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US Together, Inc.
AmeriCorps VISTA Covid-19 Vaccine Health
Education Initiative
May 10 - July 15



Executive Summary

Under the supervision of the Interpreting Services Department at US Together, Inc. (UST), Erin Schmidt, an AmeriCorps VISTA Summer Health Associate, completed a successful Covid-19 Vaccine Health Education Initiative from May 10, 2021, through July 15, 2021.

As an organization, UST cares deeply about the health and safety of its clients and wider refugee and immigrant community. UST is a strong advocate for the Covid-19 vaccine and believes it is essential for ending the pandemic. When UST observed that immigrants and refugees had been hesitant and fearful about taking the vaccine, they created a position for an AmeriCorps Vista Summer Health Associate to address these challenges.

Over the course of 10 weeks, Erin successfully created materials to educate refugees and immigrants about the Covid-19 vaccine. She also brought awareness to the barriers this population faces in taking the vaccine and provided strategies to help alleviate and eliminate the barriers.

With extensive research, a culturally sensitive, educational booklet about the Covid-19 vaccine was created. The Interpreting Services Department translated it to Spanish, Swahili, Somali, Portuguese, Nepali, Kinyarwanda, Tigrinya, and Arabic. So far, over 100 booklets have been distributed to different organizations and health clinics that serve refugees and immigrants. The PDF's have been uploaded to UST's website and have been viewed over 100 times. They have also been shared in posts on its social media pages, which have had over 2,400 interactions.

In addition, interviews concerning the vaccine in refugee and immigrant communities were conducted with a UST client and program coordinator, and a director from a faith-based non-profit on the south-side of Columbus. The interviews have been recorded and uploaded to the UST YouTube channel on the UST website. They have also been shared on UST's social media channels. These have provided valuable information to educate refugees and immigrants about the safety of the vaccine, as well as bring awareness to vaccine barriers and provide strategies to overcome them.

US Together, Inc. looks forward to providing a recap of the Covid-19 Vaccine Health Education Initiative. This review will include the urgency for and barriers to vaccination, how the barriers have been addressed, outcomes of the initiative, a SWOT analysis, and summary view of the work completed by US Together, Inc. and AmeriCorps VISTA.



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Contributors

For this project, 3 people were interviewed in the immigrant and refugee community to gain important information about the barriers to vaccination and strategies that have been implemented to overcome them. These interviews have been shared on social media to both educate people about the safety and necessity of the vaccine, as well as bring public awareness about the current struggles and how to support those hesitant about the vaccine.

Denis Kansaza

Denis is an UST client and refugee from the Democratic Republic of the Congo. He shared a first-hand view into some of the fears and barriers the refugee community faces in receiving the Covid-19 vaccine. He was eager to take the vaccine and has been a huge advocate in his community. He shared some of the ways he has been encouraging his friends and family to take the vaccine.

Hana Abdelbaki

Hana is the Program Coordinator for Victims of Crime at UST. She has worked closely with clients throughout the Covid-19 Pandemic. She shared about the heightened risk refugees and immigrants face with Covid-19 and urgency for them to be vaccinated. She also spoke to some of the hesitancy her clients faced at first when the vaccine rolled out and current struggles that remain. She has been able to encourage many of her clients by sharing her own experience of taking the vaccine.

Mike Premo

Mike is the Director of Engagement for Community Development for All People, a faith-based non-profit on the South-side of Columbus. He shared about the successful vaccine pop-up clinics they had at their building and how that has encouraged hesitant people in the community to get vaccinated. He stressed the importance of fostering community trust and building relationships with government health officials.

Urgency for Covid-19 vaccination

US Together, Inc. strongly believes Covid-19 vaccination is of utmost importance for its clients, and the broader refugee and immigrant community. Due to various disparities, refugees, and immigrants, like many other disadvantaged communities, are more likely to be severely impacted by Covid-19. Before going further into the barriers and solutions, it's important these factors are brought to attention to emphasize the high importance and urgency to encourage and help refugees and immigrants get vaccinated.

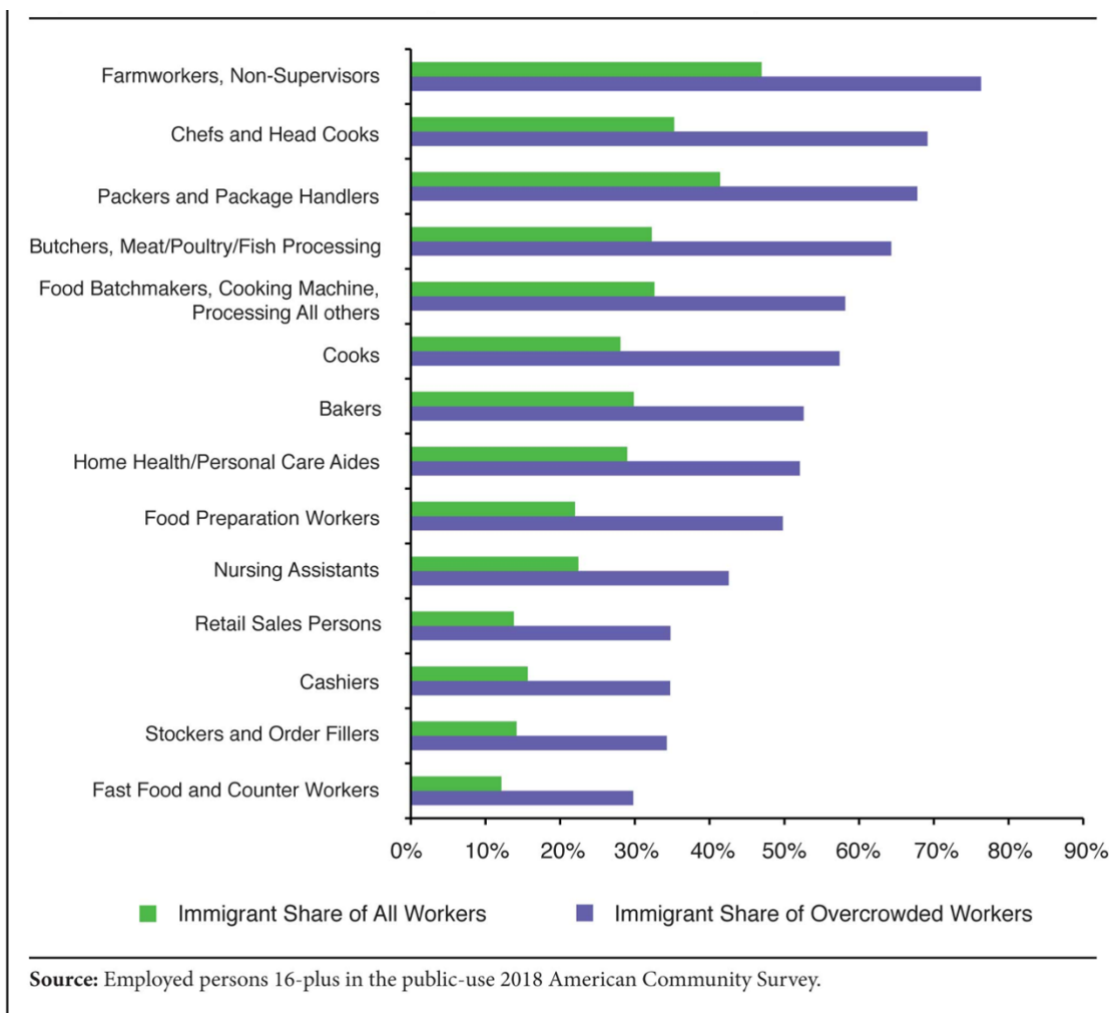
1. Refugees are vulnerable to serious complications and effects from Covid-19
 - There is a high prevalence of mental health problems and psychological distress in migrant and refugee populations due to trauma, displacement, loss, and the unstable and unhygienic living conditions in the camps. Some common conditions include post-traumatic stress disorder, depression, anxiety, sleep disturbance, substance misuse and somatization. According to a report from the German Chamber of Psychotherapists, “at least half of refugees suffer from mental health problems related to their experiences of and fleeing conflict.” 40 percent of children have witnessed violence and 26 percent of them have watched family members being attacked. Thus, the impact of the mental health crisis brought by Covid-19 can affect them even more severely due to their preexisting conditions. As well, some of these populations are more likely to have stigma concerning mental illness and can have reluctance about seeking out support.¹
 - Refugees are very susceptible to respiratory illness due to deprivation during migration, as well as damp and poor sanitary conditions and lack of adequate hygiene during the journey and while at the refugee camps. They are also at risk for respiratory complications, lung cancer and cardiovascular disease from smoke from open fires.² These diseases and complications are risk factors to becoming severely ill from Covid-19.³
2. Refugees are less likely to go to the doctor
 - As Hana mentioned, a lot of refugees have been in camps for long periods of times. Refugees are less likely to go to the doctor because they are not used to seeking preventative care, which is often severely lacking in the camps. Many doctors are overwhelmed by the increased influx of refugees. For example, in Cameroon, the doctor-patient ratio is 1 doctor per 50,000 inhabitants in rural areas, according to a 2018 Refugee Brief from the United Nations Refugee Agency. This is 5 times that recommended by the World Health Organization.⁴

¹ Daynes L. (2016). The health impacts of the refugee crisis: a medical charity perspective. *Clinical medicine (London, England)*, 16(5), 437–440. <https://doi.org/10.7861/clinmedicine.16-5-437>

³ <https://www.cdc.gov/coronavirus/2019-ncov/need-extra-precautions/people-with-medical-conditions.html>

⁴ <https://www.unhcr.org/refugeebrief/the-refugee-brief-26-november-2018/>

3. Many immigrant and refugee families are large, and live in close quarters, which makes it hard to isolate when sick.
 - According to a study by the Center for Immigration Studies, 27 percent of immigrant workers live in a household of 5 or more, compared to 15 percent of natives. As well, it was revealed that 25 percent of immigrant workers living in five-person households are in overcrowded homes, compared to 8 percent of native-born workers living in the same size household.⁶
4. As well, Immigrants represent a large share of workers in overcrowded housing in many occupations thought to be essential during the Covid-19 pandemic:⁶



⁶ <https://cis.org/Report/Overcrowded-Housing-Among-Immigrant-and-NativeBorn-Workers>

5. It is difficult for refugees and immigrants to get care if they get sick
 - Many lack health insurance. Either they are not eligible due to immigration status, or with refugees, after their short-term health insurance issued by the government ends, they have difficulty getting insurance. According to the Center for Disease Control (CDC), upwards of 50 percent of refugees lack health insurance after the initial insurance ends.⁵
 - These populations usually do not have access to a car, and if they are not eligible for Medicaid, they cannot use free medical transportation
 - Many have trouble navigating the healthcare system. Language barriers can make it difficult setting up doctor's appointments and working with doctors. Healthcare in the United States is very complicated as well and it is often very unfamiliar. For example, many come from countries where healthcare was free, and so they lack an understanding of insurance, and the process of getting adequate care.
6. Some of the essential fields refugees and immigrants work in don't have paid sick leave. Without paid sick leave they may be more likely to keep working when they are sick or exposed to someone who is sick with Covid-19.

⁵ <https://www.cdc.gov/coronavirus/2019-ncov/need-extra-precautions/refugee-populations.html>

Barriers

There are numerous barriers that prevent refugees and immigrants from receiving the Covid-19 vaccine. This is not an exhaustive list, but these are some things that came up that UST chose to highlight and address.

Culture and Religion

Hana worked with a Muslim woman who wore the traditional, full Islamic clothing. The only place and time available for her to get vaccinated was in a drive-up, public setting at the Ohio Expo Center. She was uncomfortable taking off her scarf and showing her skin in front of everyone. They had to find a way to get her to a more private place. Now it is not as big of an issue because there are more pharmacies and doctors' offices that administer the vaccines in private rooms.

Fear and Lack of Trust

Fear and lack of trust of the government and healthcare system can be huge barriers to vaccination. This is particularly the case within the African population. Unfortunately, in some places, they have often been tested with experimental drugs and vaccines as guinea pigs. For example, in 1996 Pfizer tested 100 children in Nigeria for meningitis with an unlicensed drug in an experimental drug trial that left a number of children dead, deaf, mute and brain damaged. The families alleged that Pfizer failed to tell them that their children were being enrolled in the trial and that free, effective treatment was available at the same hospital.¹

Misinformation

Misinformation has been widely spread on social media. Many people use social media to connect with friends and family back home. They often get their news in their own language from back home, which has been a large source of misinformation. This has caused fear that the vaccine is not safe.

Transportation

Refugees and immigrants often do not have access to a car to get to vaccine clinics. And if they are not eligible for Medicaid, they cannot use medical transportation.

¹ Lenzer J. (2007). Nigeria files criminal charges against Pfizer. BMJ : British Medical Journal, 334(7605), 1181. <https://doi.org/10.1136/bmj.39237.658171.DB>



Lack of translated resources

There is a lack of translated accurate resources. Without which, misinformation is more likely to be spread about the safety of the vaccine. The language barrier also makes it difficult for people to know where to get vaccinated.



Addressing the barriers: Covid-19 Vaccine Resource Booklets

To address and help erase some of the barriers to vaccination among refugees and immigrants, vaccine resource booklets were created and translated by US Together, Inc. Interpreting Services as part of a project created by the AmeriCorps VISTA Summer Associate. Each booklet contains reliable, accurate information about the vaccine. They can be found on UST's [website](#). It includes:

- Benefits
- Safety
- Side effects
- Vaccine types
- Vaccine access
- Transportation
- Locations (within the Columbus area)
- Information about Title VI, which ensures the provision of qualified interpreters/translators at no cost to any Limited English Proficiency (LEP) client at federally funded providers (such as hospitals).
- Additional resources, such as mental health organizations and Ohio Public Health contacts

The booklets have been translated so far into 9 languages:

- Arabic
- Tigrinya
- Nepali
- Somali
- Portuguese
- Swahili
- Kinyarwanda
- Spanish
- Urdu

Addressing the barriers: Interviews

As mentioned, interviews were conducted with Denis Kansaza, Hana Abdelbaki, and Mike Premo to bring awareness to barriers to vaccination and strategies that have been used to encourage vaccination. The following are summaries of the interviews. The full interviews are uploaded to UST's [YouTube page](#) and [website](#).

Denis Kansaza

What was your experience with Covid and the pandemic?

My experience with Covid here in the United States, it was just a lot. It affected a lot of people...I was really aware of the whole pandemic. We all survived and i am so glad that I was vaccinated. I feel a little safe, you know from getting those vaccines.

Did you have any fears or hesitations about taking the vaccines at first?

I was never scared of taking the vaccine shots because I was pretty much educated watching the news...people were spreading rumors, but i was so very aware of the vaccines. I was so much educated so I was never scared to take the vaccines.

People like us can post information you know, rumors and stuff, but that's like most people here are scared of taking the vaccines...but if you focus on the good side of social media like the spreading of news and good information, people can learn a lot from, you know, social media instead of focusing on those false narratives.

Do you think there are any common fears in your community or refugees in general?

A lot of people are scared, especially in my community. And they were all like, "oh ok we are going to see how it turns out for you, you know if you get sick. After that we may consider taking the vaccines." They all hear this false information on social media, so that's why they become scared. So, like now that's why I go to their homes to let them know that I am perfectly fine, it's safe taking the vaccine

Has transportation been an issue for you or others to get the vaccine? Have people had trouble finding where to get the vaccine?

Even myself I have difficulty finding places, you know, get access to the vaccines but I know I can help those who have difficulty having access to the vaccines. I can just lead them how I got access to the vaccine



I am confirming, it sounds like the best way to reach the people in your community would be people in your community who have gotten the vaccine and have provided resources.

Yes.

Are there any other resources your community needs to encourage them more, to take the vaccine? Any other advice for people in your community or other refugee populations?

One piece of advice I would give to the population or mass community is to follow the information on the news and not the false narratives about the vaccines.

Another thing people had this mentality that these vaccines are only for black people, like they are using black people as for experiments and stuff. Like at my job I am the only black person that works there, and I converse with my coworkers that are vaccinated and when we went to go get vaccines I brought one of my colleagues and one of my black friends...and i showed them like everyone is being vaccinated, it's not just about race or anything, everybody is getting this vaccine

Why do you think people have these fears?

The first time they consider(ed) vaccinating their people for Covid, this was information that they were going to use Africans as an experiment for this vaccine. So, it got into people's heads that you know you are using us for vaccines, they are trying to kill us...so they picked that out from you know from the false news on social media, so yeah that's where they got this information from

Hana Abdelbaki

How have your clients responded to Covid in general and to taking the vaccine?

It took some convincing at the beginning, we work with as I said limited English populations and the local government and Columbus public health did a great job at educating and translating all that information and to like the different languages that are prevalent here in Columbus. It does take, you know, some members from the community speaking to the community themselves to convince them that the vaccine is good and it's there and it's safe for them. So, you know we had to do a lot of talking and convincing at the beginning, but most of you know our populations are calling now asking for our assistance to schedule these vaccines so, it's going much much smoother.

Are there any stories you have of somebody who was really hesitant to take the vaccine based on religious concerns or cultural things?

I had one case of a lady, she is a Muslim from Libya, so she wears the traditional Islamic clothing...the only appointment that I found at that time that she wanted to take the appointment was at the Ohio Expo Center Downtown so there was a lot of concern about the fact that she had to take off the scarf outside, outside in front of everybody, so that took you know, we had to like find a way for her to take the vaccine safely at that location and so I also talked to Columbus public health to see for this specific people you know have those cultural concerns and religious concerns if they can find other ways to administer the vaccines, especially in a setting where you are not in a pharmacy or like in a drive through and has to be done in front of people.

What has been the response of Columbus Public Health when you reached out to them?

I think at that time, they are rapping up the vaccination site at the Ohio Expo center. They did take that into consideration and told us that the other option is to take and get her scheduled at a pharmacy where there are more private settings for these vaccines to be administered.

Are there any other fears that the some of the refugees and immigrants have had in taking the vaccine?

I think it's a matter of logistics, getting transportation to the site...I work with a lot of asylum seekers and undocumented immigrants, and you know victims of human trafficking who are working to get their status adjusted in the United States. These populations usually do not have access to a car and if they are not eligible for Medicaid, they cannot use medical transportation to get to that vaccine site, so bringing more of these you know opportunities into these communities where some of these populations reside will be very very necessary to get everyone vaccinated.

You said that when you started taking the vaccine, they were more willing. Can you explain more?

Our agency does work with families for prolonged periods of time so there is a trust- building relationship and [with] us being a grassroots agency and we take care of getting all of their sensitive information and all of their documentation, we help them get connected to all of these services so there's a trust building process that happens with the families, so when they know that their case manager or the person who has been helping them throughout this time has gotten the vaccine and you know I am still here and healthy and doing great so they, they start, you know saying maybe we also need to take it. So, I have been sharing my story of me taking the vaccine with my clients to encourage them to take it and give it to their kids because I tell them that I also have kids and I you know have taken the vaccine and they are able to attend their classes more freely and go out more you know and interact with their friends more. So, you know, it's all going to be better for everybody if we all get vaccinated.

I know sometimes refugees, some people coming here can have a mistrust in the healthcare system and just the government in general. Did you talk to anyone who had those concerns and how did you handle that?

The problem with our population is just navigating the medical system. You know a lot of them have lived in refugee camps for long periods of time, so they don't have an understanding, you know, of preventive medicine. They don't have this concept, so a lot of them for example don't see their doctor on a regular basis, they don't get their teeth checked on a regular basis. You know emotional health, this is something also that we have to help them overcome, this stigma, so there is a lot of stigma we have to help them resolve and definitely the vaccine was part of it with all the dialogue and back and forth that happened with the vaccines and the media, so you know it did take some time but I think we are over that and we are at a period of time when logistics and getting the vaccines to these neighborhoods is what we need to be talking about and considering at this time.

Are there any other ways you feel that the city or health providers could do to help refugees and immigrants communities get vaccinated or get comfortable getting vaccinated?

I think just keeping conversation going and making sure that you know that a lot of people are talking to the community at different like points of contact, so here as case managers we talk about it, so if they go also to a hospital setting or if they are seeing some kind of doctor...the more they here about it the better it is. As we said, having that translated material in their own language. You know some people may not be willing to listen at that time, but you know if they are getting away from the appointment with a translated material resources of people to call if you know, they change their mind and they are ready to take the vaccine...Getting those materials translated into those languages I think will be very very valuable



Mike Premo

Could you introduce yourself and your role, and more about the communities that you serve?

Part of our work is to come alongside people in the community and help them achieve their hopes, dreams, and aspirations. We don't come in and say this is what the community needs. We come and say let's work with community members to build a positive vision for the community and then assemble the assets in that community to make that vision a reality. And then one of the things we heard when we working with folks in the community is that they want to be healthy, they want to live healthier lives, they want to eat healthier...as part of that work we have been encouraging everyone to get vaccinated, to get the Covid-19 vaccine as soon as possible...And we have been working on getting folks to the vaccine centers, but we knew there were barriers in place that we wanted to help address. And so, we knew the best way to help the folks to get access to the vaccine was to hold a vaccine clinic here in our building for people in our community...we want to make sure everyone has access to the vaccine.

Part of the reason we wanted to do this was, A, for convenience, the location is convenient for people to get to, they are used to getting here. But also leveraging that community trust. A lot of people haven't been to Columbus public health before...and they are nervous about going somewhere they don't know and don't trust so when we open our doors to the trust of the community they come to us for any number of activities, and so if we say that the vaccines are safe and effective and free and that you should get vaccinated as soon as possible, that holds more credibility than if the department of public health is saying if or if some elected official is saying it...we have been able to get people in because of trust.

Are there any stories, or different interactions you have had with people who have come to your clinics and have concerns, and were comfortable being with you guys?

There was one woman who came in who comes to church here on Sundays and she is in her 70's and had not gotten the vaccine because she was buying into the misinformation that was out there. But when the church said to her on Sunday, come Tuesday to get vaccinated, that was, that was all she needed to hear, so she came in and got vaccinated.

What was the process of getting this vaccination clinic to your community and what are the logistics if other people in the community want to do that?

You know we reached out to Columbus Public Health, and we were provided a contact through what's called the Human Service Chamber of Franklin County and because we had made it clear from the beginning that we are...telling people that we are ready to host a vaccine clinic as soon as you are ready to have one. We are in. We will do whatever it takes. We have the space

and the trust from the community...it didn't happen right away, not because Columbus Public Health wasn't interested, they definitely were, but they were trying to get the actual real clinics off the ground and then they were able to come to us. So, once we connected, it was fairly easy. We picked a date and a time. They show, they bring their nurses, they bring their equipment, and we provide the space. We did the second floor of our building, we had 3 different rooms. 2 of them for shots and 1 of them for the 15-minute recovery period. And we went as far as to say we want to encourage people to do this, so we are going to provide \$10 gift cards...that really helped people, especially low-income people. That's a real solid incentive for folks. And so, we had 31 people the first day we did it, we did 36 the second day that we did it.

Is there anything else you would like to share, about the city or other organizations can help erase these barriers or fears, or helping people get vaccinated?

Well, I think it's two-fold, the government institutions--and we have been very fortunate to have a great partnership with city leadership and Columbus Public Health--but in general government entities focused on public health have to be listening to the folks on the ground to identify systemic barriers to access to healthcare. And the organizations on the ground have to be advocating for their community to communicate and leverage their relationships with their elected officials or the government organizations to say this is what our community is facing and here is what we think you can be doing to help that. So, it is a two-way street. Government entities need to be communicating with the folks on the ground but the folks on the ground definitely need to be banging on the doors of the government leaders and saying this is what our community wants, this is what our community expects, and this is what our community deserves.

Are there different ways these communities can reach out to government officials? What would you suggest to leaders of the community kinda like yourself, beyond getting vaccinated, but wanting to bring up these issues, what do you think is the best way?

It's all about building relationships of mutuality. Meaning I'm not helping you, you are not helping me, we are coming together alongside each other and going through life. And that's true of any organization or any elected official too. If the first time you're calling up your elected official is when there is a problem or when you are asking for something, that's going to make it hard. But if you've built a relationship over years when they have come to visit you...many of our elected officials have come here on the ground on the southside, they have toured our facility, they've met our community members, so when we call they are willing to listen to us, because they know that we are doing the work and that we are doing it well and that we have the community's back, the community's trust. So that they know that...I would go as far as to say they know there is a downside to not taking our call right. So, what you want to do is to convince the elected officials that there is an upside to taking the call and a downside to not taking the call...but by building relationships you don't have to threaten, or control or harass, you can just...you are



Interpreting Services Department

calling up your friend, you are calling up your fellow community member. That is why we have had such great success...We were one of the first (to have a vaccination clinic) ...this is a great

thing any organization can do. It's minimal staff impact, it's minimal time commitment on our part, you literally just have to have the space to do it and it was a great experience. We have done it twice and we are going to keep going as long as we feel its required, and it's a byproduct of the relationship that we have built with Columbus public health over the years.



Addressing the barriers: Overview PowerPoint presentation

The VISTA Summer Associate put together a PowerPoint presentation called “Overcoming Barriers to Covid-19 Vaccination Among Refugees.” From the gathered research and interviews, it included: the urgency of vaccination, the barriers, and overcoming and reducing barriers. This presentation has been recorded and uploaded to the UST [YouTube channel](#) and [website](#). It has also been shared over zoom with UST interns, incoming full-year VISTAs and a primary care doctor Ohio Health. It will be a valuable resource that future interns, VISTAs and other staff can use to spread awareness.

Addressing the barriers: Other strategies

With information gathered from the interviews and outside research, a number of strategies were identified to help increase vaccination among refugees. A few have already been discussed in detail and been implemented by this health initiative. There are others as well that should be brought to attention and put into place.

Community Vaccine Pop-up Clinics

- Organizations can call Columbus Public Health (614-645-1529) to set up a vaccination clinic at their building
- It is convenient, reduces transportation barriers, and leverages community trust

Sharing experiences

- “As people in the community who see their friends and family get vaccinated and seeing that there are no serious side effects, that there is no serious complication, they are more likely to become vaccinated” -Mike Premo

Encouragement from trusted organizations

- As Hana and Mike have both done, when they share about the safety of the vaccine to the people they work with or serve, people become more open to taking the vaccine because of the trust-relationship that is already formed

Government and Community Partnerships

- Change and support often come to struggling communities where there is strong partnership between the community and the government where relationships have been built over time
- Communities need to advocate for themselves, and government entities must be listening to their needs

Culturally sensitive translated material

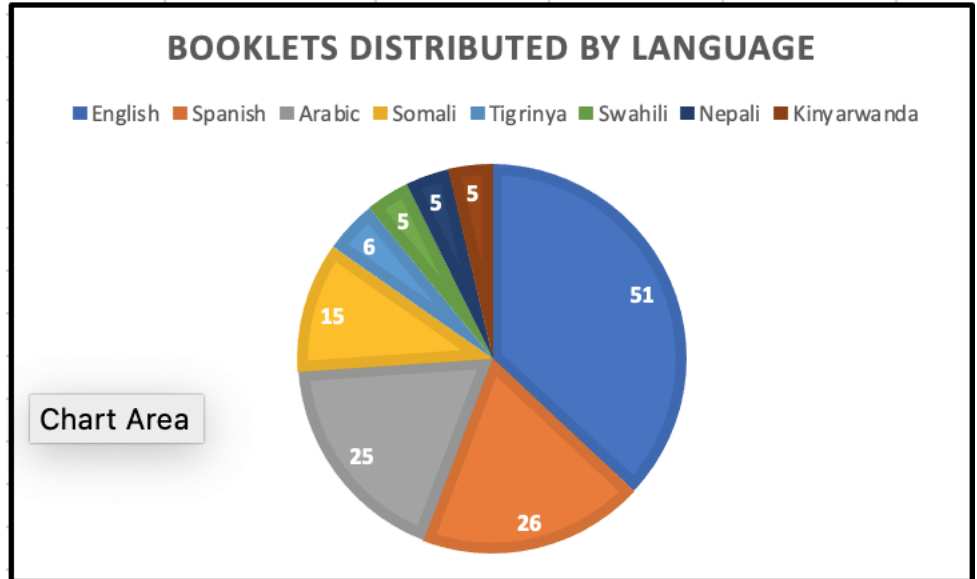
- This is essential to informing refugees and immigrants about the safety of the vaccine and how to access it. It prevents fear and misinformation being spread
- The UST Interpreting services department has created this resource

Overall Cultural Awareness

- It's important to be compassionate and listen to concerns because some may have baggage from past healthcare experiences
- We must be patient with hesitations and while continuing the conversations

Initiative Outcome: Covid-19 vaccine resource booklet distribution

Total: 138



Organizations that received printed booklet:

Breathing Association
 Helping Hands Health & Wellness Center
 Noor Community Clinic
 Riverview International Center
 Community Development for All People
 UST clients from intake meetings

Organizations that were sent PDF booklets (not included in total):

OSU College of Nursing
 Breathing Association
 Grant Medical Center Pulmonary Services
 Ohio Progressive Asian Women’s Leadership
 Community Refugee & Immigration Services
 The Bridge
 Our Lady of Guadalupe Center
 Charitable Pharmacy
 Clinica Latina

Columbus Free Clinic
 Asian American Community Services
 FESTA
 Ethiopian Tewahedo Social Services
 Human Service Chamber



Initiative Outcome: Community Response

“This is amazing! Great idea, thank you so much. I love this!!! I really liked the booklet you created – I already forwarded it to two NP’s that work at the Grant Medical Center’s pulmonary services (in and out-patient). I appreciate you so much!”

– Heather McCary, Breathing Association

“Yes, our clinic would love to have the booklets on hand. Thank you for reaching out. The booklets will be a great resource for our clinic as many of our patients come from the immigrant and refugee population...They will be a big help to the community we serve.”

-Sarah Gray, Exec. Director of Helping Hands Health and Wellness Center

“Thanks for sharing the Covid-19 Vaccine resource booklet. We’ve found that most of our clients aren’t usually receptive to handouts with lots of information. That said, I’ve shared the information with our team. If we’re interested in physical copies in the future, we’ll reach out. Thanks again for sharing with us...My coworker was reviewing the Spanish booklet this morning and really appreciated the information!”

-Bradley Petrella, Administrative Coordinator of Our Lady of Guadalupe Center

“Thank you so much for this amazing info and for the great resources. It will be great to have some...Thank you so much for reaching out to me as our clinic is a free clinic and the population is the right one who is in more need to get more educated about Covid and Covid related preventative info. Thank you again so so much.”

-Samia Miniato, Chief Nurse, Clinic Coordinator at Noor Community Clinic

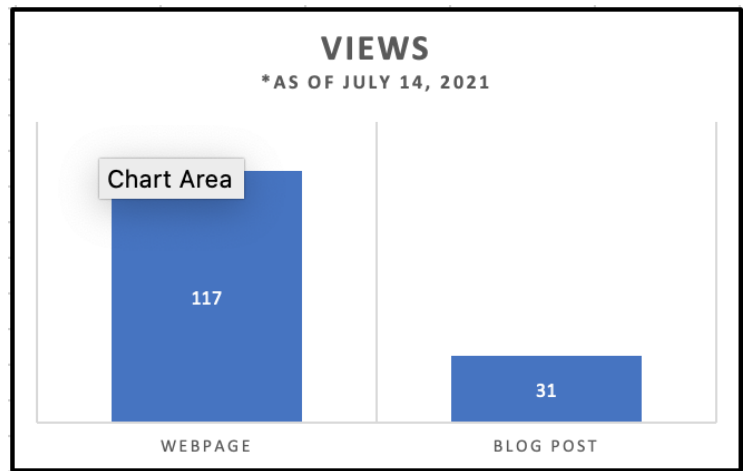
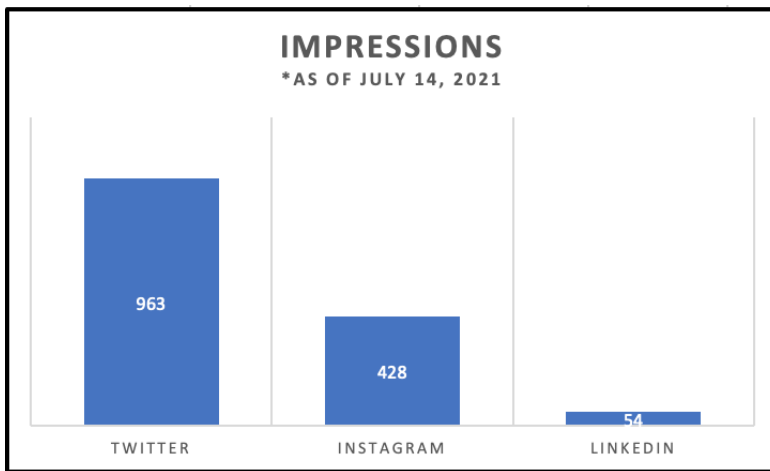
“Thanks for sending the booklet. It is very informative.”

-Hsichi Huang, Program Director at Asian Community Services

Initiative Outcome: Social Media metrics

Content (booklet and blog post about project) was posted on Twitter, Instagram, LinkedIn, and Facebook. An email newsletter was also sent out with content from the project. Videos will be uploaded in the weeks to come.

****Impressions: The number of times content was displayed, no matter if it was clicked or not***



*As of July 14, 2021

Facebook Post → **193 people reached**

Email Newsletter → **626 people opened**

On Website

*As of July 8, 2021

Vaccine Booklets → **110 views, 3 min per visit**

Blog Post → **26 views, 5.5 min per visit**

Total Interactions: 2,412

Swot Analysis

Strengths

- Orgs were excited about booklets, received much positive feedback
- 100+ booklets were distributed
- Large reach and engagement on social media
- Interviews were insightful, engaging, and provided valuable info

Weaknesses

- There was a short timeframe for initiative-some relationships did not have enough time to foster, there was limited time to share booklets and educate the community
- Many orgs did not respond, there was trouble getting direct contact info
- Booklets not effective for some orgs

Opportunities

- UST or other orgs could voice record books for people who cannot read
- Continue to leverage relationships, esp. with OSU, Mt. Carmel, and Human Service Chamber
- New VISTA's can continue sharing materials and give presentation to communities they engage with

Threats

- There may be limited supplies/time capacity to make and distribute booklets when Summer VISTA leaves
- There may not be a strong continuation of the initiative as there is not a specific person to take over the Summer VISTA's role



Summary

US Together, Inc. is dedicated to providing the highest-level support and care to all refugees and immigrants. The Interpreting Services Department provides UST the ability to meet the needs found within these communities. The ability for this department and the AmeriCorps VISTA program to work together benefits the immigrant and refugee communities being served and provides opportunities for young professionals to make a positive impact and learn how to create sustainable projects that bring lasting change.

The global pandemic faced in 2020, even going to this day, is a very clear reminder that organizations must be quick to adapt and provide essential resources when demands change. When Covid-19 vaccines rolled out, UST was charged to increase education when they observed that their clients and the broader refugee and immigrant community faced a number of barriers to getting vaccinated. The Interpreting Service Department of UST worked alongside the AmeriCorps VISTA Summer Associate to provide educational resources about the vaccine and broader awareness about the barriers to the public. Key partnerships and relationships also formed with various organizations and health clinics, which will benefit both parties going forward in continuing to meet the needs of refugees and immigrants.

The Interpreting Services Departments of US Together, Inc. anticipates that the completed projects from Covid-19 Education Health Initiative will continue to benefit refugee and immigrant communities after the Summer Associate leaves. UST and other communities will have continued access to the translated Covid-19 vaccine resource booklet, which has already been effective and greatly appreciated.