



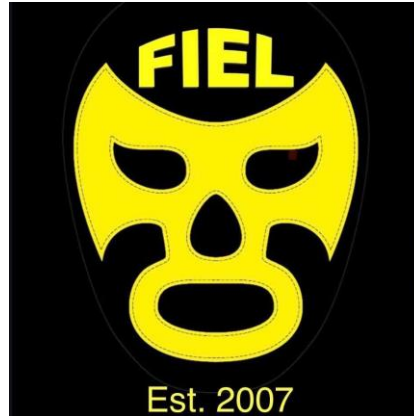
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# The **LONG ROAD AHEAD**

Challenges working families faced accessing resources during the Covid 19 pandemic





# **FIEL Houston**

## **COVID-19 Vaccine Initiative**

### Survey Analysis Report

**July 2021**

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**From our Executive Director**



Covid 19 has hit our region particularly hard. As I sat in quarantine along with my fellow Texans I lost sleep over the question of how our community would fare. As usual we got a lot of stories about resiliency but we also received a lot of stories of frustration and peril. We began to wonder as to how we could “help out” and make sure that we got our community the resources they needed. For that reason we garnered support and were able to put together a canvassing effort to make sure that we talked to our community. In this report you will find many eye opening findings. We hope that these finding will help to craft policies in the future to maximize the aid towards often forgotten communities. Our community continues to be essential prior to during the and after the pandemic.

-Cesar Espinosa  
Executive Director FIEL  
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**Jazmine Orazi** is a research strategy and data consultant primarily focusing on health services research projects. Ms. Orazi has over a decade of experience conducting research and evaluation projects for government agencies and private organizations. Ms. Orazi worked at the American Institutes for Research (AIR) for over seven years as a Health Services Researcher and Project Director. Prior to her work at AIR, Orazi served as a Research Associate and Project Coordinator at the University of Texas-Center for Health Promotion and Prevention Research (CHPPR). Her work at the CHPPR included leading quantitative and qualitative data collection and analysis tasks for a National Cancer Institute (NCI) study aimed at promoting smoke-free homes in low-income, Latino populations. She also worked on a public health intervention project aimed at increasing cancer screening and HPV vaccination rates in Houston, El Paso, and the Rio Grande Valley. Orazi received a Masters of Public Health degree in Health Services Research from the University of Texas School of Public Health in Houston and a Bachelor of Science in Human Development and Family Sciences from the University of Texas at Austin.

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## Introduction

FIEL is a community-based organization advocating for social justice, access to higher education, and the overall well-being of immigrant and underserved communities in the greater Houston area. In March of 2021, FIEL implemented a public health initiative to register individuals to receive the COVID-19 vaccine and assess how vulnerable communities were affected by the COVID-19 pandemic. The initiative took place during the first three weeks of March and consisted of community health workers or *promotoras* conducting socially distanced home visits with the aim to register individuals for COVID-19 vaccine appointments. The *promotoras* also collected a series of data items about the effects of the COVID-19 pandemic on the respondent's household. The data items focused on barriers to access COVID-19 vaccines, concerns about the COVID-19 vaccine, and the type of support needed during the pandemic.

Through this initiative, FIEL *promotoras* knocked on 7,710 doors and were able to engage 1,942 respondents for vaccine registration. While not all respondents were willing to register for the COVID-19 vaccine or answer every question on the survey, FIEL *promotoras* successfully collected vaccine status data on 1,974 respondents, vaccine barrier data on 509 respondents, and vaccine attitude data on 415 respondents. The *promotoras* also collected data on support needed from 995 respondents.

As part of this initiative, we analyzed the FIEL Houston COVID-19 Vaccine Project data to better understand the pandemic experience in these communities and to identify any key barriers to COVID-19 vaccination.

## Analysis Approach

The major focus of this analysis is to assess the following two research questions:

1. What are the key barriers and attitudes to getting a COVID-19 vaccination in the targeted communities?
2. What effects has the COVID-19 pandemic had on the targeted communities?

To assess research question 1, we examined descriptive statistics on items on vaccine status, vaccine barriers, and vaccine attitudes. We also looked at these items by zip codes and insurance status. Similarly, to assess research question 2 we examined descriptive statistics on the item, “What has been your greatest need during the COVID-19 pandemic?” All analyses were conducted using R Statistical Software (version 4.0.5; R Foundation for Statistical Computing, Vienna, Austria).

We also collected testimonies from the *promotoras* on their field experience to help supplement the quantitative findings.

## Findings

### Vaccine Status

Overall, we found evidence to suggest improvements in the current vaccine registration processes. Below we highlight key findings examined by respondent insurance status and zip code. When interpreting the findings in the following sections, it is important to keep in mind that during most of this project vaccine appointments were limited to individuals over the age of 65, individuals with conditions increasing their risk of severe illness due to COVID-19, healthcare workers, and education workers. The state of Texas opened vaccine appointments to all individuals age 16 or older during the last week of this project on March 29, 2021.

## *Insurance Status*

- When asked about their COVID-19 vaccine status, (Item 1. “Have you been vaccinated?”) most respondents with at least one household member either eligible for Medicaid or uninsured indicated that they had not been vaccinated and needed help signing up (51% and 50% respectively).
- In contrast, most respondents with at least one household member eligible for Harris Health’s Financial Assistance program (Gold Card) indicated that they had been vaccinated (41%). While this is promising information about the vaccination roll-out approach at Harris Health, it is important to highlight that almost 40% of the Gold Card population surveyed indicated that they had not been vaccinated and needed help signing up.
- The percentage of respondents indicating that they had been vaccinated was the highest among those with at least one household member with private insurance (56%).
- When examined by insurance status, the percentage of respondents stating that they were uninterested in being vaccinated was relatively low. However, it is important to note that the percentage of respondents indicating being uninterested in being vaccinated was the highest in those with at least one uninsured household member (16%).
- We present figures illustrating details about these findings below.



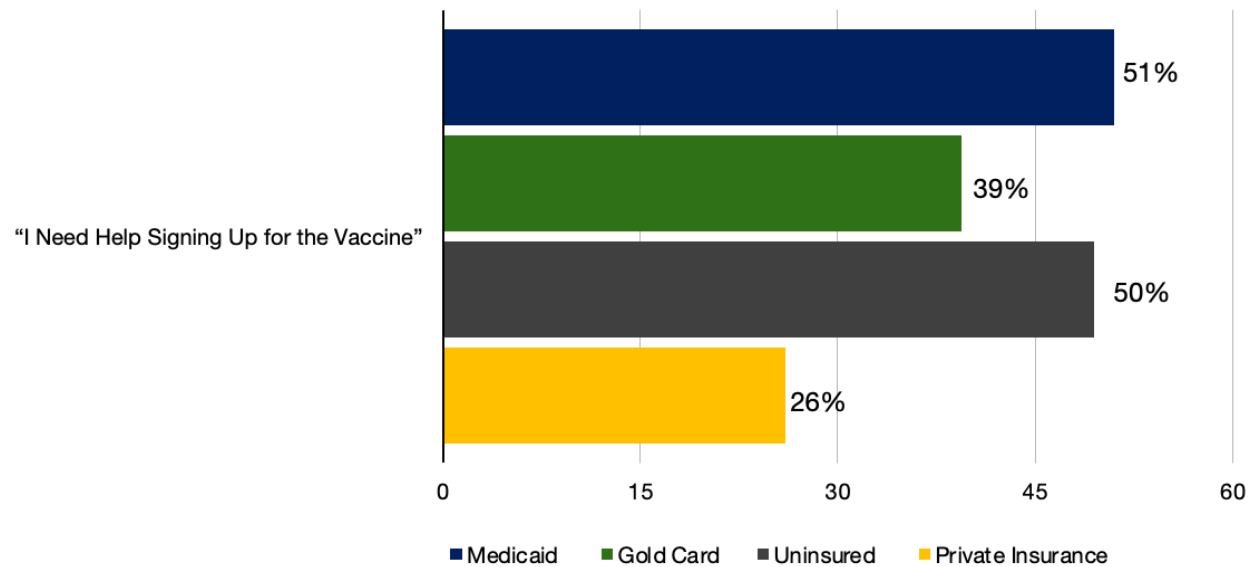
**Table 1. Responses to “Have you been vaccinated?” By Insurance Status**

	Medicaid	Gold Card	Uninsured	Private Insurance
Yes, I have been vaccinated	30%	41%	30%	<b>56%*</b>
No, but I am on a waitlist	9%	9%	5%	11%
No, but I need help getting signed up	<b>51%*</b>	39%	<b>50%*</b>	26%
Not interested in being vaccinated	11%	11%	<b>16%*</b>	7%

Note: For readability, percentages have been rounded to the nearest whole number.

\* indicates highlighted finding

**Figure 1. Percentage Needing Help Signing Up For Vaccine By Insurance Status**





*“The need was visible and at the end of the registration process the people were extremely thankful. On some occasions we had to provide them with correct information about vaccine facts, because they were being influenced by false information” —FIEL promotora*

FIEL promotora registering a young family for COVID-19 vaccine

### *Zip Code*

- We focused the zip code analysis on the zip codes mentioned in the sections below because 95% of respondents were located in those four zip codes. When examined by zip code, the overall percentages of respondents reporting being vaccinated appeared promising. At least 30% of respondents reported being vaccinated in each of the four zip codes.
- The highest percentage of respondents indicating that they needed help signing up to be vaccinated was located in the 77502 zip code representing the South Houston and Pasadena areas (42%).
- One of the most notable findings is that the percentages of respondents indicating that they are uninterested in receiving the COVID-19 vaccine appear relatively high when examined by zip code. The exception to this finding is the 77502 zip code with only 3% of respondents indicating that they are not interested in receiving a COVID-19 vaccine.

- The highest percentage of respondents indicating that they are not interested in being vaccinated was located in the 77504 zip code. Here, about 25% of respondents reported not being interested in receiving a COVID-19 vaccine.
- An explanation for this difference in percentages when compared to the insurance status analysis is that not all respondents disclosed their insurance status, however the *promotoras* were able to record almost all respondent zip codes. Therefore, the zip code data was nearly complete allowing for a more accurate analysis of the responses.
- We present figures illustrating details about these findings below.

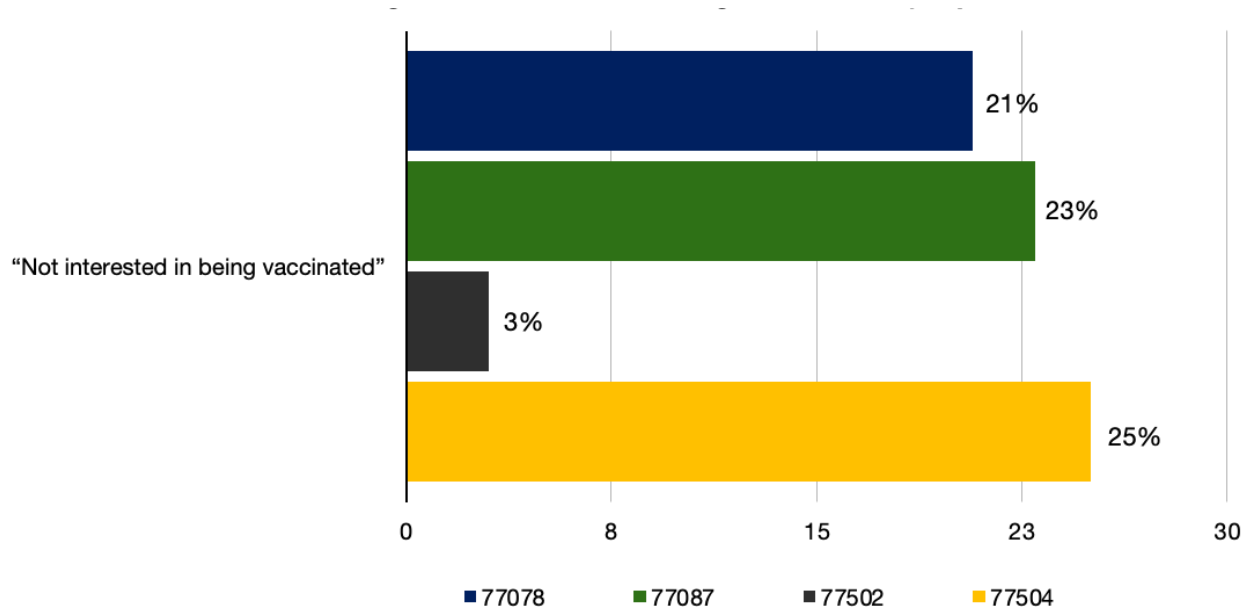
**Table 2. Responses to “Have you been vaccinated?” By Zip Code**

	<b>77078</b>	<b>77087</b>	<b>77502</b>	<b>77504</b>
Yes, I have been vaccinated	53%	39%	40%	32%
No, but I am on a waitlist	6%	8%	16%	10%
No, but I need help getting signed up	21%	30%	<b>42%*</b>	34%
Not interested in being vaccinated	<b>21%*</b>	<b>23%*</b>	3%	<b>25%*</b>

Note: For readability, percentages have been rounded to the nearest whole number.

\* indicates highlighted finding

Figure 2. Percentage Not Interested in Being Vaccinated by Zip Code



*“Durante el proyecto me sentí muy contenta de poder tener mas información sobre las vacunas y poder ayudar a muchísima gente sin acceso al internet” / “During this project I felt very happy to have the information about vaccines and to be able to help many people without internet access—FIEL promotora*

FIEL *promotoras* engaging a community member for COVID-19 vaccine registration

## Vaccine Barriers

- The overall top three barriers to getting a COVID-19 vaccine in order of priority are listed below:
  1. I don't know where
  2. Work hours
  3. Nothing close to me
- When examined by zip code most respondents indicated “I don't know where” as the top barrier to obtaining a COVID-19 vaccine.
- Work hours was the second most common barrier that respondents noted. 23% of respondents in 77078, 21% of respondents in 77087, 14% of respondents in 77502, and 22% of respondents in 77504 indicated that work hours were a barrier to obtaining a COVID-19 vaccine.
- While the percentage of participants citing distance (i.e., “Nothing close to me”) as a barrier was relatively low in most zip codes when compared to the first two top barriers, 31% of respondents in 77504 indicated that distance was a barrier for them. This finding calls for a need for information about the location of vaccination sites and a possible need for more accessible vaccination sites in the Pasadena area. We present figures illustrating details about these findings below.

**Table 3. Top Barriers to Receiving a Vaccine By Zip Code**

	<b>77078</b>	<b>77087</b>	<b>77502</b>	<b>77504</b>
I don't know where	60%	74%	53%	66%
Work hours	23%	21%	14%	22%
Nothing close to me	6%	5%	<b>31%*</b>	12%

Note: For readability, percentages have been rounded to the nearest whole number.

\* indicates highlighted finding

## Vaccine Concerns

- The overall top three concerns for not wanting to get a COVID-19 vaccine in order of priority are listed below:
  1. Vaccine safety
  2. Vaccine side effects
  3. Need more information
- In addition, over 25% of respondents indicated that they refused to provide details about why they did not want to receive the COVID-19 vaccination. This finding suggests respondents are concerned about discussing why they may be vaccine hesitant. This finding also supports the need for evidence-based education about the COVID-19 vaccine in these communities. The vaccine education should be tailored to the needs of the community and be delivered in a way that is both understanding and compassionate to the concerns of the community members.
- We examined the zip codes expressing the highest rates of vaccine hesitancy based on responses to Item 1 (77078, 77087, 77504). Most respondents in these zip codes indicated that they refused to answer why they did not want to receive a COVID-19 vaccine.
- For those individuals that did disclose a reason for not wanting to receive a COVID-19 vaccine, vaccine safety was the top reason. We present details about these findings in the table below.

**Table 4. Top Reasons for Refusing Vaccine By Zip Code**

	<b>77078</b>	<b>77087</b>	<b>77504</b>
Vaccine Safety	<b>23%*</b>	<b>26%*</b>	18%
Side Effects	6%	19%	12%
Refused to answer why	<b>47%*</b>	27%	29%

Note: For readability, percentages have been rounded to the nearest whole number.

\* indicates highlighted finding

## Greatest Need

- Most respondents indicated that their greatest need was something other than the response options provided. The *promotoras* indicated that based on their interactions with respondents, cash assistance for food or utilities was a common need expressed in this population.
- Assistance related to the effects of job loss was cited as the top need for most respondents that did specify their greatest need during the COVID-19 pandemic. 21% of respondents in 77078, 40% of respondents in 77087, 21% of respondents in 77502, and 29% of respondents in 77504 indicated that assistance related to the effects of job loss was their greatest need during the pandemic.
- The percentage of respondents indicating assistance with rent or mortgage as their greatest need was notably higher in the 77087 zip code. 22% of respondents in 77087 reported needing assistance with rent or mortgage, compared to 13% of respondents in 77078, 14% of respondents in 77502, and 15% of respondents in 77504.

**Table 5. Responses to “What has been your greatest need during the COVID-19 Pandemic?” By Zip Code**

	77078	77087	77502	77504
Rent or mortgage	13%	<b>22%*</b>	14%	15%
Job loss	21%	<b>40%*</b>	21%	29%
Access to aid for immigration status	0%	3%	2%	1%
Other	66%	36%	63%	55%

Note: For readability, percentages have been rounded to the nearest whole number.

\* indicates highlighted finding

## **Conclusion**

As COVID-19 vaccination efforts continue, it is critical that policymakers and other stakeholders keep in mind the needs of communities that may be harder to reach. We want to highlight three key findings that emphasize the needs of the communities participating in this vaccine initiative. First, while the percentage of respondents reporting already being vaccinated appeared promising, at least 20% of respondents in 3 out of the 4 zip codes analyzed indicated that they were not interested in obtaining a COVID-19 vaccine. In addition, a slightly higher percentage of respondents in all zip codes reported needing help signing up to get a vaccine. This finding suggests an increased need for educational information about the COVID-19 vaccine and a need for assistance signing up people for vaccine appointments in these communities.

Second, out of those respondents that did not want to obtain a COVID-19 vaccine, most did not want to indicate why they were against receiving the COVID-19 vaccine. The respondents that did specify why they did not want to receive the vaccine indicated concerns about vaccine safety and side effects as the primary concerns. This finding further supports a need for educational information about the COVID-19 vaccine. Furthermore, because respondents appeared to be sensitive about discussing their reasons against receiving a vaccine, there seems to be a need for a compassionate educational approach that meets people where they are and does not shame any concerns or questions that community members may have.

Third, when asked about their greatest need during the pandemic, those respondents that did specify a need, overwhelmingly indicated that assistance related to the effects of job loss was their greatest need. This finding sheds light on the notion that although most businesses have reopened, many families are still struggling with the economic hardship of job loss during the pandemic. It is important that local and state government officials keep these families in mind particularly as they make plans to phase out unemployment benefits and other forms of pandemic-related social support systems. We hope that this report will inspire conversations among community stakeholders about ways to improve vaccination efforts and other community needs.



## Recommendations

We propose the following recommendations to help address some of the community concerns that were found as part of the FIEL vaccine initiative.

- **COVID-19 vaccine health education campaign aimed at addressing vaccine hesitancy.** We recommend a health education campaign aimed at addressing vaccine hesitancy. This could be done in partnership with the UT School of Public Health or the many other reputable expert institutions in the Texas Medical Center. In addition, due to the success of FIEL's vaccine initiative, we recommend that *promotoras*, representative of the targeted communities, conduct most of the outreach and delivery proposed campaign.
- **Workforce resource assistance for families experiencing economic hardship as a result of pandemic job loss.** We recommend that community stakeholders consider extending benefits aimed at helping families struggling with the effects of job loss during the pandemic. These benefits could be in the form of workforce reentry programs or workforce training programs, as well as connecting these families to available resources such as SNAP and WIC.
- **Direct Community input models.** We recommend developing more direct community input models. In order to understand our community we must do a better job at asking them for their input. In our number of years of experience a proven method to have buy in from the community is to come to meet them where they are. Many members in our community do not have access to transportation or other means of receiving information. This proved to be a particular challenge during the Covid 19 Pandemic.
- **Money allocation for canvassing.** We recommend that after every disaster that occurs in Houston, Harris and the surrounding areas that we allocate funding for hands on community organizing. We must restore faith in government and must make sure that we make those connections that are integral to having community voices. We must understand that not everyone will actively reach out to government so we must do as much due diligence as possible to make sure that the community gets the much needed information.

- **Preventative care.** We recommend that we do a better job to get all communitive members on a path to preventative care. We know that many members of the immigrant community and communities of color face a disadvantaged access to healthcare. We must push policies forward to have a better outreach in these communities so that when the next emergency arises we can be better prepared to face these situation head on.
- **Community navigators.** We recommend that in every program that is built that is meant to hand out resources to the masses that there are “Navegadores” or navigators available to answer community questions and/or guide people through the processes. Special attention must be paid to how information is presented and in the way questions are framed to not overburden people already in precarious situations. This can be done by taking that into account as a line item to be considered as part of budgets for projects.
- **Community trust.** We recommend partnering with organizations like FIEL or other community based organizations to leverage community trust. One of the reasons why we were able to get so much community input for this survey was that for the past 14 years FIEL has been in the community day in and day out providing direct assistance to the immigrant community and communities of color. We provide guidance on a variety of issues including after natural disasters. We as an institution have established deep roots in our community and it showed in the community’s trust in sharing their experiences with our Promotoras. The intentional work of creating connections across different communities also vastly contributed positively in this effort.

**For a digital copy of this report please visit**  
**[www.fielhouston.org/covid19](http://www.fielhouston.org/covid19)**

**A Special Thank you to the FIEL TEAM, the people that made this initiative possible, our canvassing coordinator Alain Cisneros and to our team of Promotoras.**

**A very special thank you to our community for your trust.**



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