

# A Communication Framework for Building the Pandemic Response Capacity of Communities Disproportionately Impacted by COVID-19

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## ABSTRACT

Beginning in July 2020, the Centers for Disease Control and Prevention (CDC), Office of Minority Health and Health Equity (OMHHE; now known as the Office of Health Equity [OHE]) funded three organizations to build the capacity of community-based organizations (CBOs) serving African American/non-Hispanic Black (AA/B), Asian American and Native Hawaiian/Pacific Islander (AA/NHPI), and Hispanic or Latino (H/L) communities to respond to COVID-19 and future health issues. The three recipients included the Asian and Pacific Islander American Health Forum (APIAHF), CDC Foundation, and PROCEED, Inc.'s National Center for Training, Support, and Technical Assistance (NCTSTA). From September 2020 – September 2022, CDC OMHHE contracted with Oak Ridge Associated Universities (ORAU) to support the capacity-building assistance related to community-informed and evidence-based pandemic communication. This poster summarizes: 1) the project's theory of change, 2) the Communication Capacity-Building Activities (CBA) Framework, 3) the impact of the framework, and 4) lessons learned for federal agencies to consider when supporting future grant recipients to advance health equity.

## PROJECT THEORY OF CHANGE AND FRAMEWORK

The CDC COVID-19 Response Health Equity Strategy Guiding Principles were at the core of the capacity-building approach, including **data-driven approaches, community engagement, and culturally-responsive outreach**. The project's theory of change suggested that increased partner capacities to run community-driven COVID-19 interventions reduce barriers and increase community practices to prevent COVID-19, reduce COVID-19 incidence and disparities, and advance health equity (see Figure 1).

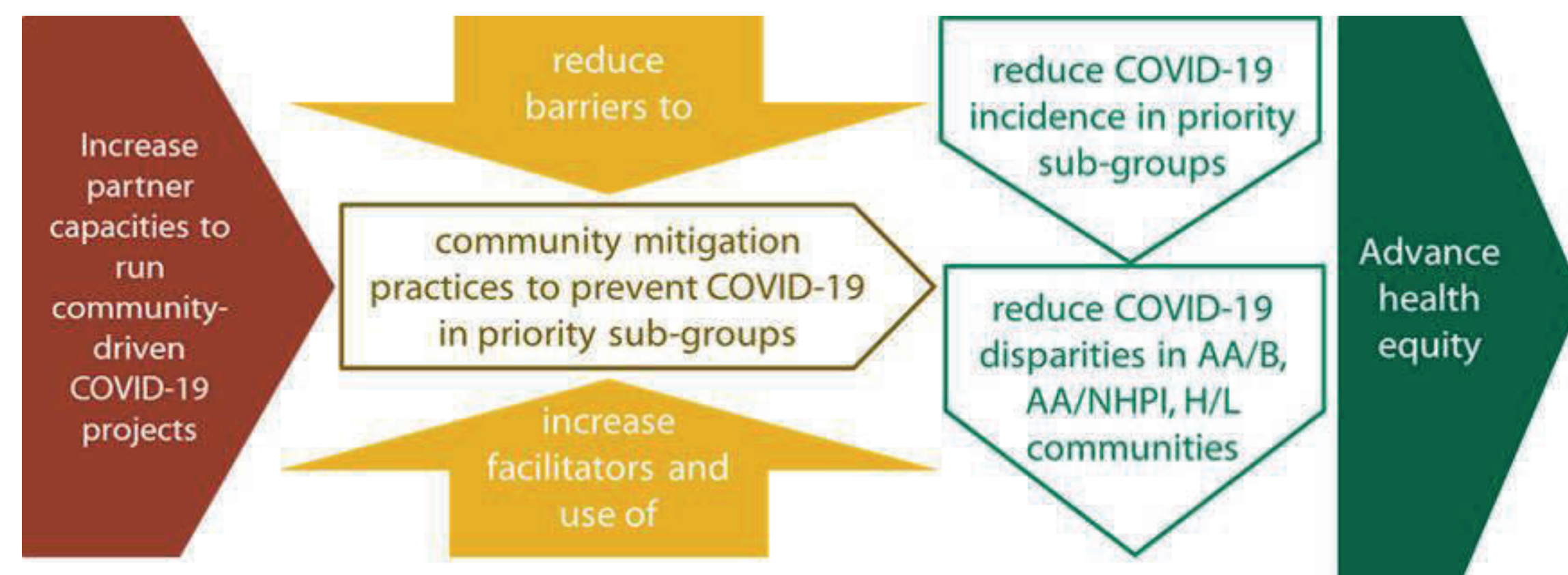


Figure 1 - The project's theory of change for advancing health equity.

ORAU developed the **Communication Capacity-Building Activities (CBA) Framework** to identify the essential CBA for community-informed, evidence-based and culturally-responsive communications (see Figure 2). ORAU CBA included:

- 1) Delivering webinars about the Communication CBA Framework;
- 2) Reviewing COVID-19 and CBA materials for partners and recipients to assure clear and accurate messaging;
- 3) Sharing resources with communication best practices and current COVID-19 guidance; and
- 4) Attending regular meetings to support the development of culturally-responsive messages and communication plans.

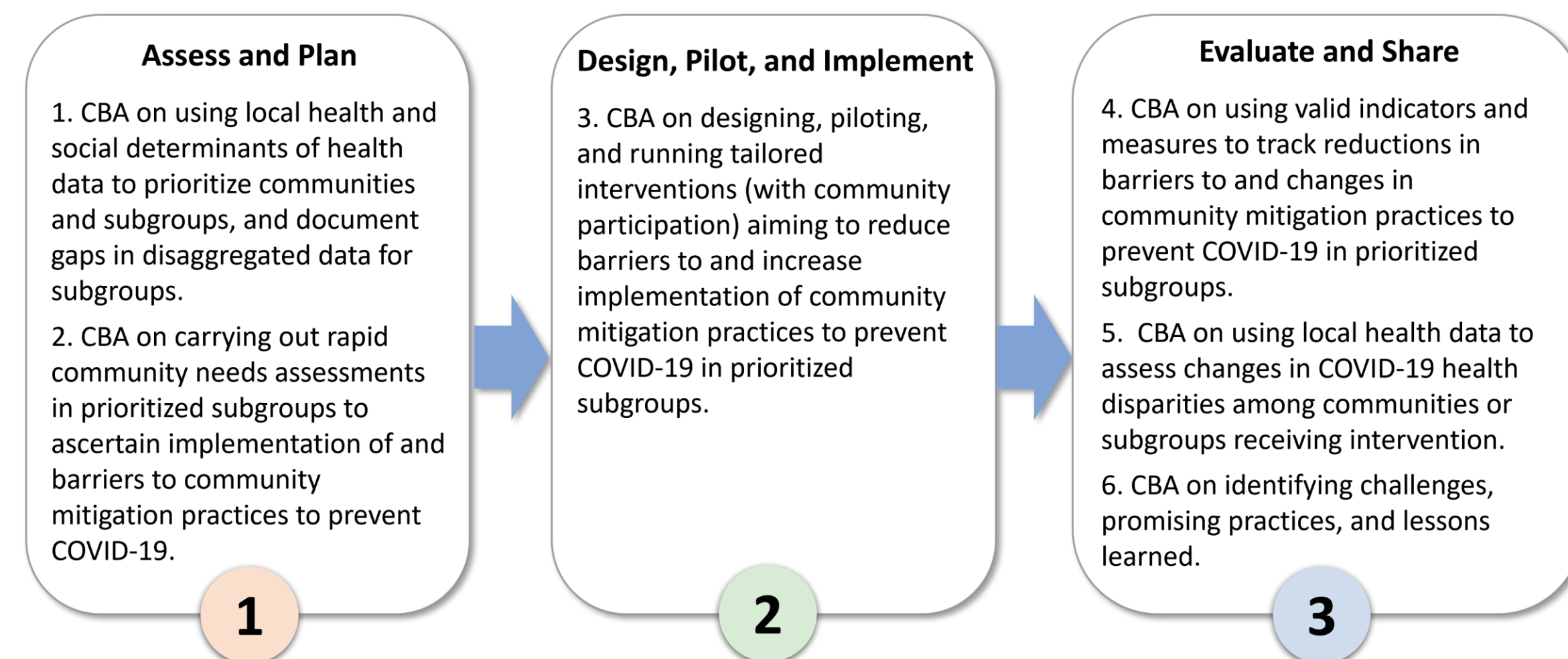


Figure 2 - According to the Communication CBA Framework, recipients would assist their CBO partners with 1) assessing community needs related to the pandemic, 2) implementing and disseminating evidence-based strategies to address those needs using trusted networks, and 3) evaluating and sharing challenges, promising practices, and lessons learned from those activities.

## IMPACT

- Recipients and their CBO partners established three sustainable and trusted coalitions serving disproportionately impacted communities of the COVID-19 pandemic.
- Recipients reported increased CBO knowledge about community concerns and using data to inform their pandemic response; greater confidence in creating community-informed materials; new hires, service areas, and funding opportunities; and expanded partnerships and community health worker networks.
- Communication CBA informed over 400 accurate, timely, culturally appropriate, and easy-to-understand products and events in nearly 30 languages that aimed to increase COVID-19 mitigation strategies.

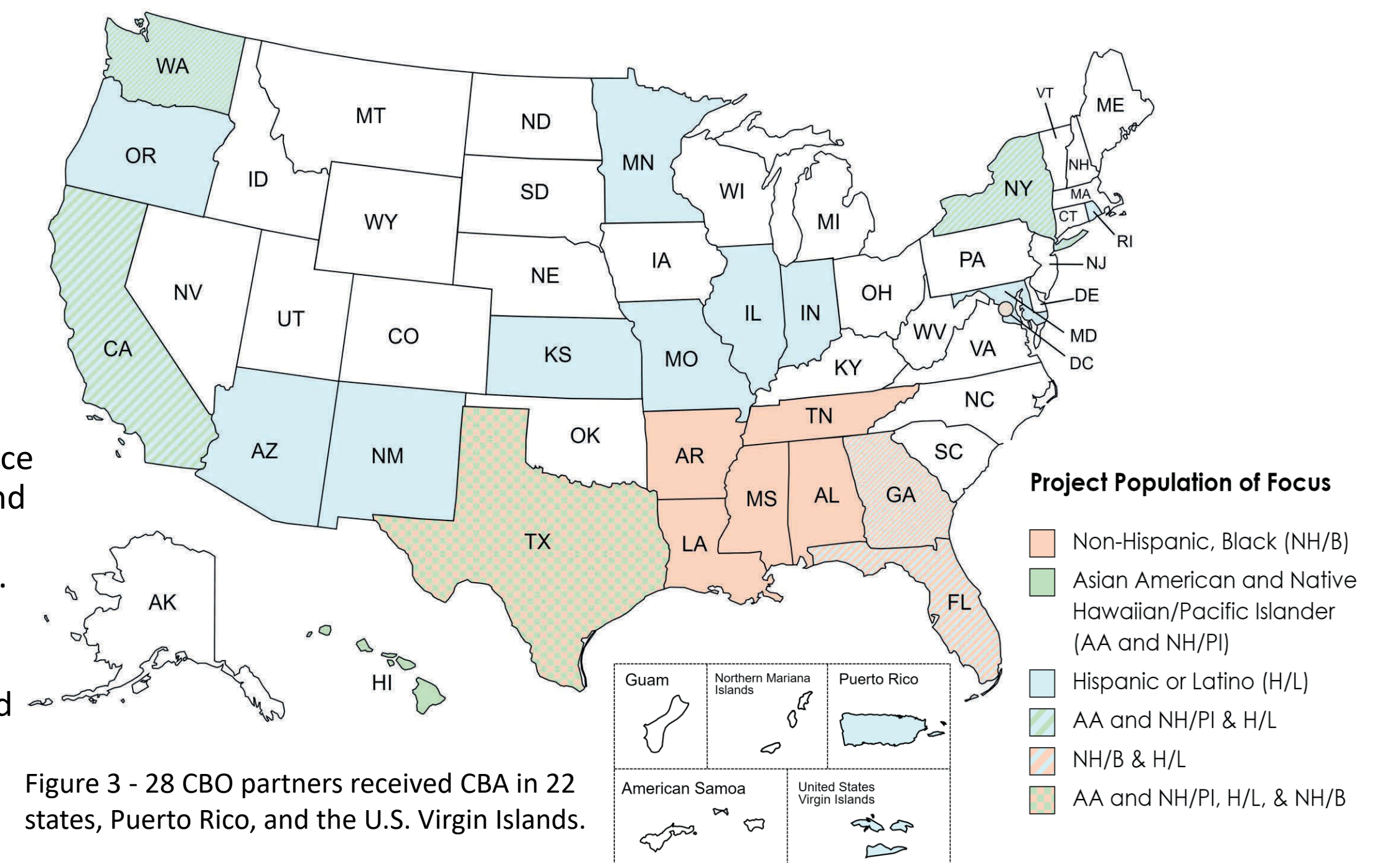


Figure 3 - 28 CBO partners received CBA in 22 states, Puerto Rico, and the U.S. Virgin Islands.

## LESSONS LEARNED

- Preliminary results from the OMHHE COVID-19 Supplemental Award suggest the Communication CBA Framework is a best practice to replicate with future projects that aim to build local capacity and advance health equity. The award has provided the leadership, infrastructure, and a model that has proven useful to partners in other responses, such as monkeypox.
- Communication lessons learned reported by recipients emphasized the importance of:
  - 1) Tapping trusted community-based organizations and leaders to address government distrust;
  - 2) Using plain and in-language messaging to reduce confusion; and
  - 3) Combining "low tech, boots-on-the-ground" approaches, such as training of local community members as community health workers to disseminate messages with "high tech" social media campaigns (for younger generations) or more traditional media campaigns, such as radio and billboards (for older generations).
- Lessons learned from the Communication CBA Framework can be applied when supporting future grant recipients to advance health equity. Lessons learned emphasized the importance of:
  - 1) Tailoring communication CBA to partner needs due to diverse knowledge, backgrounds, and capacities;
  - 2) Using one-on-one sessions to listen and respond to the changing barriers to and facilitators of project work;
  - 3) Providing clear guidance, templates, and tools that empower partners to replicate those processes in their own communities;
  - 4) Being present at partner events to build a network of support that can boost morale during challenging times; and
  - 5) Facilitating partner collaborations to share challenges and lessons learned, as well as brainstorm solutions together.

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