



National COVID-19 Resiliency Network (NCRN)

Year 1 Annual Report
July 2020–June 2021

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THE NATIONAL COVID-19 RESILIENCY NETWORK (NCRN)

THE NEED FOR NCRN

COVID-19 is disproportionately impacting the health and wellbeing of populations that often lack access to accurate and culturally and linguistically appropriate information and resources. In 2020, the Department of Health and Human Services Office of Minority Health (HHS OMH) launched the **National Infrastructure for Mitigating the Impact of COVID-19 within Racial and Ethnic Minority Communities (NIMIC) Initiative** to work with community-based organizations (CBOs) across the nation delivering education and information on resources to help fight the pandemic. As part of this effort, HHS OMH established a three-year cooperative agreement with the Morehouse School of Medicine (MSM) to develop and coordinate a structured national network of partners to address the needs of communities highly impacted by COVID-19 and at highest risk for adverse health and social outcomes.

NCRN is a network of national, state/territory/tribal (STT), and local community partners working to ease the impact of COVID-19 on racial and ethnic groups, rural, and socially disadvantaged populations. NCRN:

- Provides **awareness and linkages to critical health information and services** to help families recover from difficulties caused by or worsened by the pandemic.
- Offers individuals, families, and community organizations **access to new COVID-19-related resources** to reduce the negative impact of the pandemic on communities.
- Establishes **collaborative partnerships** with nonprofit organizations, companies, academic institutions, health centers, hospital systems, faith-based organizations, and federal agencies to provide critical culturally relevant resources to communities that are most affected by the COVID-19 pandemic.

NCRN is created for community, by community to ensure the diverse needs of our nation are understood and addressed.

76.5% of NCRN's \$14.6 million Year 1 budget went to partners working in disproportionately impacted communities.

OBJECTIVES



Identify and Engage
Disproportionately Impacted
Communities



Nurture Existing and
Develop New Partnerships



Disseminate Culturally
and Linguistically Appropriate
Information



Leverage Technology to Connect
Communities to Resources



Monitor and
Evaluate



Apply Broad and Comprehensive
Dissemination Methods

NCRN focuses on addressing the needs of and providing culturally and linguistically appropriate resources to six priority populations:

1. Diverse racial and ethnic groups, including Black/African Americans, Hispanics/Latinxs, Asian Americans, American Indians/Alaska Natives (AI/AN), and Native Hawaiians and Pacific Islanders (NHPI)
2. Justice-involved individuals
3. Migrant and agricultural workers
4. Rural populations
5. Individuals with intellectual and/or developmental disabilities (I/DD)
6. Immigrant and refugee communities

VOICES FROM NCRN PARTNERS

Partners reported that NCRN allowed them to:

- Fund community health workers (CHWs) and CHW organizations directly doing COVID-19 work.
- Focus the COVID-19 response directly on diverse racial and ethnic communities and other priority populations.
- Participate in collective and peer-to-peer learning with a diverse group of partners at the community, STT, and national level.
- Produce and share reliable and accurate COVID-19 materials and resources to help communities wade through the confusion of misinformation.

“... [NCRN] is the only partnership that directly addresses the COVID response in diverse racial and ethnic communities and of people with disabilities.... This provided an opportunity to address, respond to, and reflect in our communications and outreach the multiple cultural identities and impacts experienced by many people with disabilities.”

- Association of University Centers on Disabilities

NCRN GOVERNING STRUCTURE

MSM coordinates and oversees the activities of the network, but activities are guided by a series of advisory boards that inform the strategic direction and overall activities of the NCRN.

NCRN GOVERNANCE STRUCTURE



The National Advisory Board (NAB) informs the overall strategy, execution, and alignment of national community engagement activities for NCRN. The goals of the NAB are to further strengthen the network and deploy effective strategies toward the response, recovery, and resilience for COVID-19 amongst diverse racial and ethnic, rural, and socially disadvantaged populations. NAB members are responsible for ensuring the coordinated development and dissemination of culturally and linguistically diverse information as well as dissemination of information on available COVID-19 testing and vaccination, other health care, and social services.

The National Community Coalition Board (NCCB) is a multi-stakeholder coalition board that ensures data on community assets for COVID-19 testing, vaccinations, and other health care and social services are compiled and managed. The NCCB fosters collaboration and networking to create sustainability among the network partners for future cross-collaborative work and activities for the successful and immediate response and recovery of populations impacted by COVID-19.

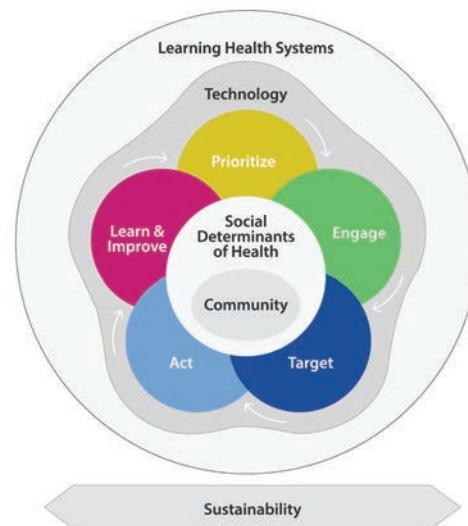
Regional Community Coalition (RCC) is an NCCB extension established in 10 U.S. regions to allow for the expansion of the network at the grassroots level, ensuring network member organizations an opportunity to network and engage amongst NCRN strategic partners.



NCRN ACTIVITIES

NCRN activities are informed by the **PETAL** Framework, a community-centered approach to transforming health care organizations and communities. The **PETAL** Framework consists of:

- P**rioritizing health equity
- E**ngaging the community
- T**argeting health disparities
- A**cting on data
- L**earning and improving



PETAL incorporates social determinants of health and technology in the creation and development of health and health care strategies that produce practical, actionable, and culturally tailored solutions. Using this PETAL framework, NCRN activities in Year 1 coalesced around five key areas:

AREAS OF ACTIVITY	EXAMPLES OF ACTIVITY
1. Partner and Community Engagement	<ul style="list-style-type: none"> • Identify and engage national, STT, and community partners • Conduct strategic and sustainability planning
2. Capacity Building	<ul style="list-style-type: none"> • Expand partners', CBO workforce's, and individuals' infrastructure and capacity through training, technical assistance, information sharing, and other supports
3. Communications and Dissemination	<ul style="list-style-type: none"> • Conduct formative research to inform development and implementation of a communication strategy • Develop and disseminate culturally and linguistically appropriate information and resources on COVID-19, other health and social services, and promising practices
4. Technology	<ul style="list-style-type: none"> • Develop and deploy a user-friendly and equity-focused central platform with information on COVID-19 and other health and social services
5. Research	<ul style="list-style-type: none"> • Assess community needs, strengths, and priorities • Collaboratively build and implement a research agenda for program- and policy-making • Assess impact through monitoring, evaluation, and quality improvement

This report highlights NCRN's accomplishments in each of these areas of activities from its launch in July 2020 through June 2021. We invite you to learn more at <https://ncrn.msm.edu/>.

1. PARTNER AND COMMUNITY ENGAGEMENT

NCRN considers establishing and implementing partner and community engagement processes, for all its members, as vital to effective collaboration.

PARTNER ENGAGEMENT

In Year 1, NCRN engaged 376 partners. A list of strategic infrastructure and network partners appears in Appendix A.

PARTNER ENGAGEMENT, BY THE NUMBERS

July 2020–June 2021

376 total partners

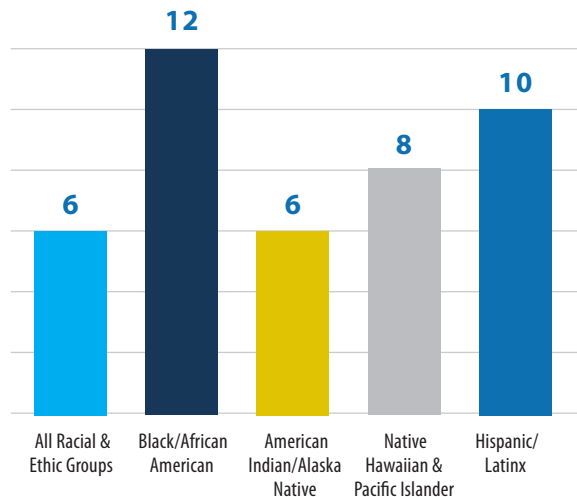
14 strategic infrastructure partners are engaged in a formal contract or memorandum of understanding (MOU) agreement with MSM to assist NCRN with the overall design and structure of NCRN, including evaluation, communications, building technology infrastructure, and project management.

32 strategic network partners are also engaged in a formal contract or MOU with MSM to assist NCRN with the development, dissemination, and activation of the strategies and tactics of NCRN.

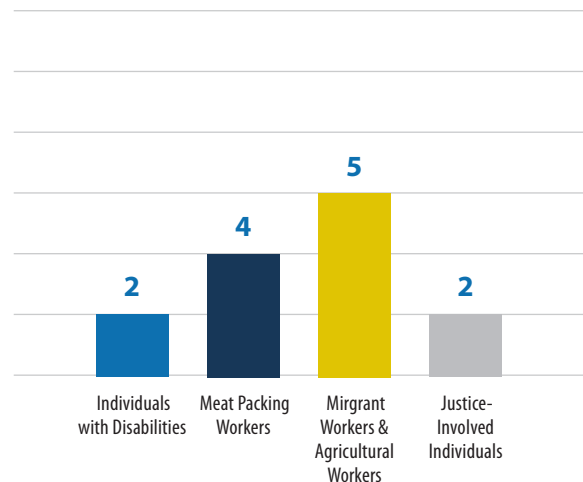
330 outreach partners are not formally engaged or contractually obligated to NCRN or MSM but have voluntarily joined NCRN to help disseminate its materials, news, publications, tools, and technologies in their communities.

NCRN's strategic partners tailor their efforts towards priority populations to maximize their impact and ensure diverse populations across the United States are reached through NCRN.

NUMBER OF STRATEGIC PARTNERS SERVING PRIORITY POPULATIONS



NUMBER OF STRATEGIC PARTNERS WITH ADDITIONAL SPECIALIZATION



VOICES FROM NCRN PARTNERS

Strategic partners shared that working with NCRN expanded their view of equity and the needs of different communities throughout the United States. For example, Alliant Health Solutions shared that NCRN's resources and information implemented their other work with nursing homes and community coalitions and benefited other program partners and communities. NCRN not only reached partners that are part of their network but also the networks of those partners. Other feedback from NCRN partners include:

"Our involvement has allowed for formal partnerships and collaboration with community organizations that engage community outreach leaders. These partnerships have allowed us to build further trust with the priority population (farmworkers, dairy and meat packing workers, Hispanics, rural communities) as we provide them with educational materials and protective equipment."

– University of Texas at El Paso (UTEP)

"The camaraderie within NCRN reminds us that we are not in this struggle against COVID alone, and through this network of like-minded organizations we are better able to serve vulnerable communities."

– 100 Black Men of America, Inc.

"For us, the main goal of our work is to bring more resources to Asian American and Native Hawaiian/Pacific Islander communities. We do this work with our member organizations, 28 of which are Community Health Centers, and our community partners."

– The Association of Asian Pacific Community Health Organizations (AAPCHO)

In addition to the 376 partners, NCRN also engages with STT Offices of Minority Health and Health Departments and media partners.

- **54 State Offices of Minority Health and Health Departments** participated in NCRN RCC meetings and received communications related to: COVID-19 vaccine allocation planning (December 2020); holiday gathering messaging (December 2020); and the Centers for Disease Control and Prevention (CDC) COVID-19 Vaccine Communication Toolkit (January 2021).
- **2 media partners**, Cox Media Group and Hispanic Communications Network, assist with building NCRN awareness through paid advertising on social media, e-mail, and radio.

NCRN employs a tiered partnership approach to ensure each partner has a comprehensive experience with the network. NCRN's partners are engaged in multiple ways and through various forums for bi-directional exchange of information and data. They participate in monthly strategic partners and data partners meetings, as well as quarterly NAB, NCCB, and RCC meetings. NCRN also holds an annual Evaluation Advisory Board meeting.

PARTNER MEETINGS, BY THE NUMBERS

July 2020–June 2021

25 partners meetings

12 monthly Data Partners meetings, consisting of a core group of data partners to discuss new and emerging trends, approaches, and tools, and foster collaboration across data partners.

9 monthly Strategic Partners meetings to promote collaboration, discuss and engage operational and programmatic elements critical to implementation, and receive updates on the program's progress.

3 Community Engagement Networking Hour sessions, an informal gathering for NCRN partners to connect, engage, and explore new opportunities for cross collaboration and networking.

1 annual NCRN Evaluation Advisory Board meeting, consisting of representatives from various partner and community organizations, to inform research questions and data sources for monitoring and evaluation.

Partners also provide feedback on materials. For example, partners reviewed the design and questions included in the COVID-19 Health Assessment and Mitigation Planning Survey (CHAMPS) for community members. They also contributed to the development of a COVID-19 vaccine factsheet. Partners informed the design and data curation of the NCRN data platform. In addition, partner organizations provided NCRN with feedback on the quality, accuracy, and identified translation needs of the NCRN website.

COMMUNITY ENGAGEMENT

NCRN has developed a Community Engagement strategy to effectively raise awareness and engagement with NCRN, deliver trusted public health messages to priority populations, and amplify lessons learned through NCRN that allows bi-directional communication, opportunities to network and collaborate, and leverages expertise of partners. Monthly community partner meetings led by the MSM Community Engagement staff were a key source of information for the NCRN team around community needs and gaps.

CHWs completed 282 new and follow-up encounters with individuals and organizations in Texas, Georgia, Louisiana, Hawaii, California, and Florida.

LITERATURE REVIEW TO SUPPORT COMMUNICATION TO PRIORITY POPULATIONS

University of South Florida (USF) College of Public Health conducted a [literature review](#) to assess and summarize peer-reviewed and grey literature findings on the knowledge, perception, motivation, facilitators, and barriers to COVID-19 testing and vaccine uptake among general Hispanic/Latinx populations, Hispanic/Latinx populations engaged in food harvesting and processing (e.g., migrant workers, meat packing workers), and American Indian and Alaskan Native populations. USF reviewed 102 articles published between 2000 and 2020, and found that:

- There is widespread contradictory information regarding asymptomatic spread of COVID-19 and vaccine information that are being consumed by these priority populations. Trusted and credible sources are needed to reduce misinformation.
- The populations covered in this review have concerns related to lack of trust, medical racism, lack of perceived benefit of testing, and health care avoidance due to immigration concerns.
- There is a need for clear COVID-19 testing guidelines, in addition to knowing which form of testing (DNA or antigen) is most appropriate for these priority populations.
- Successful communication strategies for information dissemination regarding COVID-19 includes the combination of using social media, text-messaging, and translated materials in the native language of the recipient.

NCRN partners and CHWs have engaged priority populations across the local, STT, and national partnerships. Disseminating culturally and linguistically appropriate information remains a top priority for NCRN. The following statistics show the widespread community reach of the NCRN over the past year.

COMMUNITY REACH OF NCRN, BY THE NUMBERS

JULY 2020 – JUNE 2021

DIRECT OUTREACH AND ENGAGEMENT BY NCRN PARTNERS

Over 633,181 individuals

SOCIAL MEDIA REACH

4,338 NCRN Facebook page reach

49,500+ NCRN Twitter impressions

750 NCRN Instagram reach and 796 impressions

5,600+ NCRN Youtube impressions

NEWS MEDIA MENTIONS

339 Mentions from local, regional, and national media outlets

548,097,123 Combined reach of media articles

EARLY LESSONS LEARNED AROUND ENGAGING COMMUNITIES AND PRIORITY POPULATIONS

NCRN leadership learned that:

- Engagement with American Indian and Alaskan Native communities requires first requesting tribal leaders' participation in formative research activities.
- Working closely with communities and technology providers of individuals with I/DD requires addressing the myriad of challenges that prevent people with disabilities from participating in digital events in a meaningful and beneficial way. These challenges often cause frustration and discourage those with disabilities from engaging—effectively silencing their voices.

“We made a strong connection to CBOs, the essential workers exposed to the risks of COVID, and particularly in individuals who were infected or hospitalized. We were able to engage in the hot spot communities/counties that allow us to coordinate and communicate at macro, mezzo, and micro levels that is not always possible. CBOs were grateful for information that was factual and helpful, especially in Spanish.”

– National Latino Behavioral Health Association

2. CAPACITY BUILDING

NCRN offered partners training, technical assistance, and funds to enhance their capacity to meet the needs of communities.

TRAININGS

TRAININGS, BY THE NUMBERS

July 1, 2020 – June 30, 2021

- **37** individuals from **15** partner organization trained in community-based prevention marketing
- **10** partner organizations trained in formative research recruitment methods
- **10** CHWs trained on using the NCRN platform

Community Based Prevention Marketing (CBPM) Training. CBPM is a community-engaged planning process that builds on community knowledge and strengths and incorporates principles of community-based participatory research (CBPR). NCRN sought to enhance organizational capacity, understanding, and ability to evaluate formative research findings using CBPM training to ensure information delivered to priority populations is culturally and linguistically appropriate. USF Prevention Research Center led a CBPM Training and Technical Assistance Program to build participating organizations' capacity to develop culturally and linguistically appropriate messages for COVID-19 testing or vaccine acceptance. The CBPM training program consisted of two cohorts, for a total of 37 individual participants from 15 organizations.

- Cohort 1 (January–February 2021): 22 participants from 6 partner organizations representing the following populations: Asian Americans, Hispanic/Latinx farm workers, Hispanics/Latinxs, Native Hawaiians and Pacific Islanders.
- Cohort 2 (March–April 2021): 15 participants from 9 partner organizations representing the following populations: CHWs, Haitians, and Hispanics/Latinxs.

COMMUNITY BASED PREVENTION MARKETING TRAINING AND TECHNICAL ASSISTANCE PROGRAM

The [six-week interactive virtual training](#) curriculum included:

- An overview of social marketing overall and as it applies to COVID-19.
- Identification and selection of a specific behavioral focus to help promote COVID-19 testing and vaccine uptake.
- Identification and selection of a priority population who are more susceptible to getting COVID-19, developing personas, and conducting formative research to better understand the population.
- Translating findings from the formative research into a marketing strategy

A key insight from the persona building training exercise is the **importance of culturally and linguistically appropriate information delivered by trusted people in the community**. Other insights include that priority populations:

- Lack of confidence/trust in vaccine development
- Lack of understanding related to why vaccine is needed and the behaviors after vaccine has been given
- Mistrust medical system/pharmaceutical industries
- Mistrust government
- Face language barriers and lack resources and information in languages other than English

Recruitment Training

ICF worked with the MSM Communications & Dissemination team to train 10 partner organizations that represented diverse priority populations in the recruitment of organizational staff for individual interviews and community members for focus groups. Information gathered from the individual interviews and focus groups helped inform message development and dissemination strategies for priority communities.

CHW Training

NCRN is sponsoring education and training for CHWs in multiple states. Along with its partner the National Association of Community Health Workers (NACHW), NCRN is engaging CHWs, promotores de salud, and community health representatives (CHRs) to disseminate culturally appropriate information to priority populations throughout the United States.

“There should be more focus on community health workers as essential workers, many who are NOT paid for their work!”

– National Latino Behavioral Health Association

NCRN collaborated with NACHW to train 10-12 CHWs to use the NCRN data platform to connect individuals to services. **CHWs also received training on the dissemination of free internet vouchers within select communities. As part of its partnership with Comcast’s Internet Essential Partnership, NCRN provided one year of free internet services to qualifying households.**

AN ENVIRONMENTAL SCAN TO INFORM CHW STRATEGIES WITHIN NCRN

NACHW and a consultant from the Community Health Acceleration Partnership (CHAP) conducted an [environmental scan](#) to examine key factors within the U.S. landscape that create challenges or opportunities to integrate the CHW workforce into COVID-19 responses. NACHW and CHAP identified and analyzed available secondary sources; conducted national listening sessions with CHWs, CHW network leaders, and allies; and conducted key informant interviews with national leaders with a COVID-19 pandemic response primary focus to get a deeper understanding of what an effective community-based response to COVID-19 disparities would look like in NCRN’s priority communities.

The environmental scan found that a successful COVID-19 response, including vaccination distribution, will depend on:

- establishing an **authentic feedback loop**, and
- **equitable engagement with communities** to design, implement, and monitor culturally relevant and effective strategies that **invest in existing community assets, build trust, and expand access** to ensure public participation, partnership, and accountability.

TECHNICAL ASSISTANCE

Based on findings from formative research efforts, NCRN provided partner organizations with technical assistance on dissemination planning, process and outcome evaluation methods, and refinement of metrics to measure reach for monthly community engagement tracking/reporting. NCRN also worked with partners to develop more individualized dissemination strategies. In addition, NCRN assisted with rapid translations and validation of existing and new messages and materials, working with OMH to engage other HHS Offices with translations.

63 Community Engagement Office Hours hosted

From March to June 2021, NCRN hosted community engagement office hours, designed to connect one-on-one with NCRN Strategic Partners to celebrate their successes, understand any challenges that they may be facing, answer questions/concerns related to implementing scopes of work and CE activities, as well as provide technical assistance in navigating the NCRN website, partner accounts, or monthly partner tracking form.

90 requests fielded through the customer support/call center

Starting in January 2021, NCRN partnered with **Premedex** to establish a **customer support/call center** to help address the needs of diverse populations, providing language interpretation services in over 240 languages. The customer support/call center is primarily available to communities, but partners can also use the center to have their questions answered about NCRN programmatic items (e.g., upcoming webinars, subscriptions, etc.). Premedex allows NCRN to respond to all inquiries within a 24-hour period (except for weekends). The hours of operations are 9 am – 9 pm EST Monday through Friday. The hours are designed to capture a large portion of the business hours across all time zones. In the first six months of its operation, the center received requests from 16 people by e-mail, 54 through the website, and 20 by phone. The requests came from 15 states and Puerto Rico.

GRANTS

\$120,000 in grants disseminated to CBOs and CHWs

NCRN supported CBOs and CHWs in COVID-19 priority areas with **micro-grants** for capacity-building, training, and technical assistance to support the mobilization of CHWs in local areas. Mini- and capacity building grants are part of the efforts to work with smaller organizations to grow reach and strengthen work at the community level.

COMMUNITY BRIDGES CAPACITY BUILDING PROGRAM (CBCBP) AWARDS

9 organizations received training and technical assistance to develop CHW mobilization plans, including monthly webinars, access to online CHW training, technical support, and a \$5,000 stipend. They are:

- El Sol Neighborhood Educational Center – Southern California
- Louisiana Community Health Worker Outreach Network – New Orleans
- Familias Triunfadoras Inc. San Elizario, Texas
- Gateway Regional Council, Mableton, GA
- Kau Rural Health Community Association Inc. – Pahala, Hawaii
- Birthmark Doula New Orleans, LA
- Kula no Na Po-e Hawaii, Honolulu, Hawaii
- Chris 180 - Atlanta, GA
- Florida Community Health Worker Coalition, Inc. Clearwater, FL

REGIONAL COMMUNITY COALITION (RCC) MICRO-GRANT AWARDS

20 organizations received \$3,000 – \$5,000 to reach NCRN priority populations with COVID -19 information via dissemination efforts. A total of **\$75,000** were disseminated.



3. COMMUNICATIONS AND DISSEMINATION

NCRN partners leveraged their networks and engaged diverse community-level partners to ensure broad use of communication resources and strategies to bring awareness, participation, education, and training directly to priority populations. NCRN has developed a communications strategy to effectively raise awareness and engagement with NCRN among partners and members of the lay community, deliver trusted public health messages to priority populations, and amplify lessons learned among members of the NCRN.

PARTNER HIGHLIGHTS

Assessing the State of Communications and Messaging

ICF Next worked with NCRN to conduct an environmental scan of news stories released from January to December 2020, including national newspaper, television, radio, and online stories that communicated messages to the general public or NCRN priority population. ICF Next conducted content analysis on a random sample of 231 articles. Based on findings from the content analysis, ICF Next provided the following recommendations for NCRN's Communication Program:

- Identify core messages that can be disseminated across all NCRN priority communities while also ensuring messages are culturally tailored.
- Address misinformation about COVID-19 testing and vaccination.
- Explore perceptions about the credibility of federal, state, local government agencies, and of scientific evidence and spokespersons.
- Focus key messages on changing behaviors that may have been influenced by the surge of misinformation and distrust.
- Include tasks for specific dissemination activities in NCRN partners' contracts based on their expertise, capacity, and community engagement strengths

ICF Next also conducted an environmental scan assessing to what extent existing messaging uses plain language based on the CDC Clear Communication Index (CCI). It found that **existing messaging developed for priority populations had plain language scores that ranged from 69% to 94%** (scores higher than 90 suggest higher compliance with plain language criteria) based on the CCI.

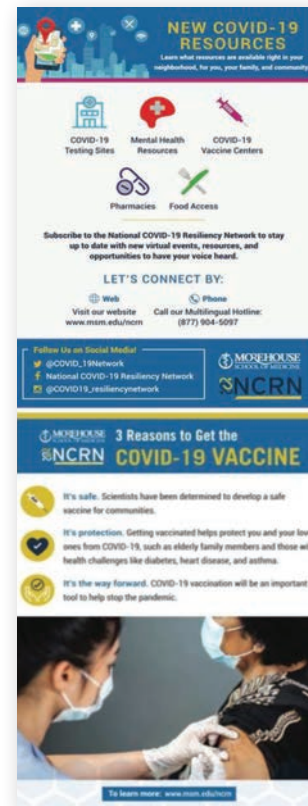
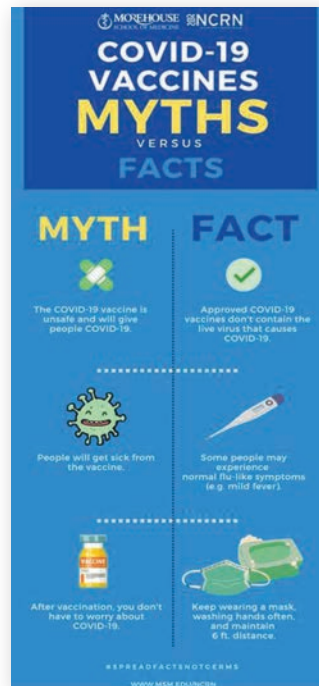
In addition, they found that **structural inequity prevented members of priority populations from receiving messaging about COVID-19 testing and vaccination**; they recommended that new messaging focus on enhancing personal motivation through preferred and trusted communication channels. In addition, there is a need for a multi-level, multi-cultural communications campaign that considers message development and dissemination at the individual, group, organizational, and societal level.

MATERIALS AND REPORTS

NCRN developed or shared materials to drive vaccine uptake, raise awareness regarding vaccine safety, address misperceptions, and connect audiences with resources.

31 web materials produced

The **web materials** included CDC COVID-19 guidelines, a [resources library](#) with 28 articles and external links to provide answers to frequently asked questions related to COVID-19, CDC flu season guidance, and the National Institutes of Health (NIH) Community Engagement Alliance Against COVID-19 Disparities.



19 materials and resources developed and disseminated in languages other than English

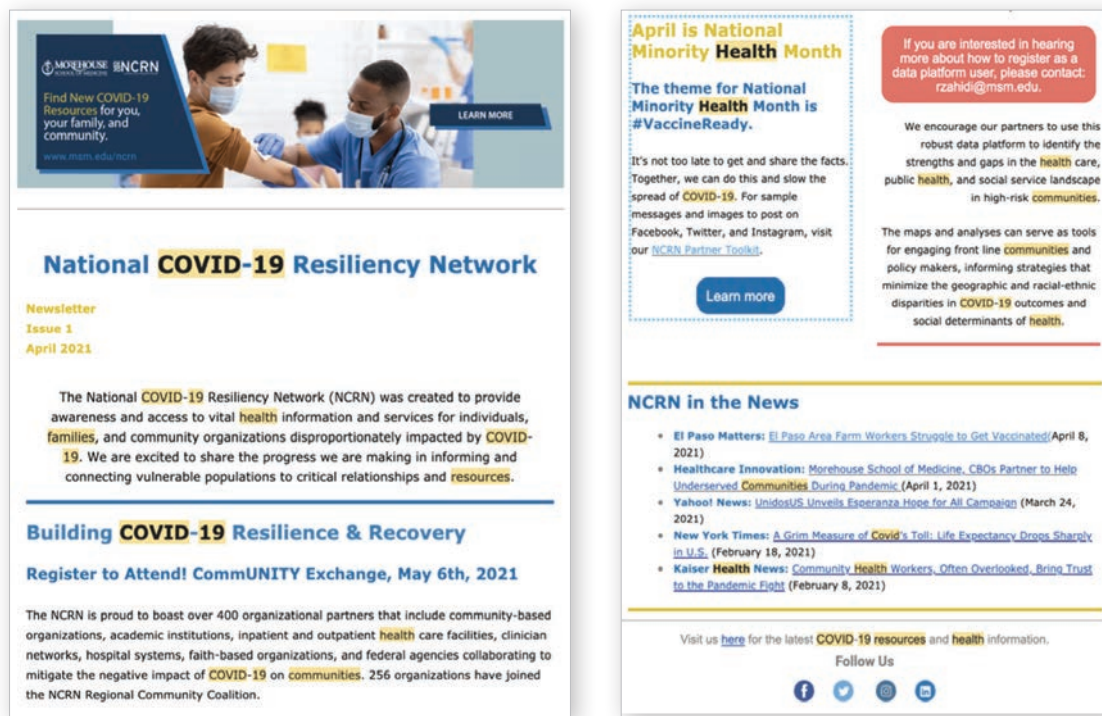
In collaboration with UnidosUS, Papa Ola Lokahi, Asian and Pacific Islander Health Forum, and others, NCRN disseminated materials and resources in languages other than English. It disseminated materials in the following languages on NCRN's website: *English, Spanish, Chuukese, Ilocano, Kosraean, Marshallese, Hawaiian, Pohnpeian, Samoan, Tongan, Yapese, Cantonese Chinese, Korean, Mandarin Chinese, Bengali, and Urdu.*

5 print products produced

The **print materials** sought to address common misperceptions about the COVID-19 vaccine and bring awareness to the benefits of taking the COVID-19 vaccine and to resources available through NCRN. For example, the [COVID-19 Vaccine Factsheet](#) highlights three things to know about the vaccine and three things to know about reducing spread of the virus.

1 e-newsletter produced

The **newsletter**, sent to NCRN partners, subscribers, funders, and other stakeholders, provided updates on program progress and opportunities to engage or disseminate culturally and linguistically appropriate resources to communities.



PARTNER HIGHLIGHTS

Partners appreciated NCRN's communications resources and support:

"Out of the funders, NCRN understood our cultural and linguistic context. NCRN encouraged and supported our community to do what is best."

- Pacific Islander COVID-19 Response Team Papa Ola Lokahi

"Participation also caused us to identify multilingual resources for immunizations efforts."

- Alliant Quality

DISSEMINATION

31 digital media campaigns and 3 social media motion graphic videos launched

The **digital media** campaign materials and social media motion graphic videos sought to increase awareness of resources available through NCRN; to drive conversations between community members, health care providers and CBOs about the safety of COVID-19 vaccines; and to address common misperceptions about the COVID-19 vaccine and increase awareness of the importance of wearing masks.



11 culturally and linguistically appropriate webinar presentations, viewed 3,160 times

Partner- and NCRN co-hosted webinars and virtual events sought to provide updates on a wide variety of topics, including:

- COVID-19 prevention and treatment among high-risk populations
- the different types of authorized COVID-19 vaccines and vaccine-related misinformation
- legislative affairs related to the COVID-19 vaccine challenges to well-being, the importance of personal health, and approaches for coping
- approaches for addressing vaccine hesitancy among patients, community members, and employees, including opportunities for systemic change through policy-making and organizational support
- chronic disease and violence among youth in communities
- mental health equity
- systemic racism
- environmental injustice

Audiences for these webinars and virtual events included priority populations, CBOs, policy/decision-makers, and corporate health and wellness employees.



6 culturally and linguistically tailored vaccine promotion campaign concepts developed

In addition to the five print products that were released in Year 1, NCRN developed six new culturally and linguistically tailored vaccine promotion campaign concepts. Four of the concepts will be distributed as fully executed print and digital materials in Year 2 to our strategic network and outreach partners. These materials include: posters; palm cards; social media graphics; radio ad spots/commercials; and videos.



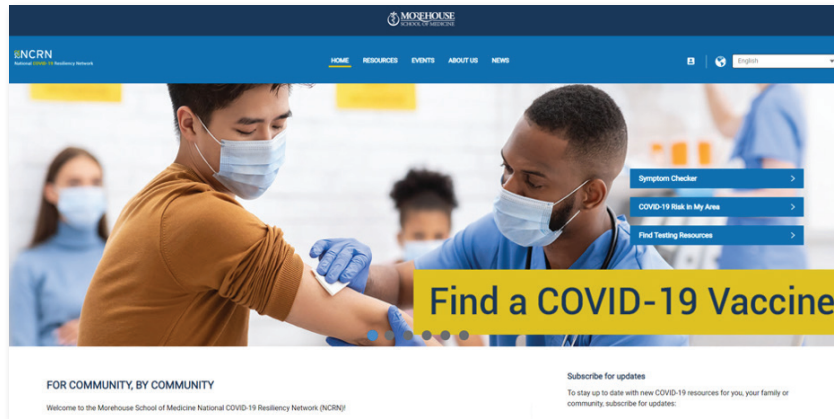
1 federal vaccine promotion campaign supported

NCRN disseminated materials to support the #VaccineReady campaign in partnership with the HHS OMH, the National Institute on Minority Health and Health Disparities, and health care professionals around the nation to work towards mitigating the impacts of COVID-19 on racial and ethnic minority populations and American Indian and Alaska Native communities.



4. TECHNOLOGY

The [NCRN website](#) provides information about NCRN and its partners and links to resources, including COVID-19 information and guidelines for individuals, CBOs, and health providers. The website is available in 13 languages: English, Spanish, Samoan, French, Haitian Creole, Hawaiian, Portuguese, Tagalog, Vietnamese, Arabic, Traditional Chinese, Simplified Chinese, and Korean. Key groups with expertise in priority population groups informed selection of the languages available on the website.

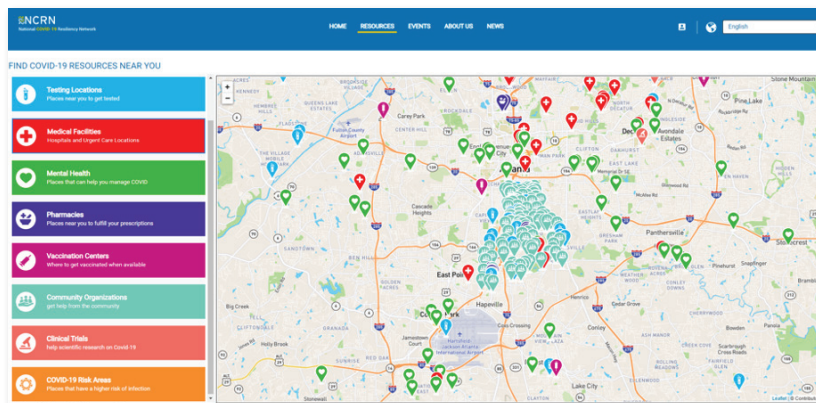
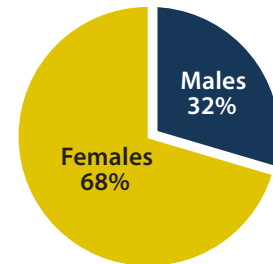


8,100+ users of NCRN's website, with over 112,000 pageviews

In Year 1, NCRN's website expanded the dissemination of partners' messaging and communication to priority communities. The sharing of partners' messages through NCRN's website and community forums has been a significant accomplishment.

The website hosts a [platform](#) where CHWs, community partners, and individuals can search for health care and social services as well as understand the local landscape of COVID-19 based on their zip code location. NCRN worked with [KPMG](#) to integrate multiple sources of information about health care, COVID-19 testing, vaccination, monoclonal antibody therapy, and social service organizations to a searchable format. Locations are address-based, and types of services are searchable at the zip code level. MSM is also working with KPMG to improve the quality and specificity of the social service data on the website through a collaboration with Aunt Bertha, a comprehensive web-based resource of multiple social services available at the zip code level for the entire United States.

Website Users by Gender



5. RESEARCH

NCRN prioritizes research that assesses community needs, strengths, and priorities while it collaboratively builds and implements a research agenda for program and policy-making. NCRN will continue to assess its impact through monitoring, evaluation, and quality improvement.

PROBLEM SOLVING RESEARCH ISSUES

NCRN has identified the following issues related to researching health equity and solutions and tools for overcoming them:

- **Inconsistent Data Issues:** There is inconsistent reporting across states of racial and ethnic data related to COVID-19 infection rates. Accurate reporting and consistency across the states is needed, as well as methods to address the incomplete nature of race/ethnicity data for COVID-19.

NCRN Solution: Use area-level population estimates as a proxy for missing individual-level data. When race/ethnicity-specific data is available at a state or county level, it can be used to provide weighted small area estimates at the zip code level.

- **Data Access Issues:** In a rapidly changing data landscape; tools are needed to enable quick comparisons by place and priority population.

NCRN Solution: Leverage the NCRN data platform.

- **Issues with Information Sharing:** It is important to share lessons learned, relevant publications, and data resources among colleagues and partners, especially due to high volume of work being produced across the field.

NCRN Solution: Use the monthly Data Partners meeting as a space for sharing lessons learned within NCRN.

- **Issues Tracking Social Needs:** Tracking community needs by state and zip code levels helps identify and address key social determinants of health.

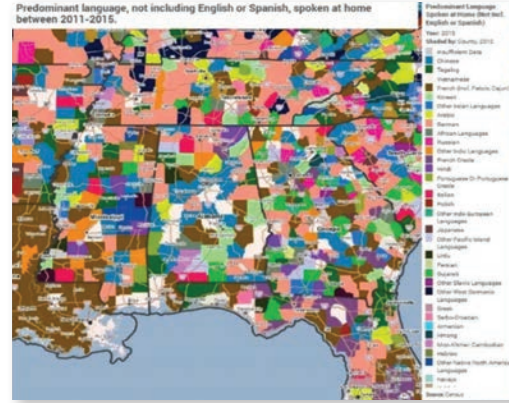
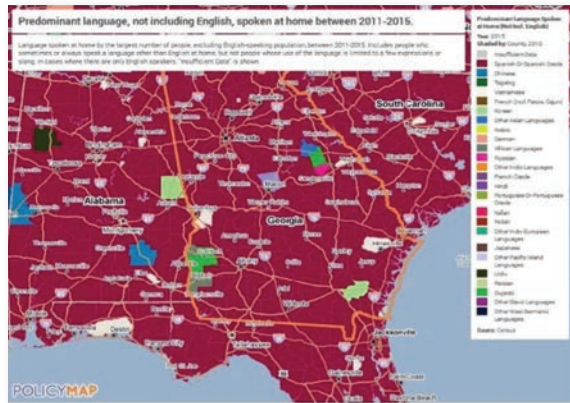
NCRN Solution: Aggregate data from multiple sources to analyze and disseminate this information on an ongoing basis.

RESEARCH ACTIVITIES

NCRN has access to various public and private data sources and has aggregated a large set of COVID-19 health-related data for public access. It has developed a research portal to support partners' research and evaluation efforts. Communities and partners can access COVID-19 information and health-related services through the website and app. Key research focus areas include:

Identifying current priority areas and needs. NCRN produced an Environmental Scan for Priority Areas in the National COVID-19 Resiliency Network (NCRN): Mitigating the Impact of COVID-19 on Vulnerable Populations chartbook. This chartbook summarizes the impact of COVID-19 on population health in areas that were initially (e.g., May 2020) identified as COVID-19 hotspots: Alaska, Arizona, Florida, Georgia, Hawaii, Los Angeles, Louisiana, New Mexico, Texas, and Utah. Additionally, the report includes measures of health equity across demographic subgroups in each state with respect to COVID-19 disease burden. The report serves as a resource for engaging partner organizations and community members around the epidemiologic landscape of COVID-19 and key place-based factors that are imperative to address when crafting an effective public health response to COVID-19.

In addition, NCRN identified languages spoken across these priority areas using American Community Survey and Policy Map data and produced visualizations of those findings. MSM is also working with Alliant Health Solutions to identify local health systems in priority areas that might be willing to explore a data sharing partnership to understand race and ethnic disparities in health care-seeking behavior, access to care, and health outcomes for COVID-19.



Understanding community members’ knowledge, perceptions, and behaviors related to COVID-19 testing and vaccination.

NCRN has been monitoring Societal Experts Action Network (SEAN) survey data on a weekly basis to identify national trends in information gaps and health behaviors by priority population (e.g., masking, social distancing, willingness to engage in vaccination). Over the course of the year, vaccine hesitancy has decreased across priority populations, but disparities in willingness to receive a vaccine continue. Similar trends exist for vaccination rates.

In addition, in Year 1, ICF Next, with MSM support, conducted 4 focus groups, including 2 with 18 Black/African Americans and 2 with 18 Hispanic/Latinx community members (36 participants total), to understand community perspectives and needs and inform the planning of NCRN’s communication program, gathering critical insights on the knowledge, perceptions, and behaviors of each priority population related to COVID-19 testing and vaccination.

Select Findings from ICF Next’s Focus Groups with African American and Hispanic/Latinx Participants

	Black/African American Priority Populations	Examples of Activity
COVID-19 Testing	<ul style="list-style-type: none"> Half of the participants within this priority population had not been tested due to lack of external motivators (e.g., travel/job requirements, visiting eligibility), low perceived susceptibility, and high perceived barriers (e.g., waiting times, unreliable internet) 	<ul style="list-style-type: none"> Most of the participants within this priority population had tested due to low perceived barriers and high perceived self-efficacy (e.g., ability to find testing location); those who had not reported low perceived susceptibility and lack of external motivators
Vaccination	<ul style="list-style-type: none"> Most of the participants within this priority population did not plan to get vaccinated due to distrust in institutions and science, negative expectations, and low perceived effectiveness 	<ul style="list-style-type: none"> None of the participants within this priority population had been vaccinated due to eligibility requirements at that time, but half planned to. Researchers found mixed sense of trust and distrust in science and mixed perceptions about effectiveness
Trusted Sources of Information	<ul style="list-style-type: none"> Mass media channels, interpersonal channels, and trusted organizations (e.g., CDC, health department, state government) and trusted spokespeople (e.g., faith leader, doctor, public figures) 	<ul style="list-style-type: none"> Mass media channels and interpersonal channels (e.g., close friends and family members). Trusted spokespeople within organizations and news anchors/ doctors (e.g., Univision, Telemundo) other health and social services, and promising practices

Assessing community uptake of other vaccinations. NCRN worked with Alliant Health Solutions to conduct analysis of Medicare claims to assess differences in uptake of Influenza and Pneumovax Vaccination rates among Medicare beneficiaries that are part of priority populations. In addition, MSM's National Center for Primary Care (NCPC) Research Division conducted analysis of H1N1 vaccination uptake by race/ethnicity of Medicaid enrollees in 28 states and the District of Columbia. The team found that uptake of H1N1 vaccination was more robust among Hispanic/Latinx and Asian/Pacific Islander populations than the current uptake among these groups of the COVID-19 vaccination. This paper has been submitted for publication and invited for resubmission with revisions.

Developing an evaluation plan for NCRN activities. In partnership with NORC at the University of Chicago, NCRN developed a logic model and evaluation plan. The programmatic logic model is grounded in the PETAL Framework and identifies the inputs, activities, outputs, outcomes, and intended impact of the NCRN. Eleven individuals across five partner organizations, in addition to 10 NCRN staff, participated in interviews to inform development of an NCRN logic model that described the activities and outputs and expected outcomes and impact of the NCRN. MSM also worked with NORC to develop an evaluation and monitoring plan to describe a design for monitoring key metrics and evaluating the impact of the NCRN. The logic model can be seen in Appendix B.

DATA COLLECTION TOOLS

NCRN has also made great progress working with partners to build data infrastructure and develop research projects that engage and measure community-level activity related to its objectives and outcome measures. NCRN developed data collection tools to inform evaluation and monitoring efforts, including:

Strategic and Community Partner Organization Reporting Forms: Partners document NCRN activities on engagement, awareness building, and other metrics monthly.

COVID-19 Health Assessment and Mitigation Planning Survey (CHAMPS): CHAMPS is designed to help CBOs in highly impacted geographic areas assess and document issues with COVID-19 testing, vaccination, treatment, and symptom management. It also assesses needs related to chronic disease management, mental health and substance use, and other health and social services. CHAMPS includes both a community member survey and a community partner survey:

- **Community Member Survey:** This survey is designed to learn more about community members' knowledge and attitudes toward COVID-19, their experiences living in the COVID-19 pandemic, and areas of greatest need/support. This information is used by NCRN to tailor prevention and support resources to the specific needs of communities impacted by COVID-19.
- **Strategic Partner Survey:** This survey is designed to assess CBO/CHW reach and linkage to services and partner engagement activities.

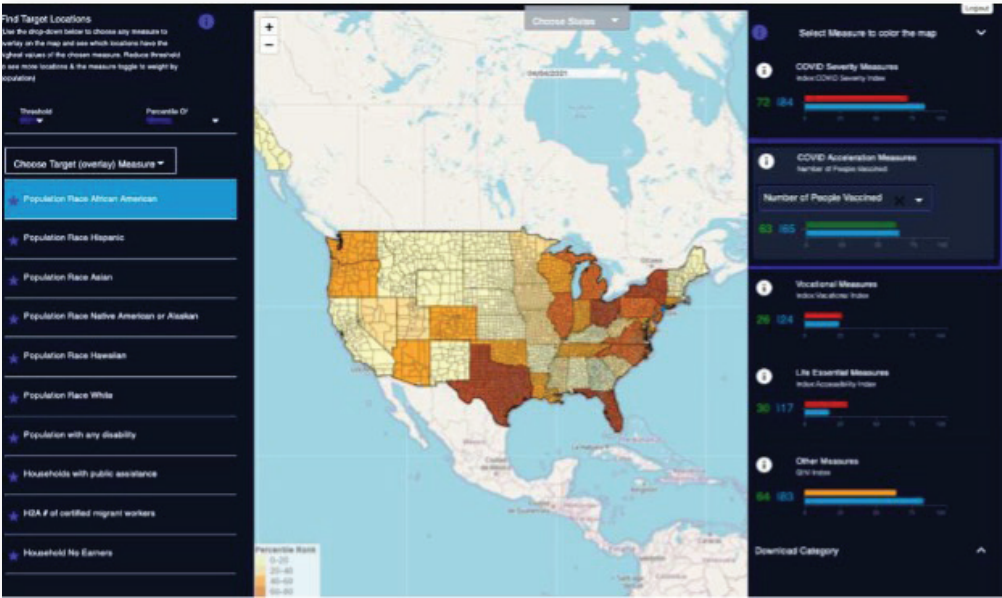
Findings from the CHAMPS will inform data-driven CBO mitigation approaches and establish a centralized inventory of existing and evolving COVID-19 response strategies.

CHW Reporting Form: This data collection form for CHWs/*promotores*/CHRs is used to document activities with clients, including connection to resources and care at the individual, family, or community level.

FIRST CHAMPS SURVEY FOR COMMUNITY MEMBERS LAUNCHED ON MAY 1, 2021

Objective: assess and document community perceptions around COVID-19 to collect insights and observations, assess the impact of NCRN resources and activities on COVID-19 mitigation and recovery, and identify opportunities for NCRN to better serve the evolving needs of its priority populations across the United States.

NCRN Data Platform: Underlying the NCRN web-based platform linking individuals to services is a comprehensive data platform, developed by KPMG in partnership with NCRN. The platform went live in early 2021 and incorporates over 600 data signals at the zip code and county level; data are updated weekly. Given the incomplete nature of testing and vaccination data by race and ethnicity, the platform is designed to be able to identify general proportions of specific racial/ethnic populations in any given area. The user can then quickly compare the testing and vaccination rates in places with high proportions of priority populations versus other places



PUBLICATIONS

NCRN and its partners have produced numerous peer-reviewed publications and other reports and policy briefs. NCRN's peer-reviewed publications include findings related to community engagement of Black/African Americans in the era of COVID-19; disaster preparedness and equitable care during pandemics; nonmetropolitan vs. metropolitan COVID-19 incidence and mortality rates within the first 24 weeks of the pandemic; association of the percentage of Black/African American population and primary care shortage areas and COVID-19 case and death rates; population-level disparities in COVID-19; and variations in reporting of race and ethnicity of COVID-19 cases and deaths across the United States. A full list of publications can be found in Appendix C.

PUBLICATIONS, BY THE NUMBERS
July 1, 2020 – June 30, 2021

12 peer-reviewed conference presentations submitted	11 manuscripts and policy briefs in preparation	8 abstracts accepted at the American Public Health Association (APHA) annual conference	7 reports	6 peer-reviewed journal articles published
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WHAT IS NEXT FOR YEAR 2 OF NCRN?

VOICES FROM NCRN PARTNERS

NCRN Partners are looking forward to:

- Increasing awareness, participation in, education about, and uptake of COVID-19 prevention strategies and tools among priority populations
- Expanding outreach to address co-morbidities of the COVID-19 pandemic (e.g., worsening behavioral health needs for children and adults, delayed care for ongoing chronic disease management, etc.)
- Connecting with new and existing NCRN partners

In Year 2, NCRN anticipates continuing health education campaigns through various communication and dissemination channels, including a mobile app of its website. It will also host focus groups across priority populations to understand community needs; train participants from partner organizations in CBPM; and host Community Conversations and quarterly webinars featuring partner organizations presenting COVID-19 related information to their community and others.

In addition, NCRN partners will continue disseminating results and publishing materials and articles on outcomes of the projects through peer-reviewed manuscripts, conference papers, white papers, policy briefs, research briefs, and other publications. Finally, NCRN will continue to build sustainability and scale up its efforts through dissemination and awareness of COVID-19 prevention and vaccine uptake messaging and best practices, infrastructure development, partnerships, and grant writing.

YEAR 2 ANTICIPATED REACH

- **1 million** community members through various NCRN dissemination channels and health communication campaigns
- **3,000 community members** through Community Conversations and **2,000 members** through quarterly webinars
- **90 individuals** across priority populations for focus groups and **35 participants** from community partners for individual interviews as part of formative research efforts
- **90 participants** from NCRN partner organizations to be trained on CBPM

APPENDIX A: NCRN STRATEGIC PARTNERS

STRATEGIC INFRASTRUCTURE PARTNERS

[Acorn Healthcare Credentialing Solutions](#)

Acorn Credentialing Solutions is a passionate team of medical, technical, and credentialing experts who envision a health care system that works better for everyone. The Acorn platform is designed with all health care system users and stakeholders in mind. Providers, credentialing specialists, and insurance payers get tailored views of the information they need while Acorn streamlines workflows, automates tasks, and manages data.

[Alliant Health Solutions](#)

Alliant Health Solutions is a division of Alliant Health Group, a nonprofit family of companies providing services including utilization management, program integrity, and quality assurance in the administration of public sector health care programs.

[Comcast Internet Essentials Program](#)

As the largest Internet adoption program in the nation, the Comcast Internet Essentials Program's mission is to empower their customers and enrich communities with technology.

[Florida State University](#)

Florida State University has a School of Public Health that focuses on the social determinants of health and removing disparities in access to care. The ways that this affects policy is a major focus for the school.

[The Foundation for AIDS Research](#)

The Foundation for AIDS Research is one of the world's leading nonprofit organizations dedicated to the support of AIDS research, HIV prevention, treatment education, and advocacy. Its mission is to end the global AIDS epidemic through innovative research.

[Georgia Institute of Technology](#)

The Georgia Institute of Technology is a top 10 public research university. Its main campus is in Atlanta, Georgia, and its mission is to develop leaders who advance technology and improve the human condition.

[Hispanic Communications Network](#)

Hispanic Communications Network is the leading full-service, social change marketing agency delivering culturally driven multimedia strategies.

[ICF Next](#)

ICF Next is a global marketing agency focused on insights, creativity, and technology that motivate people to take meaningful action, helping organizations find opportunity in disruption.

[KPMG Consulting](#)

KPMG member firms operate in 147 countries, collectively employing more than 219,000 people, serving the needs of business, governments, public-sector agencies, and not-for-profits. KPMG helps other organizations mitigate risks and grasp opportunities and drive positive, sustainable change for clients, people, and society at large.

[NORC at the University of Chicago](#)

NORC is an objective non-partisan research institution that delivers reliable data and rigorous analysis to guide critical programmatic, business, and policy decisions.

[PREMEDEX](#)

PREMEDEX helps hospitals and physicians improve patient engagement to drive better results. PREMEDEX clinical and non-clinical representatives work with organizations to establish appropriate protocols that will best serve patients. Their proprietary software platform helps track all interactions for updates on patient progress and alerts when a patient needs help.

[Salesforce](#)

Salesforce is a customer relationship management (CRM) platform.

[University of South Florida](#)

The University of South Florida is home to the highest-ranked public health degree program in Florida (U.S. News and World Report). The USF College of Public (COPH) Health is a recognized leader in social marketing, community health, maternal and child health, and global infectious disease research. The college offers bachelors, masters, and doctoral degrees, as well as graduate certificates. The students, faculty, and staff passionately solve problems and create conditions that allow every person the universal right to health and well-being.

[Venture Leadership Consulting](#)

Venture Leadership is a partnership that works collaboratively to create new models, implement novel programs, and handle existing workload.

STRATEGIC NETWORK PARTNERS

[100 Black Men of America, Inc.](#)

The mission of the 100 Black Men of America, Inc. is to improve the quality of life within our communities and enhance educational and economic opportunities for all African Americans. We seek to serve as a beacon of leadership by utilizing our diverse talents to create environments where our children are motivated to achieve and to empower our people to become self-sufficient shareholders in the economic and social fabric of the communities we serve.

[Alliance for Strong Families and Communities](#)

Rooted in the historic cause of advancing equity for all people, the Alliance is a national strategic action network driven by members aligned through shared ownership and a common vision to achieve a healthy and equitable society.

[Asian & Pacific Islander American Health Forum](#)

APIAHF influences policy, mobilizes communities, and strengthens programs and organizations to improve the health of Asian Americans, Native Hawaiians, and Pacific Islanders. APIAHF is the oldest and largest health advocacy organization working with AA and NHPI communities across the nation, in the US Territories, and with the US-affiliated Pacific jurisdictions.

[Association of Asian Pacific Community Health Organizations](#)

AAPCHO is dedicated to promoting advocacy, collaboration, and leadership that improves the health status and access of Asian Americans, Native Hawaiians, and Other Pacific Islanders within the United States, its territories, and freely associated states, primarily through community health centers.

[Association of University Centers on Disabilities](#)

AUCD is a membership organization that supports and promotes a national network of university-based interdisciplinary programs. Network members consist of University Centers for Excellence in Developmental Disabilities, Leadership Education in Neurodevelopmental Disabilities Programs, and Intellectual and Developmental Disability Research Centers.

[Center for Victims of Torture](#)

The Center for Victims of Torture works toward a future in which torture ceases to exist and its victims have hope for a new life. We are an international nonprofit dedicated to healing survivors of torture and violent conflict. We provide direct care for those who have been tortured, train partners around the world who can prevent and treat torture, and advocate for human rights and an end to torture.

[Charles Drew University of Medicine and Science](#)

Charles R. Drew University of Medicine and Science is a private, nonprofit, student-centered university that is committed to cultivating diverse health professional leaders who are dedicated to social justice and health equity for underserved populations through outstanding education, research, clinical service, and community engagement.

[CommonSpirit Health](#)

CommonSpirit Health is committed to building healthier communities, advocating for those who are poor and vulnerable, and innovating how and where healing can happen—both inside hospitals and out in the community.

[Community-Campus Partnerships for Health](#)

Community-Campus Partnerships for Health (CCPH) is a nonprofit membership organization that promotes health equity and social justice through partnerships between communities and academic institutions.

[Dream Corps Justice \(previously known as #Cut50\)](#)

Dream Corps Justice is a bipartisan effort to cut crime and incarceration across all 50 states. We bring together leaders impacted by the criminal justice system, with unlikely allies spanning the political divide to push for criminal justice solutions.

[Henry Ford Health System](#)

Henry Ford Health System is one of the nation's leading health care providers. It is a not-for-profit corporation comprised of hospitals, medical centers, and one of the nation's largest group practices, the Henry Ford Medical Group, which includes more than 1,200 physicians practicing in over 40 specialties.

[Hoffman and Associates](#)

Hoffman and Associates is a diverse, all-female OB-GYN doctor group with offices in Central, East, and West Baltimore, Maryland. Our family-centered approach to obstetrics and gynecology allows us to serve the needs of women of all ages with top quality and compassionate medical care.

[The Institute for eHealth Equity](#)

leHE is a social impact consulting firm with a mission to improve health outcomes and reduce health disparities in underserved communities and communities of color. leHE's OurHealthyCommunity.org platform is a geographically expandable, culturally appropriate, web-based collaborative space for secular and non-secular community-facing organizations.

[Juxtapia Group, Inc.](#)

To achieve these goals, the Juxtapia Group, Inc. conducts empirical theoretical and application-based research and development activities to investigate effective learning tools and pedagogical/andragogical approaches that improve, augment, and accelerate human learning performance of underserved and disadvantaged minorities.

[Mixteco/Indígena Community Organizing Project](#)

The Mixteco/Indígena Community Organizing Project (MICOP) unites indigenous leaders and allies to strengthen the Mixteco and indigenous immigrant community in Ventura County, estimated at 20,000 people. Most are strawberry farmworkers, and many speak primarily their indigenous language. MICOP's majority-indigenous staff builds community leadership and self-sufficiency through education and training programs, language interpretation, health outreach, humanitarian support, and cultural promotion.

[National Association of Community Health Centers](#)

NACHC serves as the leading national advocacy organization in support of community-based health centers and the expansion of health care access for the medically underserved and uninsured. NACHC conducts research and analysis that informs both the public and private sectors about the work of health centers, their value to the American health care system, and the overall health of the nation's people and communities – both in terms of costs and health care outcomes.

[National Association of Community Health Workers](#)

NACHW aims to unify the voices of the community health workers and strengthen the profession's capacity to promote healthy communities.

[National Council on Urban Indian Health](#)

NCUIH is a National 501(c)(3) organization devoted to the support and development of quality, accessible, and culturally competent health services for American Indians and Alaska Natives living in urban settings.

[National Latino Behavioral Health Association](#)

The mission and goal of NLBHA is to influence national behavioral health policy, eliminate disparities in funding and access to services, and improve the quality of services and treatment outcomes for Latino populations.

[The National REACH Coalition](#)

NRC, a 501(c)(3) nonprofit located in Washington DC, was founded in 2004 to support a network of community-based organizations spanning across 50 states and U.S. territories and committed to achieving racial and ethnic health equity.

[Omega Psi Phi](#)

Omega Psi Phi Fraternity, Inc. is the first international fraternal organization founded on the campus of a historically black college.

[Our Healthy Community](#)

Our Healthy Community is an unprecedented network of local, regional, and national faith and community-based organizations (Community Partners) committed to improving health equity, health outcomes, and reducing health disparities in their communities.

[Papa Ola Lōkahi](#)

Papa Ola Lōkahi's mission is to improve the health status and well-being of Native Hawaiians and others by advocating for, initiating, and maintaining culturally appropriate strategic actions aimed at improving the physical, mental, and spiritual health of Native Hawaiians and their 'ohana (families) and empowering them to determine their own destinies.

[Sista Midwife Productions](#)

Sista Midwife Productions is a birth advocacy organization based in New Orleans, LA providing education, training and consultations for communities, birth workers and organizations that work with child bearing families.

[Southern Area LINKS, Inc.](#)

The Links, Incorporated is a women's volunteer service organization committed to enriching, sustaining, and ensuring the cultural and economic survival of African Americans and other persons of African American ancestry. The Links, Incorporated is an international service organization with more than 15,000 members in 288 chapters located in 42 states, the District of Columbia, the United Kingdom, and the Commonwealth of the Bahamas.

[Tuskegee University National Center for Bioethics in Research and Health Care](#)

The Tuskegee University National Center for Bioethics in Research and Health Care is the nation's first bioethics center devoted to engaging the sciences, humanities, law, and religious faiths in the exploration of the core moral issues that underlie research and medical treatment of African Americans and other underserved people.

[UnidosUS](#)

UnidosUS serves the Latino community through our research, policy analysis, and state and national advocacy efforts, as well as in our program work in communities nationwide. And we partner with a national network of nearly 300 affiliates across the country to serve millions of Latinos in the areas of civic engagement, civil rights and immigration, education, workforce and the economy, health, and housing.

[United Front for the Haitian Diaspora](#)

The mission of the United Front for the Haitian Diaspora is to mobilize Haitians in the Diaspora to reintegrate into Haitian society in order to – alongside our fellow Haitians inside the country – contribute in helping to develop Haiti into a politically stable, peaceful, and prosperous nation where every Haitian can achieve a good quality of life.

[University of Alaska Fairbanks' Center for Alaska Native Health Research](#)

The University of Alaska Fairbanks' Center for Alaska Native Health Research mission is to build relationships and research-based knowledge to improve the health of Alaska Native people. The center's researchers study how cultural variables influence the understanding of disease expression in Alaska Native people so that research findings and intervention are valid and culturally appropriate.

[University of Hawai'i](#)

The University of Hawai'i System includes 10 campuses and educational, training and research centers across the Hawaiian Islands. As the public system of higher education in Hawai'i, UH offers unique and diverse opportunities.

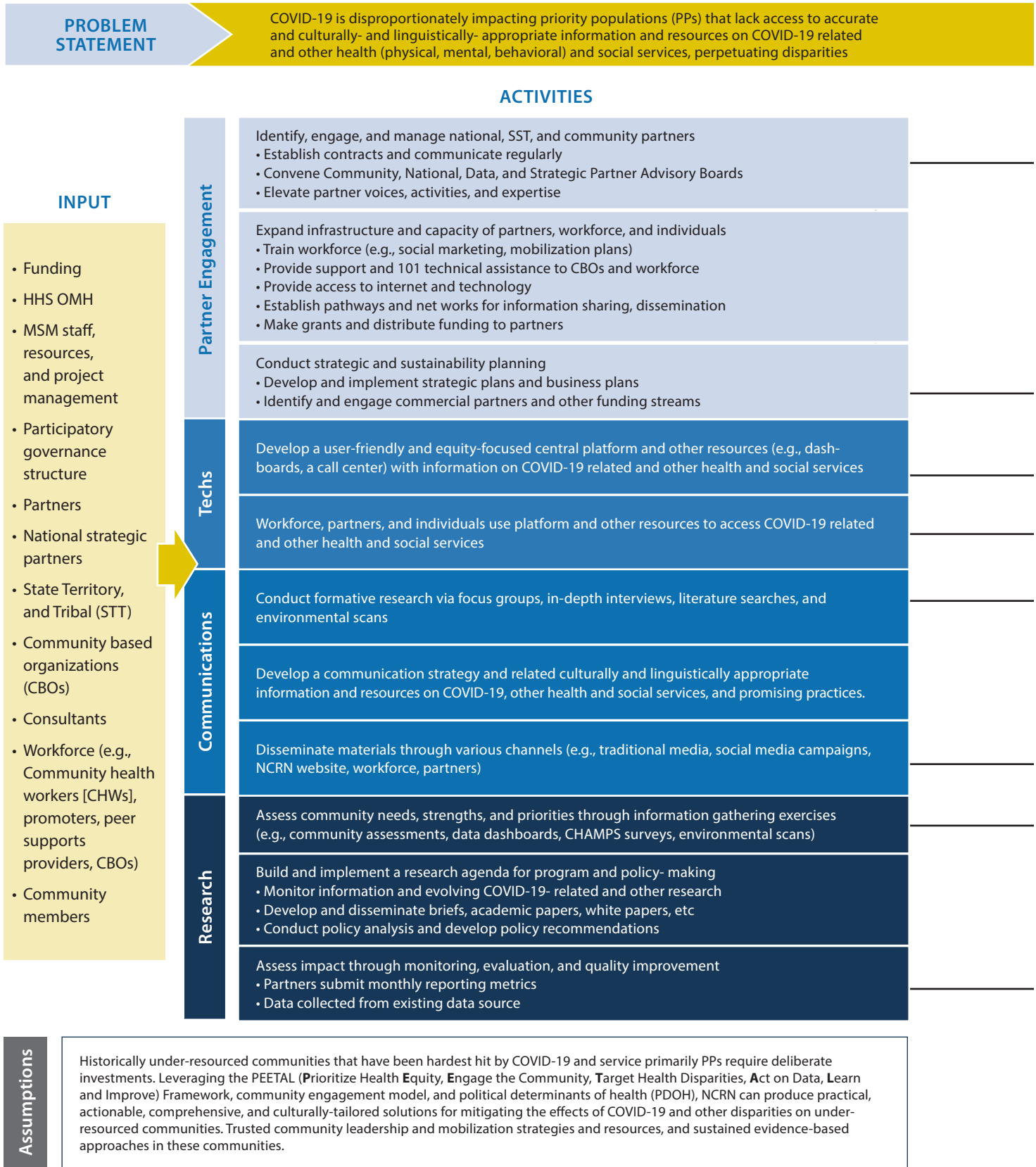
[University of Texas at El Paso](#)

The University of Texas at El Paso is one of the largest Hispanic-serving institutions in the country, with a student body that is over 80 percent Hispanic. It enrolls nearly 25,000 students in 166 bachelor's, master's, and doctoral programs in 10 colleges and schools.

[Wellstar Health System](#)

The mission of Wellstar is to enhance the health and well-being of every person we serve, with a vision to deliver world-class health care to every person, every time. Each year, Wellstar thoughtfully reinvests in the creation of healthier communities through prevention and wellness programs and charity care for eligible patients.

APPENDIX B: NCRN LOGIC MODEL



PRIORITY POPULATIONS

Diverse racial/ethnic, rural, and/or socially vulnerable populations

OUTPUTS

- # and type of partners engaged
- # and types of PPs engaged
- # meetings held and participants
- # of and types of trainings conducted
- # and type of workforce trained and deployed
- # partners trained, types of training used
- # mobilization plans generated and used
- # strategic plans generated and used
- # funders, amount of funding generated
- Amount of funding distributed to partners
- Partner length of time in NCRN

- # of individuals, workforce, and partners accessing platform and other resources
- # of individuals linked to health and social services
- Types of services utilized

- # and type of culturally- and linguistically-appropriate resources developed and disseminated
- # of partners disseminating resources
- # of PPs reached by resources
- # of materials meeting CSAT threshold for cultural sensitivity and readability

- # and type of PPs identified
- # of individuals and partners completing surveys and other assessments
- # of health equity policies developed and advocated for by NCRN
- # of metrics identified, measured, and used to improve the NCRN
- # of partners reporting monthly metrics
- # of annual reports, manuscripts, briefs, etc. published

OUTCOMES

Short

- Network for sharing of health and social services related information and resources is **developed**
- Partners', workforces', and PPs' awareness of NCRN is **increased**
- PPs are **identified and engaged**
- A workforce is identified and engaged
- Voices and expertise of NCRN partners are **amplified**

Medium

- PPs are **reached** by culturally-appropriate public health messaging and those messages are **comprehended**
- Population-specific information gaps among PPs populations are **reduced**
- Awareness and adoption of public health practices is **increased** among PPs
- A workforce is trained and mobilized to support PPs
- Partners, CHWs, and PPS use of NCRN platform and resources is **increased**
- PPs are **linked to and receive** necessary health and social services
- Disparities in COVID-19 testing and vaccination among PPs are **decreased** in highly impacted areas

Long

- Partner capacity and infrastructure are **enhanced** to support response, recovery, and resilience for PPs
- Policies that address health equity are **increased**
- A sustainability strategy for a coordinated network has been **identified and implemented**
- NCRN focus and use beyond COVID-testing and vaccination related information is **increased**

IMPACT

A coordinated and sustainable network of partners using community-level data, and culturally and linguistically appropriate resources to reduce disparities

Context

- Individual, institutional, and systemic racism
- Longstanding disparities in health and in health care information access and outcomes among PPs
- Evolving and emerging COVID-19-related research, knowledge base, and federal, state, and local initiatives
- Political and social determinants of health needs
- Widespread misinformation and disinformation
- Fragmented and uncoordinated health care, public health, government, and other systems
- Disenfranchisement of PPs communities and CBOs
- Lack of sufficient health care and public health infrastructure, and health equity funding
- Historic and contemporary mistrust of health care systems and government

APPENDIX C: NCRN DISSEMINATION ACTIVITIES

PEER-REVIEWED ARTICLES

Matthews KA, Ullrich F, Gaglioti AH, Dugan S, Chen MS, Hall DM. Nonmetropolitan COVID- 19 Incidence and Mortality Rates Surpassed Metropolitan Rates Within the First 24 Weeks of the Pandemic Declaration: United States, March 1- October 18, 2020. J Rural Health. 2021;37(2):272-27. [DOI:10.1111/jrh.12555](https://doi.org/10.1111/jrh.12555)

Baltrus PT, Douglas M, Li C, Caplan LS, Blount M, Mack D, Gaglioti AH. 2021. Percentage of Black Population and Primary Care Shortage Areas Associated with Higher COVID-19 Case and Death Rates in Georgia Counties. Southern Medical Journal, 114(2), p.57. [DOI: 10.14423/SMJ.0000000000001212](https://doi.org/10.14423/SMJ.0000000000001212)

Mack DH, Hughes C, Douglas M, Gaglioti A. Disaster Preparedness and Equitable Care during Pandemics, Journal of the National Medical Association, 2020, ISSN0027-9684, <https://doi.org/10.1016/j.jnma.2020.09.149>.

Henry Akintobi T, Jacobs T, Sabbs D, Holden K, Braithwaite R, Johnson LN, et al. Community Engagement of African Americans in the Era of COVID-19: Considerations, Challenges, Implications, and Recommendations for Public Health. Prev Chronic Dis 2020;17:200255. <https://pubmed.ncbi.nlm.nih.gov/32790605/>

Gaglioti AH, Li C, Douglas MD, Baltrus PT, Blount MA, Zahidi R, Caplan LS, Willock RJ, Fasuyi OB, Mack DH. 2021. Population-Level Disparities in COVID-19: Measuring the Independent Association of the Proportion of Black Population on COVID-19 Cases and Deaths in US Counties. Journal of Public Health Management and Practice, 27(3), pp.268-277. [DOI: 10.1097/PHH.0000000000001354](https://doi.org/10.1097/PHH.0000000000001354)

Douglas MD, Respress E, Gaglioti AH, Li C, Blount MA, Hopkins J, Baltrus PT, Willock RJ, Caplan LS, Dawes DE, Mack D. Variation in Reporting of the Race and Ethnicity of COVID-19 Cases and Deaths Across US States: April 12, 2020, and November 9, 2020. American Journal of Public Health. 2021 Apr(0):e1-8. [10.1016/j.pmedr.2021.101588](https://doi.org/10.1016/j.pmedr.2021.101588)

2021 AMERICAN PUBLIC HEALTH ASSOCIATION SESSIONS

Title: [3138.0: Engaging a strategic network of partners for coordinated COVID-19 communications & dissemination](#)

Author(s): Brittany Bethea, Rhonda Conerly Holliday, Anne Gaglioti, Tabia H Akintobi, Bria Carmichael, Lissette Badillo, Lora Wills, Rabab Zahidi, Dominic Mack

Title: [3138.0: COVID-19 testing and vaccination: Insights from African American and Hispanic audiences of the national COVID-19 resiliency network communication program](#)

Author(s): Andrea Torres, Memi Miscally, Vickie Gogo, Rhonda Conerly Holliday, Brittany Bethea

Title: [3138.0: Persona-building a user-centered approach to understanding priority populations: Experiences from the national COVID-19 resilience network's application of community-based prevention marketing](#)

Author(s): Mahmooda Khaliq, Angela Makris, Claudia Parvanta, Brittany Bethea

REPORTS

Title: [An Environmental Scan to Inform Community Health Worker Strategies in the Morehouse National COVID-19 Resiliency Network](#)

Author(s): Jane Berry, Aurora GrantWingate, Denise Octavia Smith, Bernadine Mavhungu (contributor)

Title: [Environmental Scan for Priority Areas in the National COVID-19 Resiliency Network \(NCRN\): Mitigating the Impact of COVID-19 on Vulnerable Populations](#)

Author(s): Rabab Zahidi, Anne Gaglioti

Title: [African American and Hispanic/Latinx Focus Group Insights](#)

Author(s): Vickie Gogo, Andrea Torres, Memi Miscally

Title: [COVID-19 Messages and Materials Audit](#)

Author(s): Memi Miscally, Andrea Torres, Mariana Eberle-Blaylock, Anna Taylor, VicKie Gogo, Shalaya Crummie, Katherine Dent, Cameron Hays, Bethany Tenant, PhD

Title: [Community Based Prevention Marketing Training and Technical Assistance Summary Report](#)

Author(s): Mahmooda Khaliq Pasha, Angela Makris

Title: [A Literature Review to Support Communication to Priority Populations: Hispanic/Latino/Latinx, Hispanic Food Processing Employees, and Alaska Natives/American Indians](#)

Author(s): Disha Jain, Virginia Liddell, MPH, April Ingram, Rahel Zemen, Claudia Parvanta, Angela Makris, Marlene Joannie Bewa, Samantha Boddupalli, Mahmooda Khaliq Pasha

Title: [Content Analysis of COVID-19 News Stories](#)

Author(s): Vickie Gogo, Andrea Torres, Memi Miscally

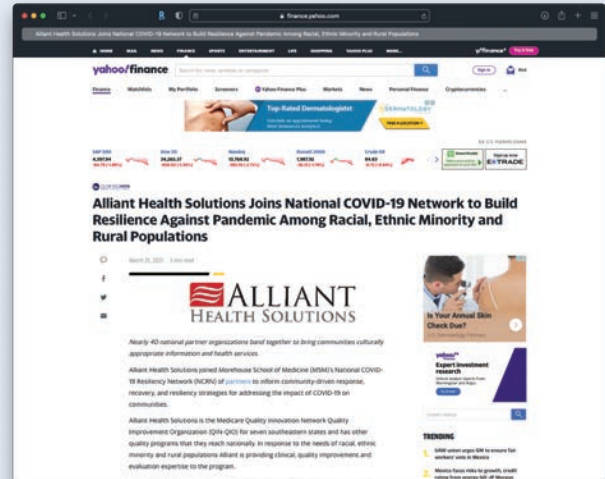
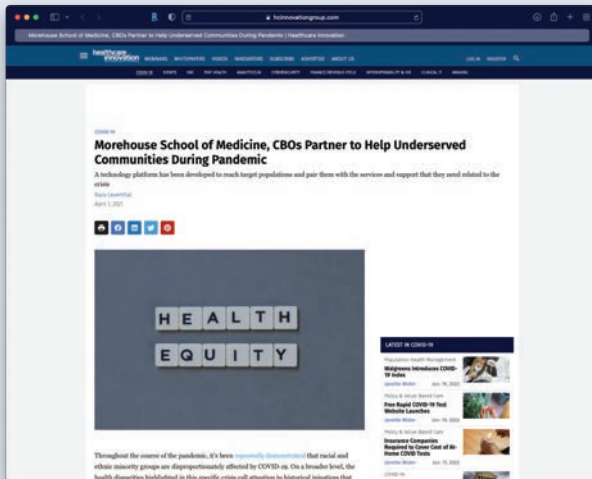
WHITE PAPERS

Title: [County-Level Proportion of Non-Hispanic Black Population is Associated with Increased County Confirmed COVID-19 Case Rates After Accounting for Poverty, Insurance Status, and Population Density](#)

Author(s): Gaglioti A, Douglas M, Li C, Baltrus P, Blount M, and Mack D, 2020. County-Level Proportion of Non-Hispanic Black Population is Associated with Increased County Confirmed COVID-19 Case Rates After Accounting for Poverty, Insurance Status, and Population Density. White Paper-Morehouse School of Medicine.

APPENDIX D. NEWS MEDIA STORIES

The Morehouse School of Medicine National COVID-19 Resiliency Network was featured in various national, regional, and local media news coverage between July 1-2020 - June 30, 2021.



MAY 26, 2021

National Reach Coalition

<https://reachcoalition.org/national-reach-coalition-partners-with-morehouse-school-of-medicines-national-covid-19-resiliency-network/>

APRIL 19, 2021

Salesforce

The Transformative Power of Community

<https://www.salesforce.com/news/stories/the-transformative-power-of-community/>

APRIL 16, 2021

Degrees

The Full Picture: Accurately Framing COVID-19 Vaccine "Hesitancy" among Black Americans

<https://degrees.fhi360.org/2021/04/the-full-picture-accurately-framing-covid-19-vaccine-hesitancy-among-black-americans/>

APRIL 1, 2021

Healthcare Innovation

Morehouse School of Medicine, CBOs Partner to Help Underserved Communities During Pandemic

<https://www.hcinnovationgroup.com/covid-19/article/21216892/morehouse-school-of-medicine-cbos-partner-to-help-underserved-communities-during-pandemic>

MARCH 29, 2021

El Paso Herald

UTEP joins national COVID-19 Network to help food production, distribution workers

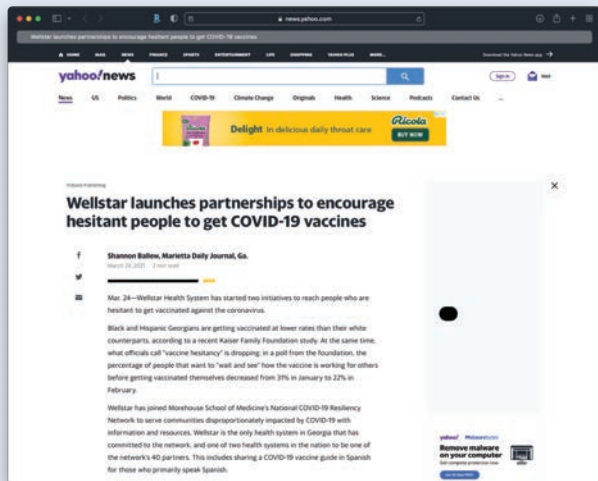
<https://elpasoheraldpost.com/utep-joins-national-covid-19-network-to-help-food-production-distribution-workers/>

MARCH 25, 2021

Yahoo News

Alliant Health Solutions Joins National COVID-19 Network to Build Resilience Against Pandemic Among Racial, Ethnic Minority and Rural Populations

<https://finance.yahoo.com/news/alliant-health-solutions-joins-national-123300522.html?guccounter=1>



MARCH 24, 2021

Center for Victims of Torture

<https://www.cvt.org/news-events/press-releases/center-victims-torture-joins-national-covid-19-network-build-resilience>

MARCH 21, 2021

Yahoo News

Wellstar Launches Partnerships to Encourage Hesitant People to Get COVID-19 Vaccines

<https://news.yahoo.com/wellstar-launches-partnerships-encourage-hesitant-224400481.html>

MARCH 2, 2021

Salesforce

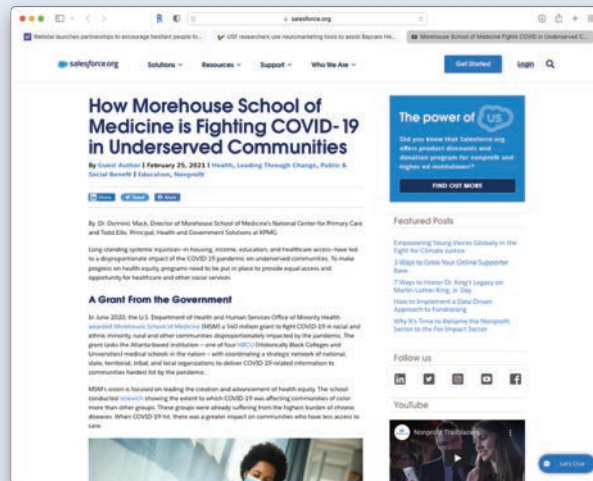
4 Ways to Support Historically Black Colleges and Universities

<https://www.salesforce.org/blog/four-ways-to-support-hbcus/>

MARCH 2, 2021

University of South Florida News

<https://www.usf.edu/news/2021/usf-researchers-use-neuromarketing-tools-to-assess-impact-of-covid19-messaging.aspx>



FEBRUARY 25, 2021

Salesforce

How Morehouse School of Medicine is Fighting COVID-19 in Underserved Communities

<https://www.salesforce.org/blog/morehouse-school-of-medicine-covid-underserved-communities/>

FEBRUARY 17, 2021

National Library of Medicine

<https://news.nlm.gov/bhic/2021/02/national-covid-19-resiliency-network-partners/>

FEBRUARY 12, 2021

Westside Future Fund News

<https://www.westsidefuturefund.org/news/morehouse-school-of-medicines-national-covid-19-resiliency-network/>



FEBRUARY 8, 2021

Kaiser Health News

Community Health Workers, Often Overlooked, Bring Trust to the Pandemic Fight

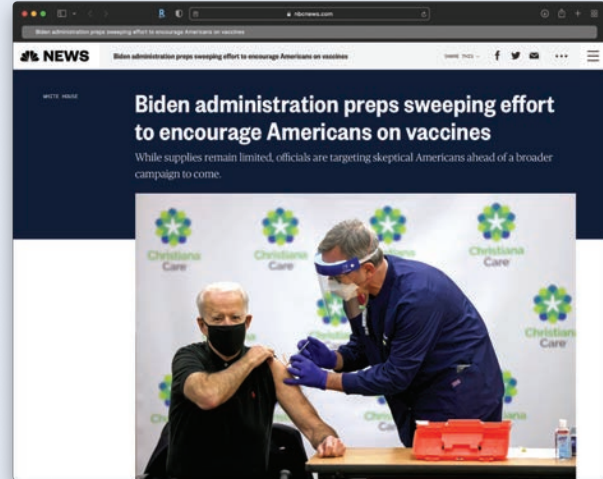
<https://khn.org/news/article/community-health-workers-often-overlooked-bring-trust-to-the-pandemic-fight/>

FEBRUARY 6, 2021

NBC News

Biden administration preps sweeping effort to encourage Americans on vaccines

<https://www.nbcnews.com/politics/white-house/biden-administration-preps-sweeping-effort-encourage-americans-vaccines-n1256924>



JANUARY 28, 2021

Thrive Global

How KPMG Is Moving the Needle for Diversity, Inclusion and Well-Being at Work — and Beyond

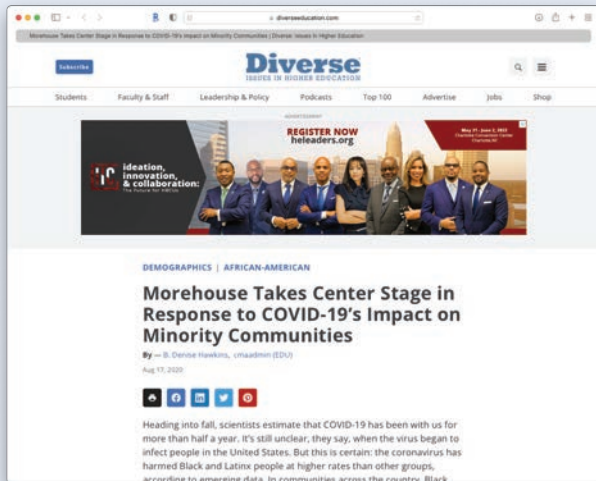
<https://thriveglobal.com/stories/todd-ellis-kpmg-diversity-equity-inclusion-mental-health-healthcare-morehouse/>

NOVEMBER 18, 2020

Forbes

Next Avenue's 2020 'Influencers In Aging' Fight Covid-19, Loneliness And Ageism

<https://www.forbes.com/sites/nextavenue/2020/11/18/next-avenues-2020-influencers-in-aging-fight-covid-19-loneliness-and-ageism/?sh=4750ef492cef>



AUGUST 17, 2020

Diverse Issues in Higher Education

Morehouse Takes Center State in Response tto COVID-19's Impact on Minority Communities.

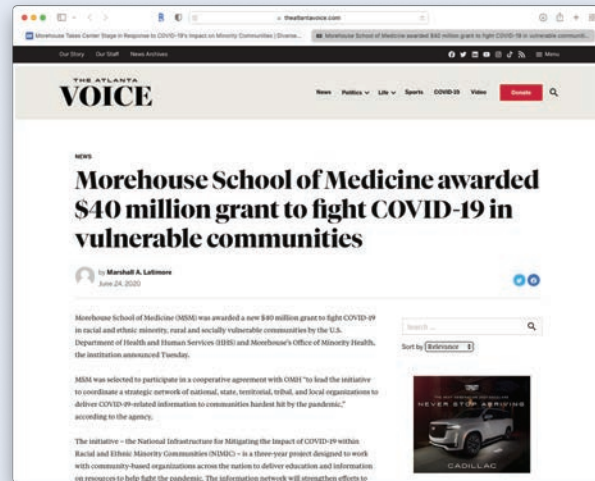
<https://www.diverseeducation.com/demographics/african-american/article/15107485/morehouse-takes-center-stage-in-response-to-covid-19s-impact-on-minority-communities>

JUNE 24, 2020

Atlanta VOICE

Morehouse School of Medicine awarded \$40 million grant to fight COVID-19 in vulnerable communities

<https://theatlantavoice.com/morehouse-school-of-medicine-awarded-40-million-grant-to-fight-covid-19-in-vulnerable-communities/>



JULY 21, 2020

U.S. Senate

Senators Collins, Casey Lead Hearing on COVID-19's Disparate Health Impacts on Seniors from Racial and Ethnic Minority Communities

<https://www.aging.senate.gov/press-releases/senators-collins-casey-lead-hearing-on-covid-19s-disparate-health-impacts-on-seniors-from-racial-and-ethnic-minority-communities>

CONTACT US:

For more information about the National COVID-19 Resiliency Network,
please visit: www.covid-resources.org or www.msm.edu/ncrn.

Email: ncrn@msm.edu

Phone: 1-877-904-5097

SOCIAL MEDIA:



@NationalCOVID19Network



@covid19_resiliencynetwork



@COVID_19Network



National COVID-19
resiliency Network

FUNDING STATEMENT:

This work was supported in whole by a \$40 million award from the U.S. Department of Health & Human Services Office of Minority Health as part of the National Infrastructure for Mitigating the Impact of COVID-19 within Racial and Ethnic Minority Communities (NIMIC) designed to work with community-based organizations across the nation to deliver education and information on resources to help fight the pandemic [Grant # 1 CPIMP201187-01-00].

SPECIAL THANK YOU

We would like to thank our partners and external evaluator
[NORC at the University of Chicago](#) for their support in
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