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On a sunny summer day, in a rural stretch in Nash County, North Carolina, a community health fair is in full effect. It is 2021, a year into the Coronavirus pandemic, public health and social services in the United States are stretched so thin they threaten to break.

Nash is reminiscent of disadvantaged areas across the country. It is high in poverty. COVID has disproportionately impacted the community. Its population of just over 50,000 suffered significant losses due to COVID in the past year and a half. Conventional social service resources don’t often reach these regions.

After lockdowns, loss of life, protests, economic downturns, mental health crises, trauma, anxiety, and pain, the vibe in the air today is celebratory. It feels more like a community gathering or a family reunion than a “health fair” might imply. The grill is going. BBQ scents hang in the air. A soundtrack sizzle of meat cooking in the smoker. Music plays. Folks are just happy to be outdoors enjoying company with one another in the spirit of camaraderie and connection.

Nationwide, systemic racial inequities, poverty, and mental and physical illness are brought into stark relief by COVID. Vastly different rates of COVID cases, vaccinations, and health and life outcomes emerged in communities of color. Federal and state governments are not adequately aligned to bring comfort to those hardest hit. As a result, the pandemic is deepening inequities even further. COVID revealed—and worsened—persistent racial, ethnic, and socioeconomic health inequities among Black, Native-American, Latinx, Asian-American/Pacific-Islander, immigrant/migrant, and low-income older adult populations.

“As an organization that focuses on intergenerational well-being and equity, one of the things we do is think about what creates intergenerational wealth and equity—and what happens when the conditions aren’t there.” Somava Saha, Founder and Executive Lead of Well-being and Equity (WE) in the World, who co-created Communities RISE Together (RISE) in direct response to these challenges, explains.

“We live in a system that is set up, structurally so that some people don’t get access to the vital conditions we all need to thrive. When you look at maps of social vulnerability based on historical inequities—the structures, systems, and legacies that reinforce inequity—overlaid with the response to COVID and resources to support that response, resources went disproportionately to communities that were already better off. Knowing these communities
were the same communities and people that were losing jobs, hours, income, and opportunities, you would expect relief resources would be concentrated there, but they weren’t.”

For these marginalized communities dealt the most significant blows by COVID, the issue is further compounded paradoxically by resistance to the vaccine, arising from a lack of trust in a system that has abused, experimented on, or failed them over history.

RISE (Reach, Immunizations, System Change for Equity) is an alliance of partners connecting 2,400+ organizations in 294 communities across the country designed to meet these complex, interconnected needs. The health fair in Nash is hosted by several RISE agencies coming together, including Conetoe Family Life Center, a faith-based organization established in 2007, working with youth to increase access to healthy foods, physical activity, health services, and jobs while shifting the food ecosystem to be more equitable for minority farmers. During the pandemic, they pivoted from community-supported agriculture, youth development, and healthy living programs to facilitate honest, vaccine-focused dialogue to address and process concerns, share health information, and provide options through 28 health fairs held throughout the year.

They are hosting this event in partnership with Shackle Free, a fellow community-based organization in Eastern North Carolina working “to promote self-reliance and to address all barriers that hinder the holistic well-being (mind, body, spirit) of individuals and families” which is connecting people with vaccinations and their basic needs for their life and health through NC360. They are joined by Action North Carolina, which seeks to win greater racial, gender, and economic justice through popular education, grassroots organizing and mobilization, leadership development, and increased voter participation which is helping attendees of the fair connect with tenant rights together with the Center for Popular Democracy.

**Trust-Building With Boots-On-The-Ground**

At the event in Nash that day, amidst the chatter of conversation, music, dance, and plates piled high with fresh produce and picnic fare, Jessica Joyner, Farm Manager with Conetoe Family Life Center, was on hand for the festivities. An attendee, a local farmer, sidled up to her and, in a cautious yet confident, matter-of-fact tone, declared: “I don’t believe in COVID.”

The farmer was not alone among those RISE is working to reach. Information, as with other resources, often suffers from inequities in the same way as healthy food options, clean drinking water, clean air, and economic opportunities are inequitably accessible to different communities. Rural Eastern North Carolina is a news desert. While some may have been less extreme in their reactions—suspicious of the vaccine itself rather than the pandemic as a whole—the origins of these beliefs fundamentally stem from the same sources. A lack of access to reliable information, an understandable, historically validated, and painfully deserved distrust of government institutions, and a lack of resources.

RISE forged a long-term strategy to overcome these factors and create a sustainable approach. They connected and co-created solutions with credible messengers and nontraditional providers that were reputable in the community. Focused on trust, civic capacity, and transforming systems in the most disenfranchised areas, RISE was assembled from ten partners—the Center for Popular Democracy, Chromatic Black, Hawaii Public Health Institute, Latino Health Access, Meals on Wheels America, Migrant Clinicians Network, National Councils on Aging, National Indian Health Board, Public Health Institute/CACHE, US Aging, Well-being and Equity (WE) in the World and the WIN Network—who joined together in recruiting community members from 200+ communities in 29 states with trust and boots-on-the-ground. They held listening sessions to understand urgent needs and the creative, asset-based strategies local community groups provided.
“We spent hours in conversation exploring programs embedded in the community, already delivering health services in unique and interesting ways, often with no budget or formal resources, but who held the love and trust of the people,” Saha explains.

This included leveraging alternative outlets for health communication to deliver accurate information that cuts through the noise and confusion around vaccines like the health fairs in Nash or health kiosks placed in beauty salons, spas, tattoo parlors, and barbershops in nearby Duplin County, North Carolina.

Shackle Free Community Outreach Agency trained 57 certified Community Health Ambassadors from barbershops to provide information and resources on cancer, diabetes, hypertension, domestic violence, homelessness, housing—and most recently, COVID. The beauty salons and barbershops serve as informal community centers where information and stories are already exchanged. The kiosks add an extra dimension to the outlet, the certification, and a degree of formality.

Migrant workers, isolated in often-overlooked, rural regions of America working for ranchers who were sometimes resistant to getting the vaccine, found a trusted partner in the Migrant Clinicians Network, a force for health justice whose mission is to create solutions at the intersection of vulnerability, migration, and health. For example, knowing that migrant agricultural workers could not use phones and didn’t have internet in the fields—yet they listened to the radio as they worked—they created radio ads that pointed people to safe places to get vaccines, testing, and other support.

Activists in Orlando, Florida, partnered across Black and Brown communities to share resources and work in solidarity. Lawanna Gelzer of the Coalition of 100 Black Women led equity walks through her neighborhood to show politicians, media, and other interested parties the disparities block by block. Working in communities where they often received death threats for hosting vaccine clinics, the Coalition strategically used social media with partners within the faith community to reach those who were vaccine-hesitant or resistant with targeted messaging through trusted pastors and accompanying Facebook ads leading to thousands getting vaccinated.

Meals on Wheels Association of Oklahoma built relationships with community organizations through RISE and are changing mindsets toward the vaccine. They have begun having open conversations about mental health and the lack of equitable housing and have been able to better identify community members who need assistance through meals and transportation. Their work reached over 2,700 people in small communities in Oklahoma and allowed them to partner with medical facilities, transportation, faith groups, and more, helping them see what was possible in a very small community.

Legal Aid of the Bluegrass in Kentucky utilized their support from RISE to extend their jurisdiction, impacting areas that usually wouldn’t have received these services, like vaccine education, pharmacy partnerships for a vaccine clinic, and bringing their Legal Aid bus out to these rural communities that otherwise didn’t have easily accessible help for legal and social services. Most notably, they started a program to ensure when they went out into these communities, the person talking to them was of the same race or ethnicity, creating a stronger bond between community members and community organizations.

In some instances, legal aid staffers patiently, painstakingly listened to conspiracy-themed concerns about the vaccine to ensure clients felt heard and supported when presented with the facts.
RISE held regional matchmaking events where community-based providers, activists, organizers, and others found each other. They collaborated by listening to community members, working together to shift the narrative throughout marginalized communities. Through such conversations, Chromatic Black, for example, realized that they needed to focus on framing the discussion about vaccines around preserving Black love and community rather than illness and death. They were reserved about their feelings about the vaccine. American history is replete with healthcare abuses rendered against the Black community—not only through neglect but often perpetuating harm through experimentation. With more than four centuries of biomedical exploitation at the front of their minds, Chromatic Black did not want to simply endorse the vaccine without recognizing this broader context. They agreed to convene groups, hold space, host conversations, and listen to concerns, but they did not want to push anyone to get the shot.

RISE allowed them to expand how they use their story to reclaim their power, using their collective of artist-activists to tap into these local communities to find out what was happening and their perspective on the misinformation and disinformation around the vaccine. This is why the health fair in Nash felt like a backyard BBQ with a bouncy house instead of an educational event. It is why community leaders like Richard Joyner and Chiquitta Lesene listened and engaged rather than debating and lecturing. It is probably why the farmer felt comfortable being outspoken about his beliefs in public at an event to promote information about COVID.

"We learned the power of little old ladies in their communities who are so well respected they could gather 100 people together to share information or participate in a pop-up clinic." Angela Harmon, President, and Co-Founder of Chromatic Black espouses lessons from their approach. "Ladies who drove a bus into housing projects to get people to vaccine sites. We learned how to walk alongside people who see themselves as leaders and those who don’t, and how to use these stories to preserve cultural memory and understand what we should do differently next time."

**Lead With Trust, Back It Up with Data**

Hundreds of years of structural racism, classism, and segregation led to substantial disparities in outcomes in this pandemic for Black and brown communities, poor communities, and Native-American tribes. RISE used the CDC Social Vulnerability Index, which looks at these historic inequities and underlying community conditions, along with local COVID-19 burden, vaccine rates, and vaccine hesitancy rates among communities of color and older adult populations who are systemically underserved, to provide focus to outreach and community-building efforts. The confluence of these figures in a community gave direction on where to concentrate efforts.
For example, three partners—US Aging, National Councils on Aging, and Meals on Wheels America—who could reach low-income older adults worked together to reach as many counties as possible with older adult vaccination rates of 60% of the population or lower.

Funding from RISE brought a renaissance to the aging services network, bringing multiple aging services together all at once to think through and deploy their multifaceted services at the same time, creating a wave of change in the community that was really exciting. With the support from RISE, they were able to document that change through data and take that back to the organizations, and talk about the intersection between what NCOA does and what organizations like Meals on Wheels do, and how they can better work together to serve their community.

For NCOA, RISE meant a revolution for a lot of what they do, encouraging their network to extend themselves in different ways that might have been a little uncomfortable. Still, through partnership, collaboration, and support, they kept going.

“The on-the-ground folks were already doing work around vulnerabilities and loneliness, but the RISE work allowed them to reach new people and grow in their own approach, such as providing vaccinations, providing games with meals, creating new partnerships, etc.,” explains Xavier Vaughn with the National Council on Aging (NCOA), who believes every person deserves to age well and is on a path to improve the lives of 40 million older adults by 2030.

To help communities achieve this, RISE is committed to data equity and sovereignty. “We believe these are public funds whose first job is to help these communities meet their needs. Having trust with the community meant they were the first owners of their own data,” Saha explains. “We told communities, ‘This is data for your power, voice, and advocacy.’ They could then use the data to inform their agendas at public meetings, what services or options they had available to the community at vaccines clinics, and more.”

Data was collected as efforts moved through a community, tracking progress, indicating where a pivot was necessary, and demonstrating the lasting impact of achieving an equity-first approach to public health and vaccine response. Moreover, throughout these efforts, data sovereignty was maintained. “It was never an option just to harvest data from a community without giving back,” Saha explains. “We went in with the intent of decolonizing the data collection process. It is for the people. That is who it serves, so we worked to share it, transparently, without the community throughout the project.”

One of our biggest challenges was getting information from the communities we were trying to help. Chromatic Black experienced folks who were hesitant to fill out surveys until they learned they would not only get their data back but find out great information about their community that was previously unknown. They leaned into their storytelling expertise to remind the community participants that “the community serves you, but you can also serve the community.”

When Health Services & Resources Administration (HRSA) first reached out to request RISE’s help with required data collection, despite best intentions. These requests felt invasive and untrustworthy to communities of color, who didn’t have a great deal of trust in the government. Because of our work with community partners and our focus on data sovereignty, RISE was able to act as a trust broker, working with HRSA to create a different system where they still received the information. Still, RISE served as an intermediary that allowed us to maintain data safety and data sovereignty with the community members who participated, adding a layer of protection to the data and ensuring community members couldn’t be targeted. Our surveys led with the questions the community prioritizing every
person's right to maintain their sovereignty by not being required to answer sometimes
difficult or invasive questions.

"It's more than just sharing data. RISE is an example of putting the public back into public
health. About the public owning our own health, the well-being of our neighbors, and seeing
that as a civic activity that we collectively engaged in together to keep our neighbors and loved
ones safe and alive." Saha continued, "Public Health isn't about telling others what to do, but
about a coming together of community, of collective wisdom...that is the next frontier of public
health, and truly what RISE was able to show."

**Putting the Public Back in Public Health**

Funding from RISE provided partners with an opportunity to continue building trust, deepen
civic capacity, and transform systems across their own communities—something that would
have been impossible without their knowledge, relationships, and deep understanding of their
communities.

The Chromatic Black message of “unapologetic and hopeful” love of Blackness anchored their
vaccine argument on getting the vaccine for the “love of your community” rather than a health-
centric statement around illness and death had remarkable success. The National Indian
Health Board’s Acts of Love campaign mirrored the same message to indigenous communities.
RISE’s work has touched over 25 states, tribes, and territories and reached 44 million+ people by
engaging the community in civic capacity building, system change, and creating equitable
vaccination programs. By matching those who have earned trust within diverse communities
with people who are at risk due to physical and mental health conditions and other social and
economic factors such as food insecurity, fear of deportation, under-, and unemployment, or
inability to pay rent or mortgage, RISE and their partners are helping these underserved
communities have a better chance to thrive.

In year one of this initiative, using this approach, RISE has created 2066 jobs focused in
communities experiencing inequities, helped over 184,000 people receive their COVID-19
vaccines, and more than 215,000 people have been connected to basic needs, including food,
housing, access to healthcare, and more. Beyond these remarkable results, Saha believes these
investments throughout the RISE communities will have a lasting transformative effect. New
civic infrastructure is being built in resource-poor areas. Innovative solutions are becoming
formalized, like the Community Health Ambassadors and beautician/barber health kiosks.

These efforts are transforming communities—and the partners—for the better in the long run.
Chromatic Black now has a call center where we can talk to hard-to-reach communities.
Shackle Free continues to expand its reach and deepen its knowledge thanks to RISE funding.
They’ve added a nutrition component to their Community Health Ambassadors training course.
The Center for Popular Democracy, which advocates for innovative pro-worker, pro-immigrant,
racial, and economic justice communities, utilized its national canvassing center to support the
mission, engaging community organizers to effectively share vaccine messaging while
connecting as partners with local health departments, supported by the Public Health
Institute’s Center for Advancing Community Health Equity team. Chromatic Black helped
NCOA learn how to better communicate with their communities, the importance of leading
with love, and embrace storytelling on both sides to better support community needs.

By building civic muscle and connection across national and local organizations and centering
an equitable trust and data strategy on improving the well-being of communities, RISE
communities and partners have shifted themselves. They are working together to change the
underlying system that led to such stark disparities in the context of COVID.
In the summer of 2020, the National Indian Health Board (NIHB) launched the “Act of Love” campaign. At the time, disparities among American Indians/Alaska Natives (AI/ANs) were staggering. A CDC report revealed COVID-19 incidence rates were 3.5 times higher for AI/ANs compared to White Americans during the first seven months of the pandemic. According to APM Research Lab, one in 475 AI/ANs died from COVID-19, compared to one in 825 for White Americans and one in 645 for Black Americans.

To depoliticize simple public health preventive measures everyone could take, the “Act of Love” campaign carried a simple, straightforward message. Wearing your mask indoors and adhering to tribal public health policies showed compassion, solidarity, and love for the community.

“The messaging of the campaign focused on what you could do for your community to keep people safe,” explains Tyler Dougherty, then NIHB Director of Public Health Policy and Programs, “Specifically for the most vulnerable – our tribal elders, our culture keepers, our native language speakers, our children, our immunocompromised.”

In historically oppressed communities, there was a lot of resistance to public health messaging just by virtue of the fact that it was coming from official government sources.

“Characterizing the historical relationship between the US Federal government and American Indian and Alaskan Native tribes as problematic is an understatement. There is a mountain of evidence to distrust the relationship with the US Federal government. Up until the early seventies, AI/AN women were still being sterilized without consent and without their knowledge at Indian Health Service facilities in certain areas of the country. That is how recent some of these atrocities on tribal communities are, and there is still living memory of that in some of these communities and overcoming the trust barriers is an ongoing endeavor,” Dougherty, who was raised with Cheyenne – Arapaho traditions by his adopted grandfather, explains.

To overcome these barriers, NIHB partnered with RISE to develop materials and messaging, not just with the community but from within the community. “It was truly by American Indian and Alaskan Natives for American Indian and Alaskan Natives throughout,” elaborates Dougherty.

**Sovereignty & Solidarity**

The NIHB represents Tribal governments—those that operate their health care delivery systems through contracting and compacting and those receiving health care directly from the Indian Health Service (IHS).

“We provide public health, education, training opportunities, sub-awards into communities, tribal public health capacity and infrastructure, building services, technical assistance, policy, budget analysis, advocacy, and regulatory tracking. We provide quite a few services to public health and health services,” Dougherty notes.
Governed by thirteen board members—one member for each of the twelve regions plus one member at large—NIHB was created and managed by the tribe. The Board is composed of elected tribal leaders from each area. It is trusted and has a hard-earned reputation for thoroughly vetting and sharing trustworthy information.

"It began with a single design and had gone through a couple of reformations, but nothing resonated across the country like we had wanted this campaign to do," explains Dougherty of the earliest phases of the campaign before the partnership with RISE.

RISE helped the campaign to develop regional-specific designs to lift up the local community and culture. Distinctive artwork from each IHS area elevates the cultures of those regions. Six new designs were created with support from RISE (with a seventh being developed more recently in collaboration with Southwest Tribes following that initial grant period with additional funding because the region did not feel adequately represented). Each regional representative on the NIHB Board provided inspiration for designs. They offered regional art, sketches, and motifs. They reviewed everything, considered mock-ups, and provided feedback. The aesthetic was wholly drawn from the community.

The messaging of the campaign focused on what you could do for your community to keep people safe. "We were able to refine some of our positive vaccine messaging through RISE, as well," says Dougherty, who oversaw the evolution of the campaign from CDC guidelines and safety protocols to messaging for the vaccines. Postcards were developed and designed to encourage folks to perform Acts of Love, like wearing a mask, washing their hands, watching their distance, and getting vaccinated and/or boosted. Three to five postcards were placed in "Act of Love" boxes mailed to households throughout the community, so recipients could send vaccine-hesitant friends or family members gentle, personalized reminders to take action. "We feel like it has had a really great impact on keeping vaccination rates high and boosting them in many tribal areas! We saw rapid decreases in the spread of COVID-19," enthuses Dougherty.

**Empowering Communities Through Data**

"RISE was truly a collaboration of partnerships across populations that have experienced inequities and historically faced massive barriers to obtaining public health services and health services, and it was a coming together of the minds of passionate community workers and community servants to collectively come together and work to overcome many of those inequities," Dougherty says of the RISE project.

A biostatistician by trade and training with a Master's in Public Health, Dougherty is most impressed by how RISE advocated that the tribe should own data collected on tribal citizens on tribal land. "Data is power!" he explains, "RISE empowered communities that historically had been marginalized and experienced barriers in accessing their own data. They were amazing in making sure communities got access to their data in communities that they were reporting to help inform their decision-making to help empower communities to use their own data for the benefit of their communities."

**Conclusion**

Dougherty sees Tribal Health as planning seven generations and looking at what can be done to set tribal communities up for success in health and public health. It requires a strategy that is guided by data, advocates for policies, addresses social determinants and continues to overcome distrust when it benefits the community's collective health.
As for “Act of Love,” Dougherty feels the campaign has staying power. “It can be sustained beyond infectious disease mitigation and control, so you know, getting your mammogram once a year is an act of love to you, your children, your family,” he observes. A long-term, intergenerational health strategy requires a solid prevention strategy—and the “Act of Love” campaign offers a cornerstone that can support this work for decades to come.
Transforming systems doesn’t happen overnight.

Fresno Metro Ministry is keenly aware of this fact.

Keith Bergthold, Executive Director, thinks his organization was chosen to be part of RISE for precisely this reason: “I feel like we were invited to this portfolio because we’ve got a long-term agenda.”

It is something that differentiates Fresno Metro Ministry from other community-based organizations and, in Bergthold’s opinion, differentiates RISE from other funders.

“There’s just been so much hit and run, hit and run, hit and run in the philanthropy world,” Bergthold explains, “it’s really refreshing to have someone going, ‘how can we build your capacity to do your work longer-term?’ Trying to figure out how to really invest in an appropriate way in communities.”

Transforming Systems One Door Knock at a Time

Since 1970, Fresno Metro Ministry has served California’s San Joaquin Valley. They know the community well and have a central focus on health and well-being. It was natural that they would be involved in supporting the community around COVID through both vaccination awareness and building community resilience to better respond to future crises.

The central aspect of their efforts in that latter point, building community resilience, really hinges on the Better Blackstone project, a community economic development, affordable housing, and job/business opportunity in mixed-use environments along Blackstone Avenue in Fresno’s primary commercial corridor. A crucial part of their earlier work on Better Blackstone was knocking on hundreds of doors and having conversations with community members, which provided an excellent foundation for Fresno Metro Ministry’s work around COVID.

Being part of RISE, also meant that the organization could better explore the community’s health.

“With RISE, I think I discovered another aspect of the community that I wasn't very aware of, like vaccination rates or access to health resources,” says Ivan Paz, a Project Manager with Fresno Metro Ministry. “It gave me a glimpse into the actual health conditions, which gave me a deeper, more accurate perspective of the community.”

Funding through RISE allowed the organization to connect more deeply with residents, and with more people overall, thanks to an increase in field staff knocking on doors and engaging in conversations using a comprehensive survey.

“Effective community engagement work is very methodical, it's very technical,” notes Paz. “It's one thing to put something up on social media, or ask other local organizations to identify community leaders. But it's quite different when you have a really strategically designed list of
questions and training that helps you start a conversation. I really believe that the fundamental building blocks of community organizing are small conversations where you connect with people, and then you bring those people together, and you connect them to each other.”

Those conversations allowed Fresno Metro Ministry to understand their community’s needs and concerns around COVID and identify potential community leaders to engage in their ongoing work. They did so by incorporating some straightforward questions into their survey:

- What do you love about your community?
- Do you feel connected to your neighbors?
- Do you want to form a neighborhood association?

Knocking on roughly 2,000 doors, Fresno Metro Ministry was able to connect one-on-one with hundreds of residents and develop a list of over 270 people open to taking action in their community. That list will be used for further outreach, with the goal of getting participation in community meetings, though they have realistic expectations. “I’m pretty certain that we’ll have about 30 people in each meeting,” says Paz. “And out of those 30, maybe about 7 to 10 people are going to be key leaders.”

The goal with these people will be to help them think critically about uniting, organizing, and addressing the issues in their own communities. That work will help them build competencies and eventually be able to engage with the “big players” like businesses and local government officials.

Asset-Based Community Development (ABCD)

This approach reflects the heart of Fresno Metro Ministries’ efforts: a commitment to Asset Based Community Development (ABCD) and, through that, the long-term development of constituents who can speak for themselves and create their own resilient neighborhoods. It’s not always easy to keep conversations framed around the positives, though. “It feels like by default people have a deficiency approach,” points out Paz. “We’re trained by society to focus on the bad.” That’s why the team’s questions about forming neighborhood associations were critical to shifting conversations from what might not be working in a community to what individuals might be willing and able to do about it. As Paz notes, these questions “help people become conscious of the kind of capacity that they can build if they work together.”

It’s this development of more engaged communities that Bergthold thinks is the real success story of RISE, “It’s really about building community resilience so that future pandemics are not as severe. And we know that communities that are prepared do better in all kinds of crises. We need that in every single neighborhood in the United States. Especially underserved neighborhoods, so that they can be true partners in local discourse.”
At first blush, a legal aid organization involved with public health might seem strange. Legal Aid of the Bluegrass has a focus area on social determinants of health. One of the organization’s many service areas is the health and government benefits unit, which serves 35 counties in north and east Kentucky. They concentrate on educating the community, specifically seniors over 60, about government programs, associated benefits, and eligibility. As a result, they’ve been seen as a trusted resource and partner for decades. Sharing information about COVID-19, especially with the vulnerable population of adults, was a natural fit.

Still, they had their work cut out for them.

**A Harm Reduction Approach to Public Education**

Kentucky is a red state. COVID is highly politicized. Misinformation runs rampant. While Legal Aid of the Bluegrass hoped their efforts would increase vaccinations in their area, success was framed around broadening reach, regardless of whether or not those interactions result in a vaccination.

In harm reduction, the philosophy centers around “meeting clients where they are at” rather than trying to force a particular perspective. Born out of the recovery movement, this strategy often looks for ways to move a client closer to a positive health outcome, regardless of whether or not they are prepared to quit a substance abuse habit entirely. Legal Aid of the Bluegrass approached its information-sharing campaign similarly rather than trying to engage in a direct debate. In some instances, this meant creating the space for community members to feel heard, even when concerns were conspiratorial (i.e., the belief that the vaccine was a way to control the population by injecting a microchip into the bloodstream) before providing the most reliable information possible. In other instances, it meant letting the community know that Legal Aid of the Bluegrass was there for them.

“We never believed that it was our place to be in their face,” says Angela Zeek, Public Benefits and Ombudsman Unit Manager. “Our role was to provide the information so that they could make informed decisions.”

One of the most meaningful accomplishments resulted in no vaccinations at all. For the first time in 30 years of serving the area, a Legal Aid of the Bluegrass team was able to engage with the close-knit Mennonite community.

“The team had really great conversations with them,” notes Zeek. “Did we move the needle? No. They don’t believe in vaccinations at all. That’s their religious view, and we understand that. But the goal was to share information that we knew to be factual. And we were able to have those conversations.”
In addition to the Mennonites, Legal Aid of Bluegrass was also able to engage with two rural counties where they hadn’t worked previously – Bell County and Clay County – in southeast Kentucky.

Since they weren’t already an established presence in Bell and Clay counties, Legal Aid of Bluegrass focused their efforts on “introducing themselves.” Being part of RISE (Reach, Immunizations, System Change for Equity) played a significant role in this expansion. It allowed the team to develop targeted plans for communities with the lowest COVID vaccination rates in adults 60 and over and create relevant outreach materials. Legal Aid of Bluegrass partnered with the University of Kentucky to map the community and develop culturally sensitive materials. They also collaborated with the Appalachian Research and Defense Fund, which had familiarity with communities that were newer to Legal Aid of Bluegrass.

They were able to get the addresses of everyone over 60 in the county and deliver postcards to each of those individuals. These postcards included a photo and quote of a long-time community hero well-known in eastern Kentucky for his work in fighting poverty and representing the community. They established a hotline number for vaccination locations and factual information about the vaccines to combat rampant misinformation in the area. The team also focused on a “boots on the ground” approach in these rural areas, spending time in any place they could connect with people over 60, whether a store, a laundromat, or a restaurant. Their main goal was to listen and better understand the concerns and needs of the community.

In Clay County, where over 37 percent of residents live in poverty, even as COVID deaths rose, the community’s biggest concerns were drugs and the lack of jobs. As a result, the team from Legal Aid of Bluegrass had to change its message.

“We just kind of shifted and said, ‘do you think that if that community were healthier, that industry would come here?’” Zeek explains, “That was far more complex than we thought we would get into, but we were trying to get people to broaden their thinking.”

**Broader Thinking Gets Results**

The efforts paid off.

During the Delta and Omicron waves, Clay County saw an increase in vaccinations. While Legal Aid of Bluegrass is careful to note that they can’t take all the credit, Zeek recognizes their strategy played a part. Community residents were more open to different perspectives and more willing to talk.

“We had some really good conversations,” Zeek explains, contributing to the results.

Closer to home, in Owen County, where Legal Aid of the Bluegrass has had a decades-long presence, they could take a different, more direct approach.

They organized a legal vaccine clinic focused on “life planning.” The legal team was on-hand to offer advice and talk about life planning documents. In some instances, pro bono assistance was provided in drafting plans. A local pharmacy was onsite to give COVID vaccines to attendees who wanted one.

“It was ‘let’s give them the information that we want them to have, under the umbrella of something that we know is important to them. The success was being able to share factual information,’” Zeek explains.
Being part of RISE has not only meant that Legal Aid of the Bluegrass has been able to reach more of their community but also that they could approach local challenges with a broader mindset and a fresh set of eyes.

"Sometimes we get tunnel vision, and we think ‘this is the only way to do it,’ but we can learn from one another and figure out if something is working in another state that maybe we can get it to work here," Zeek explains. “That feedback and information are always helpful, and it allows us to think more broadly ourselves.”

By collaborating and coordinating with a network of organizations engaged in similar struggles across the country, Legal Aid of the Bluegrass was able to learn what did and didn’t work in different communities and apply those lessons at home. This real-time sharing of strategy and approach was critical to achieving success in some of the local communities hardest hit by COVID.
Lus Chavez remembers the first farmworker who reached out with COVID. The extreme urgency was palpable. “I was scrambling,” Lus says, “trying to find him a place to quarantine.” “Juan,” whose name has been changed to protect his privacy, lived in a shared bunkhouse with other farmworkers, which is common in the rural Texas Panhandle outside Amarillo. Many of the farmworkers are from Central America where communal living is a norm. It’s common for two to three families to share a house or apartment. These close quarters contribute to a tight-knit community but make any form of isolation nearly impossible.

No space unoccupied, let alone a 6-foot egress. A perfect breeding ground for COVID. “Juan” was being sent right back into this environment.

“The hospital was just going to let him go back to his housing where it was just going to be spread,” Chavez recalls.

As outreach coordinator for Family Support Services of Amarillo, Chavez leads Sembrando El Sueño, the organization’s program providing services to migrant farmworkers. It was a long ordeal to get the farmworker the support he needed after his hospitalization. Lus, along with a network of partners, coordinated housing, food, and clothes.

Though he recovered, the experience was traumatic and Juan decided to go home to Mexico rather than return to farm work. Lus drove him to the airport. She remembers how happy Juan was to be going home and how grateful he was, “[Juan] told me I’m so lucky that I was able to find you.”

**Overcoming Barriers to Access and Trust**

Even before COVID, finding trusted resources like Lus and Family Support Services of Amarillo was no easy feat for farmworkers. In expansive rural areas like the Texas panhandle, farmworkers are isolated from the community at large, but geography is only one barrier.

Language often represents a significant challenge as well. Many workers speak only Spanish with distinct dialects from their Central American hometowns. Fear and distrust, even of the people and resources that offer assistance, runs deep. A number of workers are undocumented, and as a result, the whole community has “a huge fear of letting social services in, because that might trigger deportation or authorities coming into their town to question them,” explains Lus, “They’re used to sticking together very tightly and can be very hesitant to let us have any access.”

Family Support Services of Amarillo (FSS) has longstanding roots in the community. Founded in 1908, FSS exists to provide healing resources for those with no other means of assistance. They specialize in hard-to-reach communities serving over 25,000 people a year, including victims of sexual assault, family violence, human trafficking, at-risk children, and veterans. The secret of their success in providing resources to those often pushed beyond the social safety net is a combination of persistence, follow-through, and lived experience.

Lus diligently cultivated the trust she needs to do her job over several years. Her Spanish-language skills and shared experiences, including being the daughter of immigrant
farmworkers from Mexico and spending much of her childhood working in cotton fields with her mother, helped break down initial barriers. Reliable consistency and an unwavering willingness to help establish her as a trusted resource in these tight-knit, insular communities. The simple act of doing what she says she will do, over and over, have established her as someone who can deliver on her promises. And that means farmworkers are not only willing to trust her but also to spread the word and vouch for her to others, which is key in a community that frequently changes.

**Game-Changing Support During the Pandemic**

Before Family Support Services of Amarillo partnered with RISE (Reach, Immunizations, System Change for Equity) to help manage the pandemic response, Lus’ job was part-time. The additional funding through RISE has allowed Lus to go full-time, and in late 2021 she hired another outreach specialist. “RISE has really allowed us to really expand our focus on these populations,” says Lus. “We’ve gotten more work done in the last few months than we have in the past two or three years.”

The expanded *Sembrando El Sueño* team has been game-changing, allowing FSS to reach more farmworkers and travel farther distances to reach them. As a team, Lus and her colleague, Cynthia, are also able to more quickly deliver on the resources they’re promising to workers.

“That in itself helps build up our trust,” Lus notes.

That trust was likely a key reason vaccine hesitancy was not much of an issue. Lus says there were lines of farmworkers at their vaccine clinics. People proactively reached out when they knew it was time for their second dose. Collaborations with Dr. Anabel Rodriguez from University of Texas, Texas RioGrande Legal Aid, National Center for Farmworker Health, and Migrant Clinicians Network also helped expand their reach. Trusted experts from different areas working together means more migrant farm workers get the help they need.

At a systems level, the partnership with RISE meant that the *Sembrando El Sueño* team has been able to make the issues facing farmworkers more visible to public health and other local officials. The seasonal nature of the work and remote locations mean the population of farmworkers is often in flux. This makes their numbers harder to track, so they are not always "counted" when it comes to making data-driven decisions. This meant that early in the pandemic, it was challenging to get local officials to understand how farmworkers were affected. Now county officials regularly attend farm-worker coalition meetings organized by *Sembrando El Sueño*, seeking out the expertise of Lus and others.

And the impact of Lus, *Sembrando El Sueño*, Family Support Services of Amarillo, partner organizations, and RISE stretches across borders. When the farmworker who first reached out to Lus when he had COVID returned to Mexico, he started working for the National Center for Farmworker Health. Now he does outreach and education with farmworkers there. It’s a powerful testament to the work being done by Lus and others and the value of investing in trusted relationships.
CIVIC CAPACITY
In Orange County, Florida COVID-19 testing sites designated "accessible" to underserved communities were located 2-3 hours (each way) on public transportation. It was a long distance, a huge time commitment, and a complete inconvenience—but, given the nature of the crisis, it was also reckless.

At a time when social distancing was required to get the pandemic under control, this emergency response was by design, putting people in greater danger. The Coalition of 100 Black Women of Central Florida, a vast network of Black women on a mission to bring attention to—and fix—equity issues plaguing the minority communities, sprang into action.

First, they mapped where the testing sites should be located. Based on community needs, vaccination rates, and accessibility to public transportation they identified the areas where sites could increase the safety, reliability, and access for those in need.

Information in hand, the Coalition set out to confront the local government. They knew from past experience that the officials might try to block them from attending town hall meetings, asking questions, or voicing their concerns—so they devised a plan to make certain they were recognized: press passes.

By securing these credentials they increased the likelihood that they would have the opportunity to speak.

They garnered national press coverage and changed the landscape of the response, but this was just the beginning.

**A History of Resistance to Disparities, Inequities, and Neglect**

The Coalition of 100 Black Women is a diverse, intergenerational group who delivers equity-focused programming to communities in need. Their mission is "to advocate on behalf of Black Women and Girls through national, state and local actions and strategic alliances that promote leadership development and gender equity in the areas of health, education, economic empowerment and social justice." Through public events and activities, and partnerships with private business, nonprofits, and government organizations, the Coalition is bridging the equity gaps in public policy, health and wellness, economic and education empowerment, civic engagement and community advocacy, and environmental equity.

In short, they organize, occupy, march, campaign, advocate, canvass, report, publish, confront, gather, and host walking tours to demonstrate the disparities throughout the community and advocate change. Lawanna Gelzer, President of the Coalition, points out that often these inequities can vary block-by-block, neighborhood-by-neighborhood.

Traditionally, government funding for communities of color in Orange County goes to the same organizations over and over again without any progress made to improve equity issues. These
initiatives are often used to mask the problem, Gelzer notes. In one instance, a huge sports stadium built in her community was used as a sleight of hand to deflect any allegations of a problem. Just around the corner from the shimmering structure the disparities were plain as day—problems hidden in plain sight.

In rural and urban areas alike, lack of equity for public services remains a staggering problem that was only exacerbated further by the COVID-19 pandemic. Despite the lack of funding, Lawanna and the volunteers behind the Coalition of 100 Black Women didn't shy away from the new problems caused by the pandemic...they charged full steam ahead.

“We're here. We're fighting. The work is going to happen regardless of if we have funding or not. It was never a question of IF we were going to do the work, but HOW we were going to do it,” says Lawanna.

Thankfully for the Coalition, they didn't have to wait long to find out.

RISE Provides Support to Change the Conversation

The Coalition of 100 Black Women didn't stop with increasing access to testing centers in underserved communities. After getting press passes, initially a clever way to get questions answered, the Coalition launched 32805 Community News, an online information source for neighborhoods west of downtown Orlando, focusing specifically on hyperlocal news for and about local minority communities.

They also began to start formally collecting data to better understand the issues within their community and allocate resources accordingly. Gaining the trust of these communities wasn't easy, and a survey wasn't going to solve all of their problems. By working directly with evaluators, the Coalition was able to customize the survey not only with language, but with information talking about their organizations so the community knew this survey was coming from somebody they already knew.

This was community members helping community members.

These surveys revealed information they suspected but now on which they were able to take action. Public health support was an area where funding was desperately needed. Through their partnership with RISE, the Coalition was able to fund existing community health workers that were about to shut down. Those workers were able to keep their program up and running, reaching numerous last year. The local Black Nurses Association wanted to expand its services statewide but didn't have the funding for the application. For $300, the Association was able to submit an application, ultimately getting approved, allowing them to train more team members and expand their public health services beyond Orlando.

In late 2021, the Coalition received a grant from the Environmental Protection Agency (EPA) to study and ultimately reduce the impact of air pollution in Parramore, a community in Orange County, Florida. Parramore residents were trained to use air quality monitoring devices to continually run tests for six months. Those results will be used to determine air quality related to soil contamination from the remnants of a gasification plant that ran for decades within the community before finally being shut down in the 1960s. Gelzer knows environmental protections are an equity and public health issue, and she intends to use the power of her community to get politicians to actually change policy instead of sweeping it under the rug. Lawanna has been an activist and public figure for decades, and likes to call herself “unbossed and unbought.”
“We are stronger together. I know my strengths and my weaknesses, and when you bring that honesty to the table it’s amazing what you can do. This coalition of people working together understands that “together we are stronger” and we’re having an impact on the community. People will march and we have to keep marching, but it’s what you do after the marching that really pushes policy forward,” says Gelzer.

The Coalition of 100 Black Women is just getting started.
In neighborhoods across the country, barber and beauty shops function as vital community hubs. They are informal spaces to swap gossip, discuss politics, learn local lore, exchange community news, and gather history. As Shackle Free, a North Carolina nonprofit human services agency, explains, they are recognized as “a trusted space to discuss personal and public issues.”

Chiquitta Lesene, Shackle Free's co-founder and CEO, a social worker by training, saw the opportunity to leverage this integral role for an even greater purpose to support health and well-being, including sharing information about COVID-19.

People may see a doctor only once a year but tend to see their barber or beautician much more frequently. “While you're sitting there talking to your barber who you'll see, like, 20 times of the year versus seeing the physician maybe one time, you're telling them all your information. So, we're just making it make sense,” Lesene explains. “People may be scared to go to the doctor, but they're telling their barber or beautician everything about their family life and their health.”

She also knows of numerous instances where people shared cancer diagnoses, relayed depression symptoms, discussed traumatic issues, and sought advice from their beautician/barber before disclosing it to their family, friend, or physician.

**What's “The Buzz”?**

It is not exactly a new idea. Until the mid-1700s, barber-surgeons in the United States could care for wounds, perform surgeries, and cut and style your hair, but on the verge of the global healthcare shortage, Shackle Free's programming gives this old idea new life.

Shackle Free serves people in North Carolina's Duplin, Pender, Onslow, Sampson, and Jones counties, focusing on areas with high poverty and crime rates. While the formal organization is relatively new, Lesene and Benjamin Moore, Shackle Free's other co-founder and COO, have worked in the community for over 20 years. Being part of RISE meant Shackle Free had more than just a shoestring budget to support their work when it came to sharing information about COVID-19 through their existing programs.

"The Buzz" seeks to increase families' access to support through local barbershops, beauty salons, spas, and tattoo parlors, outfitting these natural settings with relevant health information. The Buzz has 82 locations, which offer physical binders full of information and resources. Thanks to funding through RISE, some areas have also been able to add digital kiosks.

The information and resources available, whether in a binder or on a tablet at a kiosk, focus on cancer, diabetes, hypertension, and now COVID, as well as domestic violence, homelessness, and housing.
By training barbers and beauticians, who are already trusted messengers in their communities, to be community health ambassadors, they are filling gaps in community needs, now and in the future.

In collaboration with Duke University, Shackle Free has already trained and certified 57 of these community health ambassadors. And the organization hopes to continue to expand its reach across the country. As a result of the exposure they got as a part of RISE, Shackle Free is now participating in the Healthy Opportunities Pilot program, a first-of-its-kind comprehensive program to evaluate the impact of providing non–medical services related to housing, nutrition, domestic violence, and more to people enrolled in Medicaid.

**A Whole Person Approach to Civic Capacity**

As a social worker, Lesene resonates with the work of Abraham Maslow.

The renowned psychologist and founding father of humanism, Maslow is best known for his hierarchy of needs, a pyramid-shaped structure representing a range of basic needs like food, shelter, and rest, ascending to more intellectual needs. At the bottom of the pyramid, Maslow depicted the fundamentals. Above these are safety needs, which include safety from violence and abuse and a general sense of stability and security.

Shackle Free was conceived with this concept in mind. More specifically, a holistic approach to care identified the gaps in the hierarchy of needs and sought ways to address them.

“The Buzz” program and how it builds on the cultural role that the barber–beauty shop already occupies is critical to accomplishing this mission.

“They start building their own community,” says Lesene. People across social statuses, including elected officials and people that are homeless, “just stop by to say ‘hi’ at the barbershop or play a game of checkers. You get all those people thinking more and learning more; then you have the whole community getting information, even the hardest to reach areas.”

As Lesene sees it, funding grassroots organizations like Shackle Free is critical to strengthening a community’s civic capacity “instead of giving money to programs that just keep going in circles with no outcome.” Investing in trusted messengers helps to build a community collectively, and expanding the idea of who is a trusted messenger recognizes and empowers non-traditional community leaders.
“For us, it’s about life.”

Reverend Richard Joyner, the founder of the Conetoe Family Life Center in North Carolina, was experiencing a distressing trend in his community, including his own family members. Living in a food desert with no access to health care or affordable food and an average yearly salary below the federal poverty level created a local epidemic: over 100 Black males died each year of chronic illness in their small community.

The rural community of Conetoe (‘Kuh-neet-uh’) needed help, but they didn’t want charity. Reverend Joyner needed a way for the community to help themselves grow and lift each other up to thrive. In 2007, the Conetoe Family Life Center (CFLC) was born. They opened a summer camp to help the community improve their health by providing healthy food, increasing activity, and opening doors to public health services. Joyner anticipated maybe ten students. When they opened their doors on the first day, 100 students showed up. On day two, those 100 students came back. On day three? There they were, 100 smiling faces ready to learn.

CLFC exists to nourish people, build solutions, and empower communities. They provide food and knowledge resources to the community and their partner agencies to bring to life their vision of no one going hungry in their community and being able to stay nourished with healthy, fresh foods. The center uses practical farm applications to teach its students math, reading, science, and technology. Their first project was centered around ice potatoes (otherwise known as Irish potatoes), which grow well in North Carolina.

Reverend Joyner bought one 50-pound bag of potatoes and brought it to the summer camp. He worked with the students to turn that single 50-pound bag into food for the entire cohort. The students were tasked with deciding how many times to split the potatoes and how many plants they could get from each piece. From there, they had to calculate how many plants were needed to feed 100 students for 12 weeks and how many additional potatoes were needed for 100 students to be able to take home boxes of fresh produce to feed a family of four. Finally, they had to learn how much space was needed to grow them, how to grow potatoes, and how to harvest. Four weeks later and the students were blown away by the results. They could see the fruit of their labor, with four to five potatoes coming from one, learning what potatoes tasted like fresh, and seeing their curiosity and knowledge grow before their very eyes.

The summer camp also focused on more traditional approaches to improving community health by requiring students to track their weight and blood pressure every morning, using the work around the farms and the knowledge needed to keep them running to improve long-term community health quietly. “We can grow more medicine through the plants than we can buy, and there are no side effects,” explains Joyner.

Although the summer camp was closed temporarily in 2020 because of the COVID-19 pandemic, CFLC remained involved in the community, reaching out to ensure people were fed, see where and how they could help, and determine who needed more support. They changed their focus from farming to combating misinformation and lack of information about COVID-19 and the vaccine, including vaccinating people within the community.
With an understandable mistrust of doctors and the government, they had their work cut out. Lucky for CFLC—and the greater Conetone community—Reverend Joyner has always said that relationships are the most important thing about their work. “The relationships are more important than the money we receive from the farm. What we're building together will outlast everything else,” says Joyner.

The pandemic put a strain on relationships within families in Conetone and across the country, but Reverend Joyner wasn't phased. The CFLC team doubled down and did what they do best: nurtured and nourished the community. They reached out to their peers to share their funding, asking them to co-host events and share what their community needs to target their support better. They hosted these events across counties, giving away masks and hand sanitizer and getting to know their neighbors. They educated people about COVID and worked to increase vaccination rates while reminding folks to stay on top of other chronic illnesses like diabetes and high blood pressure, encouraging them to get or stay connected with their providers to maintain their health and manage their diseases.

These events led to hundreds of people getting vaccinated and hundreds of thousands of fresh food put into the community, but you’d never know their mission is quite so serious. With delicious food, music, a bouncy house, and joyful energy, these events were a chance for community members to come together, see their friends, neighbors, and family, and get a little education or help with their health process.

By continually showing up in the community, they were able to see people multiple times and show they were genuinely invested in the health and wellness of the folks in the community. One such community member—upon his first visit to a CFLC event—told them COVID wasn’t real. They saw him again at another event. At his third CFLC-hosted event, that gentleman received his first COVID-19 vaccine. Relationship-building works. An honest and kind environment and building community trust work.

CFLC has hosted 38 events and counting, always including an organization that is already present in the host community. By decolonizing food, CFLC has ultimately been able to partner with amazing organizations to create their own path to wellness and community, creating a pipeline of Black and brown people who are building their skills, helping them to receive the funding to invest in their farms and their communities, feed their communities, and so much more.

The folks behind CFLC know the action happens at the grassroots community level. The changes necessary to protect and improve the help of these rural communities aren’t coming from the policymakers sitting in the House or Senate. These policy changes are informed by the community members, who then influence the people around them, influence their representatives, and ultimately impact policy.

In rural North Carolina, the government used to follow a top-down approach, but empowering the community members to be more involved and demand what they need has switched gears to bottom-up policy change. Through their partnership with RISE, CFLC could take community data to force the legislators to pay attention, listen to the community, and see the actual need and where those needs aren’t being met. These conversations with community members have helped inform the policy, reminding legislators who they work for and are fighting for.
These days the farm at CFLC is up and running again. Across 25 acres of sustainably farmed land, they provide over 50,000 pounds of fresh produce to the community daily. Their Community-supported Agriculture (CSA) program has led to further community building, improved health outcomes for the community, and helped CFLC support itself and continue to grow. Their summer camp also continues with the mission to give children a voice in their community, health, and future. CFLC began as a grassroots response to poverty, malnutrition, and premature death in the Conetoe and surrounding communities. It has led to dramatic declines in chronic ailments, hospital visits, and healthier and more vibrant lifestyles across their community. The Conetoe Family Life Center is sowing the seeds of change.
TRANSFORMING SYSTEMS
Shifting the narrative is central to the futurist artist-activist collective Chromatic Black. The group’s mission is to “disrupt the master narrative with good storytelling.” The master narrative is defined by author Toni Morrison (in a 1990 conversation with Bill Moyers) as “whatever ideological script that is being imposed by the people in authority on everybody else.”

As narrative strategists, Chromatic Black sought to address undermining beliefs fueling medical distrust, vaccine hesitancy, and misinformation around COVID by collecting and sharing stories through a campaign called Keep Black Love Alive. The campaign focused on the rural South and included a listening tour and unique experiences beyond the standard “hot dog and DJ” event.

When COVID hit, Chromatic Black shifted from conversations they had already had about the fragile public health infrastructure before the pandemic to focusing on supporting communities, especially around the rollout of vaccines. Chromatic Black thought a civic model was the right approach to address vaccine hesitancy. Based on their previous work with community organizing groups, they knew their ability to mobilize on the ground and serve as trusted advisers. The RISE funding allowed them to test this theory along with innovative outreach approaches.

In addition to food dissemination and fine and fee clinics where individuals could get assistance clearing balances that were “jamming them up,” the campaign also tapped into Chromatic Black’s roots in the arts by making films about what it means to be in the community, and photo essays about people’s experiences with COVID. Following quarantines that kept lots of folks cooped up indoors, the campaign also incorporated outdoor sports and play into their events, including double dutch contests and kickball. The campaign visited 65 neighborhoods, collected 500 stories, and activated 5,000 advocates.

These events also included information about COVID vaccines and mobile vaccine clinics whenever possible. But the campaign positioned itself as “Switzerland,” a neutral voice providing information but not pushing people to get vaccinated.

“We are aware of the many ways in which the public health system has failed black folks and poor folks in this country,” explains Abene Bloodworth, Chromatic Black co-founder and one of the chief architects of the Keep Black Love Alive campaign. “The medical experimentation that profits off of Black and Brown bodies and poor bodies are not confined to the turn of the century. It’s something that is occurring today. So we wanted to validate the fears and concerns of Black folks so that it doesn’t re-victimize us and that there isn’t a dissonance from what occurs.”

A powerful example of this fear came from a woman in her eighties named Jamila. According to Abene, Jamila “had absolute confidence and trust in the vaccine and the system. And she mobilized everybody within her tribe. She got, like, 30 people to go to get vaccinated. So everybody went ahead of her and got vaccinated, and then when it was her time, she completely flipped out.” As the doctor approached her with the vaccine, Jamila said she saw
all her ancestors and started to weep and shake uncontrollably. She was embarrassed and told the doctor she didn’t understand why she was suddenly afraid to receive the vaccine. The doctor, a White man, was patient and understanding, acknowledging the long history of Black mistreatment by the medical system. He told Jamila to take her time and wait until she was ready, and she stayed at the event for several hours. When things started to close down, she was still there, and the doctor came back to check on her. Jamila asked if he would sit and pray with her, and he did. The prayer brought Jamila peace and calm; afterward, she was ready to receive her vaccine.

Generational trauma wasn’t the only deterrent to COVID vaccinations in the communities where the Keep Black Love Alive campaign was active. Access was a huge issue for a variety of reasons. For example, says Harmon, “In Albany, Georgia, the local public health infrastructure was decimated. One large health system called Phoebe bought up all these small clinics and absorbed them into these big hospitals. And, you know, the closest hospital is 50 miles away.” Access was an issue even in more urban areas, especially during severe weather. Torrential rains, tornadoes, and snow can prevent people from traveling to get a vaccine.

This is why Keep Black Love Alive tried to incorporate mobile vaccine clinics into their events whenever possible. Says Harmon, “We would either set up situations where you could get vaccinated or get information on-site with, or we'd give you information as to where you could go.”

The Keep Black Love Alive campaign has now moved into its second phase, armed with a multitude of stories and oral histories reflecting the Black experience of COVID. In June 2022, they brought together 50 movement leaders from across the country in person, along with Harriet Washington, author of *Medical Apartheid*, Dr. Valerie Montgomery Rice, President and CEO of Morehouse College’s School of Medicine, and Jewell Jackson McCabe, founding president of the National Coalition of 100 Black Women. The gathering (which will be followed by an even larger virtual event) will focus on what has been learned during the pandemic, the structural roots of health inequity, what a “well world” might look like, and, critically, the policies needed to get there. The conversation will inform a presentation to the Congressional Black Caucus in November 2022. “We’re really excited about that,” says Bloodworth. “And it’s all the work that's been done for the past year, including being a part of RISE, that has gotten us to this place, to be able to have that conversation.”
Early in the pandemic, COVID-19 triggered a cascade of crises in succession. Racial and ethnic disparities were exposed and exacerbated, polarities deepened, and the shutdowns intensified the economic strains already placed on poor and working-class families. In Nashville and throughout Middle Tennessee, the Latinx community, specifically newly settled immigrants, was shaken to the core.

Conexión Américas, an organization focused on Latino families, reported that a sample of applicants for assistance found that 70 percent seeking help in those early days had lost their job due to the pandemic. An additional 30 percent of those still employed had their hours cut. The organization, established in 2002 to help address the challenges and opportunities created by demographic changes as an increasing number of Latino families moved to the region, set to work helping those impacted by the pandemic. They provided over $11 million in rent and mortgage assistance, making more than 710 payments to keep families in their homes.

They created a weekly food distribution event in partnership with Second Harvest Food Bank, Nashville Noticias, and World Central Kitchen hosting drive-thru events to provide fresh produce, eggs, milk, and other staples allowing families to shelter in place.

And throughout the pandemic, Conexión Américas became a communication hub for the Latinx community, promoting culturally specific campaigns and providing support for those with questions and concerns during the crisis.

They did not set out to be a health provider, but by virtue of their longstanding and trustworthy reputation, they became a resource for Latinx families in Middle Tennessee throughout the crisis.

Connecting Americas, Building Communities

In 2000, the US Census revealed some astonishing statistics for Nashville. The preceding decade from 1990 to 2000 saw a 446 percent growth in the Hispanic population. The local infrastructure was not prepared for this staggering growth. Public agencies felt the crunch, and nonprofits were ill-equipped. Many put together small projects or programs to accommodate but could not leverage the opportunities or weather the challenges brought by this growth. Even larger community-based organizations with the resources to roll out more sophisticated support programs for the newly arrived Americans lacked the knowledge to do so with cultural competency.

"Over the last 20 years, we have done a lot of work around education, economic opportunities, skill-building, job training, and support for families who move to Nashville," explains Martha Silva, current co-executive director. "We've helped newly arrived families in achieving their goals of buying homes and starting businesses, as well as supporting them in navigating the systems, learning English, and so on."

In 2002, the co-founders María Clara Mejía, José González, and Renata Soto, professionals in nonprofit, business, and social development teamed up with an existing small nonprofit group, the Hispanic Family Resource Center (HFRC), that was exclusively dedicated to providing information and referral services on health-related matters. The merger, which broadened services, allowed for implementing a holistic approach to helping Latino families.
They helped families establish new roots, create businesses, find meaningful work, and settle into their new homes. So, naturally, families turned to Conexión América as the hardships wrought by COVID were felt.

Cultural Competency Goes Beyond Translation

This strategy of developing partnerships and adapting to community needs, which have been central to Conexión América since the beginning, served them well throughout COVID. Over the past two decades, the original information and referral service of the HFRC evolved into the Spanish Help Line for Middle Tennessee, serving over 9,000 families and individuals per year.

During COVID, the hotline provided vaccine information, location information for community vaccination centers, and general support. “We were not in a rush to schedule appointments,” Silva says. “We gave people space to express their concerns, beliefs, reactions to the vaccine. We just talked to them.” Since the hotline was already a reputable source of information, this transition seemed natural.

“Recognizing a lot of the families we work with don’t have a primary care provider—in some cases, they haven’t been to the doctor in years—so they are hearing things, and they don’t know what is accurate,” Silva notes. “We hosted informational forums, educational webinars—all anonymous, all virtual—with two doctors. One Mexican, one Peruvian, who could answer their questions and address their concerns without judgment.”

Conexión América also helmed three broad-reaching health campaigns: “Yo Sí Uso Mascarilla” (I wear a mask) in early 2020, “Juntos y Sanos” (Healthy Together) beginning in the second half of that year, and “Vacunémonos” (Let’s get vaccinated). Each campaign built on the preceding one and broadened its reach.

“This is not just about translating flyers into Spanish,” Silva is quick to point out. “It was about true cultural competency. We took efforts to explain relevant health information, clarify anything that there might be confusion around, and educate on the best course of action.” The strategy varied between groups. Seniors were open to the vaccine but had barriers to access. They required transportation options and Uber vouchers. They often recognized the importance of the vaccine, but they had questions.

On the other hand, youth were often more aware of the vaccine and spoke English (so it did not require translation), but they were also overwhelmed by misinformation. “There were rumors that the vaccine caused infertility,” Silva explains. “That was a concern. There was also the belief that the vaccine would put a chip in you. We would listen to concerns and take the time to explain and educate. We tailored our message to every group.”

Overall, health messaging across Conexión América’s communication platforms targeting Spanish-speaking individuals had over 200,000 impressions. Their dedicated websites for general information and vaccine information had almost 5,000 visitors.

Location! Location! Location!

“We didn’t think people would just line up at the door to get the vaccine,” Silva explains. “Access was critically important like they say: ‘Location! Location! Location!’ We needed to find locations with easier access to the community.” The larger distribution centers were great for accommodating many people at one time, but they could be intimidating to some residents.
“We chose places where people already felt comfortable,” Silva continues enthusiastically. “Going to churches, hair salons—our health partners were very mobile—we went anywhere people gathered.”

Conexión Américas partnered with the Metro Nashville Public Health Department, Neighborhood Health, and others to host 11 vaccination events in total, resulting in 1,301 shots.

Conexión Américas had earned its trustworthiness over two decades of steadfast support and community investment for the Latinx community in Nashville and throughout the surrounding area. This longstanding relationship was the differentiating factor for getting results and saving lives.
Social Change, a national Chicago-based nonprofit, has a unique model for transforming systems.

In 2011, the International Social Change Film Festival (ISCF), now known as ChangeFest, was launched using art to advocate and organize on issues of systemic racism, poverty, and justice. Rather than taking a conventional nonprofit approach to service provision—addressing symptoms, not the source—Social Change focuses on root causes. They look for more profound interventions into the issues of poverty and systemic racism to cultivate systemic change.

These efforts have helped usher in over 30 laws focused on eradicating New Jim Crow, challenging policies that punish the poor, and working to advance equity. The Social Change initiative has grown in the last decade-plus to leverage documentary, narrative feature films, shorts, and animation alongside exhibits of art, music, fashion, and poetry with a social justice bent in Chicago, Atlanta, Los Angeles, and New York.

The reforms are focused on ensuring past mistakes or personal circumstances don’t limit present-day opportunities. They have advocated for policies that provide access to housing, business, and good-paying jobs. Social Change was instrumental in a historic win to abolish cash bail payments for jail release, which punished the poor and, like a modern-day debtor’s prison, forced those without means to serve time even before a trial.

They have also successfully advocated for police reform to increase accountability, enhance transparency, and prevent abuse, including alternatives to deadly force, body cam duty of care, detainee rights, and increased access to police conduct files.

Today, in addition to the work advancing policy and reform, Social Change provides legal training, know-your-rights workshops, resources, and services. An expanded scope that is community-directed by needs as they arise.

Humble Beginnings, Deep Impact

Todd Belcore, co-founder and Executive Director of Social Change, is an activist, advocate, lawyer, and legal lecturer. He credits his lived experience as having as much influence on his career as his education and professional training. Growing up on Chicago’s Southside in an economically disadvantaged household with a single mother, Belcore struggled to find his footing.

Even with the deck stacked against her, his mom always found time to give back to the community, something that inspired Belcore to find work that would give him purpose. The mantra in his formative years, imparted by his mother, was that “a low-income background should not keep you from a high-income education.”
Belcore earned his law degree at Northwestern. He struggled with poverty throughout his education. Couch-surfed undergraduate and law school, waited tables to make ends meet, and wore hand-me-downs. His focus was always on finding a way to give back to his family and his community.

Since those days, he has been a six-time national award-winning mediator putting in over 20 years of experience fighting for global economic, social, and racial equity. He has advised the White House and helped provide legal assistance to over a thousand individuals and organizations who otherwise would not have access to these resources.

ChangeFest started as a side passion that Belcore launched with a friend. A couple of years in, a supporter suggested he take the work full-time. Social Change was the result, organized around the mission “committed to liberation and amplifying community voices through storytelling, organizing, and direct action.” The initiative has grown to offer policy, advocacy work, direct action, legal services, training, and, most recently, social support.

At the start of the pandemic, as logistic concerns around access to PPE, hand sanitizers, and masks amplified the crisis and deepened disparities, Social Change stepped up. “We never really saw ourselves as service providers,” explains Belcore, “but every step of the way, the community would ask, ‘can you do something about this?’ That is how we got into food distribution, PPE, hygiene products, vaccines—the community asked.” They distributed masks and gloves, made hand sanitizer, and coordinated with community contacts to get supplies where they were most needed.

“We started making sanitizer because people needed sanitizer. We started distributing masks because people needed masks,” Belcore explains.

This responsiveness and adaptability to community needs have been a driving force of the work from the beginning and the secret to their success.

**Leveraging a Broad Network**

One of the benefits of working with so many communities in so many contexts around is building a broad network. The festival organizers turned community service providers gave know-your-rights training to 1,000 organizations nationwide. In the deep South, they canvassed door-to-door to get out the vote. They engaged 250,000 voters across the country, distributed more than 550,000 pounds of food, and shared countless resources. This provided a broad national network of diverse activists, organizers, community-based organizations, and service providers.

“When we started working with RISE around vaccines, it felt like we had in-roads everywhere. We would get into these conversations like, ‘Do you know rural farmers in the South?’ and we were like, ‘Yeah. We were just there!’ so we were in a good position to provide introductions,” Belcore explains.

Building connections and establishing networks gave Social Change reach; being community-directed in meeting needs helps them earn trust.

Taken together, these were critical ingredients to navigating vaccine resistance.
“Our role was really to connect people together, who might not have a relationship otherwise,” says Belcore.

As a result, they were able to meet the needs of difficult-to-reach communities throughout the country. Social Change vaccinated more than 2,500 people by leveraging their connections, being a trusted and supportive resource, and activating their relationships.

The engagement with RISE also influenced and inspired the work Social Change is looking to do in the future. Food insecurity has been a significant concern in underserved communities throughout the pandemic. After working alongside Conetoe Family Life Center in North Carolina growing food and with America’s Second Harvest for distribution, Social Change has expanded its focus again, moving at community request into food access and community health. They are now looking at ways to implement programs in rural areas throughout central and southern Illinois.