

COVID-19 Rural Vaccination Success Story: Rio Arriba County, NM



Percentage of population that have completed a primary COVID-19 vaccine series (November 2022)

82.6%

Population (U.S. Census Bureau)

40,363

Demographics (U.S. Census Bureau)

American Indian or Alaska Native
(non-Hispanic): 14.3%

Asian (non-Hispanic): 0.5%

Black (non-Hispanic): 0.4%

Hispanic or Latino: 71.2%

White (non-Hispanic): 12.4%

Health Department Governance

Centralized, except for the county-run Rio Arriba County Department of Health and Human Services

Key Vaccination Strategies



Background

Located in northern New Mexico, Rio Arriba County has a population of 40,363 that is predominantly Hispanic/Latino (71.2 percent) and Native American (14.3 percent). The county includes the Ohkay Owingeh and Santa Clara Pueblos, as well as part of the Jicarilla Apache Nation Reservation.

The Rio Arriba County Department of Health and Human Services (RAHHS) is the first county-run health and human services department in New Mexico to have a largely centralized public health system. RAHHS provides funding, staffing, and coordination for—and is a member of—the Rio Arriba Community Health Council, a local cross-sector planning and advisory board that reports to Rio Arriba's County Commissioners.

Prior to the COVID-19 pandemic, the Council had experience developing county-wide responses to major health crises, including the opioid epidemic. County leaders had a history of working collaboratively to maximize limited rural resources while recognizing community-specific cultural values. When COVID-19 infection rates began to rise, they leveraged this experience and existing infrastructure to disseminate information and mobilize the community. In addition to drawing on community strengths, vaccination efforts also directly addressed major local systemic challenges to health care access, such as transportation and lack of internet connectivity.

Methods

We conducted in-depth interviews with representatives from 11 organizations involved in the county's COVID-19 vaccination campaign. They included the RAHHS, the New Mexico Department of Health (NMDOH), Presbyterian Española Hospital, Rio Arriba County and City of Española Emergency Services, and local clinics. We also interviewed 10 residents about their COVID-19 experiences.

Core Partners

The following partners joined RAHHS in vaccinating the greatest possible number of residents:

- Rio Arriba Community Health Council
- Presbyterian Española Hospital
- The New Mexico Department of Health (NMDOH)
- Federally Qualified Health Clinics and Rural Health Clinics (e.g., El Centro Family Health, Las Clínicas Del Norte, and La Clínica Del Pueblo de Tierra Amarilla)
- Emergency management directors from Rio Arriba County and the City of Española
- Indian Health Service (IHS)
- Local media/KDCE Radio
- North Central Regional Transit District
- Business partners (e.g., Walmart)
- Northern New Mexico College
- Local school districts (e.g., the Española Public Schools, Chama School District, and Charter Schools)
- Rio Arriba County Board of County Commissioners
- Rio Arriba Benefits Enrollment Center
- Volunteer fire departments
- Española Pathways Shelter
- Rio Arriba Senior Programs

Key Strategies



Working with Partners

Local Partners

Prior to the pandemic, Rio Arriba County had established a strong network of local partners—which included local clinics, schools, churches, transportation agencies, hospitals, economic and development groups, government officials, and others—that met regularly to discuss priority health topics. By activating these longstanding partners, the county was able to quickly pivot to COVID-19 emergency operations, and coordinating vaccine efforts, developing consistent messaging, and identifying local leaders to disseminate information about vaccination.

At the pandemic's onset, Rio Arriba Community Health Council pulled together an Infectious Disease Taskforce that helped make and distribute masks, establish testing sites and, later, coordinated vaccination efforts. The RAHHS and its partners also identified local leaders who could help distribute information about the vaccine and build confidence in the county's vaccination efforts.

State & National Partners

County leaders worked closely with the NMDOH to plan and execute vaccination clinics. The NMDOH's northeast regional director for public health met with the RACHC and its task force to coordinate plans and ensure that the demand for vaccines was being met. The NMDOH's mobile vaccine teams also traveled across the county, to help vaccinate community members and distribute vaccine supply to many Federally Qualified Health Centers and smaller towns.



Conducting Community Outreach & Engagement

Community outreach and engagement were central to Rio Arriba’s vaccination strategy. Core elements included working with community partners to facilitate vaccination registration, to educate community members, and to leverage frequently used communication channels.

Multiple community organizations—including RAHHS, the Presbyterian Española Hospital, and City of Española Emergency Management—helped identify and register community members for vaccine appointments. In particular, the hospital used electronic health record data to identify all patients age 75 and older, and contacted them as soon as the first vaccines became available. Registration assistance was critical to successfully vaccinating community members who spoke Spanish and local Indigenous languages, and older adults who experienced challenges with navigating online appointment systems.

Because radio is a major communication channel in Rio Arriba County, where many communities lack access to reliable broadband service, the RAHHS director made twice-weekly radio appearances to provide updates on the county’s COVID-19 response, daily hospitalizations, and vaccine availability. To reach the entire community, broadcasters also provided information about vaccination events in both Spanish and English. The City of Española Emergency Manager also used social media to interact with community members and share information.



Using Trusted Messengers

Trust is an essential component of vaccine uptake. In Rio Arriba County, trusted messengers included faith-based organizations, health care providers, and local media personalities, such as radio DJs.

Health care providers and representatives from county agencies and community-based organizations attended community events to build trust in the vaccine and raise awareness of vaccination opportunities. These trusted messengers used a combination of small forums and one-on-one conversations with community members to answer questions about the vaccine and address misinformation that contributed to vaccine hesitancy, such as vaccine side effects circulating on social media, including the vaccine’s impact on fertility.

Local churches also granted county leaders time to talk about COVID-19 vaccination at the end of services and helped co-host vaccination clinics. The Archbishop of Santa Fe even wrote a letter to local pastors encouraging them to promote the vaccine.



Offering Mobile, Off-Site & Drive-Through Clinics

Establishing multiple vaccination sites helped ensure that all community members could conveniently receive the vaccine. The NMDOH and Presbyterian Española Hospital were key to vaccine distribution, coordinating with local clinics to provide drive-up and pop-up vaccination events. Pop-up clinics were held at multiple familiar and convenient locations in the community, including schools, senior centers, community centers, colleges, and churches. Rio Arriba County also made vaccination more convenient and accessible by:

- Offering multiple options for making a vaccination appointment, including online, by phone, or simply walking in
- Hosting clinics on multiple days of the week, at times that made the vaccine available to every community member regardless of their schedule
- Ensuring that vaccine clinics did not conflict with important community events, such as church services
- Using efficient scheduling—such as vaccinating people with last names starting with A-N on one day and M-Z on another—to reduce bottlenecks and lines
- Tailoring vaccination appointments to the needs of community members, including allowing more time to discuss hesitancy or to process older adults, and others, with mobility issues
- Holding clinics in remote county corners, to cut travel time for the most rural residents
- Visiting homebound community members
- Offering school-based clinics for K-12 students

“I think the other thing that we need to look at in rural communities is flexibility. If you can only do one pop-up clinic once a week, what's the biggest bang for your buck? Is that a Thursday afternoon? If you do it on a Sunday morning, is that going to conflict with church?”

- New Mexico Department of Health



Overcoming Transportation & Other Access Barriers

Lack of transportation is a major barrier to vaccine access in Rio Arriba County. Several partners worked together to overcome this hurdle by providing rides to vaccine clinics and in-home vaccination.

Specifically, due to a drop in demand for bus services during the pandemic, New Mexico's North Central Regional Transit District was able to offer on-demand, curb-to-curb bus services for vaccination. Staff from Rio Arriba's senior centers also picked up clients at their homes and drove them to local vaccine clinics.

Furthermore, county and local emergency management agencies, hospitals, and clinics partnered to identify community members with limited mobility who were open to receiving the vaccine at home. Emergency medical service volunteers, nurses, and other vaccinators made home visits to administer the first and second vaccine doses.

“Whether it’s a mobile food pantry or a mobile vaccination clinic, anytime that we’re able to create ease of access to services for populations that are more remote—by bringing that resource to them directly—that facilitation makes a significant difference. Creating ease of access is critical.”

– Española Pathways Shelter



Using Employer Incentives & Mandates

Requiring vaccination to maintain employment is another tactic that led some residents of Rio Arriba County to get vaccinated, including at facilities affiliated with the federal government, such as the Los Alamos National Laboratory. The NMDOH also offered \$100 incentives for vaccination, which were effective at increasing vaccination rates among younger county residents.

Community Member Vaccination Experiences

We conducted in-depth interviews with 10 residents. They reported no issues with accessing the COVID-19 vaccine when they were ready to receive it. Many had to overcome initial hesitation about being vaccinated, including concerns about the short timeline for vaccine development, the lack of information about long-term effects, or a lack of trust in the medical establishment and government.

They said that the following factors helped convince them to get vaccinated:



Talking with people—especially family members—who were familiar with vaccine research



Discussing the experience of family members and friends who received the vaccine without any adverse consequences



Getting encouragement and reassurance from their personal health care providers about the safety of the vaccine



Receiving a mandate from their employer to get vaccinated

Promoting Vaccines in the Jicarilla Apache Nation

The Jicarilla Apache Nation worked directly with contacts at the federal, state, and local level to vaccinate community members. The tribe's emergency manager initially reached out to the Federal Emergency Management Agency, the State of New Mexico, the local IHS clinic, and other tribes in the region to understand best practices for responding to the pandemic and sharing resources. The emergency manager also worked closely with state entities to deliver vaccines and provide essential services. For example, the NMDOH helped establish drive-through testing and vaccination sites, and the New Mexico National Guard assisted with delivering vaccines and running the events. The Jicarilla Apache Nation received vaccines directly from the federal government because of their government-to-government relationship. While the state vaccine stock was still limited, they also used this federal supply to vaccinate community members who worked or lived in the areas surrounding their tribal lands.

Tribal leaders used multiple strategies to promote the COVID-19 vaccine. The emergency manager used Facebook Live to provide frequent updates on COVID-related hospitalizations and deaths among tribal members, and to discuss information about the vaccine. Information on the toll of early COVID deaths and severe complications was also shared, and motivated many community members to get vaccinated. In addition, the tribal council tied the lifting of stay-at-home orders, curfews, and weekly testing requirements to sufficiently high vaccination rates, further motivating tribal members to get vaccinated.

Takeaways for Other Rural Communities

1. Identify strategies to “meet people where they are,” to make the vaccine convenient.

The Rio Arriba response focused on reducing barriers to COVID-19 information and vaccination. Successful strategies included conducting home visits to vaccinate community members with mobility challenges, arranging transportation to vaccine sites, and assisting with vaccine-appointment registration. In small communities, they identified convenient locations—like post offices—to disseminate vaccination materials and to hold events. At local clinics, providers used regularly scheduled appointments to ask patients if they wanted the COVID-19 vaccine.

2. Work with existing partners to make emergency preparedness plans to quickly mobilize resources when an emergency occurs.

Rio Arriba’s pre-existing, flexible, and nimble partnership network helped public health leaders quickly mobilize and coordinate efforts for the COVID-19 vaccine response. Leaders leveraged this existing infrastructure to create multi-sector task forces that focused on different aspects of the pandemic response.

3. Keep the community continuously informed with consistent messaging, to combat misinformation, build trust, increase vaccination rates, and facilitate coordination.

Successful vaccination efforts required clear, consistent, and repeated communication from county leaders to the public. Rio Arriba County leaders used multiple tactics to communicate timely, consistent information about vaccination opportunities and to combat misinformation about the vaccine. For example, the RAHHS Director provided twice-weekly radio updates about the pandemic response, including on vaccine availability and vaccination clinics. Other tactics included online and social media updates and telephone outreach (including robocall reminders about events). Open communication between county leaders and the public was also vital to building trust in COVID-19 vaccines. To engage the public, county leaders attended community events across the county and shared their own phone numbers so community members could contact them directly with questions or hesitations about the vaccine.

Methodology

On behalf of the Centers for Disease Control and Prevention (CDC), NORC at the University of Chicago (NORC) and East Tennessee State University (ETSU) conducted a qualitative study to better understand vaccine confidence and demand in rural communities. The study explored the following topics related to COVID-19 vaccination in rural communities: factors influencing COVID-19 vaccine confidence; strategies implemented to address vaccine demand and access barriers to increase COVID-19 vaccination rates; individual-level perspectives on COVID-19 vaccination in rural areas; and lessons learned related to COVID-19 vaccination efforts for rural communities. The qualitative study included case studies in six rural communities. Between April and July 2022, NORC/ETSU interviewed organizations involved in COVID-19 vaccination efforts and community members who had received the COVID-19 vaccine. Organizations and community members were recruited from the following study sites: Leflore and Jefferson Counties, MS; Marshall County, IA; North Country Region (Carroll, Coos, and Grafton Counties), NH; Perry County, KY; Rio Arriba County, NM; and Starr County, TX.