



Photo: UNICEF

COVID-19 and Vaccines:

What Community Health Workers Need to Know

January 13, 2022

SIMULTANEOUS “INTERPRETATION” ZOOM

From your computer’s Zoom toolbar, click on the **Interpretation icon (globe icon)**. Select your desired language in the pop-up menu. This will be the language you hear during the presentation.

From your **Cellphone**, click the “more options” and select Interpretation to select your desired language. Simultaneous



English and Spanish
interpretation available!



Interpretation

FUNCION DE “INTERPRETACION SIMULTANEA”

*Desde su pantalla por computadora en la barra de herramientas, pulse en **el icono de Interpretación/que se ve como un mundo**, un menú aparecerá, seleccione el lenguaje en que quiere escuchar. Desde su teléfono pulse en más opciones y seleccione interpretación y elija el lenguaje que quiera escuchar.*

NRC-RIM and MCN

The National Resource Center for Refugees, Immigrants, and Migrants (NRC-RIM) is funded by the U.S. Centers for Disease Control and Prevention and the International Organization for Migration to support state and local health departments working with refugee, immigrant, and migrant (RIM) communities that have been disproportionately affected by COVID -19.

Migrant Clinicians Network (MCN) is a partner of NRC-RIM.

This presentation has been adapted from slides created by the Minnesota Department of Health and MCN.



Purpose of Presentation

1

Increase knowledge regarding COVID-19 and vaccines.

2

Identify barriers to getting vaccinated and reasons for vaccine hesitancy .

3

Recognize culturally and linguistically contextual strategies and resources to support vaccine uptake.



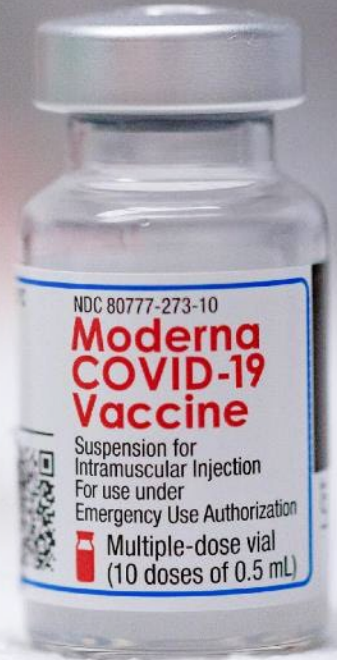
1. Vaccine 101

An overview of vaccinations

View a recorded presentation of this information [here](#).

Why Do We Use Vaccines?

- Keep you from getting diseases such as flu, chickenpox, and now COVID-19.
- Train the immune system to fight the germ that causes the illness.
- Vaccinating a community can:
 - ✓ Stop disease spread
 - ✓ Reach herd immunity
 - ✓ Keep you, your family, and your community safe and healthy



What are the COVID-19 Vaccines?

Information	Pfizer	Moderna	Johnson & Johnson
Who can receive this vaccine?	5 years and older	18 years and older	18 years and older
Dosage	2 doses, 3 weeks apart	2 doses, 4 weeks apart	1 dose
Additional dose for moderately to severely weakened immune system	28 days after second dose	28 days after second dose	No authorization
Booster shot	5 months later For everyone 12 years and older	5 months later For everyone 18 years and older	2 months later For everyone 18 years and older

- mRNA vaccines do not contain a virus, do not create a virus, and cannot cause COVID-19 infection.
- Cannot change a person's DNA.

How mRNA COVID-19 Vaccines Work

Understanding the virus that causes COVID-19.

Coronaviruses, like the one that causes COVID-19, are named for the crown-like **spikes** on their surface, called **spike proteins**. These **spike proteins** are ideal targets for vaccines.

What is mRNA?

Messenger RNA, or mRNA, is genetic material that tells your body how to make proteins.

What is in the vaccine?

The vaccine is made of mRNA wrapped in a coating that makes delivery easy and keeps the body from damaging it.

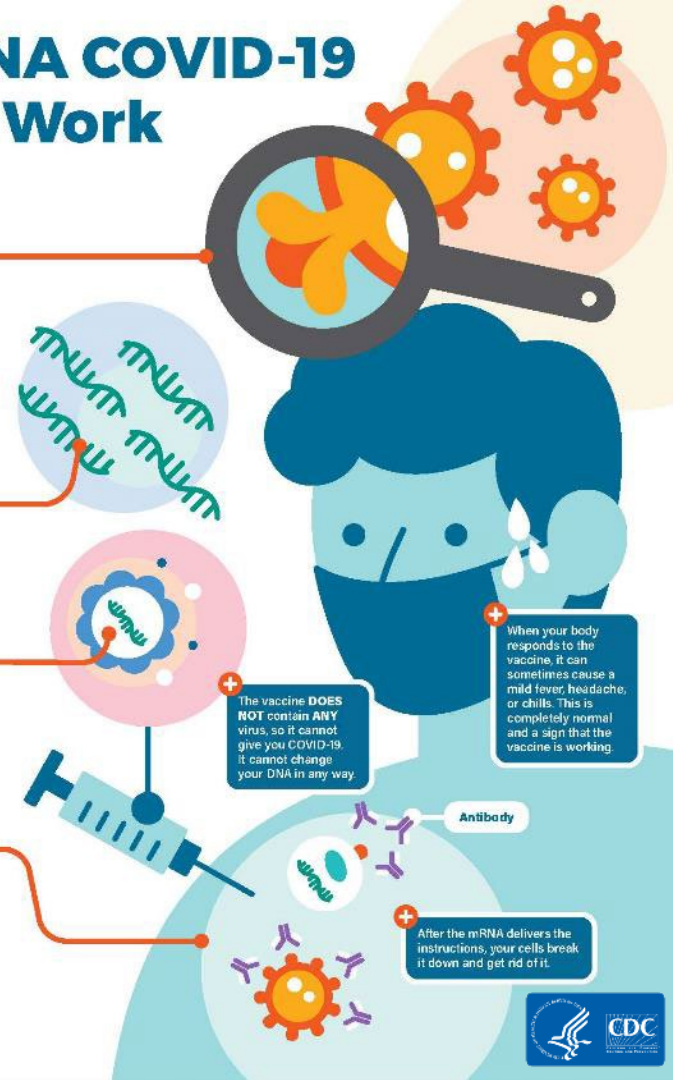
How does the vaccine work?

The mRNA in the vaccine teaches your cells how to make copies of the **spike protein**. If you are exposed to the real virus later, your body will recognize it and know how to fight it off.

The vaccine **DOES NOT** contain **ANY** virus, so it cannot give you COVID-19. It cannot change your DNA in any way.

When your body responds to the vaccine, it can sometimes cause a mild fever, headache, or chills. This is completely normal and a sign that the vaccine is working.

After the mRNA delivers the instructions, your cells break it down and get rid of it.



How does the J&J COVID-19 vaccine work?

- Uses a weakened, common virus to carry instructions for the body to recognize and fight the germ that causes COVID-19 disease.
- The common cold virus has been modified so it cannot give the person the common cold.

How Viral Vector COVID-19 Vaccines Work

Understanding the virus that causes COVID-19.

Coronaviruses, like the one that causes COVID-19, are named for the crown-like spikes on their surface, called **spike proteins**. These **spike proteins** are ideal targets for vaccines.

What is a viral vector vaccine?

A viral vector vaccine uses a harmless version of a different virus, called a "vector," to deliver information to the body that helps it protect you.

How does the vaccine work?

The vaccine teaches your body how to make copies of the **spike proteins**. If you are exposed to the real virus later, your body will recognize it and know how to fight it off.

The vaccine **DOES NOT** contain the virus that causes COVID-19 and cannot give you COVID-19. It also cannot make you sick from the virus that is used as the vector. It cannot change your DNA in any way.

When your body responds to the vaccine, it can sometimes cause tiredness, headache, muscle pain, nausea, or mild fever. These are normal signs the vaccine is working.

Antibody

COVID-19 Vaccine Ingredients

Lipids

Fat coating to protect the genetic material (instructions)

Sugars

To prevent the solution and fats from bunching up

Buffers

To reduce the irritation of the liquid (pH) and keep the solution stable

What's NOT in the COVID-19 Vaccines?

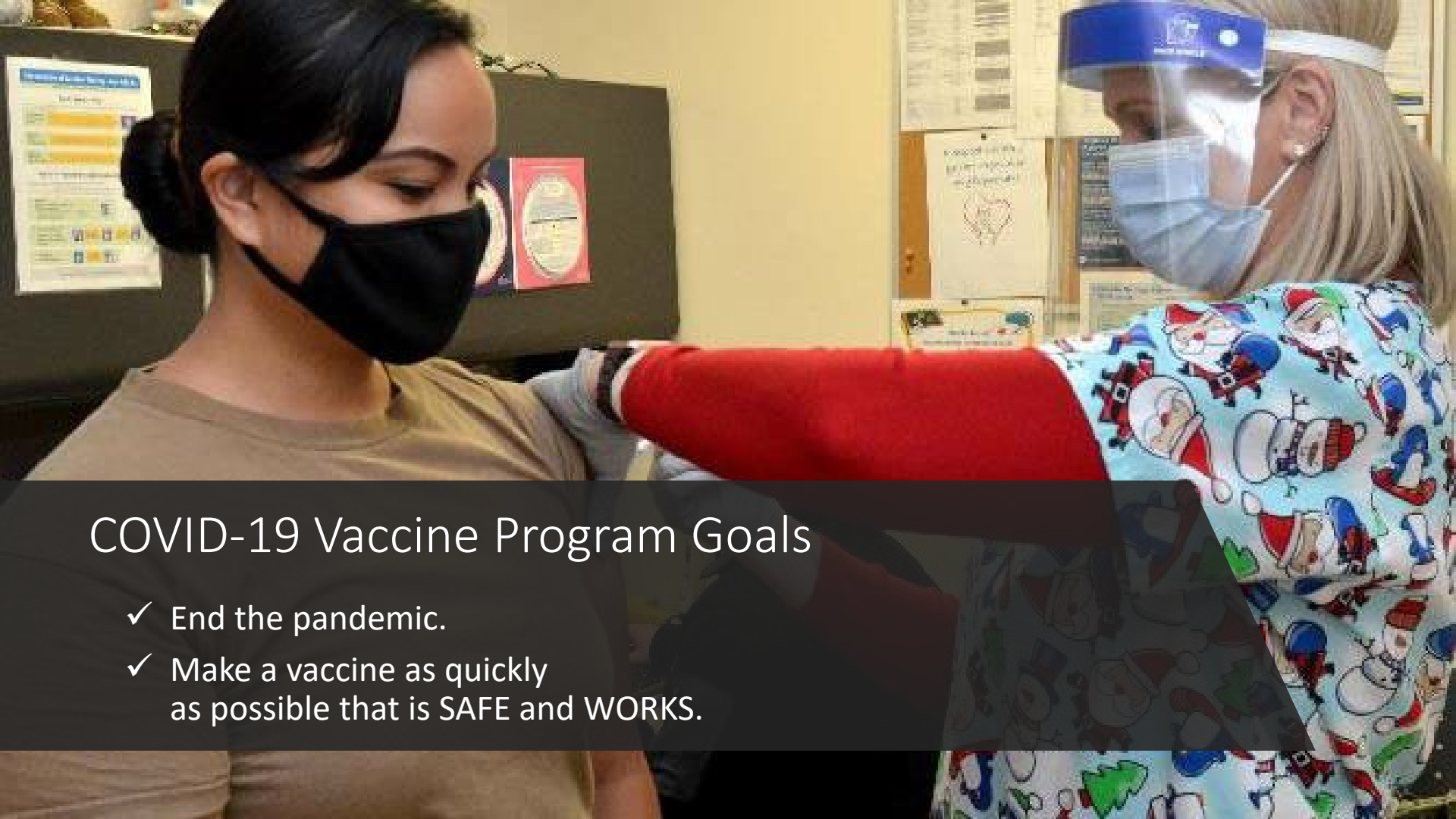
The vaccines do NOT contain fetal cells

No COVID-19 vaccine contains eggs, pork products, gelatin, latex, or preservatives

The vaccines do NOT contain DNA and will not alter your DNA

A person wearing blue scrubs and purple gloves is shown from the chest down, handling a white paper bag. The background is a blurred clinical or laboratory setting. The text "2. COVID-19 Vaccine Development and Efficacy" is overlaid in white on the image.

2. COVID-19 Vaccine Development and Efficacy



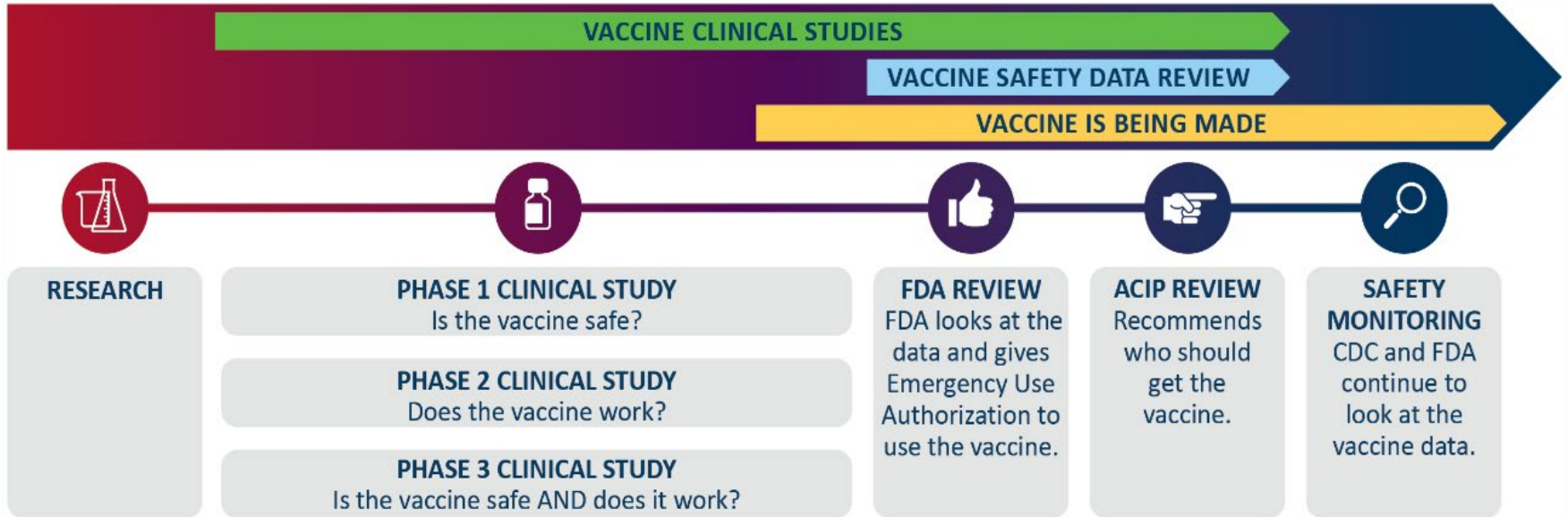
COVID-19 Vaccine Program Goals

- ✓ End the pandemic.
- ✓ Make a vaccine as quickly as possible that is **SAFE** and **WORKS**.

Clinical Studies: Who Was included?

Category	Pfizer	Moderna	J&J Janssen
Number of participants in the study	44,392	30,000	19,302
Latinx/Hispanic	26%	20%	15%
Black/African American	10%	10%	13%
Asian	5%	4%	6%
American Indian/Alaska Native	0.5%	0.7%	1%
Seniors	41% ages 56+	64% ages 45+	34% ages 60+ (global)
One or more health condition	21%	27%	41% (global)

Vaccination Development

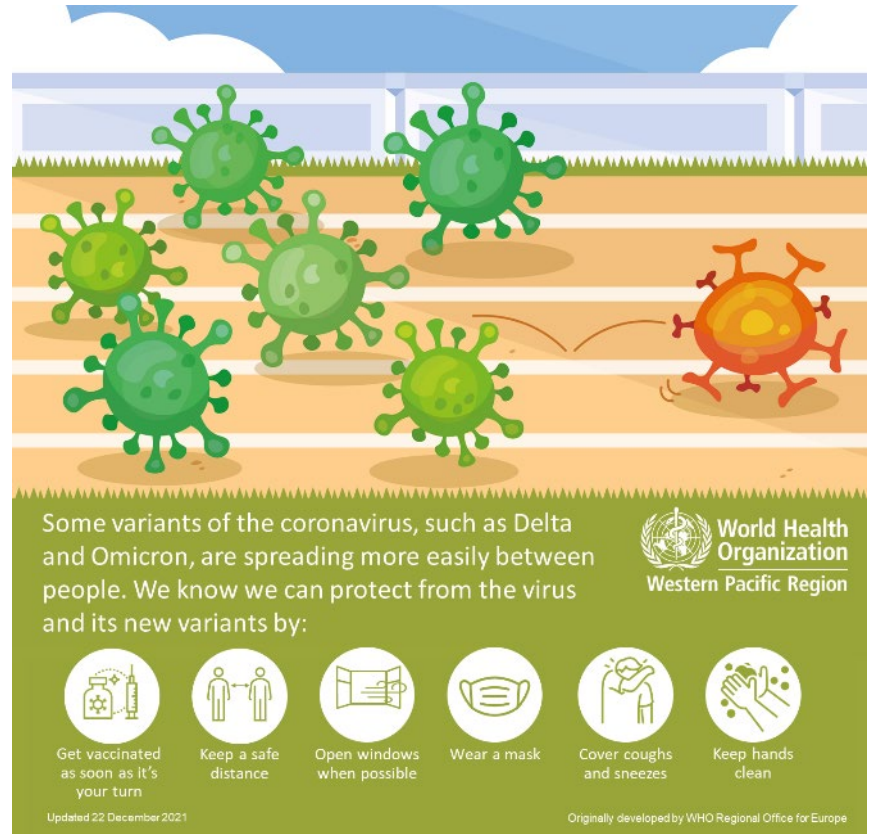


What We Know

1. It protects against any symptoms most of the time.
2. Works in all different ages, different racial and ethnic groups, and in people with health conditions.
3. Protects against severe disease, going to the hospital, or dying.
4. Boosts protection in people that already had COVID-19.
5. Decreases the amount of disease spread.

What are variants?

- COVID-19 is a virus, and it mutates or changes over time and there have been several variants of concern.
- The vaccine protects us from severe disease, hospitalization and death. It even protects against the variants, especially with the booster dose.



In Summary: The truth about COVID-19 vaccines

mRNA vaccines can only deliver instructions – they cannot do anything else.

The only thing that is tracked is a record of your vaccination.

Pregnant people that have been vaccinated have healthy babies.

People who wanted to get pregnant have done so after getting the COVID-19 vaccine.

There is no virus in the vaccine. A person gets COVID-19 when exposed to a person who is infected with COVID-19.



3. Getting Vaccinated

What to expect when someone gets vaccinated

What to expect

- Recommended for everyone 5 years and older, even if someone already had COVID-19.
- Pfizer vaccine approved for people 5 years and older.
- All other vaccines for 18 years and older.
- Requires either one or two doses as the initial series. And then a booster.
- Protection happens about two weeks after final dose.



Free Vaccines for Everyone



- Vaccines are FREE for everyone
- An administration fee may be billed to insurance
- No one can be denied a vaccine if they are unable to pay
- Anyone can be vaccinated regardless of immigration status

After Vaccination: Common Side Effects

Where the shot was given:

- Sore arm
- Redness
- Swelling – sometimes around the armpit

General symptoms:

- Muscle aches
- Headache
- Feeling tired
- Fever and chills

After Vaccination: Common Side Effects

Common side effects are normal

They mean the vaccine is working!

Usually start within a day after vaccination and go away in 1-2 days

May not be as intense among elderly people and younger children

Treatment of Common Side Effects



Over-the-counter pain relievers that you take for pain or fever, such as acetaminophen (Tylenol®) or ibuprofen.

- **Not** recommended to take acetaminophen or ibuprofen before you get vaccinated or if you do not have side effects after unless you take it for routine pain management.



Cool cloths to relieve the swelling or pain at the injection site. Keep moving your arm.

Very Rare Serious Adverse Events

Blood clotting problems (Thrombosis with thrombocytopenia)

- J&J vaccine
- Women, 18-49 years
- 7-10 days: bleeding, severe headache or stomach pain

Severe allergic reaction (Anaphylaxis)

- Any vaccine
- Any age
- Within 30 minutes: weakness, short of breath, difficulty swallowing, rash with itching

Inflammation around the heart (Myopericarditis)

- mRNA vaccines
- Males, 16-39 years
- 1-3 days, chest pain, short of breath, irregular heartbeat

Nervous system weakness (Guillain-Barré syndrome)

- J&J vaccines
- Males, 50-65 years
- 2-6 weeks, growing weakness from feet/legs moving upward

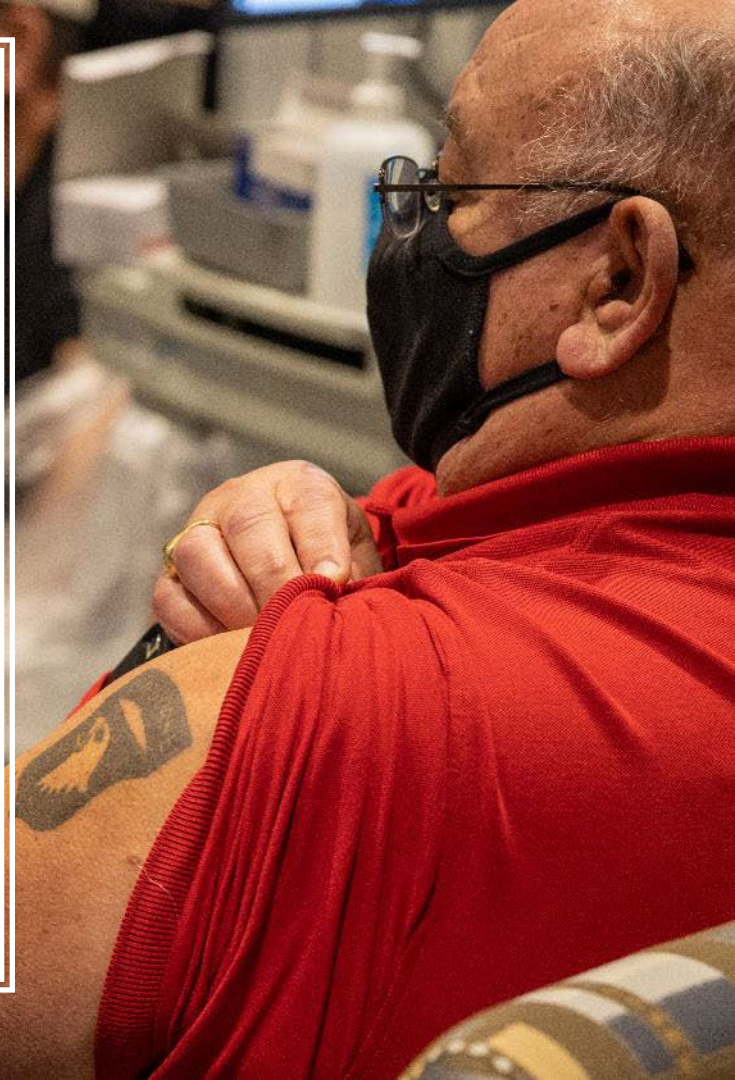
Moderna and Pfizer

CDC recommends using Moderna or Pfizer when there is a choice of vaccines.



People with Certain Immunocompromising Conditions

- People with certain immunocompromising conditions that received the mRNA vaccine (Pfizer or Moderna) should get an additional dose as part of their primary series. This is different from a booster dose.
- Because of a weakened immune system due to illness or its treatment, they may not have responded to the two-dose series, an extra dose is recommended.
- An additional dose may improve protection. These people should continue to take other precautions: masks, distancing, wash hands, etc.
- People should talk to their health care provider about their medical condition, and whether getting an additional dose is recommended for them.



Fertility and Pregnant Women

- No evidence the vaccine causes fertility problems
- Pregnant women should get vaccinated
 - If sick with Covid-19 there is higher risk of poor outcomes for themselves and their babies including still births and preterm birth
 - No reports of increase in pregnancy loss, growth problems or birth defects in vaccinated women



Booster Shots

- Many routine vaccines require booster shots to maintain protection. They “boost” your ability to fight the disease if you are exposed, because we know original protection from the vaccine decreases over time.
- People who have received the COVID-19 vaccine still have some protection even when protection starts to decrease.
- The booster shot helps get protection back up to a higher level.



Getting a Booster Shot

People 12
**years and
older** should
get a booster
shot.

Pfizer (12 years+): Get a booster shot at least 5 months after 2nd dose.

- Moderna (18 years+) vaccine: Get a booster shot at least 5 months after 2nd dose.

- Johnson & Johnson vaccine (18 years+): Get a booster shot at least 2 months after the initial dose.



COVID-19 Vaccine for Children 5-11 Years

- Pfizer is authorized for children ages 5 years and older.
- Study in children 5 to 11 years showed a smaller dose of the vaccine worked and is safe for this age group.
- An additional dose is recommended for some immunocompromised children.
- Check to make sure the vaccination location you are going to has the vaccine that matches your child's age.



Photo by Noun Project from Noun Project

Other important ways to protect ourselves

- Wear a mask
- Wash hands often
- Socially distance when possible
- Avoid crowded space
- Outdoor settings are generally safer than indoor spaces
 - ✓ Ventilation is important

A close-up photograph of three women wearing hijabs, looking down at a document. The woman on the left is wearing a tan hijab and is smiling. The woman in the middle is wearing a brown hijab. The woman on the right is wearing a black hijab with a red and white patterned headband. The background is blurred.

4. Considerations for RIM Communities

Who RIM communities are and how they can be supported in accessing the vaccine



Refugees, immigrants, and
migrants and their families
in the United States.

RIM Communities

A Disproportionate Effect

- COVID-19 disproportionately affects some populations, including certain RIM communities
 - ✓ Learn more about this through the NRC-RIM Module, Working with Refugees, Immigrants, and Migrants in COVID-19
- Certain RIM communities may be hesitant to obtain the vaccine
- This is due, in part, to social and structural determinants of health



Social and Structural Determinants of Health



Other Considerations and Solutions

- Limited familiarity with US health systems
 - ✓ Identify vaccination sites
 - ✓ Support registration
- Concerns about immigration status
 - ✓ Consider location of vaccination site
 - ✓ Reiterate that vaccinations are encouraged for all



Limited access to transportation

- Identify site nearest individual
- Provide clear directions
- Organize a vaccination drive in a RIM community



Work is a priority

- Many do not get paid time off
- Organize mobile clinics at the worksite
- Advocate with employers



Language and Literacy

- Limited English proficiency
- Varying levels of literacy
- Provide interpretation services
- Culturally contextual educational materials
- Vaccine consent in the patient's primary referred language





5. Vaccine Hesitancy

Vaccine Hesitancy

Education

Health
Literacy

Access to
information

Culture

Religion

Values

Distrust

Infodemic

Refers to a large increase in the volume of information





Misinformation can be an innocent mistake, but it's still dangerous.



Disinformation is dangerous, plus it serves someone else's agenda.



Factsheet
N.5

Medical Misinformation: Incorrect or unverified information about the form and function of the human body, and/or misperceptions of health practitioners and medical science.

UNDERSTANDING THE INFODEMIC AND MISINFORMATION IN THE FIGHT AGAINST COVID-19

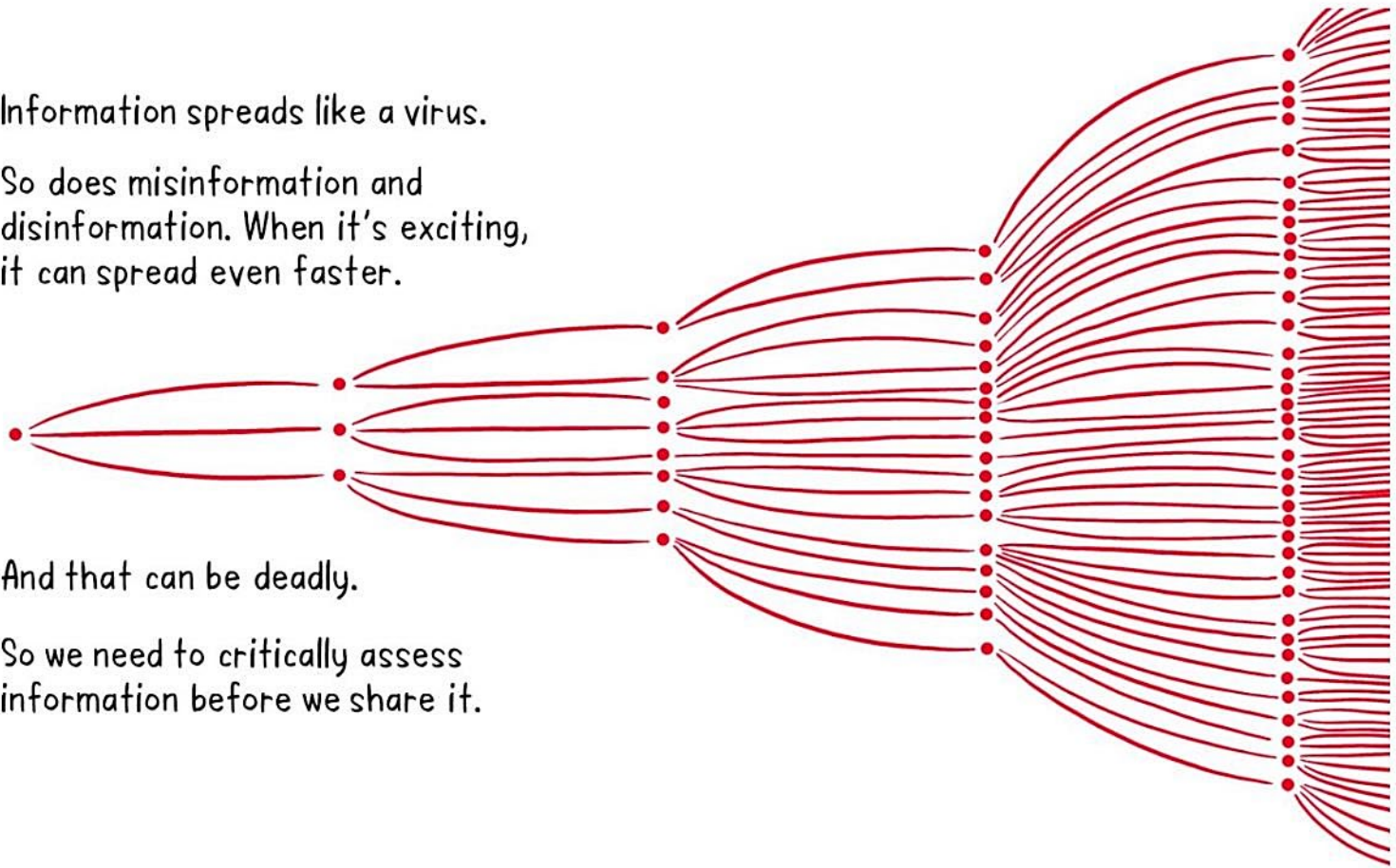
DEPARTMENT OF EVIDENCE AND INTELLIGENCE
FOR ACTION IN HEALTH
OFFICE OF THE ASSISTANT DIRECTOR
www.paho.org/ish



PAHO

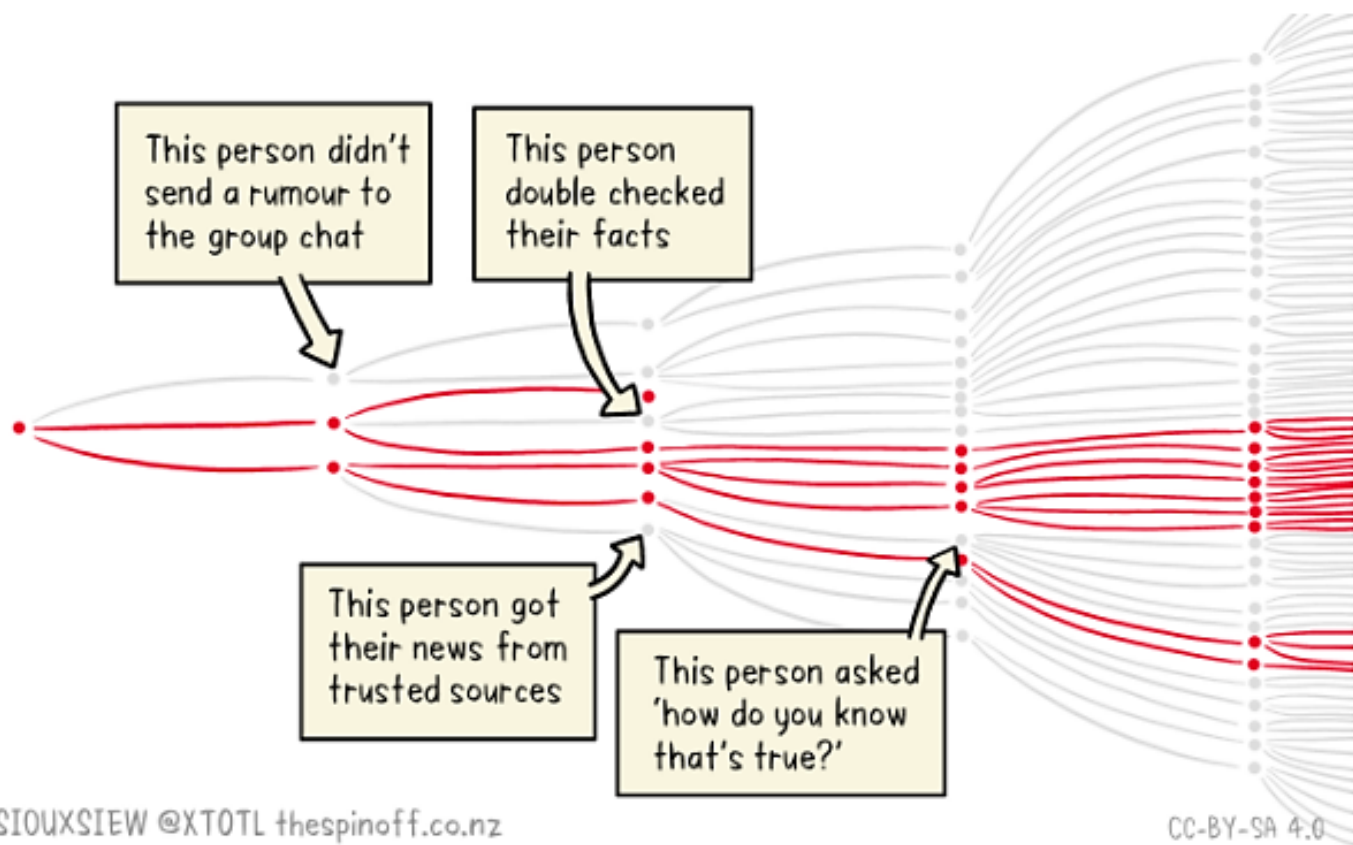
Information spreads like a virus.

So does misinformation and disinformation. When it's exciting, it can spread even faster.



And that can be deadly.

So we need to critically assess information before we share it.



Deconstructing Health Messages

Five Key Questions developed by the Center for Media Literacy (CML)



More info from MCN: <https://www.migrantclinician.org> | More from CML: <https://medialit.org>





Deconstructing Health Messages

This resource supports the analysis of health information using the Center for Media Literacy's *Five Key Questions* and links to related resources. It's available as a PDF or Prezi presentation.

WHO COVID-19 Mythbusters

This page on the World Health Organization website is constantly updated with debunking materials to counter the latest misinformation regarding COVID-19.

WHO Health Alert on WhatsApp

From government leaders to health workers and family and friends, this messaging service provides the latest news and information on coronavirus including details on symptoms and how people can protect themselves.

How to Report Misinformation Online

The WHO has compiled the steps necessary to report misinformation on the most popular online platforms in order to encourage individuals to report false or misleading content online.

Equal Access Language Services

This service specializes in interpretation, training, translation and consultation for organizations that need to communicate in various languages.

Resources in Indigenous Languages

CIELO has translated COVID-19 related resources into indigenous languages from across Latin America.

Videos from The Refugee Response

Refugee Response has short videos in many languages on topics including mental health and recognizing misinformation during a pandemic.

Analizando mensajes sobre salud

Este recurso apoya el análisis de la información de salud utilizando las Cinco Preguntas Clave del Centro de Alfabetización Mediática y enlaces a recursos relacionados. Está disponible como una presentación PDF o Prezi.

Consejos para la población acerca de los rumores sobre el nuevo coronavirus (2019-nCoV)

Esta página en el sitio web de la Organización Mundial de la Salud se actualiza constantemente con materiales de desacreditación para contrarrestar la última información errónea sobre COVID-19

Cómo señalar la información errónea publicada en línea

La OMS ha recopilado los pasos necesarios para denunciar la desinformación en las plataformas en línea más populares con el fin de alentar a las personas a denunciar contenido falso o engañoso en línea.

Servicio de alertas sanitarias de la OMS por WhatsApp en español

La OMS ha puesto en marcha un servicio especial de mensajería en español y otros idiomas, con la colaboración de WhatsApp y Facebook, para ayudar a la población a protegerse del coronavirus.

Acceso igualitario a servicios de lenguaje

Este servicio se especializa en interpretación, capacitación, traducción y consultoría para organizaciones que necesitan comunicarse en varios idiomas..

Recursos en lenguas indígenas

CIELO ha traducido recursos relacionados con COVID-19 a lenguas indígenas de toda América Latina

Trusted sources of information

MIGRANT CLINICIANS NETWORK



MCN <https://www.migrantclinician.org/>



NRC-RIM <https://nrccrim.org/>



CDC <https://www.cdc.gov/coronavirus/2019-nCoV/index.html>



- Communication Campaigns
- Vaccination Education Resources
- Join us for PART 2 on January 27 at 2 pm ET

A landscape photograph of a grassy field with a path leading towards a forested hill under a cloudy sky. The foreground is dominated by tall, golden-brown grasses. A narrow, dark path winds through the grass from the bottom center towards the middle ground. In the background, a dense forest of evergreen trees covers a rising slope. The sky is overcast with soft, grey clouds. The overall lighting is dim, suggesting dusk or dawn.

6. Summary

Let's summarize what we've learned


The vaccine is safe.

The vaccine is effective.





The vaccine is
free.



The vaccine is
free vaccine
regardless of
immigration
status.

- Certain RIM communities have been disproportionately impacted by COVID-19
- Some may be hesitant to receive the vaccine.
- They can be supported through:
 - ✓ interventions tailored around recognized barriers and values
 - ✓ Access to accurate, translated information
 - ✓ Other social supports





Thank you!

For additional resources visit nrcrim.org