



Extension Collaboration on Immunization Teaching and Engagement (EXCITE)

VACCINE HESITANCY OF THE COOPERATIVE EXTENSION SYSTEM

APPLICATION GUIDE

Land grant institutions (LGI) are invited to apply for funding to: 1) assess vaccine hesitancy of Extension field educators, specialists and administrators, and 2) create and implement a strategy to reduce vaccine hesitancy for COVID-19 and other adult immunizations, and increase confidence and willingness to become immunization educators in their community. The goal of this project is to reduce hesitancy around vaccination, and increase willingness to serve in educational roles around adult vaccination among Cooperative Extension personnel at all three types of Land grant institutions (1862, 1890, 1994).

This funding is for December 1, 2021-April 30, 2023. By the end of this project, we anticipate the following outputs: 1) an assessment of Cooperative Extension system COVID-19 and adult vaccine hesitancy, and 2) tested, deployed and assessed strategic educational interventions to decrease Extension personnel hesitancy. The anticipated outcomes are to: 1) increase confidence to serve as immunization educators 2) increase willingness to serve as immunization educators 3) improve attitude supporting vaccination education as an appropriate educational role for Cooperative Extension. Awardees can expect productive interaction with the national EXCITE Program Team as needed.

The Extension Foundation, in cooperation with the Extension Committee on Organization and Policy (ECOP), through an Interagency Agreement (IAA) with the USDA National Institute of Food and Agriculture (NIFA) and the Centers for Disease Control and Prevention (CDC) are funding the Cooperative Extension System to address health disparities among rural and other underserved communities. Priority work includes facilitating discussions at the community level to address barriers and concerns about COVID-19, flu, and other adult immunizations to help increase connections and communication between the community and health care professionals, increase accessibility and acceptability of local vaccination clinics and opportunities, and mobilize communities to implement public health programs to reduce health disparities. Through the IAA, the EXCITE program seeks to decrease vaccine hesitancy and build the evidence base of effective interventions to improve vaccination coverage in rural and other medical underserved communities.

WHERE TO APPLY

The deadline for receipt of your proposal is October 31, 2021. Applications should be filled out through Extension Foundation here: <https://registry.extension.org/212726122259048>. Proposals received after this date will not be considered. For additional information, questions, or clarifications, please contact Dr. Michelle Rodgers at michellerodgers@extension.org or phone at (302) 635-4306.

BACKGROUND

1. The global COVID-19 pandemic is rapidly evolving in the U.S. as a variant of the virus now accounts for the vast majority of transmission, hospitalization, and deaths (mostly among unvaccinated individuals), all of which are increasing in rates as of August 2021. The FDA has granted Emergency Use Authorization to 2 vaccines in the U.S.: a two-injection regimen by Moderna, and a one-injection dose from Johnson & Johnson. The FDA has given full approval for the Pfizer-BioNTech two-injection regimen, as well as a booster dose for eligible populations. The availability of these vaccines at no cost to the public is our greatest tool for preventing further harm to lives and disruption to the economy.
2. Vaccination is one of the most effective ways to prevent the spread of the COVID-19 virus and prevent complications that require hospitalization and may result in death. However, vaccination acceptance is limited among some populations due to an abundance of misinformation, politicalization, medical mistrust, and physical access for some populations. The continued spread of COVID-19 globally is having immense impact on the health and safety of individuals, including the most medically vulnerable, as well as the economy, which in turn can lead to further vulnerability through social determinants of health. The U.S. Land Grant University (LGU) system comprises 111 institutions across the country, with at least 1 institution in each state and territory, an “1862 institution.” Additionally, several states have one or more 1890 institutions, typically historically Black institutions, and one or more 1994 institutions, Native American tribal institutions. 1890 Institutions are additionally served by the 1890 Foundation, and the 1994 institutions are served by the American Indian Higher Education Consortium, all of whom are eligible to apply for this RFA. Currently, the U.S. vaccination rate among adults is less than 70%, with vast disparities across geographic areas, especially at local, county, and state-levels.

PROJECT OVERVIEW

An overview of the scope of services in your proposal should include a plan to:

- Conduct a target audience assessment to determine current levels of COVID-19 and other adult vaccine hesitancy among Cooperative Extension personnel (administrative, specialists and field faculty/staff), examine reasons for the hesitancy, and explore other barriers to the promotion of COVID-19 vaccine and other adult vaccinations among their community clientele.
- Develop an educational campaign strategy to reduce vaccine hesitancy and increase confidence and willingness to provide immunization education and market test the campaign with Extension personnel
- Implement the educational campaign and measure campaign awareness, as well as program outcomes.

PROJECT KEY ACTIVITIES AND RESULTS

- National needs assessment and summary report identifying COVID-19 vaccine and other adult immunization hesitancy and confidence and willingness to provide vaccine education in the Cooperative Extension system.
- Market test an educational campaign to decrease COVID-19 vaccine and other adult immunization hesitancy among target audience and increase confidence and willingness to deliver immunization education for community members.
- Implement an educational campaign to decrease COVID-19 vaccine and other adult immunization hesitancy among target audience
- Document results of these outcomes:
 - Target audience feels more confident in conducting vaccination education
 - Target audience demonstrates greater willingness in conducting vaccination education, and
 - Target audience feels that vaccination education is an appropriate educational role for Cooperative Extension.
- Additional attitude and uptake indicator options include:
 - Target audience has higher trust in vaccines,
 - Target audience feels vaccines are safe,
 - Target audience feels vaccines are important for health promotion and disease prevention,
 - Target audience demonstrates increased vaccination rates,

PROPOSAL OUTLINE

1. **Executive summary.** Describe your understanding of the work to be performed and your **firm/institution's** ability to complete it within the November 2021 to April 2023 timeframe. Use “LGU Cooperative Extension personnel” for the target audience.
2. **Professional experience.** Provide a description of your **institution**, including a list of current engagements in the public health sector or Cooperative Extension that you believe are comparable to the size, mission focus, and complexity of this project. Share a past experience when the Principal Investigator has worked with the public health sector or with LGU Cooperative Extension personnel to explore attitudes and beliefs, test messages, implement strategies and evaluate success.
3. **Team qualifications.** Identify the specific individuals – **partners, managers, and in-charge staff – who will be assigned to this engagement** if your firm/institution's proposal is selected, including the individual's role and qualifications /experience of each individual.
4. **Project Roadmap.** Provide a roadmap of your major milestones and activities for this project. Include milestone, activity, month, and year in the table below. If you need more space, create a table as an attachment.

	Milestone Description	Activity/Activities	Month	Year	Individual Responsible
Milestone 1					
Milestone 2					

5. **Related Experiences.** Prepare a narrative for each of the following topics letters a-f. Use 12-point Times New Roman, double-spaced. **One page maximum** for each response to letters a-f

- a. Describe, if applicable, any strategies your team members and partners have used to assess, among LGU Cooperative Extension personnel or other groups, adult vaccination hesitancy and/or barriers to vaccination.
- b. Describe, if applicable, any ways your team members and partners have already worked to reduce, among Cooperative Extension personnel or other groups, adult vaccination hesitancy and/or barriers to vaccination.
- c. Describe a plan to assess and market test and provide an educational campaign to reach all three types of LGUs - 1862's, 1890's, and 1994's. Include which LGU institution(s) and specific groups of personnel you plan to reach and how you plan to reach them, clearly distinguishing strategies among them if needed.
- d. List and describe which of the intended Key Results will be selected. Include details describing the intended data collection approach (method) and/or data collection tool(s) to be used, as well as analysis plans.
- e. Describe, if applicable, other initiatives of which you are aware currently targeting LGU Cooperative Extension personnel. How is your proposed intervention different from, or augmenting, existing efforts?
- f. Share a past experience when the Principal Investigator has worked in and with an organization to explore attitudes and beliefs, market test messages, implement an educational strategy and evaluate, with success.

BUDGET AND BUDGET CONSIDERATIONS

- The budget should address each of the major cost categories outlined in the Federal SF-424 Research and Related Budget form (see brief outline below). No match of institutional funds is required. Note that EXCITE funds cannot be used to purchase vaccines. More specific guidance is found in the 2 CFR Part 200 Cost Principles (<https://www.ecfr.gov/current/title-2/subtitle-A/chapter-II/part-200?toc=1>) and the NIFA Federal Assistance Policy guide (<https://nifa.usda.gov/resource/nifa-federal-assistance-policy-guide>).

Personnel Costs (R&R Sections A&B):

- Compensation in the form of Salaries and Wages for the faculty, technicians, research associates and assistants, postdoctoral associates and other technical personnel necessary to meet the goals of the project, computed as either percent effort, hourly wages or person months.
- Fringe Benefits normally encompass employer contributions for social security, employee life, health, unemployment, worker's compensation insurance and pension plan costs related to the personnel charged to the project. Costs must be expressed as a percentage of salaries and wages in the proposal budget based on negotiated Federal rates applicable to each person or role.
- Equipment Costs: Capital equipment (R&R Section C) is defined as tangible personal property (including information technology systems) having a useful life of more than one year and an acquisition cost of \$5,000 or more per unit. Requests must include item description, justification of use for equipment on the project, quote to substantiate the equipment cost, and plan for equipment disposal at the end of the performance period. Agency approval must be obtained before awarded funds may be released. If both cost and useful life criteria are not met, then equipment is considered noncapital (see Other Direct Costs below).
- Travel Costs (R&R Section D): Employee costs for transportation, lodging, and subsistence that directly support the aims for the project. Include in the budget justification the destination, number of people traveling, and dates or duration of each stay for all anticipated travel.
- Participant Support Costs (R&R Section E): Direct costs for items such as stipends or honoraria, subsistence allowances, travel allowances, and registration fees paid to or on behalf of participants or trainees (but not employees) in connection with conferences, or training projects. NIFA considers payments to non-participants, e.g., organizers, recruiters, influencers, trainers, coaches, etc., who encourage or assist participants to be Participant Support. Payments made to defray the cost of participation, e.g., for travel and meals, are also allowed in accord with institutional policies and documentation requirements.

Other Direct Costs (R&R Section F):

- Materials and Supplies: Consumables to be used in the performance of the proposed project, e.g., laboratory items and data processing supplies.

- Noncapital Equipment: Equipment not meeting both capitalization criteria above. Note that such items are indistinguishable from other supplies.
- Consultants/Independent Contractors: Consultants who provide expertise or a service to a particular project consistent with their normal course of business.
- Subawards: A contract specifically creating a Federal assistance relationship with a subrecipient to carry out part of a Federal award received by the project applicant. A subrecipient typically is assigned responsibility for programmatic decision-making with subsequent performance measured in relation to whether it assigned project objectives were met.
- Tuition Remission: Mandatory benefit for students employed as Graduate Research Assistants/Associates (GRAs) that is separate and distinct from other employee fringe benefits.

Other Costs: Various items such as vendor contracts for ancillary goods and services, publication, and meeting costs. Also may include items that are normally indirect, e.g., telephone long distance and photocopy costs, that are directly related and assignable with a high degree of accuracy.

- Indirect costs (R&R Section H): Whereas Direct Costs (R&R Sections A-F) can be identified specifically with the performance of a project, Indirect (aka Facilities and Administrative) Costs are incurred for common or joint objectives and therefore cannot be identified readily and specifically with any project. Indirect Costs are quantified as a percentage of a pre-defined Direct Cost base: Total Direct Costs (TDC), Modified Total Direct Costs (MTDC), or Salaries and Wages (S&W) that may or not include Fringe Benefits. Consult your institution's current negotiated rate agreement for the correct rate base application. Applicants may also elect to apply the de minimis rate of 10% against MTDC. Note that Indirect Cost rates remain unchanged for the life of the project.

APPLICATION FORM FIELDS

Institution Information:

1. Institution Name
2. Principal Investigator
 - a. PI Name and contact information
3. Contract and Office of Sponsored Programs
 - Administrative Name and contact information
 - Financial Contact Name and contact information
 - Institution Legal Address
 - Institution Administrative Address
 - Institution Payment Address
 - Institution DUNS Name and Number
 - Currently Registered in SAM.gov y/n
 - Audit Information (Provided by Office of Sponsored Programs)
 - Date of last A133 Audit

- Upload of last A133 Audit (or link)

Project Proposal Outline:

1. Project Title

2. Executive summary and project description. Describe your understanding of the work to be performed and your **institution's** ability to complete it within the November 2021 to April 2023 timeframe.

Describe in a narrative how you will implement the following:

- a. Describe a plan to assess vaccine hesitancy among Cooperative Extension personnel to reach all three types of LGUs - 1862's, 1890's, and 1994's. Include which LGU institution(s) and specific groups of personnel you plan to reach and how you plan to reach them, clearly distinguishing strategies among them if needed. The audience assessment should determine current attitudes related to COVID-19 and other adult vaccine hesitancy among Cooperative Extension personnel, understand reasons for the hesitancy, understand other barriers to their promotion of COVID-19, CES willingness to provide adult vaccination among their community clientele and CES attitudes about the appropriateness of immunization education as an Extension program. Target audience is all Extension personnel (administrative, specialists and field faculty/staff).

Describe in a narrative how you will implement the following:

- b. Describe your plan to market test and develop an educational campaign strategy to reach all three types of LGUs - 1862's, 1890's, and 1994's to reduce vaccine hesitancy and increase confidence and willingness to provide (deliver or facilitate) immunization education with Extension personnel based on the audience assessment.

Describe in a narrative how you will implement the following:

- c. Design and implement an educational campaign strategy to reach all three types of LGUs - 1862's, 1890's, and 1994's and measure program outcomes. List and describe which of the intended Key Results will be selected. Include details describing the intended data collection approach (method) and/or data collection tool(s) to be used, as well as analysis plans. Share how results will be measured and documented to address the following expected results:

- Target audience feels more confident in conducting vaccination education
- Target audience demonstrates greater willingness in conducting vaccination education
- Target audience feels that vaccination education is an appropriate educational role for Cooperative Extension.

Indicate which of the following indicators you may plan to measure and report.

d. Optional additional attitude and uptake indicators:

- Target (CES) audience has higher trust in vaccines,
- Target (CES) audience feels vaccines are safe,
- Target (CES) audience feels vaccines are important for health promotion and disease prevention,
- Target(CES) audience demonstrates increased vaccination rates,

3. Professional Experience:

Provide a brief description of your institution’s readiness to conduct a vaccine hesitancy research study project with Cooperative Extension. Please respond to each of the experience categories:

a. Describe, if applicable, any strategies your team members and partners have used to assess, among LGU Cooperative Extension personnel or other groups, adult vaccination hesitancy and/or barriers to vaccination.

b. Describe, if applicable, other initiatives of which you are aware currently targeting LGU County-level Cooperative Extension personnel. How is your proposed intervention different from, or augmenting, existing efforts?

- c. Share a past experience when the Principal Investigator has worked in and with an organization to explore attitudes and beliefs, market test messages, implement an educational strategy and evaluate, with success.

4. Project Roadmap. Provide a roadmap of your major milestones and activities for this project. Include milestone, activity, month, and year in the table below. If you need more space, create a table as an attachment.

	Milestone Description	Activity/Activities	Month	Year	Individual Responsible
Milestone 1					
Milestone 2					

5. BUDGET and BUDGET JUSTIFICATION: Provide a detailed budget and narrative justification. Total budget should not exceed \$300,000, including indirect costs based on your pre-negotiated federal rate. Your institution has the option to reduce or waive the indirect cost rate. If you do not have a negotiated federal rate, you may include 10% indirect costs.

<https://docs.google.com/spreadsheets/d/10TSJjNXuodMDPGPcaK3C-dsc65cutS22/edit#gid=1640090715>

6. Awardee must agree to the following expectations as conditions of an award for a completed submission:

- Agreement to provide quarterly updates and reports.
- Agreement to work closely with the EXCITE Program Team during the administration of the project.
- Agreement to provide a final report.

Signature _____