

health information: the Jewish Orthodox Women’s Medical Association (JOWMA) Covid-19 hotline

Miriam Borvick,¹ Ellie R. Carmody, MD,² Ava Weitz,² Sarah Becker, MD,³ Sheindel Ifrah,⁴ Jennifer Berkovich, DO,⁵ Alisa Minkin, MD,⁶ Eliana Fine, MD,⁷ Miriam A. Knoll, MD⁸

[1 University of Nevada, Las Vegas, 2 NYU Langone Health, New York, NY, 3222 4 Touro College of Osteopathic Medicine, 5 Pediatric Associates Family of Companies, 6 Beach Pediatrics, a division of Allied Pediatrics, Oceanside, NY, 7 Stony Brook Hospital, 8 Montefiore Nyack Hospital]

Background

- Mistrust of health authorities and government can undermine public health efforts to promote vaccination within self-protective religious and ethnic communities (Kasstan 2020).
- Self-protective religious communities, such as various Haredi Orthodox Jewish groups, often have greater trust in medical organizations within their own networks for health information (Carmody, 2021).
- Novel methods of reaching these communities are needed to channel culturally-sensitive and accurate information about vaccines that will promote acceptance.
- The JOWMA Covid-19 health tele-hotline was developed to deliver reliable education around Covid-19 infection and vaccines to Haredi communities.

Specific Aims & Objectives

- Analyze the de-identified JOWMA informational health education community tele-hotline log for call traffic over time and selections made by callers of pre-recorded health information topics
- Analyze thematic content of hotline callers’ questions and concerns from log notes from hotline staff volunteers made for internal quality monitoring and training
- Describe basic demographic information of callers who elected to provide information on live calls, including religious affiliation
- Share knowledge gained through internal analysis of hotline operations so that findings, including feasibility and trends, may be used to inform policies for providing culturally specific health information to self-protective religious and other communities experiencing vaccine inequities.

Methods

- JOWMA staffed a Covid-19 tele-hotline by physicians and medical students to provide information and address questions about Covid-19 vaccines for Haredi communities from 7 Oct 2021 to 30 Jun 2022.
- The hotline offered 3 options: Speak with a volunteer, leave a voicemail for callback, or listen to pre-recorded health education information.
- Using descriptive analyses of the de-identified call tracking log, we tabulated hotline traffic, selections of pre-recorded health information, and classified thematic content of callers’ questions.

Results

- Traffic on the hotline during the eight months of hotline operation included 5192 calls from the United States, Canada, Israel and the United Kingdom. Calls over time corresponded to novelty of the hotline upon launch and intermittent, extensive advertising campaigns, with most traffic occurring over the first two months
- Of the 669 voicemails and missed calls, 511 (76.3%) were returned, and contact was made with approximately 370 (55.3%)
- Affiliation data from 213 calls showed callers overwhelmingly self-identified as Orthodox Jewish (96%) and comprised a diversity of sub-groups.
- The majority of callers (64%) chose to listen to pre-recorded information.
- Average listening time of callers with a call duration of >2 minutes was 11:48, ranging from 2:01 minutes to 3 hours 59:55 minutes.
- From the pre-recorded options, the majority of callers chose to listen to pre-recorded information on Covid-19 vaccines and pregnancy.
- Preliminary descriptive results of call content using term-searching show the most common concerns about Covid-19 vaccines were infertility risk, vaccination during pregnancy, and the risk-benefit analysis of vaccination after infection.

Graphs/Figures

FIGURE 1: Breakdown of call traffic by type

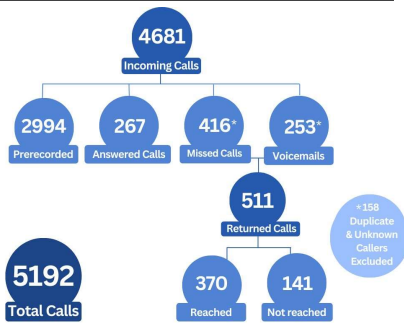


FIGURE 2: Hotline traffic over time

Hotline traffic: total calls over time

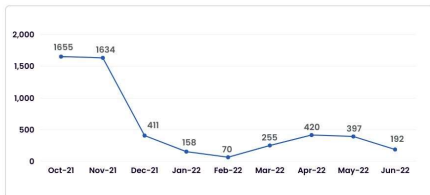
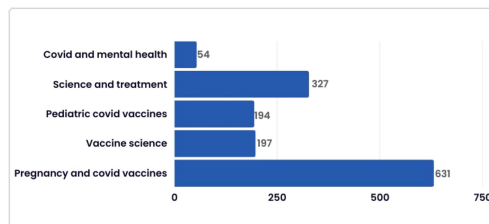


FIGURE 3: Pre-recorded Covid-19 health information caller selections

Pre-recorded Covid-19 talks: frequency of listens



Conclusions

- Tele-hotlines can be a highly utilized, feasible method for providing culturally-specific health information to self-protective religious communities.
- Our preliminary thematic data reveal prominent concerns within Orthodox Jewish communities about Covid vaccines and fertility as well as vaccine safety during pregnancy. Hotline data may be useful to guide future public health responses to community health education
- Limitations of hotline operation included volunteers with varying levels of vaccine-specific training, language barriers, “anti-vax” callers with malignant intent, limited schedules for volunteers that led to missed calls, callers who did not respond to callbacks, only a live call option that may have deterred people who preferred a text or online platform
- Limits of our current analysis include only partial notes from volunteers on call thematic content.

Acknowledgements/Ethical Approval

Ethical approval provided by NYU Langone Health Office of Science and Research Institutional Review Board, 1 Park Avenue, New York, NY 10016

References

- Carmody, Zander, D., Klein, E. J., Mulligan, M. J., & Caplan, A. L. (2021). Knowledge and Attitudes Toward Covid-19 and Vaccines Among a New York Haredi-Orthodox Jewish Community. *Journal of Community Health*, 46(6), 1161–1169. <https://doi.org/10.1007/s10900-021-00995-0>
- Kasstan, B. (2020). Vaccines and vitriol: An anthropological commentary on vaccine hesitancy, decision-making and interventionism among religious minorities. *Anthropology & Medicine*. <https://doi-org.ezproxy.library.unlv.edu/10.1080/13648470.2020.1825618>
- Pirutinsky, S., Cherniak, A. D., & Rosmarin, D. H. (2020). COVID-19, mental health, and religious coping among American Orthodox Jews. *Journal of Religion and Health*, 59(5), 2288–2301. <https://doi-org.ezproxy.library.unlv.edu/10.1007/s10943-020-01070-z>
- Weinberger-Litman, S.L., Litman, L., Rosen, Z. et al. A Look at the First Quarantined Community in the USA: Response of Religious Communal Organizations and Implications for Public Health During the COVID-19 Pandemic. *J Relig Health* 59, 2269–2282 (2020). <https://doi-org.ezproxy.library.unlv.edu/10.1007/s10943-020-01064-x>