

# COVID-19 Vaccination Efforts & Communication Barriers

Recommendations from vulnerable communities in Georgia







# Directory

#### **3** OVERARCHING GOAL

What We Hope To Achieve With This Document

#### 4 <u>KNOWN BARRIERS FOR VACCINE ADOPTION</u> AND CONFIDENCE CONNECTED TO COMMUNICATIONS

#### 5 OUTREACH COMMUNICATION

Descriptive Language Language and Tone

#### 7 DURING REGISTRATION

Disclosures Where to Get Help

#### 9 WHAT TO EXPECT AT THE SITE

#### 10 LANGUAGE

Literacy Level Documentation Vaccination for Minors Vaccination for Pregnant People

#### **13** AT THE VACCINATION SITE

Welcoming Space Safe Space

#### 15 WORDING RECOMMENDATIONS

Triggering Words

## **Overarching Goal for This Document**

To develop a communication model that incorporates a low-barrier design in all outreach, registration and on-site vaccination activities as a strategy to reduce hesitancy in vaccine adoption.

#### WHAT WE HOPE TO ACHIEVE:



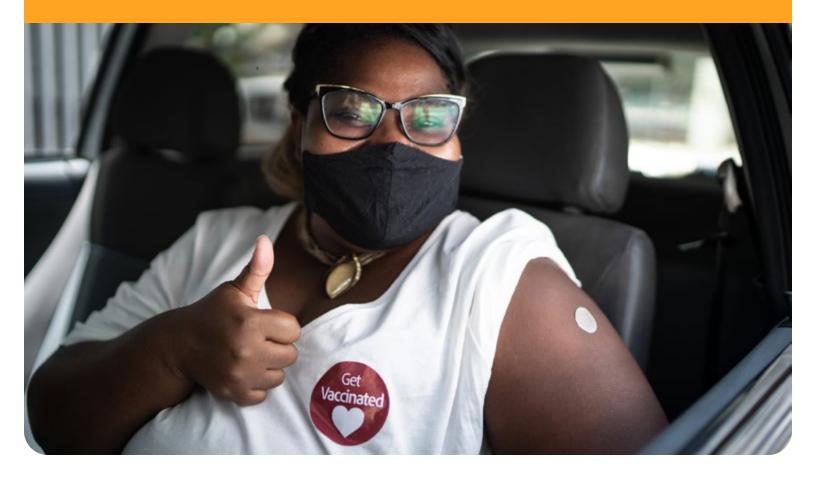
Strengthen communication efforts to create trust and reduce vaccine hesitancy in vulnerable communities.



Use specific language during vaccination efforts to create a welcoming environment to all communities and reduce confusion and misunderstandings around vaccine eligibility.



Ensure that all outreach communications are factual, relevant, actionoriented and clear to all Georgians.



### Known Barriers for Vaccine Adoption and Confidence Connected to Communications

Many things stand in the way of individuals opting in to receive the vaccine. There are many factors — effective, consistent, clear and actionable communication on the benefit of the vaccine, clarity on the incidence of potential side effects, concerns about time down or off work due to side effects, previous experiences and concerns affecting the perception of the effort, emotional state, lack of familiarity or credibility with messengers or the government, gossip, semantics, literacy and language.

Specifically for vaccination, we have identified the following pain points and barriers for some of the most affected and vulnerable communities, described in this document as immigrants, undocumented, English Learners, people experiencing poverty, those in essential jobs and those living in rural areas.

- 1 Doubts around eligibility connected to their age, occupation, documentation status, insurance status, and location
- 2 Doubts about eligibility related to their medical history, current illnesses or lifestyle
- **3** Concerns around vaccine reaction and long-lasting effects
- 4 Concerns around information sharing and potential negative consequences for their families, workplace and faith community

This document intends to address some of the points noted above by standardizing and guiding verbal, written and non-verbal communication before vaccination events (outreach), during the registration process and throughout vaccination events or clinics.

### **Outreach Communication**

#### **DESCRIPTIVE LANGUAGE**

While descriptive language sometimes can become biased language based on stereotypes, in this case the descriptions can be helpful for specific and targeted efforts as it would be descriptive of the community the activity is centered on.

If used, it is important that language is paired with the appropriate logistic component to build trust.

### YES

### "Latino Vaccination Event / Evento de vacunación para la comunidad"

Bring your consular identification, social security number, an electricity bill or other ID with your legal name. Bilingual personnel will be on site. Outreach materials need to be in Spanish and Portuguese and in those languages use the word community vs. Latino or Latinx.

#### "Poultry Plant Family Vaccination Event"

If you or your family members work at a poultry plant, this event is for you! Bring any identification you have with your legal name or a paystub. We want you to be safe. No other information will be required.

(Translate everything in the top five languages spoken by poultry plant workers.)

#### NO

#### "Vaccination event for immigrants"

Bring social security number, Georgia ID and insurance card. Supported by the National Guard/Sheriff Department (outreach materials are only in English).

WHY? Using the word immigrants as part of the outreach raises a flag for anti-immigrant activists that may decide to show up and protest. This word also describes a status not everyone feels comfortable disclosing. Prioritizing SSN and Georgia ID on the first line creates the appearance of limited eligibility, including law enforcement as part of the event creates concerns of the safety of community members that may prefer not to have interactions with police.

#### "Employer-mandated immunization"

If you are an employee of a poultry plant, bring your ID and your family to get the vaccine. The vaccine is free and will be required for you to return to work.

WHY? With many workers in poultry plants not being fully documented and therefore formally without an employer, it creates a concern of who qualifies for the event. Additionally, a mandate to bring an ID and family, may result in fear of exposing family members to additional scrutiny if wanting to continue working at that plant.

#### LANGUAGE AND TONE

Specific language and tone can change the perception of the intention of the communication. We need to be careful with the words that we use and how we use them:

#### YES

#### Please bring any identification with

**your name.** Some examples include: College or student ID, passport, consular ID, drivers' license, social security number, etc. If you have insurance, please bring your card.

#### NO

Bring your social security number, insurance card or a Georgia ID.

WHY? Strong tone with few options reads like a mandate and excludes those who do not have all or the majority of documents noted. Creates the perception that the vaccine is not for all.

Community health personnel will be available to answer any questions you may have around reactions, care, what to expect. You will be required to stay for 30 minutes in case of negative reactions.

**WHY?** It anticipates a negative reaction and creates fear and concerns before the event.

## **During Registration**

Some vaccination efforts may not require registration in an effort to reduce barriers for communities with limited access to internet, computers or with low literacy.

If this is the case for your event or clinic, please make sure you announce the expected waiting times for check-in and any materials and requirements for individuals to receive their vaccine.

It is important to have a sign noting the process for people waiting in line and showing COVID-19 symptoms.

Consider a special workflow for those with limited mobility issues, those with children or those with limited ability to wait standing for a long time.

Here are some ideas:

- When you arrive at the clinic, please expect to wait approximately 15-20 minutes for check-in so we can get your information in our system.
- If you bring a minor with you, you will be asked to sign a consent on their behalf so they can receive the vaccine.
- If you are over 70 years old, have babies or young children with you, have mobility issues, or cannot stand for a long time, please let our personnel know so we can take you to a separate more expedited lane.



#### DISCLOSURES

# It is critical that a disclosure on the first page of all appointment/registration forms include the following language:

The COVID-19 vaccine is FREE for all Georgia residents. You do not need to present or have a social security number, a Georgia drivers' license or an insurance card to qualify. You will be asked to provide a document with your legal name on, which can be any document you may have available. If you have a health insurance card, we will ask you to provide some information so we can bill a small administrative fee to your provider.

According to a recent Household Pulse Survey COVID-19 Vaccination Tracker from the U.S. Census Bureau, 51% of adults with health insurance have gotten at least one dose of a COVID-19 vaccine compared with less than one-quarter (24%) of those without insurance. These numbers seem to indicate we need to provide more information for uninsured patients to feel comfortable receiving the vaccine and not be concerned about a potential bill.

29 million Americans were uninsured in 2019. Estimates on people losing insurance in 2020 due to the pandemic range between 16-27 million.

#### WHERE TO GET HELP REGISTERING

You can call the Georgia Department of Public Health Vaccine Scheduling Resource Line: **888.457.0186** 

Press 1 for English, 2 for Spanish, 1 for all other languages (currently available are Mandarin, Cantonese, Korean, Bengali, Vietnamese, Russian and Arabic. Other languages are available via third party.)

#### The line is available the following dates and times:

Monday - Friday, 8 a.m. - 8 p.m. ET Saturday - Sunday, 8 a.m. - 5 p.m. ET

### What to Expect at the Site

Please provide clear information on the following items that may be relevant to the communities you intend to serve:

- Who is the vaccination provider?
- Who will be at the event? Are there multilingual volunteers on-site? Will it provide childcare? Will the site offer other services or screenings? (such as HIV testing, food distribution, etc.)
- How will second dose appointments (if needed) be secured?
- What to bring with you will you request ANY documentation? If this is an employer-based event, do you need workers to bring their badges? If it is an event for minors, can adults other than parents sign consents?
- Will there be a special line for seniors, people with limited abilities or those who cannot stand for a long time?
- Will it be walk-up or drive-thru?
- How much time should people expect to wait for check-in?



### Language

There are close to one million Georgia residents that speak a language other than English at home. It is likely that a significant number from this group speaks English less than well or might have limited English proficiency.

Title VI of the 1964 Civil Rights Act states that recipients of federal funds may not run their programs in such a way as to create discrimination on the basis of race, color or country of national origin. The Department of Health and Human Services Office for Civil Rights (OCR) enforces this act.

The OCR refers to language access as a means of promoting effective communication for Limited English Proficient (LEP), blind, and deaf/hard-of-hearing individuals to receive meaningful access to federally funded recipient programs.

Specific guidance is provided <u>HERE</u> by HHS. Note that this is not waived during a national emergency.

All state-sponsored and federally-funded services and programs, including the COVID-19 vaccine must have language support for limited English proficient communities, those blind and deaf/hard of hearing.

#### LITERACY LEVEL

Limited literacy affects individuals' access to healthcare and health-related programs and services. <u>43 million Americans possess low literacy skills and</u> <u>8.4 million American adults are classified as functionally illiterate-defined</u> <u>as having literacy skills at a third-grade level.</u>

# Recommended best practices to increase accessibility to community members to effective, clear and actionable information and vaccination sites include:

- Limit the use of technical and medical terminology in public communications
- Limit the inclusion of statistics or terms that audiences find confusing to explain risk
- Do not rely on just one medium of communication, i.e. print materials for persons with limited reading skills.
- Focus on awareness and information rather than action and behavior.
- Avoid literal translations as they usually do not mean anything or can be inaccurate

More guidance is available at <u>PlainLanguage.gov</u> site supported by the General Services Administration.

#### Examples:

YES	NO
Do you have problems with your heart? Do you have high blood sugar?	Do you have cardiovascular disease? Do you suffer from diabetes?
Have you ever had an allergic reaction where you had to call a doctor, an ambulance or go to the hospital after receiving a vaccine?	Have you NEVER had a life-threatening allergic reaction after a dose of any vaccine or injectable medication OR any immediate allergic reaction of any severity to a previous COVID-19 vaccine or its components.

#### **DOCUMENTATION REQUIRED**

It is natural to request a document that notes the appropriate spelling of the name of a community member, however being clear that identification CAN BE a number of documents is critical to ensure people feel welcome and part of the effort. Not all people have a social security number and are willing to share it and not all people have a valid Georgia drivers' license. Here are some examples of appropriate identification that should suffice to confirm the correct spelling of a person's name.

- A passport (even an expired passport is an appropriate and valid proof of identification)
- A student ID (college or K-12)
- A drivers' license of any state or country
- A consular identification card
- A telephone or utility bill
- An employment identification card

#### **VACCINATION FOR MINORS**

Ensure the specific requirements for age, consent and permit are included visibly in the form and a sample of the required forms are available during registration and on-site.

#### **VACCINATION FOR PREGNANT PEOPLE**

People may have questions about the vaccine as different information on safety has been shared at different times. Make sure you share any specific updated and relevant information that can appease any concerns and doubts for people pregnant or trying to get pregnant.

## At the Vaccination Site

#### WELCOMING SPACE

A welcoming space incorporates all previously noted recommendations for verbal and written communication and ADD non-verbal communication to ensure the space community members walk in feels comfortable and where trust can be established between various partners.

Below, we incorporate some recommendations to be considered when setting up a site with low-barrier access for all communities.

YES	NO
Limited visibility of law enforcement	Blue lights and patrols in plain sight "guarding" entrance of location
Security personnel in plain clothes / traffic control in plain clothes with safety vests	Large, uniformed law enforcement presence around the site
Welcome sign in various languages	Signs in English only
Poster announcing steps/stages of the vaccination activity in languages	No information to manage expectations on waiting times on site
Expedite intake process by having line- management staff request that individuals have identification ready	Staff managing lines asking for social security numbers and insurance card specifically
Special line for pregnant, families with small children and elderly	
Consent forms in various languages printed and/or electronic or translators with visible sashes noting languages available	Electronic forms only and in English. Limited language access
Signs in appropriate languages encouraging people to ask questions about the vaccine	
Observation area with bilingual staff asking if people have questions and are feeling OK	
Before an individual leaves, ensure that the second appointment (if needed) is scheduled and materials on what to expect after the vaccine have been distributed	

The National Immigrant Law Center has a FAQ page on immigrants and access to the COVID-19 vaccine that can be useful to explain to providers and community what is allowed and required by law <u>HERE</u>.

For other COVID-19 health services, there are informational patient sheets on what is covered by the Health Resources & Services Administration (HRSA) <u>here in English</u> and <u>here in Spanish</u>.

#### For providers, the same sheets are available <u>here in English</u> and <u>here in Spanish</u>.

#### SAFE SPACE

People have different experiences and relationships with government, authorities and health systems. People may have lots of questions and doubts about potential reactions to the vaccine, if there are changes in behaviors that need to happen (what to eat, drink, etc.) after receiving the shot or what they can do.

Please talk to your vaccinators and providers to allow time for these questions to be addressed carefully and with attention.

Some of these doubts and questions come from a lens of self-preservation and previous experiences or information received in their communities. The most common questions folks may have include:

- What can(not) I eat after my vaccine?
- Can I drink alcohol after my vaccine?
- What should I say to my spouse if he/she/they are opposed to the vaccine?
- What should I say to my religious leader if they are not supportive of the vaccine?
- Should I go out after my vaccine?
- Should I wear a mask even if I have had/received my vaccine?
- What to do if I still get COVID-19?

### Wording Recommendations

#### **TRIGGERING WORDS**

We process language based on previous experiences. Here are some potential triggering words and some suggestions that allow for more open communication.

Standard/Commonly Used	Better
ID	Identification or document with your name on it
Immigrant/Limited English Speaking	English Learner, new American
Georgia citizens	Georgia residents/Georgia communities
Inner city folks	Communities of color/diverse communities
Legal immigrants	Georgia residents
Illegal immigrants	People with different/limited documentation
Low-wage workers	Workers
Businessmen	Entrepreneurs and business community
Disabled people	People in wheelchairs or needing special assistance
Elderly, older people	People over 65 years of age
Children	People under 16 years of age
Accompanied by a parent	Bring your adult with you