The logo features the text "NC Rural Coalition Fighting COVID-19" in orange and white on a dark blue background. To the right, there is a graphic of overlapping triangles in shades of blue, orange, and grey, forming a larger triangular shape that points to the right.

## NC Rural Coalition Fighting COVID-19

### NC Rural Coalition Fighting COVID-19 February 17, 2021 Meeting Notes

Facilitators: Todd Brantley, VP of Public Affairs, NC Rural Center  
Misty Herget, VP Programs & Strategic Partnerships, NC Rural Center

Speakers: Dr. Heather Kilbourne, NC Rural Center  
Dr. Dawn Baldwin Gibson, Peletah Ministries  
Brian Foreman, Campbell University Center for Church & Community

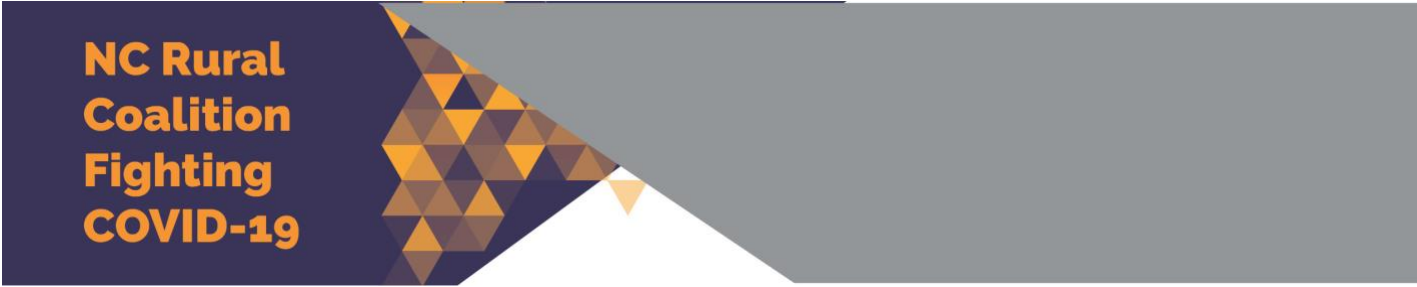
Todd Brantley opened the meeting with a review of the Coalition's structure and mission. The NC Rural Coalition Fighting COVID is comprised of the Rural Center, the Governor's Hometown Strong group, NCAHEC, the Governor's Office of Public Engagement and the Foundation for Health Leadership & Innovation. It is a statewide partnership working with the Office of Rural Health and the NC Department of Health & Human Services to disseminate resources and information to rural communities about prevention of COVID-19 and logistics regarding vaccine distribution.

The mission of the coalition is to unite rural residents, partners and community organizations to raise awareness in the prevention of COVID-19 in rural areas, as well as provide information about vaccine deployment. The calls provide a feedback loop to hear barriers, innovations and successes in the rural communities.

The theme for today is the role of rural faith communities in preventing and fighting COVID-19.

Dr. Kilbourne stated that, during the pandemic, churches have been innovative and responsive to community needs. The NC Rural Center has sponsored grants to support them. The faith communities initially focused on creating hotspots and Wi-Fi access for students. They subsequently addressed food insecurity by partnering with local food banks, and purchasing food from restaurants and local farmers.

Dr. Heather identified four levels of COVID response: international, national, state and local. The local challenge is getting the vaccine to the people, and getting the people to the vaccine. Dr. Kilbourne identified two ways churches could help: 1. As trusted community members, they can spread the word that the vaccine is safe. Many don't trust the government, but do trust clergy, friends and neighbors. There needs to be a deliberate effort to share stories, via word of mouth in small, underserved communities, from those who have received the vaccine to reassure others that the vaccine is safe. 2. Churches can help with vaccine access by offering their location as a vaccine site. The NC Council of Churches is compiling a list of churches who will support vaccine distribution in their area, which will be shared with NCDHHS. Also, contacting local health centers and hospitals to facilitate vaccine distribution is another idea.

The logo for the NC Rural Coalition Fighting COVID-19 is located at the top left of the page. It features the text "NC Rural Coalition Fighting COVID-19" in a bold, orange, sans-serif font. To the right of the text is a graphic consisting of a series of overlapping triangles in shades of orange, yellow, and grey, forming a larger triangular shape that points to the right.

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Churches could attract participants to a vaccine distribution event by pairing it with a fundraiser. She suggested a pork 'n poke event. Churches could also work with retired nurses or local pharmacists to bring the vaccine to the homes of those who are unable to travel. There are churches in every community, so there is an existing network in place for vaccine distribution, and as trusted messengers to get the word out.

What are strategies to coordinate the communication between faith communities, who generally don't communicate with each other? Ministerial councils exist in many counties, denomination and regional resources are available for churches to connect with each other. Existing systems at the local level must be utilized for the churches to communicate.

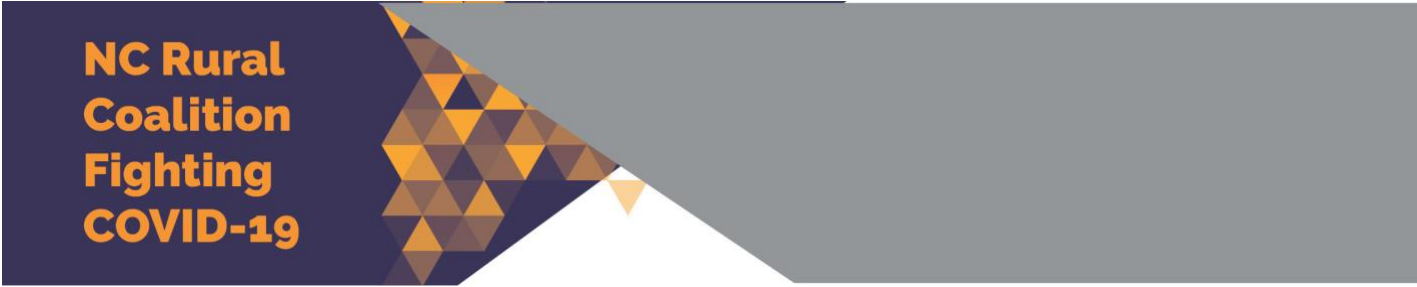
Dr. Dawn Baldwin Gibson of Peletah Ministries, which serves Craven, Pamlico and Jones counties, said many communities were still responding to the devastation caused by Hurricane Florence when COVID struck. Many churches were already closed and trying to rebuild. There was so much misinformation locally that it was essential to find a method to disseminate accurate information. Many churches closed their doors due to COVID and offered virtual services, which was challenging for the aging population. Peletah Ministries reached out to churches to find out how to support them. Education and testing were the key issues. Food insecurity was already an issue and was amplified by COVID. Any event addressing COVID was coupled with food. If people were only focused on getting their needs met, they would not be as focused on testing and vaccines.

Education was promoted through social media, conference calls and church leaders to give to their communities. Goshen Medical Center partnered with churches to do COVID-19 testing coupled with food distribution through the local food bank. More than 1000 individuals were served in one day.

The impact of stress on the immune system is a concern, so to help de-stress local populations, Peletah offered Emergency COVID-19 Rental Assistance with funding through Blueprint NC to alleviate concerns about eviction.

Other programs and events sponsored by Peletah Ministries include:

- Peletah Ministries offered a Digital Literacy Class to help parents have resources for teaching their newly homeschooled children.
- NC Healthcare Association offered a grant for project Resilient Health for impacted communities to get resources to improve health, which included a dietician, health management and mental health services.
- The Foodbank of Central and Eastern NC provided food for 75-80k individuals last year.
- NC DHHS offered a Vaccine 101 webinar, where people could call in and ask questions held on multiple social media platforms. There has been a distrust of health care systems and this brought accurate information to local communities. More than 2K people have viewed the presentation.

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- Health, food and mental health concerns are ongoing and Peletah Ministries continues to offer forums to help communities. The Ministry is staying connected through the Eastern NC Disaster Resources Facebook page.

Responding to a question regarding what faith communities can do to help in post COVID recovery, Dr. Dawn suggested to start planning now for the next 12 months, and learn how to support devastated communities with the support of rural coalitions. Look at the long-term goal of how to emotionally balance loss of family, reduced work hours, and the other effects of the pandemic.

Brian Foreman outlined the efforts of the Campbell School of Medicine to address COVID-19 and has partnered with local congregations and the Dunn United Ministerial Association to run vaccine clinics in Harnett County. The Divinity School at Campbell was contacted by NCDHHS to do a webinar for alumni, which was promoted through social media to local faith leaders. It was initially difficult for faith leaders to find information they could trust. By partnering with other networks and sharing information, more accurate information is dispersed. Many programs appear invisible to those not living in communities. To find those, clergy can be tapped as resources. Demands on clergy since the beginning of the pandemic have been high. They may not be getting accurate information and they may face a community that doesn't believe the government-issued messages. Continue moving the good work forward. He suggested the following practical solutions for congregations to use:

- Make presentations available for faith leaders and communities.
- Make use of parking lots and facilities for mass testing and vaccine events.
- School of Medicine will travel to do a clinic in Harnett and surrounding counties.
- Digestible bites – show congregation members that social distancing is not a penalty, but a sign of caring.
- Drive through options
- Ride sharing for seniors

Good information and specific ideas for participation both need to be included in communication with churches.

Brian responded to a question of, are there better methods to work regionally across county lines to work with the faith community in other areas, as Campbell has done? He advised, be better listeners for who's doing good work, join with them, amplify and connect with other networks to do good work together.

Open discussion led to the following comments:

- It's important to think creatively and innovatively.
- Use relationships built through the pandemic to be able to respond to the next crisis.
- Look at lessons learned to move forward; disasters can happen any time.

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- Build trust with community health workers to craft messages to alleviate community fears and concerns due to mis-information.
- Use different messaging to resonate with different communities.
- There was a shift in communities who were initially hesitant, when the effects of COVID were more apparent.
- One of the barriers to funding is access and knowing who the providers are and who to call, including knowing how to access the vaccine.
- Requests for participation from clergy should be specific asks and tailored to the size of the staff.
- Navigating knowing where to go for funding has to be discerned even outside of the disasters. Building relationships with people you don't know is a challenge, and people feel left behind.
- An example of using power to move the funding structure was a program was set up to pay people for getting their friends to complete the census. The people who were typically overlooked became engaged. The same idea can be used to empower individuals in marginalized communities, by paying them to help people get access to the vaccine.
- Local churches are asked to register large numbers of vaccine recipients on extremely short notice. A system could be developed to create a quickly accessible waiting list.
- Collaboration between community members can help address this and to bring the vaccine to the community and the community to the vaccine.

**The next coalition Zoom meeting will focus on equitable access of the vaccine on February 24<sup>th</sup>, 2021 at 9:00am.**