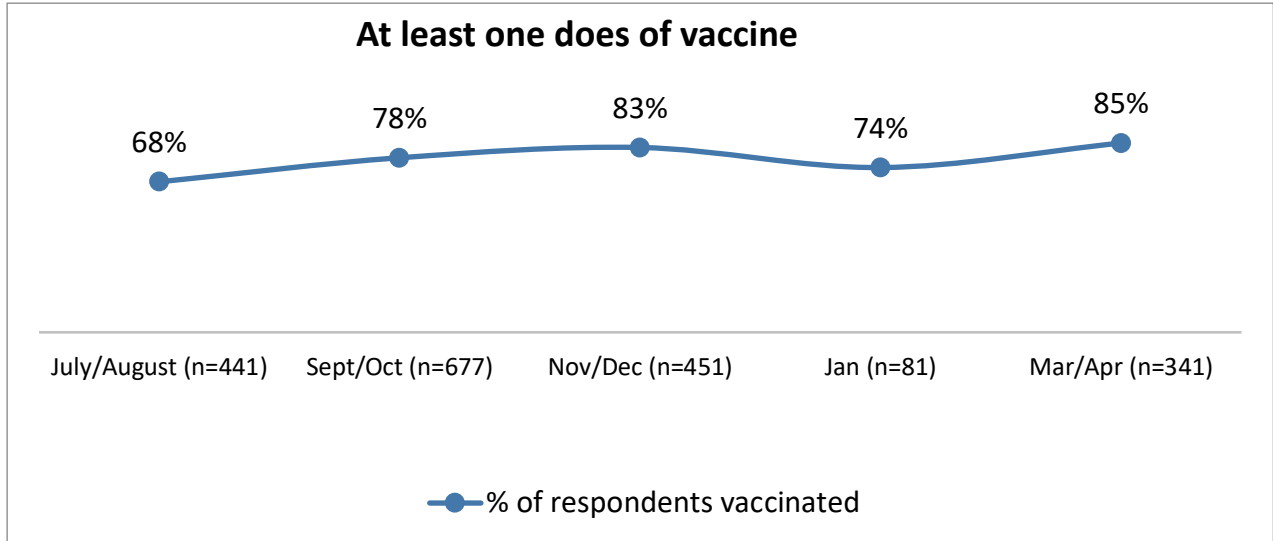
Across all months, a large share of unvaccinated respondents reported:

- being worried about getting sick/side effects as a barrier to getting vaccinated.
- believed that there was not enough information on how the vaccine interacted with other health conditions.
- did not believe the vaccine was safe or effective.
- Trust in various messengers remained low across all months
- A number of unvaccinated respondents said that “nothing” will motivate them to get the vaccine

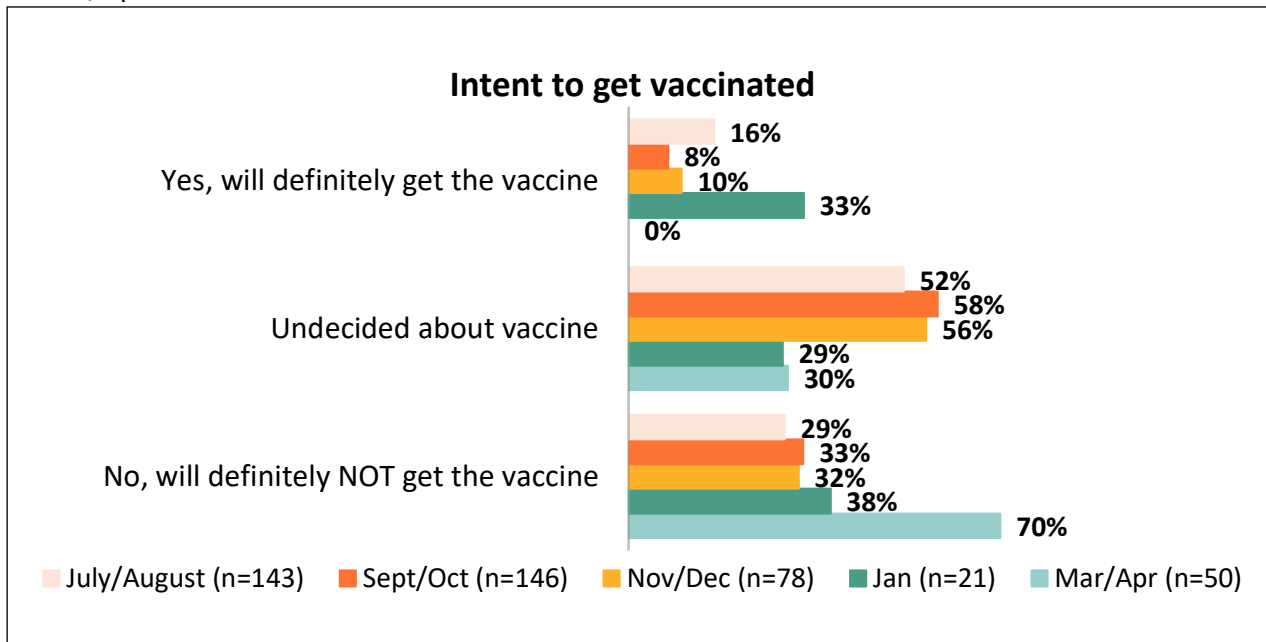
Please note that some of these differences could be due to sample size differences (vaccinated sample size is 478 respondents and the unvaccinated sample size is 173 respondents)

Vaccination status and intention (n = 1991)

The share of respondents who had received at least one dose of the COVID-19 vaccine varied slightly between months, but overall, there was an increase from July 2021 to April 2022.

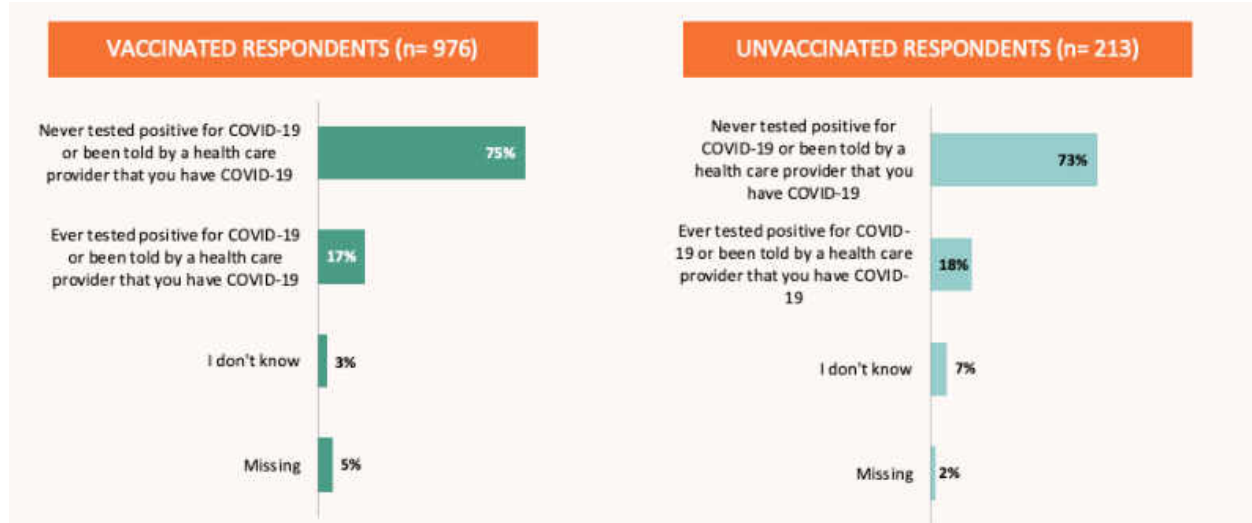


Across months, there were few unvaccinated respondents who noted they would definitely get the vaccine (<16%), except for January where 33% of respondents reported they definitely intended to get the vaccine. The share of respondents who reported they will definitely NOT get the vaccine did not vary much between July 2021 and January 2022 but increased to 70% in March/April.



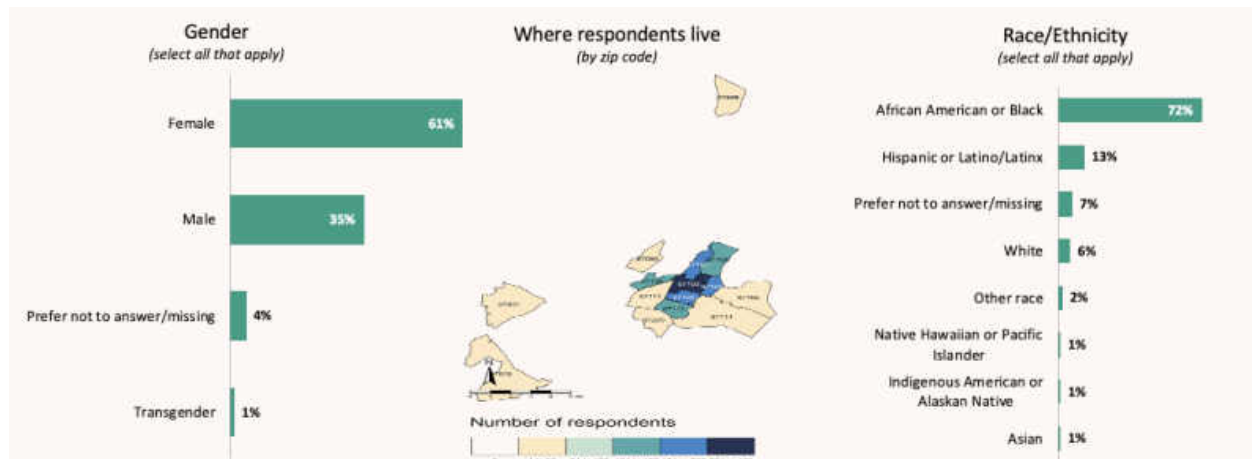
Respondents' personal experience with Covid-19 (n=1189)

75% of vaccinated respondents and 73% of unvaccinated respondents surveyed between October 2021 and April 2022 said they have never tested positive for Covid-19 or been told they have Covid-19.

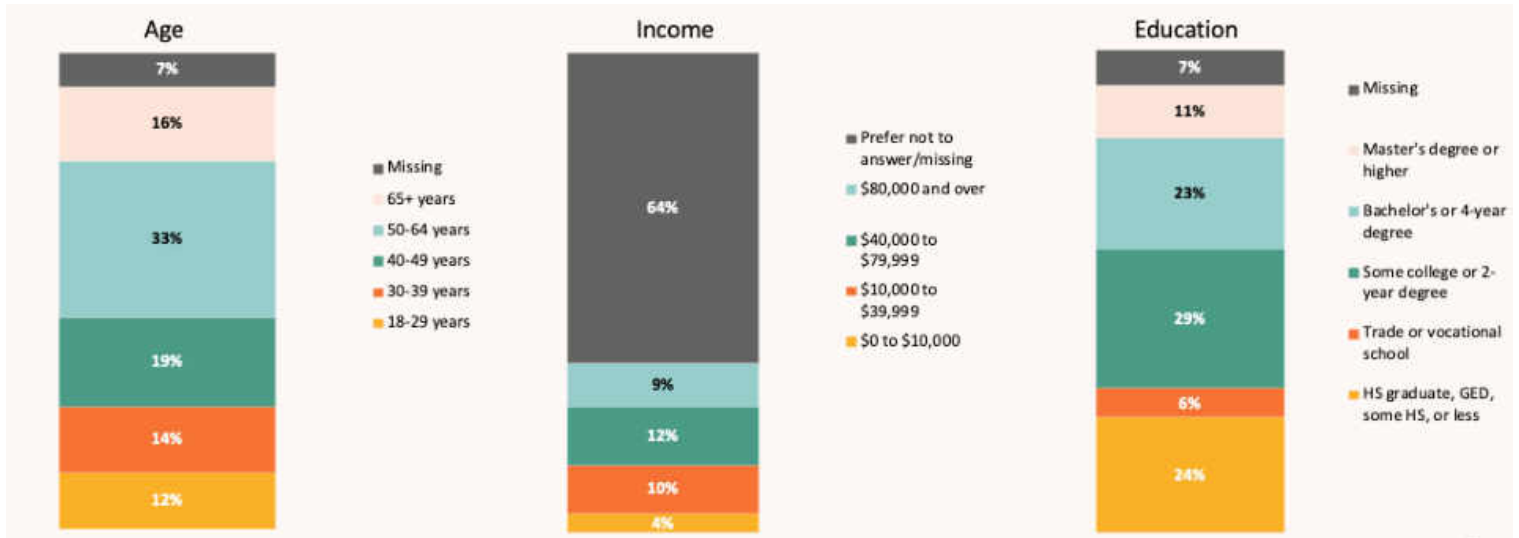


Who are the vaccinated respondents? (n=1556)

61% of the vaccinated respondents surveyed between July 2021 and April 2022 were female, 72% were African American or Black and many were from zip codes 07102, 07103, 07107 and 07108.

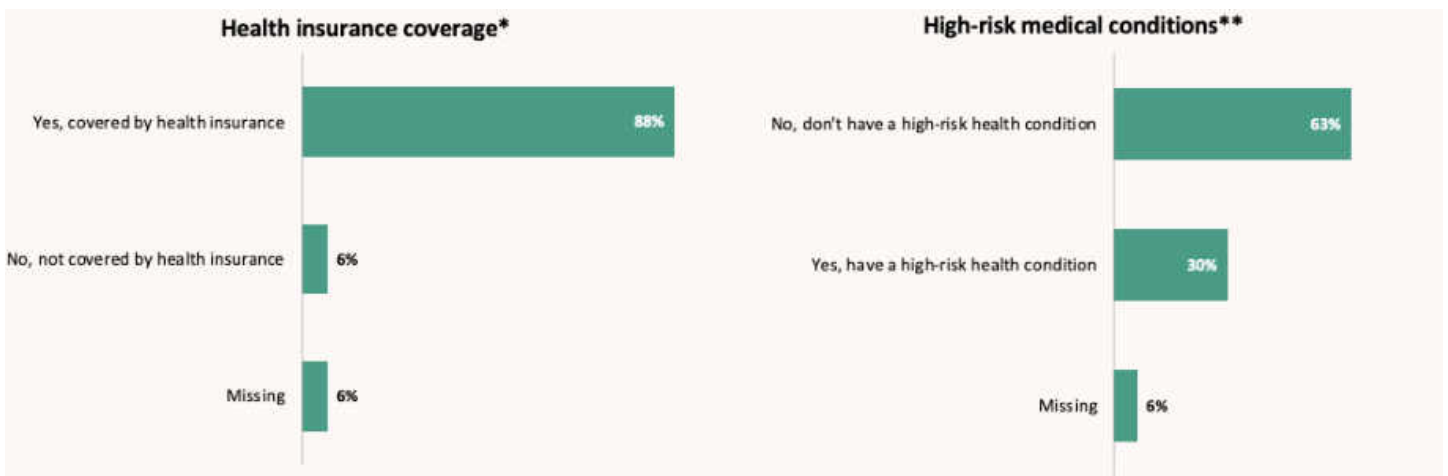


A third of the vaccinated respondents surveyed between July 2021 and April 2020 were between 50 and 64 years old (33%). Just under two thirds had some college or 2-year degree (63%). With such a high % of missing income responses it is difficult to accurately describe the typical income of a vaccinated respondent.



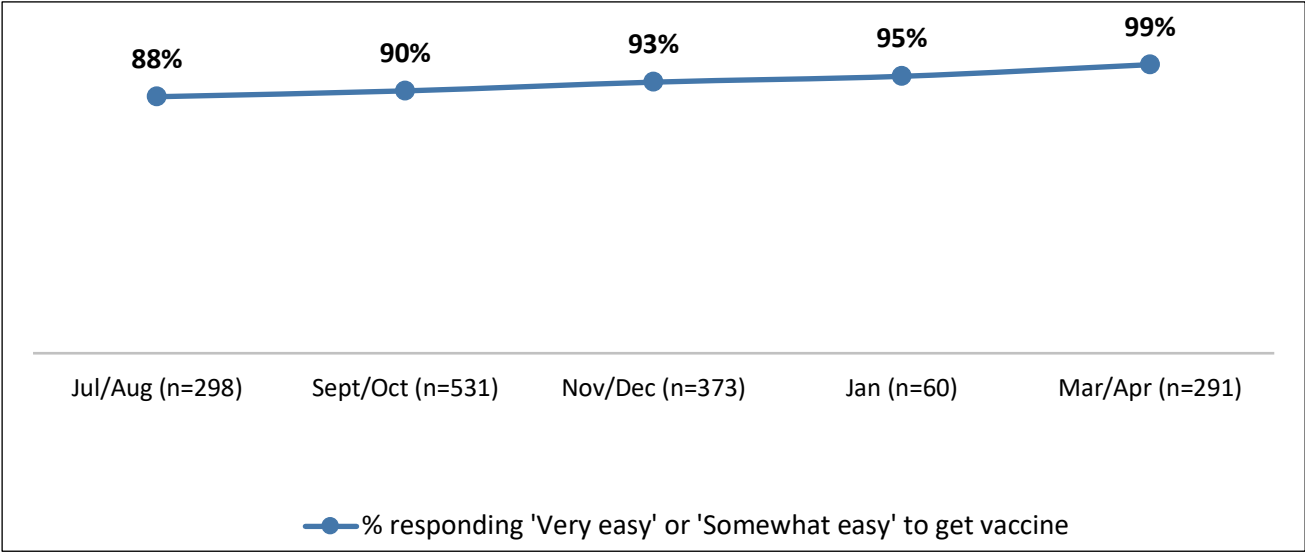
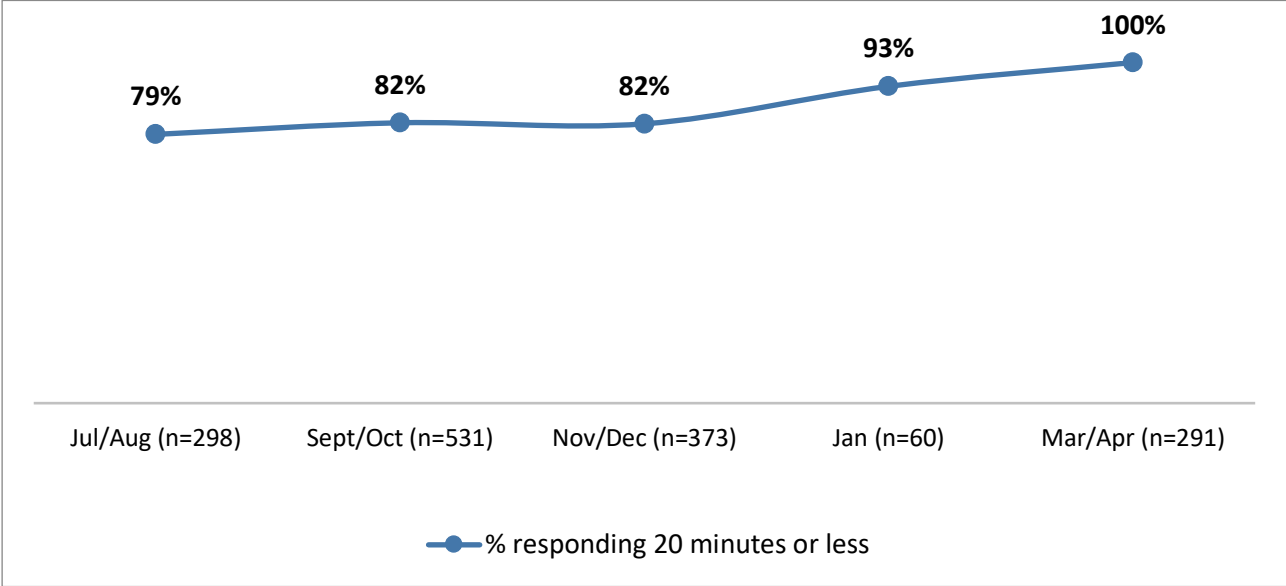
Continued: Who are the vaccinated respondents? (n=1556)

Over four-fifths of vaccinated respondents surveyed between July 2021 and April 2022 (88%) were covered by health insurance and almost two-thirds (63%) did not report having any high-risk health conditions. High-risk medical conditions include smoking, heart conditions (including high blood pressure), diabetes, obesity, lung disease (including asthma or COPD), kidney disease, cancer, pregnancy, sickle cell disease, HIV, other chronic diseases, or any condition that impairs your immune system.



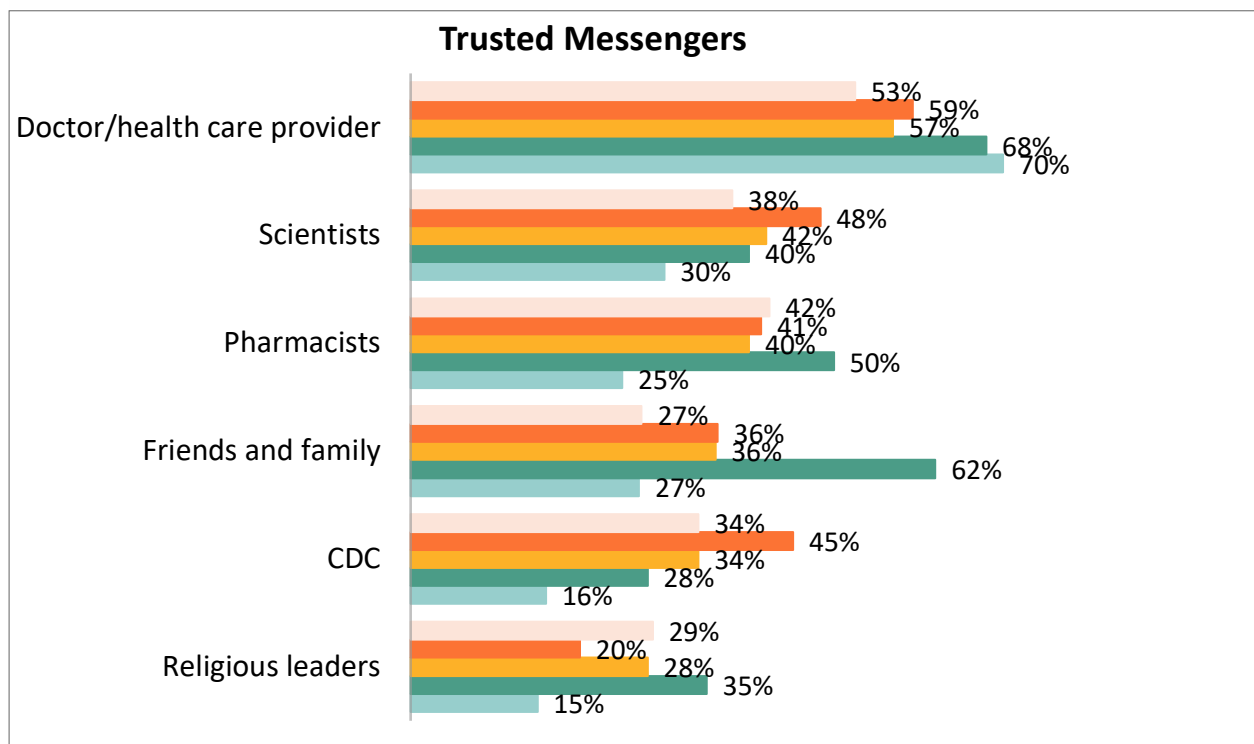
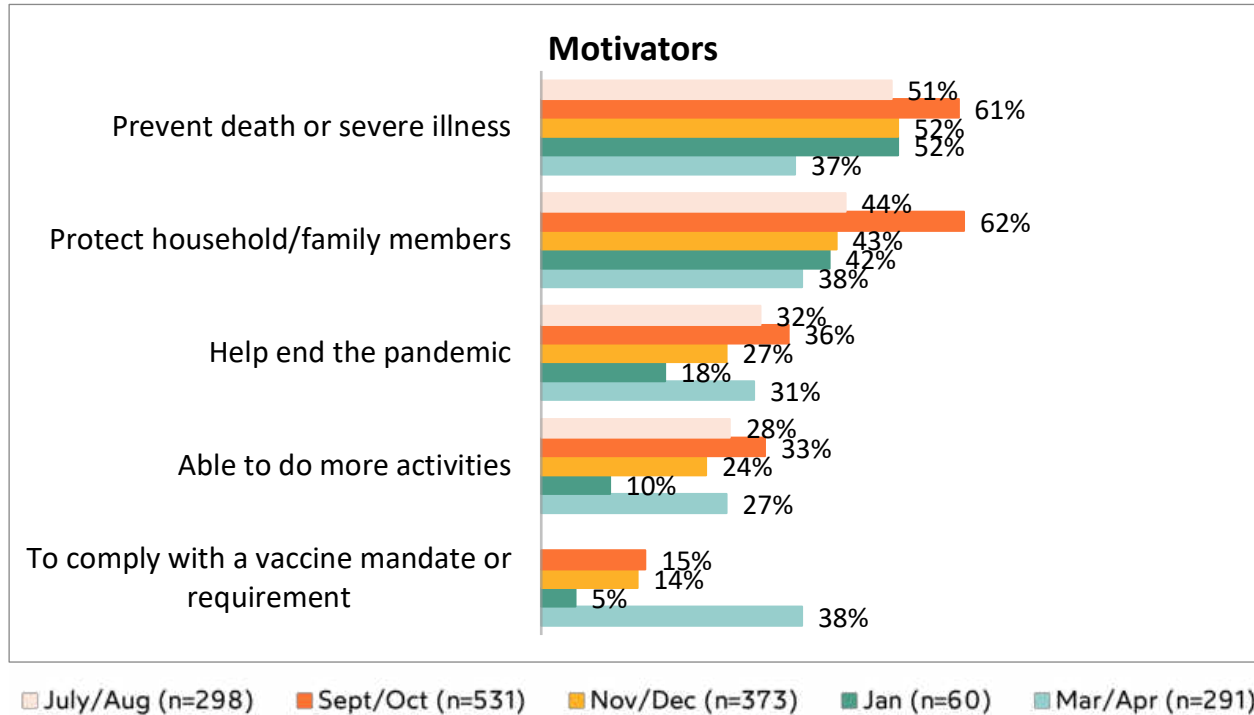
Access and trusted messengers over time (vaccinated)

Most respondents took twenty minutes or fewer to get to the vaccine location (79-100%) and many noted it was very easy or somewhat easy to make an appointment (88-99%).



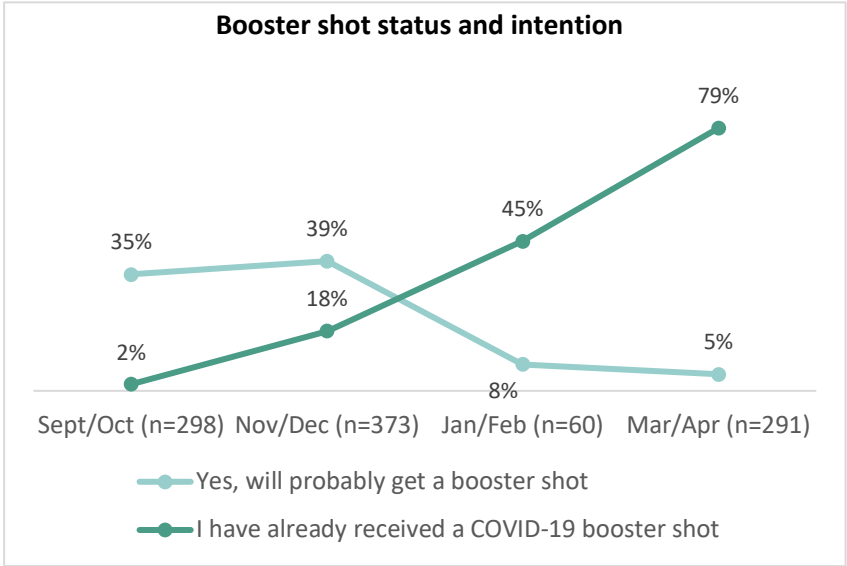
Motivators and Trusted Messengers over time (vaccinated)

Fairly consistent across all months, vaccinated respondents noted that the vaccine preventing death/severe illness and protecting household/family members was a motivator to get the vaccine. Across all months, a large share of vaccinated respondents reported doctors and health care providers as a trusted messengers for information related to COVID-19.

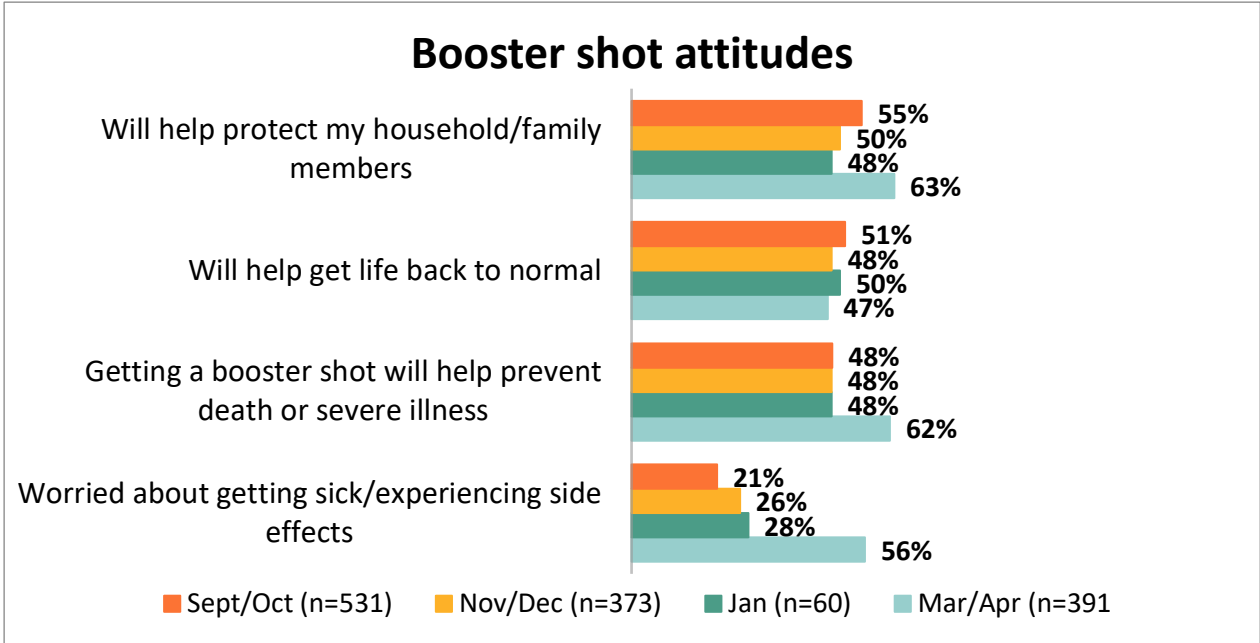


Booster shot trends (vaccinated)

Each month, a larger share of vaccinated respondents noted they received their booster shot (nearly 80% by March and April 2022).



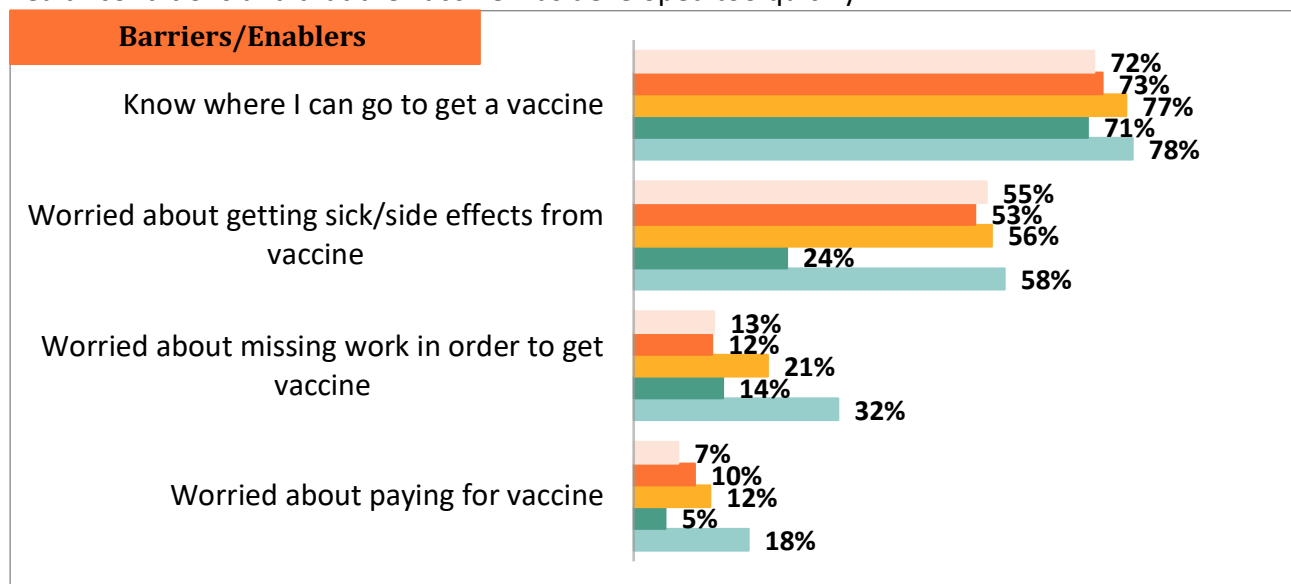
Compared to September 2021 through January 2022, a larger share of respondents reported concerns about getting sick/experiencing side effects from the booster shot in March and April 2022 (a difference of almost 30 percentage points). Confidence about booster shots protecting household members, getting life back to normal and preventing death or severe illness was largely similar across months.



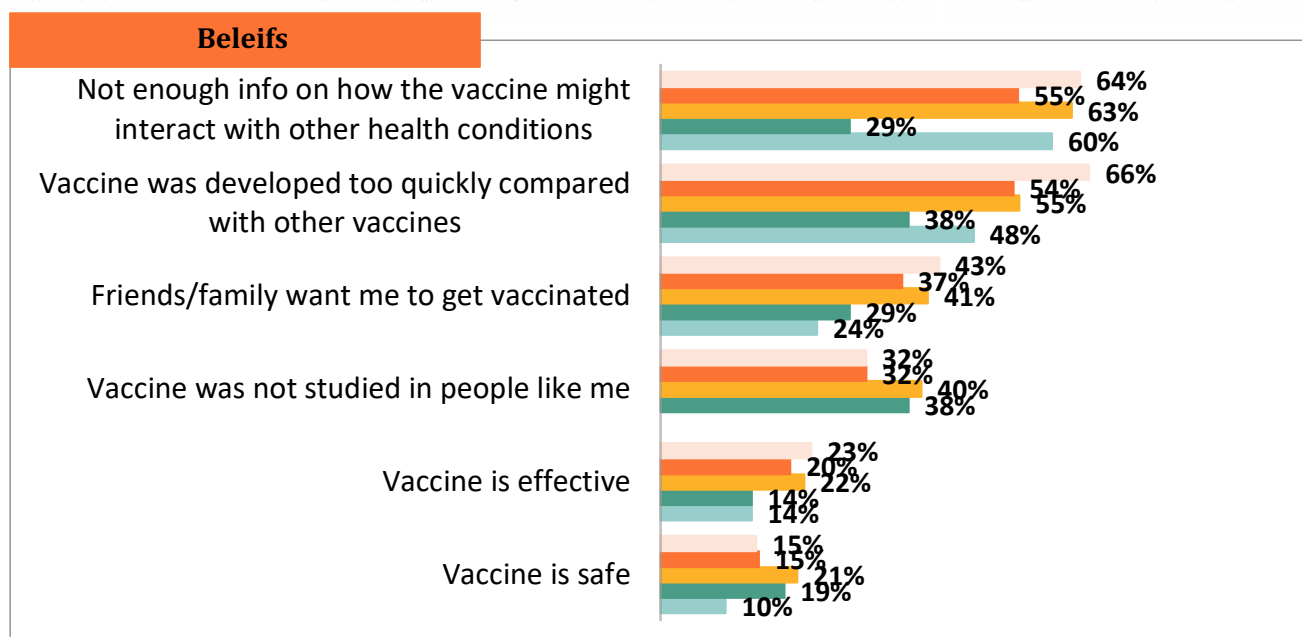
Barriers/enablers and beliefs over time (unvaccinated)

Given the **very small sample sizes**, it is important not to overinterpret these differences.

Most unvaccinated respondents knew where they could go to get a vaccine (71-78%). Concerns about getting sick/side effects was a barrier for over half the respondents across all months, except for January 2022 when it was lower. Across all months, a large share of respondents felt there was not enough information on how the vaccine interacts with other health conditions and that the vaccine was developed too quickly.



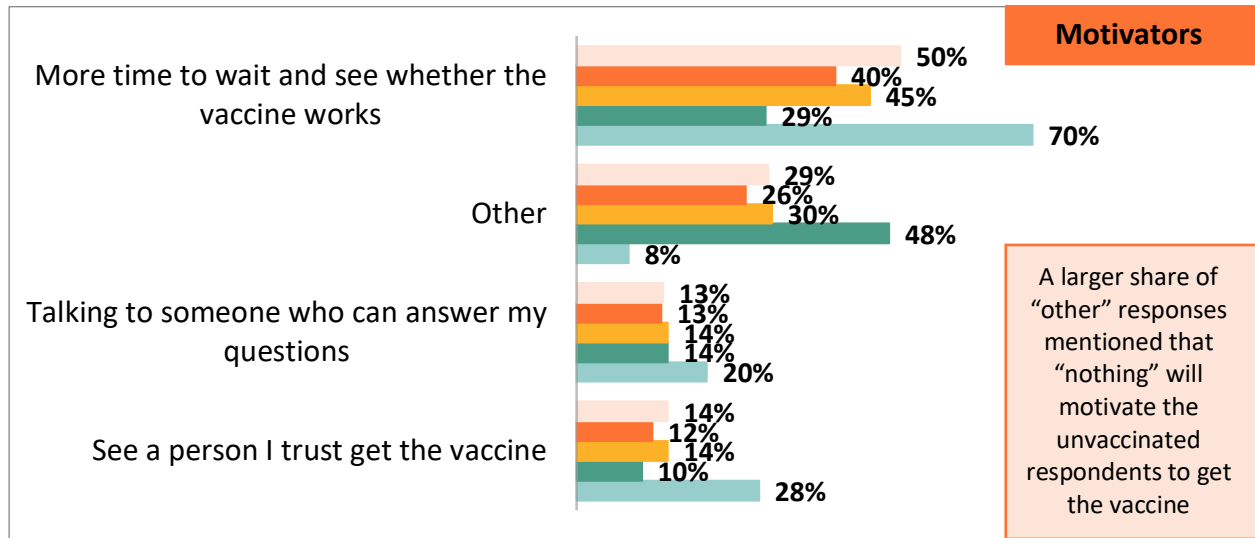
July/Aug (n=143) Sept/Oct (n=146) Nov/Dec (n=78) Jan (n=21) Mar/Apr (n=50)



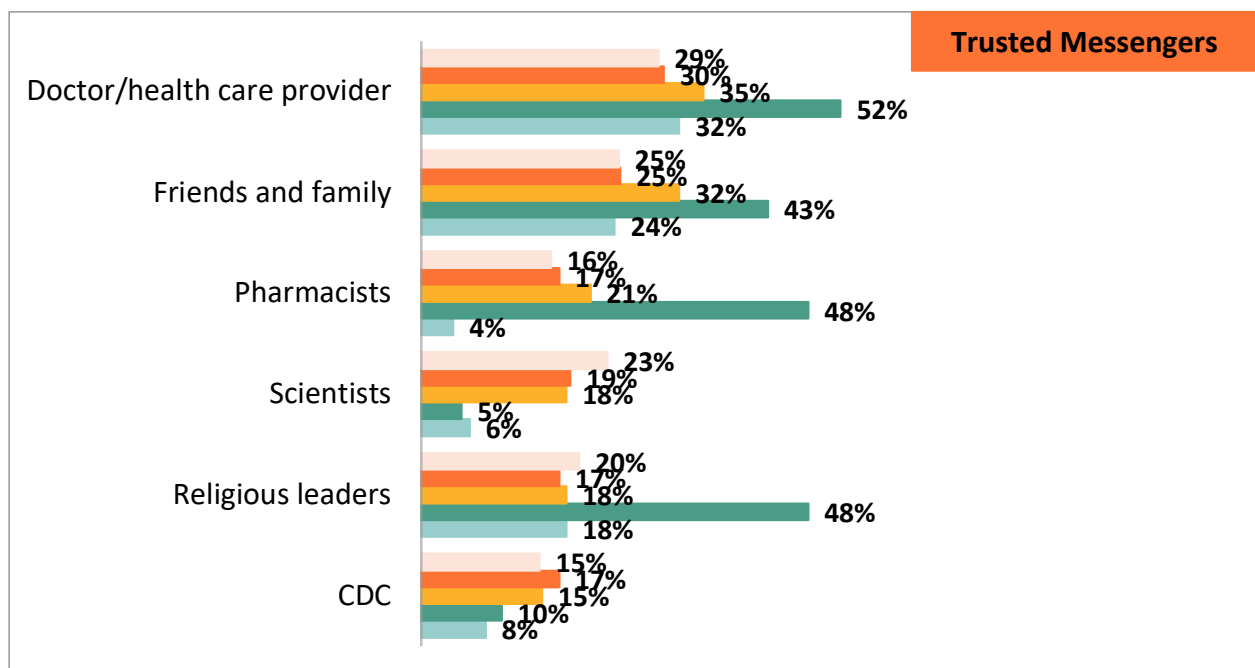
Motivators and trusted messengers over time (unvaccinated)

Given the **very** small sample sizes, it is important not to overinterpret these differences.

Across months, most unvaccinated respondents reported they would be motivated to get the vaccine if there was more time to wait and see whether it works. While overall trust in listed messengers was low among unvaccinated respondents, a larger share of respondents surveyed in January 2022 reported trust in doctors/health care providers, friends and family, pharmacists, and religious leaders (though this may be in part due to the smaller number of respondents in January).



July/Aug (n=143) Sept/Oct (n=146) Nov/Dec (n=78) Jan (n=21) Mar/Apr (n=50)



References

Okoh, Alexis K et al. "Coronavirus disease 19 in minority populations of Newark, New Jersey." *International journal for equity in health* vol. 19,1 93. 10 Jun. 2020, doi:10.1186/s12939-020-01208-1

Miller, Sarah et al. 2020. "Estimated Mortality Increases During The COVID-19 Pandemic By Socioeconomic Status, Race, And Ethnicity." *Health affairs* vol. 40,8, <https://doi.org/10.1377/hlthaff.2021.00414>

SAMHSA Office of Behavioral Health Equity (OBHE), 2020, Double Jeopardy: COVID-19 and Behavioral Health Disparities for Black and Latino Communities in the U.S.