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Creating Rural Community Outreach Materials related to COVID-19 and Disability

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Research & Training Center
on Disability in Rural Communities

Rural Practice Guidelines

CREATING RURAL COMMUNITY OUTREACH MATERIALS RELATED TO COVID-19 AND DISABILITY

June 2022

BACKGROUND

In general, rural people experience higher rates of disability and higher rates of health-related conditions such as diabetes, heart disease, and obesity relative to urban people.(1) Unfortunately, these conditions place them at greater risk of COVID-19 related complications and death.(2) Rural outcomes are further compounded by long distances to emergency care, limited transportation, and lower per capita rates of ICU beds.(3,4) Simultaneously, COVID-19 vaccination rates are lower in rural communities relative to urban. Reasons for lower vaccination rates are varied, but include hesitancy about side-effects from the vaccine, lack of trust in public health information sources, and resistance to government authority.(5)



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AUCD VACCINATION HUBS

In 2021, the Association of University Centers on Disability (AUCD) funded several regional vaccination hubs throughout the U.S. Each hub has a slightly different emphasis, but all were organized to support vaccination outreach to the disability community and provide resources across the AUCD disability network. The Rural Institute for Inclusive Communities (RIIC) serves as the regional hub for Region VIII, which includes Montana, North Dakota, South Dakota, Wyoming, Colorado, and Utah. The primary goal of this hub is to facilitate locally relevant outreach about COVID-19 and vaccination to people with disabilities living in rural areas, their friends, family, and caregivers.

RURAL DISABILITY STAKEHOLDER GROUP

To guide recommendations for rural outreach, we held a series of rural disability stakeholder meetings. Stakeholders shared experiences of talking with local constituents about COVID-19 and provided suggestions for developing and sharing information about COVID-19. Specifically, we wanted to know how to tailor information in a way that was understandable, useful, and would be best-received. The following recommendations are based on these meetings and feedback from disability representatives across Montana, South Dakota, Wyoming, Colorado, and Utah.

STAKEHOLDER RECOMMENDATIONS

To gain stakeholder recommendations, our hub team worked with rural disability leaders across our region to assess barriers to vaccination and overall vaccine hesitancy, and review existing informational materials that were developed to promote vaccination confidence. We identified several types of outreach materials that were tailored either for people with disabilities or for rural communities, but also identified a gap in information that addressed COVID-19 from both a disability and a rural context. Based on this information, rural disability leaders provided recommendations for developing outreach materials in four overarching areas including messaging, personal choice and control, universal public health guidance, and local voices and values. For each area, we provide an example of how information might be modified or improved for rural constituents.

1. MESSAGING

Use plain language that is brief and to the point. Include specific actions that can make a difference and include information about how to act. For instance, if you highlight the advantages of getting vaccinated also include information about how to sign up for a shot and where to go.

- **Existing:** COVID-19 spreads when an infected person breathes out droplets and very small particles that contain the virus. These droplets and particles can be breathed in by other people or land on their eyes, nose, or mouth.
- **Tailored:** If someone is sick with COVID-19, they spread germs into the air when they sneeze, cough, or talk. Germs in the air get into your body through your mouth, nose, and eyes. Wearing a mask, covering your mouth, and washing your hands are ways to reduce the spread of germs.

2. PERSONAL CHOICE AND CONTROL

Avoid telling people what to do. Inform them so they can make a choice. Also, try to avoid “absolute” statements because science and health are rarely absolute. There will always be exceptions and these exceptions can undermine trust in messaging.

- **Existing:** It is your public responsibility to get a COVID-19 vaccine. Concerns about the vaccine are based on misinformation. The vaccines are a safe and effective means of controlling the spread of COVID-19.
- **Tailored:** When deciding whether to get the COVID-19 vaccine, please consider others in your community. Some people get sick more easily and vaccines can help keep us healthy. The vaccines are safe, effective, and can help keep more people from getting sick.

3. UNIVERSAL PUBLIC HEALTH GUIDANCE AND PRACTICES

Normalize health behaviors, reduce emphasis on COVID-19, and be positive. Public health practices such as hand washing, social distancing, masking, and vaccination are appropriate for all sorts of diseases and infections, particularly if you have a disability or pre-existing health issues. Emphasize the benefits of a healthy community including reduced cold/flu season and highlight indirect impacts of COVID-19 such as labor shortages, supply-chain disruptions, and cancelled events. Provide positive images of health behaviors, such as a patient laughing with a nurse rather than a large picture of a needle.

- **Existing:** To help protect yourself and others, you should get vaccinated and stay up to date on your COVID-19 vaccines. You should wear a mask if you are in an area with a high COVID-19 Community Level. You should wash your hands for at least 20 seconds after being in a public place to prevent the spread of COVID-19.
- **Tailored:** Activities like handwashing, getting vaccines, and staying home when you are sick help prevent the spread of all kinds of diseases. If you are going out or getting together as a group, think about how to keep everyone safe.

4. LOCAL VOICES AND VALUES

Build on community values and events. Many rural people are wary of government oversight and distrusting of resources coming from outsiders. Avoid using the term “government” or highlighting references and logos from federal or global agencies.

- **Existing:** CDC guidance states that everyone 5 years and older is recommended to stay up to date with their COVID-19 vaccines. Search [vaccines.gov](https://www.cdc.gov/vaccines/imz/downloads/#vaccine-locations), text your zip code to 438829, or call 1-800-232-0233 to find COVID-19 vaccine locations near you.
- **Tailored:** Once you have gotten your COVID-19 vaccine, it is best to stay up to date with a booster. Talk with your doctor or health department about when you should get a booster and where they are available in your community.

Outreach materials should reflect local values and context, including pictures of local people and landscapes.

- **Existing:** Picture of multiethnic group of friends in an urban setting with a message encouraging people to get vaccinated, wear a mask, and watch their distance.
- **Tailored:** Picture of an individual who is representative of the community, explaining why they think an issue is important to their family and town.

Because COVID-19 is viewed as a non-issue among many people in rural areas, COVID-19 focused events are unlikely to bring people together. Providing locally-focused information at existing community events, such as fairs, meetings, or church functions provides an opportunity for education and outreach.

- **Existing:** The health department is hosting a COVID Seminar this Friday at 6:00 p.m. Public comment is welcome at the event regarding vaccines, mask regulations, and upcoming in-person community events.
- **Tailored:** The health department will be holding a town hall meeting this weekend to discuss food, nutrition, and healthy living. All residents are welcome to attend and learn about healthy eating habits, exercise, and how to improve our overall community health.

A checklist of these recommendations is included on **page 6**. Use this as a stand-alone resource to gauge how your materials align with these recommendations for rural outreach.

TO LEARN MORE ABOUT THE RIIC COVID-19 VACCINATION HUB CONTACT:

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RESOURCE LIBRARY

The Research and Training Center on Disability in Rural Communities (RTC:Rural) has developed a COVID-19 Resource Library specifically for rural communities. The materials have been curated for the unique challenges and opportunities in rural areas and have been vetted by our rural stakeholder advisory group for this purpose. These guidelines were used to create community-informed educational resources about COVID-19 and are available for free at <https://www.umn.edu/rural-institute/rtc/covid-19-hub.php>. We recognize that COVID is an ongoing pandemic and that the best available evidence changes over time. Some of these materials will be updated as time and resources allow.

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COVID-19 RURAL OUTREACH CHECKLIST

Use the following checklist to gauge how your materials align with these recommendations for rural outreach.

MESSAGING

- Plain and simple language
- No technical jargon
- Actionable steps with information about how to accomplish them

PERSONAL CHOICE AND CONTROL

- Nonjudgmental
- Validates concerns and emotions
- Informative rather than directive (does not tell people what to do)
- Avoids “absolute” statements

UNIVERSAL PUBLIC HEALTH GUIDANCE

- Emphasizes the universal nature of public health practices
- Emphasizes benefits of healthy communities
- Provides positive images and interactions, rather than scary, depressing, or scientific images

LOCAL VALUES AND VOICES

- Includes linkages to the local community such as images of recognizable people and locations
- De-emphasizes government resources, logos, or references
- Builds on local opportunities for engagement

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