VACCINES FAMILIES TRUST

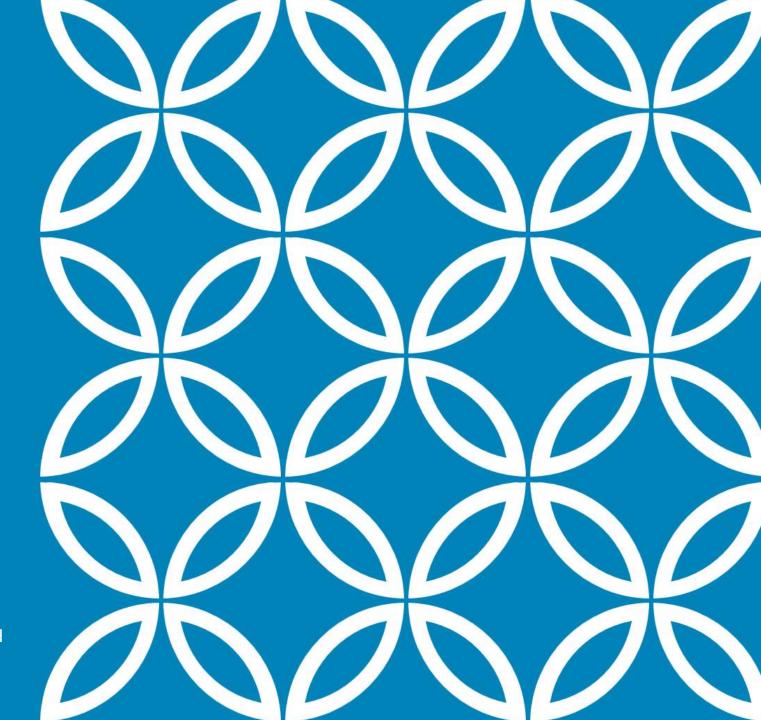
February 2024

Amina Ibrahim, Program Operation Specalist, University of WA.

Elizabeth (Beth) Dawson-Hahn, MD, MPH Assistant Professor, University of Washington

On behalf of Multilingual Health Education Alliance v

Multilingual Health Education Alliance with adapted presentation from Nadège U. Mudenge & Kate Yun



The **Multilingual Health Education Alliance** (M-HEAL) are Nadège U. Mudenge, Mohammad Iqbal Mir Wali Khan, and Katherine Yun from Children's Hospital of Philadelphia; Adrien Matadi, Kristine Knuti Rodrigues, and Betsy Ruckard from Denver Health; Sabrina Ebengho, Amina Ibrahim, and Elizabeth E. Dawson-Hahn from University of Washington; Tammy Melnik from MHEDS; Patricia Stubber; and Erin Mann and Syreeta Wilkins from the National Resource Center for Refugees, Immigrants, and Migrants.

The Afghan Working Group was led by Dr. Mohammad Iqbal Mir Wali Khan.

The Congolese (DRC) Working Group was led by Nadège U. Mudenge and Adrien Matadi.

The Ukrainian Working Group was led by Tammy Melnik.

This project was supported in part by the Centers for Disease Control and Prevention of the U.S. Department of Health and Human Services (NU50CK000608). The contents are those of the author(s) and do not necessarily represent the official views of, nor an endorsement, by CDC/HHS, or the U.S. Government.

We thank Julianne Gee, Linda McWhorter, and Priscilla Ortiz for their insight and guidance.











PROJECT OVERVIEW

To ensure that newcomer communities in the United States receive timely and culturally responsive childhood vaccine education and safety information

- -3 Working Groups designing materials
- -5 languages







Why This Project:

- Which messages: Families are tired of hearing only about COVID-19 vaccines
- Which languages: Swahili is spoken across a huge geographic expanse and has multiple regional variations
- Where or how to share: Are people in the community looking at social media and, if so, which platforms and how do you reach them?

Continuum of community engagement in research/evaluation

Increasing level of community involvement, impact, trust, and communication

Outreach

Some community involvement

Communication flows from the academic/agency research partner to the community, to inform or share

Provides community with information

Entities coexist

Outcomes: establishes channels for communication and outreach

Consult

More community involvement

Information or feedback obtained from the community to help inform the research project conducted by academic/agency researchers

Entities share information and feedback

Outcomes: develops connections and obtains information and feedback from community

Involve

Community involvement

Communication is bidirectional between the academic/agency research partner and community

Involves more participation with community on issues

Entities cooperate with each other

Outcomes: visibility of partnership established with increased cooperation

Shared Leadership/ Participatory

Strong bidirectional relationship

Decision-making is equally shared; communication is bidirectional

Entities have formed strong partnership on each aspect of project from development to solution

Entities form bidirectional communication channels

Outcomes: partnership building, trust building

Community-Driven

Strong community leadership

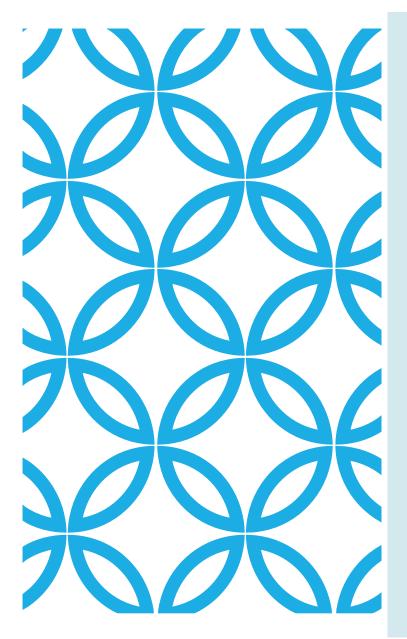
Final decision-making is at the community level

Communities may consult with external academic partners to assist with technical questions

Outcomes: research reflects the needs and desires of the community, community leadership on issues of concern

> Yuen et al, 2015 CTSA Consortium IPPA

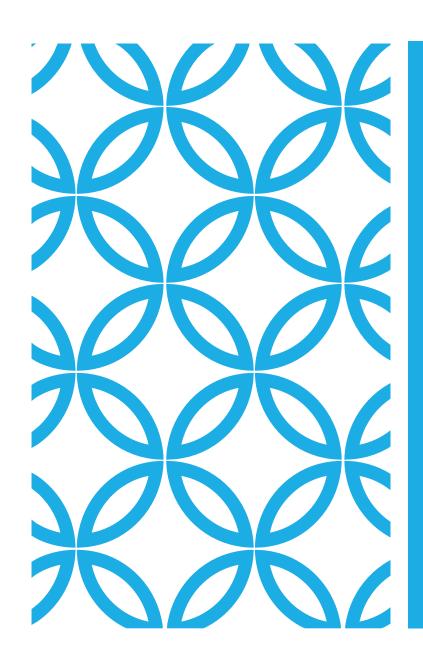
Start by Listening 1. Convene a Working Group 2. Develop Messages 3. Design Materials 4. Translate with Community Consultation 5. Disseminate via Preferred Channels



COVID-19 VACCINE SAFETY FOR CHILDREN: A COMMUNITY CONVERSATION WITH REFUGEE, IMMIGRANT, AND MIGRANT PARENTS

IMPROVING CLINICAL AND PUBLIC HEALTH OUTCOMES THROUGH NATIONAL PARTNERSHIPS TO PREVENT AND CONTROL EMERGING AND RE-EMERGING INFECTIOUS DISEASE THREATS

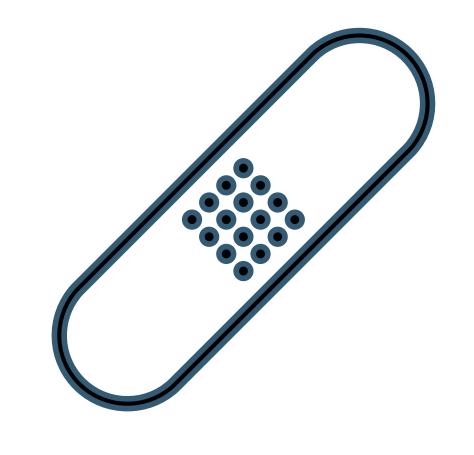
Authors: Elizabeth Dawson-Hahn, Nadège Mudenge, Sabrina Ebengho, Adrien Matadi Jaganath Adhikari, Riley Phyu, Byamungu Raymond Sunghura, Mohammad Iqbal Mir Wali Khan, Ishraga Dousa, Rasulo M. Rasulo, Khin Khin Cho, Richard Ogada, Katherine Yun



"IF WE DON'T OFFER TIMELY AND TRUSTWORTHY INFORMATION, MISINFORMATION WILL FILL THE GAP."

Adrien Matadi

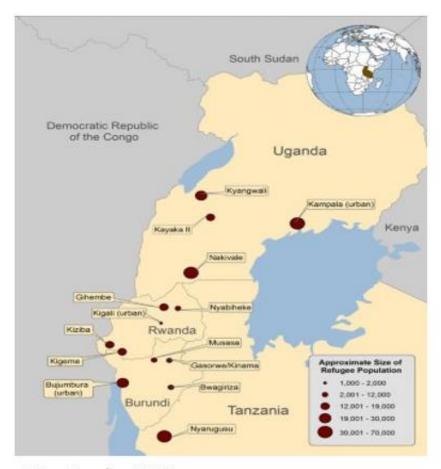
"THE DAMAGE [MIS/DISINFORMATION] HAS BEEN DONE, AND UP TO NOW, WE PAY A HUGE PRICE OF SPENDING TOO MUCH TIME TO EDUCATE AFTER THE DAMAGE. BASICALLY, REPAIRING THE WOUND."



Start by Listening

- 1. Convene a Working Group
- 2. Develop Messages
- 3. Design Materials
- 4. Translate with Community Consultation
- 5. Disseminate via Preferred Channels

1- WHY CONVENE A WORKING GROUP?



Map Credit: CDC

To ensure good communication with communities where there are many regional differences in language use

To elicit different perspectives reflective of the internal diversity of the community of interest

To expand your reach if working with a community that has historically been excluded from (public) health communication

HOW TO CONVENE A WORKING GROUP

Hire leadership from within the community, or partner with an established CBO

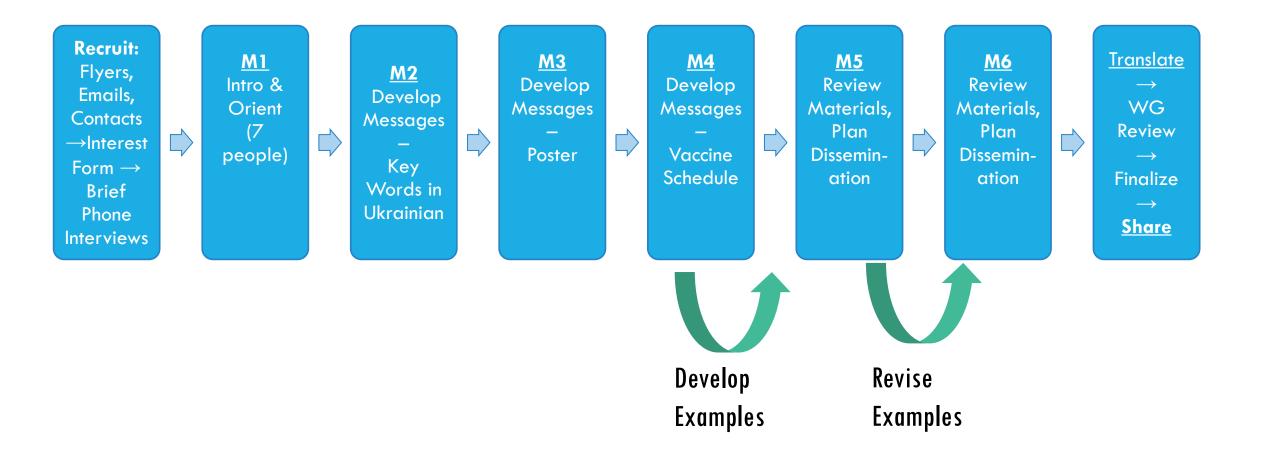
Recruit 5-10 diverse community members with the following qualifications, and value their time:

- •Characteristics in common with the subgroups you hope to reach (e.g., parents of minor children)
- Diverse experiences within the community (i.e. ability, education, etc)
- Language skills
- Respect for diverse perspectives & experiences
- Active listening
- Interest in the topic at hand
- Reliable meeting attendance (locally or videoconference)

HOW TO SEQUENCE WORKING GROUP MEETINGS

Ukrainian Example

This project also included Afghan (Dari & Pashto) and Congolese DRC (Kinyarwanda & Kiswahili) working groups



Start by Listening 1. Convene a Working Group 2. Develop Messages 3. Design Materials 4. Translate with Community Consultation 5. Disseminate via Preferred Channels

2 — HOW TO DEVELOP MESSAGES

Content

•"Your child may need additional vaccines <u>after</u> <u>arriving in the United States</u>."

•"COVID-19 is <u>one of many vaccines routinely</u> <u>recommended</u> to protect children."

"Vaccines <u>strengthen the body</u>'s natural immune system."

YOU DON'T KNOW UNTIL YOU ASK

In the United States, the *CDC and FDA* monitor vaccines for quality and safety.

Вакцини, яким можна довіряти	"Vaccines Families Can Trust" was created and translated October 20, 2023 by the Multilingual Health Education Alliance. [Ukrainian]					
	Цей документ заснований на рекомендаціях Центрів з контролю та профілактики захворювань (CDC) в США від 10 лютого 2023 р.					
	Harmani anany angaétanan angarah	week siewerwee				
Випробування в лабораторії	Науковці роками випробовують вакцину в лабораторії, щоб дізнатися, чи здатна вона захищати від певного захворювання.					
	Якщо результати лабораторних випробувань позитивні, Управління із					
	санітарного нагляду за якістю харчових продуктів і медикаментів США (FDA) може дозволити досліджувати вакцину на людях.					
Дослідження на людях, фаза 1: безпечність і доза	Протягом першої фази дослідження вакцини, яка проводиться за участю 20–100 добровольців, дослідники вивчають, чи є вакцина безпечною, та які побічні ефекти вона спричиняє. Вони також визначають оптимальну дозу вакцини.					
	Протягом другої фази дослідження, у якій беруть участь сотні					
Дослідження на людях, фаза 2: побічні дії та імунна відповідь	добровольців, дослідники з'ясовують, які побічні дії виникають найчастіц Вони також перевіряють реакцію організму на вакцину, щоб переконатис що вона достатньо ефективна , щоб запобігти захворюванню.					
	Протягом третьої фази дослідження, у якій задіяні тис	ячі добровольців,				
Дослідження на людях, фаза 3: користь	дослідники порівнюють ступінь захисту від хвороби в людей, які отрима: вакцину, з тими, хто її не отримав. Дослідники також продовжують слідкувати за побічними діями та іншими проблемами, пов'язаними з безпечністю вакцини.					
	⊥ проходить усі три вказані фази, FDA уважно чи можна схвалити використання вакцини д					
FDA може схвалити	• вона безпечна й ефективна;					
вакцину, ЯКЩО:	 користь перевищує ризики; виробник вакцини відповідає стандартам безпечності. 					

і якості з боку FDA на всіх етапах виробництва.

Лікарі та інші експерти використання вакцини

Консультаційний комітет із практики імунізації (АСІР) вивчає всі наукові дані стосовно вакцини. Цей комітет надає рекомендацію в CDC щодо надають рекомендації щодо того, чи слід використовувати цю вакцину, і кому (наприклад, дітям) її вводити. Далі директор CDC вирішує, чи додавати цю вакцину до календаря щеплень у США.

Після цього ведеться безперервний нагляд за безпечністю ва кцини.

- Підприємства, де виробляються вакцини, і надалі проходять перевірки безпечності і якості з боку FDA;
- Будь-яка особа може подати в CDC звіт про серйозну проблему зі здоров'ям, яка виникла після вакцинації;
- Науковці використовують дані від мільйонів людей і постійно слідкують за новими проблемами з безпечністю вакцин:
- Якщо вакцина виявиться небезпечною, FDA й CDC відкличуть своє схвалення, і вакцина більше не використовуватиметься в США.

FORMAT OF MESSAGE

Brochures for the Afghan community

Videos for the Congolese (DRC) community

Posters for the Ukrainian community

•Websites for everyone: We want to be able to look things up and read more in our own languages.

OTHER MATERIAL CREATED

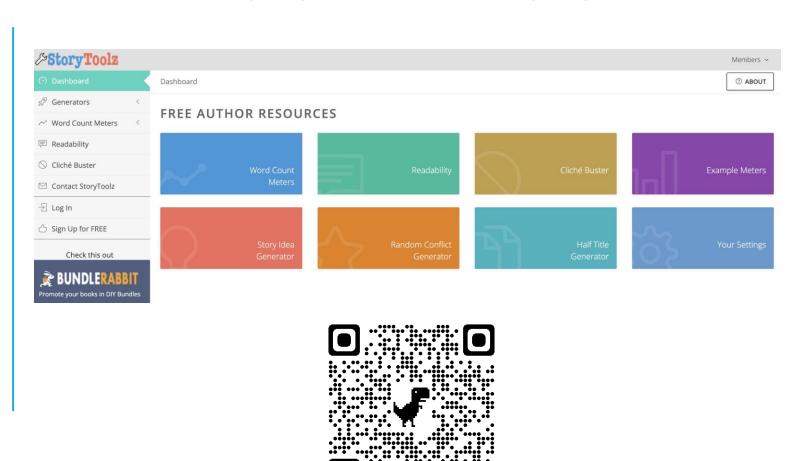
Vaccine Schedule Birth – 6
Vaccine Schedule 7-18
Developing Vaccines We
Trust

Chanjo Familia	"Vaccines Families Can Trust" was created and translated October 20, 2023 by the Multilingual Health Education Alliance (M-HEAL). [Swahili]				
Inaweza Kuamini	lyi karatasi inaendeya kwa mapendekezo ya <u>ma ofisi ya</u> kufuatiliya magonjwa na kujikinga mu Amerika kuanzia tarehe 10, Februari 2023.				
	Wanasayansi wanatumia miaka mingi kupima chanjo kwenye laboratory ili waone kama inaweza kumkinga mtu kutokana na ugonjwa fulani.				
Upimaji katika Laboratoire	Kama matokeo ya bipimo yanaonekana kuwa mazuri Usimamizi wa Chakula na Dawa (FDA) mu inchi Amerikani inaweza kuitika kupima na watu.				
Hatua ya 1 Kupima na Watu: Usalama & Dozi	Wakati ya hatua ya kwanza ya kupima na watu 20-100 walijitolea, wanasayansi watajifunza usalama wa chanjo na matokeo mabaya yayo. Watamua pia kipimo cya dozi ya chanjo inashahili.				
Hatua ya 2 Kupima na Watu: Matokeo mabaya & Mwitikio wa Kinga	Wakati ya hatua ya pili ya kupima na mamia ya watu waliojitolea, wanasayansi walijifunza ni matatizo gani yanayojulikana zaidi. Wanangalia pia mwitikio ya mwili kwa chanjo ili wahakikishe ya kwamba ina nguvu ya kutosha kuzuia ugonjwa io.				
Hatua ya 3 Kupima na Watu: Faida	Wakati ya hatua ya tatu ya kupima na maelfu ya watu waliojitolea, wanasayansi wanalinganisha jinsi chanjo hiyo inavyolinda watu wanaopok chanjo ile ikilinganishwa na watu ambao hawapati. Wanasayansi pia watatafuta zaidi kama kuko matokeo mabaya yoyote na matatizo yoyote y				



Everyday Language aka Plain Language

HOW TO DEVELOP MESSAGES



KINYARWANDA PLAIN LANGUAGE EXAMPLE

Allergy

Suggested Translation:

Impinduka z'umubiri zatewe n'ikintu ubusanzwe kiba atari ikibazo kuri benshyi

This phrase conveys the idea of an unexpected change in the body caused by something or a substance that usually doesn't cause trouble for most people.

Suggested Alternatives:

- Areriji is understood by many people, but it is a borrowed word. For this reason, it may be more familiar to people who also speak English or French.
- Ikintu gitera indwara kuri bamwe conveys the idea of "something that can cause a feeling of being unwell for some people."
- Ubwivumbure bw'umubiri describes an unexpected reaction of the body.

Words to Avoid: *Kuziranirwa* is not recommended, as it describes an unpleasant reaction to a substance like a poison.

Notes: Among individuals from DRC who speak Kinyarwanda, there is no single, widely used word for allergy. For this reason, we recommend a short phrase that conveys some of the essential meaning of this term in English. We opted not to mention the immune system in our suggested phrase, because this would require additional explanation beyond what is feasible in most handouts or other health education materials focused on vaccine safety.

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3 — HOW TO DESIGN MATERIALS

Show examples of specific material types to inform the conversation

Ask for descriptions of colors and what they mean to you

Highlight lessons that are passed down in the community

PICTURES WITH VOICEOVER





PRAGMATICS

Accessible software (i.e. Canva)

Layout

Visuals

Time for Iteration

Track iterations

(re)Design

Group Input

Group Lead Input

Revise Design

ITERATIVE DESIGN



"واكسين ها از اطفال، خانواده ها و جوامع ما محافظت مي كنند."



بر ای خو اندن تو صیه های و اکسین دو ر ان طفلي بر بنياد دستور العمل مراكز كنترول و پیشگیری از مریضی های ایالات متحده (CDC) به زبان های دری و يشتو، لطقًا به آدرس ذيل مراجعه كنيد:

www.nrcrim.org/afghan



VACCINE SAVE LIVES" WAS CREATED AND TRANSLATED OCTOBER 20, 2023 BY THE MULTILINGUAL HEALTH EDUCATION ALLIANCE (M-HEAL). [Dari]

























ITERATIVE DESIGN



Why vaccines are safe for children

Testing: Vaccines in the United States are feeted for safety. They are evaluated by the Federal Drug Administration (FDA) and the Centers for Disease Control and Prevention (CDC).

Side Effects: Mild vaccine side effects are expected. Severe vaccine side offects are rare.

Quality: Vaccine manufacturing, storage quality and side effects are closely monitored by the FDA and CDC.



Vaccines Protect Children

- Vaccines are safe in the U.S. because the Food & Drug Administration (FDA) and Centers for Disease Control & Prevention (CDC) monitor vaccine manufacturing, storage, quality, and side effects.
- Vaccines keep children, families and communities protected from serious diseases.
- For most vaccines, children need more than one dose to be fully protected.
- Mild vaccine side effects such as fever or a sore arm - are common. Adverse events are rare.
- Schools require children to be fully vaccinated for protection of all.





To read childhood vaccine recommendations based on CDC guidance in Ukrainian, visit: www.nrcrim.org/ukrainian

"Vaccines Protect Children" was created and translated October 20, 2023 by the Multilingual Health Education Alliance (M-HEAL). [ENGLISH]

Вакцини Захищають Дітей

• Вакцини, що застосовуються в США, цілком безпечні, оскільки Управління із санітарного нагляду за якістю харчових продуктів і медикаментів США (FDA) і Центри з контролю та профілактики захворювань в США (CDC) слідкують за виготовленням, зберіганням, якістю та побічними діями вакцин.

• Вакцини захищають дітей, родини й громади від серйозних захворювань.

• Щоб повністю захистити дитину, більшість вакцин передбачають щеплення більше ніж однією дозою.

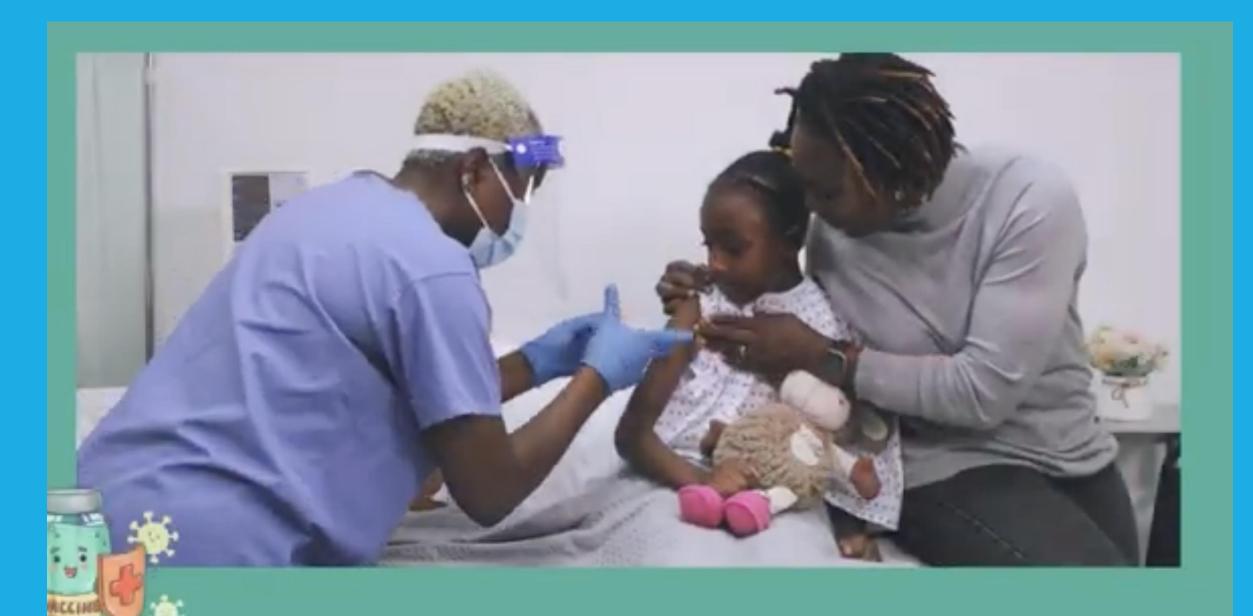
 Незначні побічні дії вакцинації — як-от лихоманка, або біль у руці в місті ін'єкції — виникають часто. Важкі побічні реакції розвиваються рідко.

• Школи вимагають, щоб діти були повністю вакциновані, для захисту всіх людей, задіяних в освітньому процесі.





Щоб прочитати рекомендації щодо вакцинації дітей на основі керівництв CDC українською мовою, відвідайте вебсайт www.nrcrim.org/ukrainian



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4-TRANSLATION WITH COMMUNITY CONSULTATION

Select a translation vendor

- Quality assurance
- Regional variation
- Formats

Select a community consultant

Working group approves the final version

Start by Listening 1. Convene a Working Group 2. Develop Messages 3. Design Materials 4. Translate with Community Consultation 5. Disseminate via Preferred Channels

DISSEMINATION



UNDERSTAND EACH COMMUNITIES NEEDS



LEARN HOW THEY
RECEIVE INFORMATION



STRATEGIC DISSEMINATION PLAN

DISSEMINATION — HOW?

Outline a multi-phase dissemination plan (i.e. email campaigns, social media ads, etc.)

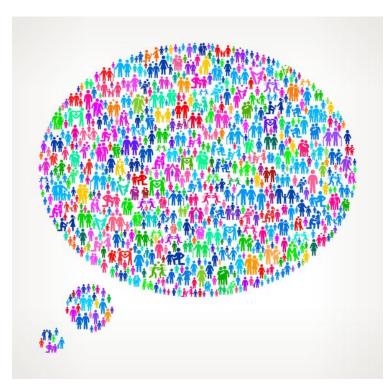
Prepare to be surprised!

Systematically track dissemination targets & engagement

User a standard approach for **outreach and tracking** (Ex. RedCap)

Record ID	Organization	Contact Person	Email	Phone Number	Location	Notes	
	AL State Refugee Health Coordinator						
	Alaska State Refugee Health Coordina	ator					
	Arizona State Refugee Health Coordin	nator					
	AR State Refugee Health Coordinator						
	CA State Refugee Health Coordinator						
	Colorado State Refugee Health Coord						

DISSEMINATION — WHO?



iStock Getty Image

Listen to community groups on **HOW** and where to disseminate

-Ask about dissemination geographic priorities

Not every community leader wants to be a public disseminator

Have **specific asks** for national and local organizations

SOCIAL MEDIA EXPERTISE

Ensure your team includes expertise in dissemination and social media or hire a consultant

Identify each community groups unique social media habits

Consider institution policies on posting and buying ads on social media

Multilingual Health Education Alliance



Vaccines Families Can Trust

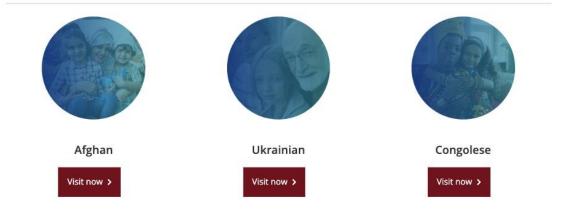
The Multilingual Health Education Alliance (M-HEAL) brings together medical providers, public health experts, and people in immigrant and refugee communities to create accurate and culturally relevant information about childhood vaccines for newcomers.

All resources are based on CDC guidance and informed by community expertise. Select a community to see vaccine schedules and culturally-tailored health education materials that support vaccine confidence.

Contact M-HEAL > with questions.

Printing Mini-Grants

We know that common barriers to using our vaccine campaign materials are time and cost. Now, a new minigrant program can help you overcome both. Apply today >

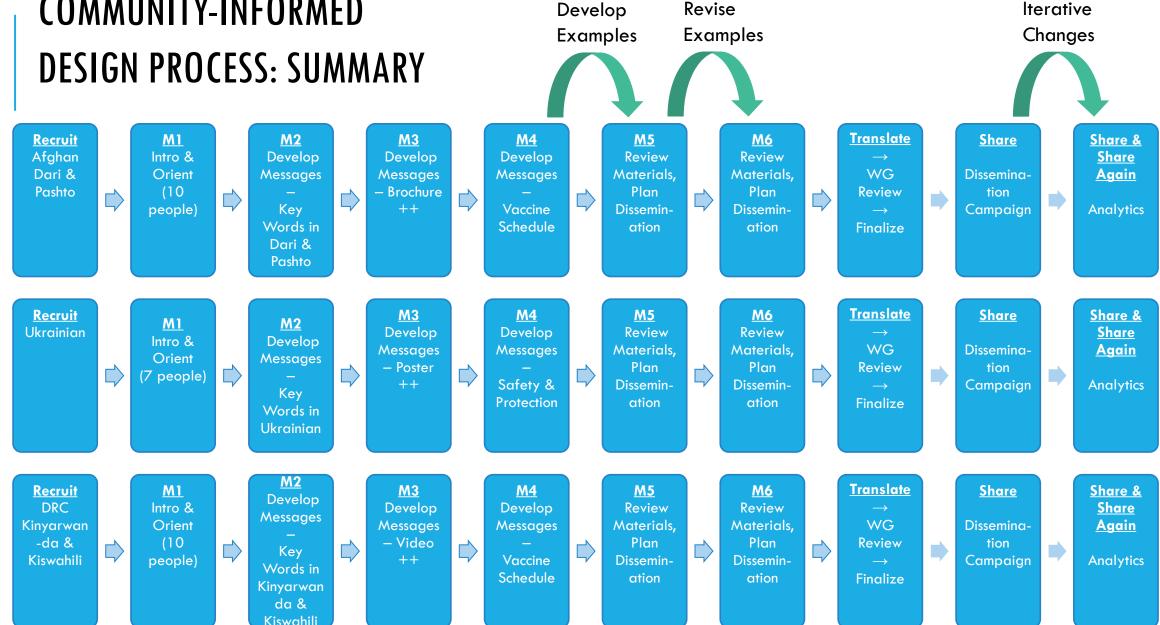


The M-HEAL, Multilingual Health Education Alliance, includes Nadège U. Mudenge and Katherine Yun from Children's Hospital of Philadelphia; Adrien Matadi, Kristine Knuti Rodrigues, and Betsy Ruckard from Denver Health; Sabrina Ebengho, Amina Ibrahim, and Elizabeth E. Dawson-Hahn from University of Washington; Tammy Melnik, Mohammad Iqbal Mir Wali Khan, and Patricia Stubber from MHEDS; and Erin Mann and Syreeta Wilkins from the National Resource Center for Refugees, Immigrants and Migrants.

This work was supported by the Centers for Disease Control and Prevention NU50CK000608.



COMMUNITY-INFORMED

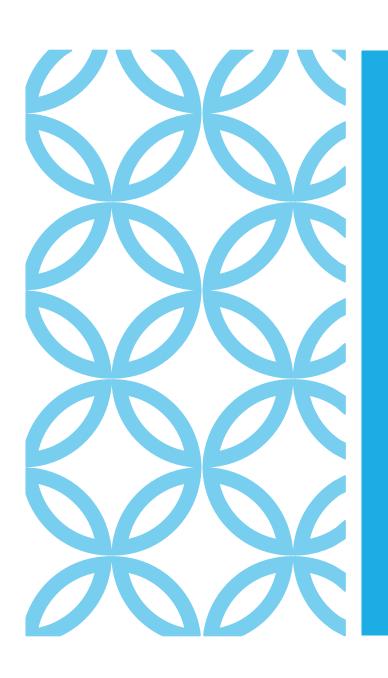


PUBLIC HEALTH VISION



To grow communityinformed multi-lingual
and multi-cultural vaccine
education and safety
information across all
levels of public health
from local to global.

To utilize communityinformed approaches for other public health activities inclusive of multi-lingual and multicultural communities.



THANK YOU

We look forward to your questions and feedback.

NRC-RIM materials on community-led design

https://z.umn.edu/6ljt

www.nrc-rim.org

CDC materials on vaccine safety

https://www.cdc.gov/vaccines/parents/infographics/journey-of-child-vaccine.html

With thanks to all the Multilingual Health Education Alliance working groups and team members, as well as many others—especially in community organizations and local public health projects—who have shared their guidance on everyday language, community engagement, and health education over the years.