

A hand is shown cutting out letters from a newspaper page. The letters are arranged to spell out 'Bicultural Healthy Living' in a colorful, blocky font. The background is a wooden surface covered with newspaper clippings and a small potted plant.

STRATEGY INTRO: Increase demand for, and access to flu, COVID-19, and other adult vaccinations via 40 pop-up community clinics at the places that cultural groups feel comfortable and connected, and increase regularity of vaccine promotion in priority communities; and increase the percentage of pan-Asian and pan-African seniors who are up-to-date with recommended adult vaccinations.

MINNESOTA STATEWIDE VACCINE EDUCATION STRATEGY: THE COMMUNITY INFLUENCER APPROACH

Preface: This article highlights Asian Media Access's third-party analysis of the Shared Health Minnesota Virtual Summit on vaccine education at April 30th, 2025. As a community organization serving diverse BIPOC populations in Minnesota, Asian Media Access brings critical perspectives to help shape effective influencer strategies and educational materials across cultural contexts.

The recent Shared Health Minnesota Virtual Summit brought together 36 participants including community influencers, health department representatives, and community organizations to better address vaccine hesitancy through trusted voices. The Summit revealed the Shared Health MN Coalition, and few critical insights that can strengthen Minnesota's approach to vaccine



education, particularly through community-specific influencer engagement.

During the Virtual Summit, communities have shared several key barriers that Shared Health Minnesota must address. These include cultural and religious concerns, with communities like the Amish (700-800 individuals) requiring specially tailored approaches that respect religious perspectives. Pervasive misinformation is another challenge, with myths about vaccines containing tracking chips or government surveillance tools circulating widely. Post-COVID communication challenges exist due to general exhaustion regarding vaccine discussions, with communities showing resistance to educational conversations. Community-specific concerns have emerged, such as the Somali community expressing specific concerns about potential links between measles vaccines and autism, and the Asian American community questioning why they are more easily catching colds compared to before taking the COVID-19 vaccine. Additionally, families are increasingly requesting modifications like spacing out vaccines or selective vaccination.



Critical communication barriers requiring strategic solutions have been identified.

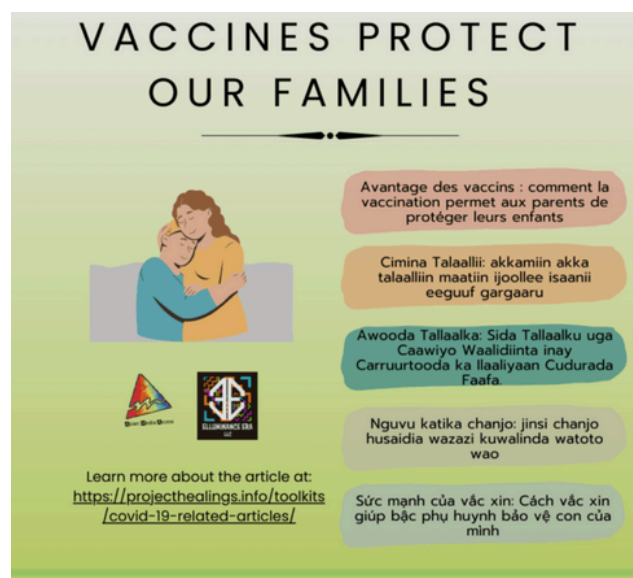
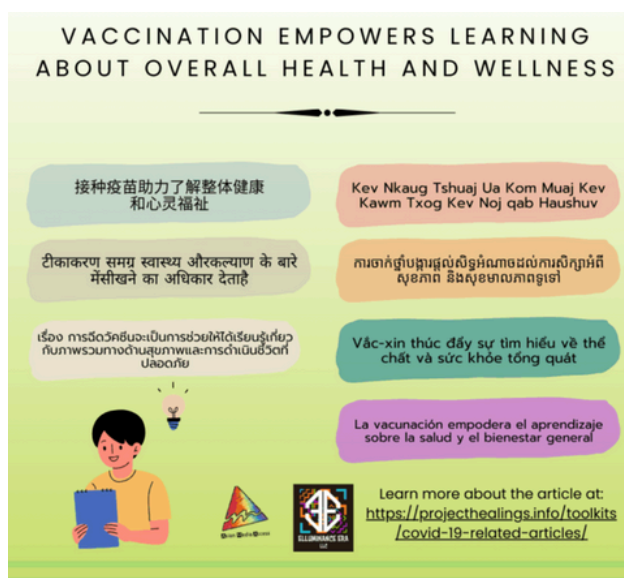
These include language access gaps with insufficient quality interpreters and translated materials, institutional resistance where some WIC program participants actively avoid vaccination discussions, and information overload with communities feeling overwhelmed by competing health messages.

Based on previous cultural integrated works, Asian Media Access recommends an "Influencer Strategy Framework" with **in-person influencer engagement**. This includes identifying respected community members with cultural integration framework, emphasizing parent-led communication networks (especially mother-to-mother), and

training influencers in culturally-specific conversation techniques. Community-tailored approaches are essential, including customizing outreach for specific cultural communities, creating culturally safe spaces for questions and concerns, and adopting holistic health frameworks that align with cultural perspectives on wellbeing beyond just vaccination.

For **digital influencers (Internet celebrity)**, members have suggested strategic platform selection, maintaining presence on established shared resources channels (Instagram/Facebook: @sharedhealthmn), expanding to platforms with growing multicultural audiences like TikTok, Threads, Lemon8, and Pinterest, and designing content resembling personal conversations rather than just health education, which is especially important for younger generations. Culturally-informed content development should include implementing regular posting schedules recognizing that 8-10 exposures are needed for action, utilizing diverse formats such as Instagram Reels, TikTok videos, and culturally-relevant infographics, employing culturally-resonant humor and trending audio, creating content people can engage with at their own pace, and emphasizing faces and personal stories over scientific language.

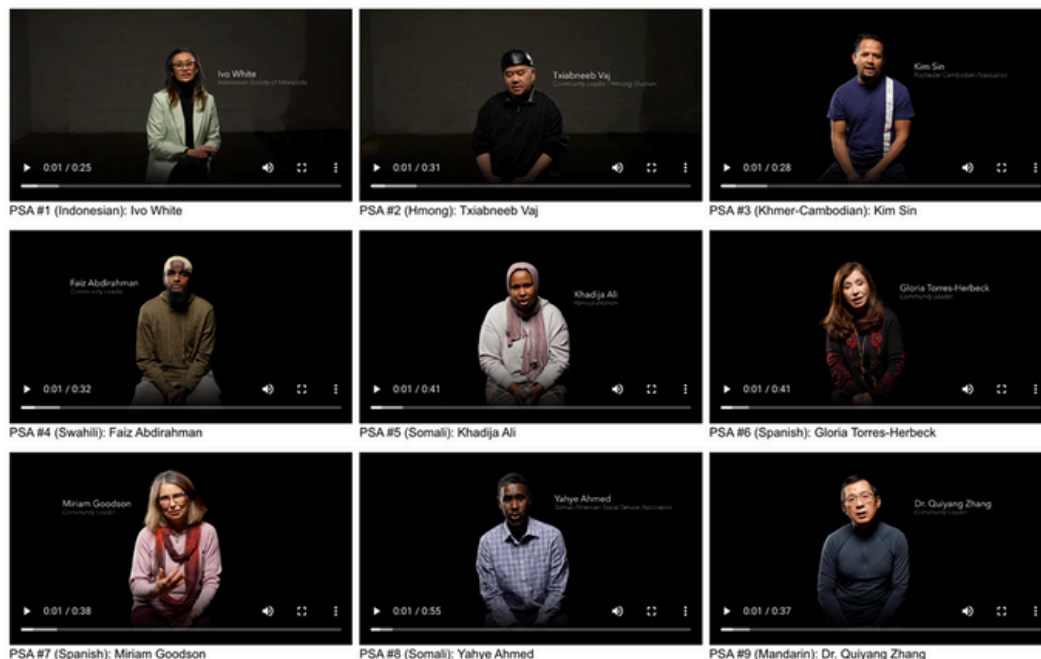
For implementation, a **Health Department Collaboration Strategy** is recommended. This involves identifying and partnering with culturally-specific influencers rather than relying on institutional communications, developing multilingual resource repositories addressing community-specific concerns, establishing culturally safe platforms for community questions, training staff to acknowledge hesitancy without judgment, and implementing culturally appropriate recognition for those choosing vaccination.



Community Organization Network Building should create a centralized resource hub, like the Shared Health MN – to prevent duplication across communities, provide cultural integrating framework training for cross-cultural vaccine conversations,

recognize interconnections between vaccine hesitancy and cultural health beliefs, and develop support systems for frontline workers addressing misinformation.

An Influencer Development Strategy should support authentic sharing of personal experiences related to vaccination decisions, train in culturally-specific communication styles, develop consistent cross-platform messaging strategies, provide platform-specific content creation training, and guide balancing of educational content with relationship building.



Source: <https://projecthealings.info/psa-videos/>

Strategic Next Steps for Shared Health MN include expanding the Shared Health newsletter with culturally-specific content streams, developing platform-specific social media strategies for diverse communities, creating collaborative opportunities between cultural influencers and health departments, and building comprehensive, culturally-informed resource toolkits addressing community-specific vaccine questions. The Shared Health Minnesota approach represents a promising foundation. However, maximizing effectiveness requires deeper integration of cultural perspectives, community-specific messaging, and trusted community voices, like Asian Media Access. By mutually supporting both initiatives and embracing these recommendations, Shared Health Minnesota can develop a truly inclusive vaccine education strategy that resonates across Minnesota's diverse communities.

Presented by Asian Media Access in collaboration with Shared Health Minnesota

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