

Messages to Increase COVID-19 Knowledge in Communities of Color: What Matters Most?

Disparities in coronavirus disease 2019 (COVID-19) outcomes in the United States are irrefutable. Non-Hispanic Black people make up 12% of the U.S. population but account for 13.5% of cases and 26.4% of (age-adjusted) deaths. Hispanic/Latinx persons make up 18% of the U.S. population but account for 23.8% of cases and 38.8% of (age-adjusted) deaths (1). Addressing systemic racism, health care access, and inequalities in socioeconomic status is fundamentally important in eliminating health disparities. Understanding how best to communicate COVID-19 messages also may help narrow these gaps.

In their recent study, Alsan and colleagues (2) explored the relationship between aspects of COVID-19 messaging and African American and Latinx participants' knowledge and information-seeking behavior (2). Video messages about COVID-19, delivered by physicians, were viewed by more than 14 000 African American and Latinx participants. Videos varied by the race/ethnicity of the messenger and acknowledgment of racial inequities and community perceptions about masks. In addition to determining whether message characteristics were related to viewers' subsequent knowledge, the authors investigated whether they had an effect on subsequent information seeking in this simulated environment.

This study demonstrated a small but statistically significant increase in COVID-19 knowledge that did not differ by race concordance between the physician messenger and the viewer. However, information seeking was higher among African American participants after they viewed messages from African American physicians. Previous research has documented the benefits of patient-physician race concordance on communication and health outcomes (3, 4), underscoring the importance of a diverse workforce to care for a diverse population. However, in 2018 only 5% and 5.8% of U.S. physicians were African American and Hispanic, respectively (5). Finally, the study provides further support for the important role that health professionals and other leaders in communities of color play in enhancing the acceptance of COVID-19 vaccination and other interventions.

The COVID-19 pandemic demands approaches that draw on evidence and resources from a range of academic disciplines and societal sectors. Race concordance of messengers and receivers of information may be particularly important in communicating about emotionally charged, politicized issues, such as COVID-19. Yet, race is only one dimension of concordance. An array of other demographic characteristics, including age, sex, socioeconomic status, and language (6), also may be important. Because information seeking among Latinx participants did not increase after they viewed a message from a Latinx physician, concordance across dimensions other than ethnicity may be more important for Latinx patients.

In addition, this study did not examine whether race concordance matters as much when communicating about COVID-19 to White persons. Subgroups exist, defined by education, religion, or political views regardless of race or ethnicity, in which persons are skeptical of COVID-19 recommendations. Research should examine whether different types of messenger-recipient concordance influences the effectiveness of public health messages.

The literature also documents the importance of trust when communicating health care information. Although Alsan and colleagues measured respondents' trust in health professionals, they did not report those findings. Studies document lower trust in health professionals and health care institutions among patients of color, which may influence receptivity to health care advice (7, 8). Ensuring that messages are accurate, available, and comprehensible is insufficient—recipients must also trust the messenger. Trust is most likely when information is delivered by a messenger who is known and has a positive relationship with the community. The National Institutes of Health Community Engagement Alliance (CEAL) Against COVID-19 Disparities (<https://covid19community.nih.gov>) has embraced this concept. One of CEAL's goals is active community engagement with, investment in, and outreach to underserved communities to build partnerships to improve diversity and inclusion in the scientific response to the COVID-19 pandemic. Trusted messengers often include health care professionals well known to patients and their families, faith or community leaders (9), and other influential persons.

Alsan and colleagues used requests for information as the behavioral outcome of interest, leaving the potential effect of message characteristics on actual patient behaviors undetermined. Attitudes, as well as abilities and resources, may be more important to behavior change than to knowledge itself. Thus, querying research participants on actual or intended behaviors regarding COVID-19 on the basis of new knowledge obtained from the videos may have provided a richer picture of the impact of the interventions. In fact, querying about intended behaviors may have a small but positive effect on the uptake of those behaviors (10).

Questions also remain about the information resources most likely to be used. What were the features of the webpages and videos that research participants requested most frequently? Did these requests differ by participant attributes? Also unknown is whether the public in general and persons in communities of color specifically desire information about topics not included in the 10 resources provided in this study. Communications research continues to grapple with questions about the effectiveness of messages targeted to demographic groups versus those tailored to the concerns of the public regardless of demographic characteristics.

This innovative study provides insight and generates important questions during this critical time. As new vaccines against COVID-19 become available, and when so many lives are at stake, mistrust of institutions and science remains high. This mistrust is especially high in U.S. communities of color, which have borne the greatest burden during the pandemic. The study by Alsan and colleagues validates previous research documenting the importance of race concordance between patients and their physicians. However, the small differences observed suggest that trust and concordance of factors other than race/ethnicity also may need to be considered in developing effective communication strategies for COVID-19 prevention and treatment. Further study should examine whether COVID-19 information seeking is a predictor of actual behavior change. Messages that promote behavior change in diverse groups are essential to save lives and facilitate economic and psychological recovery from the devastation of the COVID-19 pandemic.

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