Submission Id: 4422

Title

MivacunaLA a mobile phone-delivered intervention to improve COVID-19 vaccination behaviors among Latino Families

Priority 1 (Research Category)

COVID-19

Presenters

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Abstract

Context: COVID-19 disproportionately affects Latinos compared to other racial or ethnic groups given that they are more than twice as likely to be infected with and die from COVID-19 as non-Latino Whites. To evaluate a community-based mobile phone intervention (mivacunaLA) to increase COVID-19 vaccination among high-risk Latino families with at least one unvaccinated child in East and South Los Angeles.

Objective: We evaluated COVID-19 vaccination behaviors pre- and post-intervention at month 1.

Study Design: We designed mivacunaLA as a randomized controlled trial with a wait-list control group, to ensure that all participants could benefit from the intervention. The treatment group received the intervention in month 1 and the control group received the intervention in month 2.

Population studied: We recruited Eligible participants in collaboration with seven community partners in communities with low vaccination rates and high-risk in South and East Los Angeles. Our study population included Latino participants with at least one unvaccinated child living in East and South Los Angeles.

Intervention: Eligible participants in the program received a text message and email twice a week for four weeks, in Spanish or English. The short text messages (<160 characters in length) provided a link to a 2-3 min video and a short educational content of around 500 words. The educational curricula was tailored with community input.

Outcome Measures: Our primary outcomes were (1) changes in COVID-19 vaccination status among minors 12-17 years old and (2) changes in intent to vaccinate minors 2-11 years old. These outcomes were adapted from the Understanding America Study. We evaluated COVID-19 vaccination behaviors pre- and post-intervention at month 1.

Results: Participants who received mivacunaLA intervention were 12% points (p=0.03) more likely than controls to report a positive intention to vaccinate their 2–11-year-old children and 15% points (p=0.04) more likely than controls to report vaccination of their children aged 12-17 years.

Outcomes: Our mobile phone-delivered intervention with a community-partnered approach appears to be an effective way to combat misinformation and deliver timely information to vulnerable communities. Efforts to enhance COVID-19 vaccination uptake, in combination with other prevention strategies, are critical to minimizing COVID-19–related hospitalizations and deaths.