A Checklist for COVID-19 Vaccine Roll-out among Refugees, Immigrants, and Migrants

Ensuring opportunities for COVID-19 vaccination among refugee, immigrant, and migrant (RIM) communities is important. Consider the following actions when implementing vaccination campaigns among these communities.

**Community Engagement and Partnerships**

- Develop partnerships with community-based organizations (CBOs), grassroots organizations, faith-based organizations and other community groups to raise awareness and increase knowledge of vaccines. Maintain those relationships across COVID-19 response activities including when planning vaccine administration (see our community engagement toolkit for more resources).
- Partner with health clinics who have established and trusted relationships with communities to improve access to vaccines.
- Create informal and formal partnerships between health departments and communities such as communities of practice, community liaisons and/or community advisory boards.
- Hire bilingual and bicultural staff from local communities for vaccination efforts.
- Connect with your State Refugee Health Coordinator, who can introduce you to clinical and community partners working with refugee populations and resources in your state.
- Hold listening sessions with community members to learn about more about their perceptions, questions, and potential concerns about COVID-19 vaccines.
Cultural and Linguistic Considerations

Providing Education

☐ Offer culturally- and linguistically-appropriate education on topics such as how COVID-19 vaccines work, what is known and unknown about the vaccine including side effects, the process of being vaccinated, and answers to frequently asked questions

☐ Hire bilingual and bicultural staff from local communities to assist in development and dissemination of educational material

☐ Consider cultural preferences that could impede awareness and knowledge about vaccines (e.g. preferred format for information, trusted messengers)

☐ Build rapport by asking what questions community members either have or they believe others may have (as people may be more comfortable sharing concerns in this response to this generalized question)

☐ When providing education about vaccines, do so with the understanding that some members of RIM communities may have distrust of government authorities, may have concerns about their legal status in the US and may have suffered oppression and/or violence by government authorities in their country of origin; consider including reassuring information in clear and simple language

   ○ Share your organization’s policy about not sharing immigration status or, if not available, general information regarding accessing healthcare services

      ▪ Healthcare providers are not legally required to report or document immigration status

      ▪ Immigration status is protected by the Health Insurance Portability and Accountability Act privacy rule

      ▪ Hospitals and health care facilities are considered “sensitive locations” and to be avoided per internal guidance (not mandate) from ICE and US Customs and Border Patrol

   ○ Share general information regarding immigrant rights (such as with these multilingual fliers)
Access and Administration

☐ Offer vaccines at locations that are accessible and appropriate for the community in collaboration with community partners. See an example.

☐ Provide bilingual and bicultural staff or professional interpreters at vaccination locations who align with the communities expected to attend – avoid using family members as interpreters and never use children as interpreters

☐ Provide training to professionals administering vaccines on how to work with interpreters

☐ Provide culturally- and linguistically-appropriate details about the vaccination process, potential side effects, and methods for monitoring side effects

☐ Provide information and assist with arrangements for when and how to receive the second vaccine dose

☐ If vaccine is declined, continue to discuss and offer in future encounters