National Hispanic Health Foundation

VACCINATION TOOLKIT

Hispanic Healthcare Leaders Building Community through COVID-19 Vaccine Awareness and Equity

ACKNOWLEDGEMENTS

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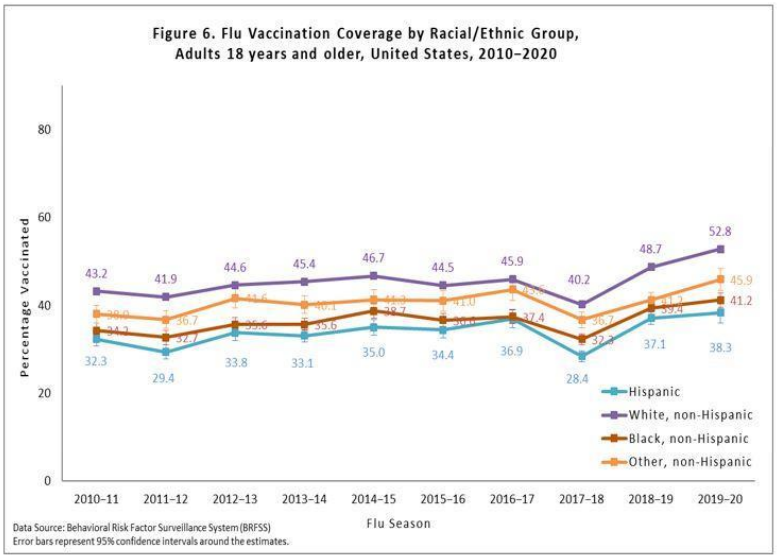
1. INTRODUCTION

1.1. VACCINATION TOOLKIT: INCREASING VACCINATION COVERAGE IN THE HISPANIC POPULATION

Hispanics are the largest ethnic or racial minority group in the United States, representing 62 million or 18.7% of the nation's population.[1,2] Despite improved access to health care services by the Affordable Care Act, Hispanics face challenges of mistrust or working for employees that cannot afford insurance and have high rates of being uninsured. Other barriers arise from social determinants of health and lack of healthcare services that are culturally competent. Cultural and linguistic barriers, as exacerbated by a shortage of Hispanic health care providers relative to their growing patient population, as well as underinsured and uninsured status remain as major obstacles to health care access.[3]

The World Health Organization (WHO) acknowledges immunization as one of the most successful and cost-effective public health interventions, preventing between two to three million deaths every year.[4] Although racial/ethnic disparities in childhood vaccination coverage have improved throughout the past decade, substantial disparities among adults aged 65 years and older have persisted.[5] Deaths from pneumonia and influenza combined are the 11th leading cause of death among Hispanics.[6] In addition, the data states that the Hispanic population has been disproportionately affected by COVID-19 pandemic.[7]



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1 Bureau, US Census. *Hispanic Heritage Month 2021*. 24 Sept. 2021, https://www.census.gov/newsroom/facts-for-features/2021/hispanic-heritage-month.html.

2 *Explore Census Data*. Web. 24 Sept. 2021. https://data.census.gov/cedsci/profile?q=United%20States&g=0100000US

3 Velasco-Mondragon, Eduardo et al. "Hispanic health in the USA: a scoping review of the literature." *Public health reviews* vol. 37 31. 7 Dec. 2016, doi:10.1186/s40985-016-0043-2

4 "Vaccines and Immunization." *World Health Organization.* World Health Organization. Web. 24 Sept. 2021. https://www.who.int/health-topics/vaccines-and-immunization#tab=tab_1

5 "Fact Sheet: Health Disparities in Influenza Vaccination Coverage." *Center for Disease Control and Prevention*, U.S. Department of Health and Human Services, http://www.cdc.gov/minorityhealth/CHDIR/2011/FactSheets/FluVaccine.pdf

6 "FastStats - Health of Hispanic or Latino Population." *Centers for Disease Control and Prevention*. Centers for Disease Control and Prevention, 07 May 2021. Web. 24 Sept. 2021. https://www.cdc.gov/nchs/fastats/hispanic-health.htm.

7 Rentsch CT, Kidwai-Khan F, Tate JP, Park LS, King JT, Skanderson M, Hauser RG, Schultze A, Jarvis CI, Holodniy M, Lo Re V, Agkun KM, Crothers K, Taddei TH, Freiberg MS, Justice AC. COVID-19 by Race and Ethnicity: A National Cohort Study of 6 Million United States Veterans. medRxiv [Preprint]. 2020 May 18: 2020.05.12.20099135. doi: 10.1101/2020.05.12.20099135. PMID:32511524; PMCID: PMC7273292

Source: "Flu Vaccination Coverage, United States, 2019–20 Influenza Season." Centers for Disease Control and Prevention. Centers for Disease Control and Prevention, 01 Oct. 2020. Web. 29 Sept. 2021. <https://www.cdc.gov/flu/fluvaxview/coverage-1920estimates.htm>.

The 2020-2021 flu season was an outlier compared to previous flu seasons in the United States.[88] The 2020-2021 flu season in the U.S. had an estimate of 1,675 positive cases as well as the lowest rate of hospitalization ever recorded.[9] In addition, the 2020-2021 flu season resulted in an estimated 678 deaths.[10] This unprecedented flu season has a connection with the COVID-19 pandemic and the protocols that have followed, including mask wearing, social distancing, and a higher emphasis on hand washing- protecting individuals against COVID-19, as well as against the flu.[118] It should also be taken into account that the COVID-19 pandemic may have a correlation with the slight uptick in U.S. adults receiving the influenza vaccine this past flu season; adults receiving the influenza vaccine hitting 55%; individuals may have sensed an urgency to get the influenza vaccine in order to protect themselves from the flu as they are on alert for COVID-19.[128] However, it is important to note that vaccine coverage remains low for Hispanics, non-Hispanic Black, and American Indian/Alaskan Native adults compared to non-Hispanic White adults.[13]

1.2. INFLUENZA VACCINATIONS FOR ADULTS WITH DIABETES, CARDIOVASCULAR DISEASE AND THOSE AT RISK FOR COVID-19

The National Hispanic Health Foundation (NHHF), with support by The Rockefeller Foundation, has developed this toolkit to assist Hispanic physicians, nurses, dentists and community health leaders in their efforts of increasing awareness and equity of vaccination uptake in the Hispanic community. The goal of the project is to reduce disparities in Hispanic vaccination coverage and rates, especially in Oakland, California, Chicago, Illinois, and Houston, Texas. The toolkit provides educational resources in English and Spanish and evidence-based approaches specifically targeted for the Hispanic community.

Patients and health care providers understand that living with a chronic disease requires patient compliance, including taking their medicine, monitoring their blood pressure and sugar levels, watching their cholesterol, and ensuring that they have well-balanced and healthy meals. Keeping up with vaccinations that protect against common diseases such as the flu, pneumonia or hepatitis B can prevent complications from dangerously high blood sugar levels for diabetics and decrease chances of a heart attack for those living with heart disease. Of note, it is important for all patients to keep up with their vaccinations, especially for those living with chronic diseases since the common flu can be deadly.

8[8] "2020-2021 Flu Season Summary." Centers for Disease Control and Prevention. Centers for Disease Control and Prevention, 22 July 2021. Web. 23 Sept. 2021. https://www.cdc.gov/flu/season/faq-flu-season-2020-2021.htm

9 Ibid.

10 "Weekly U.S. Influenza Surveillance Report." Centers for Disease Control and Prevention. Centers for Disease Control and Prevention, 24 Sept. 2021. Web. 24 Sept. 2021. https://www.cdc.gov/flu/weekly/

11[8] "2020-2021 Flu Season Summary." Centers for Disease Control and Prevention. Centers for Disease Control and Prevention, 22 July 2021. Web. 23 Sept. 2021. https://www.cdc.gov/flu/season/faq-flu-season-2020-2021.htm

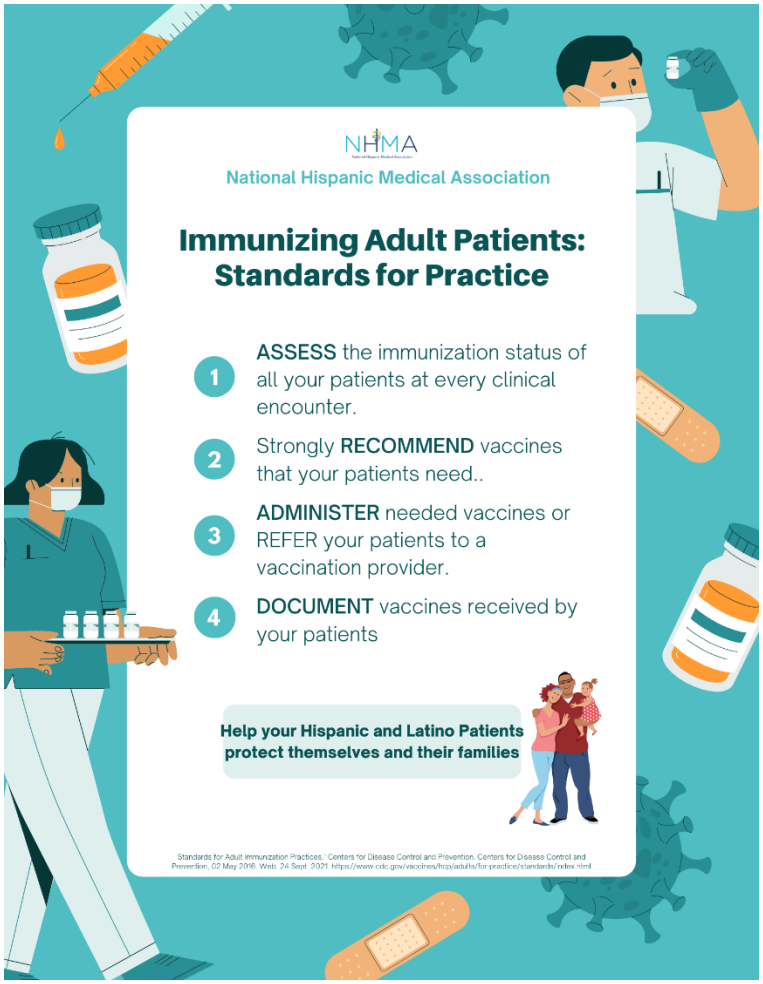
12[8] Ibid.

13 "Flu Disparities among Racial and Ethnic Minority Groups." Centers for Disease Control and Prevention. Centers for Disease Control and Prevention, 03 Sept. 2021. Web. 24 Sept. 2021. https://www.cdc.gov/flu/highrisk/disparities-racial-ethnic-minority-groups.html

Given that COVID-19 has been shown to have a more serious impact on older adults who have compromised immune systems due to chronic diseases, NHHF is calling for all older adults and parents of our Latino children to stay up-to-date on routine immunizations.

See the following for more information:
CDC: Flu & People with Heart Disease or History of Stroke
CDC: Flu & People with Diabetes
CDC: Flu Disparities Among Racial and Ethnic Minority Groups

2. IMMUNIZATION STANDARDS



The National Vaccine Advisory Committee (NVAC) revised the Standards for Adult Immunization Practice in 2013.[14] These standards require that ALL health care professionals, whether routinely administering vaccines or not, to take steps to ensure that adult patients are fully immunized:

[14] "Standards for Adult Immunization Practices." *Centers for Disease Control and Prevention*. Centers for Disease Control and Prevention, 02 May 2016. Web. 24 Sept. 2021. https://www.cdc.gov/vaccines/hcp/adults/for-practice/standards/index.html

The Advisory Committee on Immunization Practices (ACIP) updated its seasonal influenza vaccination recommendations because of COVID-19. The common symptoms of COVID-19 (e.g., fever and cough) can also occur with influenza illness. As such, during the continued circulation of COVID-19 with the influenza virus in the fall and winter, ACIP suggests that influenza vaccination of persons of more than 6 months in age can "reduce prevalence of illness cause by influenza, and can also reduce symptoms that might be confused with those of COVID-19."[15] ACIP further recommends that for persons who have acute illness with suspected or laboratory-confirmed COVID-19, "clinicians can consider delaying influenza vaccination" until patients are no longer acutely ill.[9] Nevertheless, patients should be reminded to return for the influenza vaccination once they have recovered. The influenza vaccine should be administered by the end of October, but vaccination should continue to be offered as long as influenza viruses are circulating locally and an unexpired vaccine is available.[16] Additionally, as FDA-approved COVID-19 vaccines are now available, the COVID-19 and the influenza vaccine are able to be administered during the same visit.[17]

See the following for more information:
CDC: Factsheet on Vaccine Documentation
CDC: Samples Vaccine Administration Record

3. RECOMMENDED IMMUNIZATIONS FOR ADULTS & CHILDREN

There are multiple vaccines routinely recommended for adults in the U.S. depending on their age, health conditions, lifestyle, workplace, exposure, and travel frequency. The Advisory Committee on Immunization Practices (ACIP) released the 2021 adult immunization schedule in February.[18] Routine annual influenza vaccination is recommended for all persons aged ≥ 6 months who do not have contraindications. Emphasis should be placed on vaccination of high-risk groups and their contacts/caregivers, such as children aged 6 through 59 months, adults aged ≥ 50 years, and those with chronic medical conditions.[19]

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15 Kent, Casey, Dott. Et al,. The MMWR series of publications is published by the Center for Surveillance, Epidemiology, and Laboratory Services, Centers for Disease Control and Prevention (CDC) MMWR Recomm Rep 2020;69(No.8):1-28. https://www.cdc.gov/mmwr/volumes/69/rr/pdfs/rr6908a1-H.pdf

16 Center for Disease Control, CDC. "Summary of Recommendations." Centers for Disease Control, 26 August 2021, https://www.cdc.gov/flu/professionals/acip/summary/summary-recommendations.htm. Accessed 23 Sept. 2021

17 "Frequently Asked Influenza (flu) Questions: 2021-2022 Season." Centers for Disease Control and Prevention. Centers for Disease Control and Prevention, 22 Sept. 2021. Web. 24 Sept. 2021. https://www.cdc.gov/flu/season/faq-flu-season-2021-2022.htm#coadmin

18 "ACIP Vaccine Recommendations and Schedules." Centers for Disease Control and Prevention. Centers for Disease Control and Prevention, 13 July 2021. Web. 24 Sept. 2021. https://www.cdc.gov/vaccines/acip/recommendations.html.

19 Centers for Disease Control, CDC. "Prevention and Control of Seasonal Influenza with Vaccines: Recommendations of the Advisory Committee on Immunization Practices — United States, 2020–21 Influenza Season." Center for Disease Control, 21 August 2020, https://www.cdc.gov/mmwr/volumes/69/rr/rr6908a1.htm. Accessed 21 Oct. 2020

Table 1 Recommended Adult Immunization Schedule by Age Group, United States, 2021

Vaccine	19–26 years	27–49 years	50–64 years	≥65 years
Influenza inactivated (IIV) or **Influenza recombinant** (RIV4)	1 dose annually			
Influenza live, attenuated (LAIV4)	1 dose annually			
Tetanus, diphtheria, pertussis (Tdap or Td)	1 dose Tdap each pregnancy; 1 dose Td/Tdap for wound management (see notes)			
	1 dose Tdap, then Td or Tdap booster every 10 years			
Measles, mumps, rubella (MMR)	1 or 2 doses depending on indication (if born in 1957 or later)			
Varicella (VAR)	2 doses (if born in 1980 or later)		2 doses	
Zoster recombinant (RZV)			2 doses	
Human papillomavirus (HPV)	2 or 3 doses depending on age at initial vaccination or condition	27 through 45 years		
Pneumococcal conjugate (PCV13)	1 dose			1 dose
Pneumococcal polysaccharide (PPSV23)	1 or 2 doses depending on indication			1 dose
Hepatitis A (HepA)	2 or 3 doses depending on vaccine			
Hepatitis B (HepB)	2 or 3 doses depending on vaccine			
Meningococcal A, C, W, Y (MenACWY)	1 or 2 doses depending on indication, see notes for booster recommendations			
Meningococcal B (MenB)	2 or 3 doses depending on vaccine and indication, see notes for booster recommendations			
	19 through 23 years			
***Haemophilus influenzae* type b** (Hib)	1 or 3 doses depending on indication			

Recommended vaccination for adults who meet age requirement, lack documentation of vaccination, or lack evidence of past infection

Recommended vaccination for adults with an additional risk factor or another indication

Recommended vaccination based on shared clinical decision-making

No recommendation/ Not applicable

Table 2 Recommended Adult Immunization Schedule by Medical Condition and Other Indications, United States, 2021

Vaccine	Pregnancy	Immuno-compromised (excluding HIV infection)	HIV infection CD4 count <200 mm³	HIV infection CD4 count ≥200 mm³	Asplenia, complement deficiencies	End-stage renal disease; or on hemodialysis	Heart or lung disease, alcoholism[1]	Chronic liver disease	Diabetes	Health care personnel[2]	Men who have sex with men
IIV or RIV4	1 dose annually										
LAIV4	Not Recommended						Precaution			1 dose annually	
Tdap or Td	1 dose Tdap each pregnancy	1 dose Tdap, then Td or Tdap booster every 10 years									
MMR	Not Recommended*	Not Recommended		1 or 2 doses depending on indication							
VAR	Not Recommended*	Not Recommended		2 doses							
RZV		2 doses at age ≥50 years									
HPV	Not Recommended*	3 doses through age 26 years		2 or 3 doses through age 26 years depending on age at initial vaccination or condition							
PCV13		1 dose									
PPSV23		1, 2, or 3 doses depending on age and indication									
HepA		2 or 3 doses depending on vaccine									
HepB		2, 3, or 4 doses depending on vaccine or condition							<60 years; ≥60 years		
MenACWY	1 or 2 doses depending on indication, see notes for booster recommendations										
MenB	Precaution	2 or 3 doses depending on vaccine and indication, see notes for booster recommendations									
Hib		3 doses HSCT[3] recipients only		1 dose							

Recommended vaccination for adults who meet age requirement, lack documentation of vaccination, or lack evidence of past infection

Recommended vaccination for adults with an additional risk factor or another indication

Precaution—vaccination might be indicated if benefit of protection outweighs risk of adverse reaction

Recommended vaccination based on shared clinical decision-making

Not recommended/ contraindicated—vaccine should not be administered.

*Vaccinate after pregnancy.

No recommendation/ Not applicable

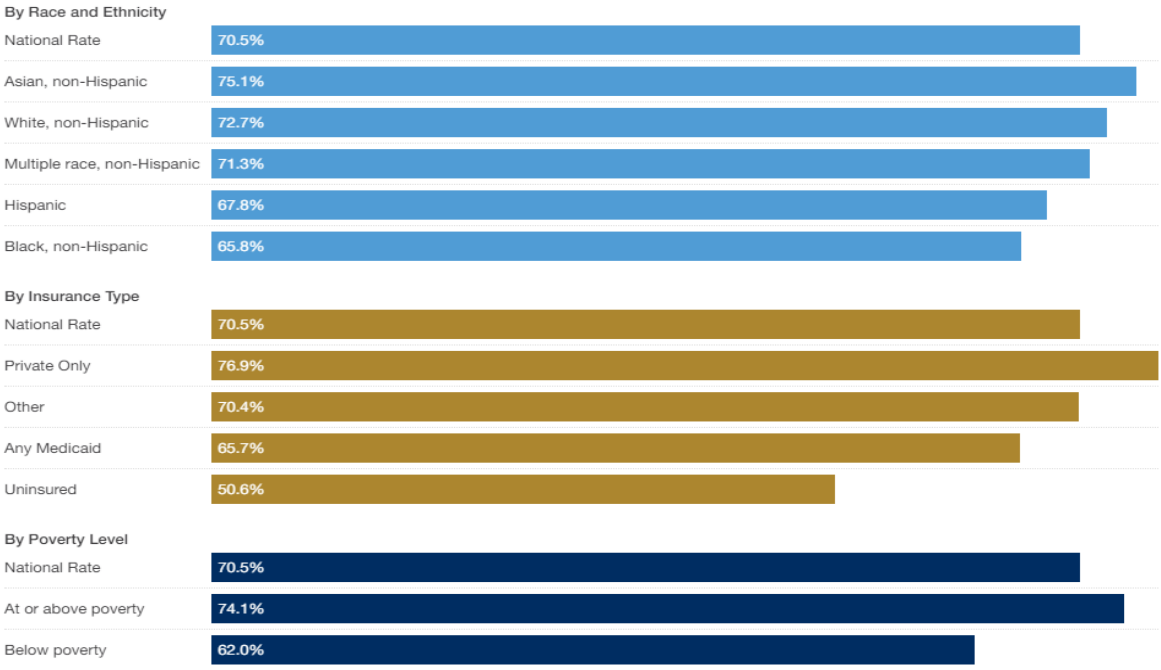
1. Precaution for LAIV4 does not apply to alcoholism. **2.** See notes for influenza; hepatitis B; measles, mumps, and rubella; and varicella vaccinations. **3.** Hematopoietic stem cell transplant.

Source: Center for Disease Control. Recommended Adult Immunization Schedule, United States, 2021. Feb. 2021, Accessed 29 Sept. 2021.

3.1 Increased Concerns about Child Immunization Rates

It has been noted by many studies that declining immunization rates for children have been seen in recent years. According to a study by Avalere published in June 2021, the Advisory Committee on Immunization Practices (ACIP) found a significant decrease in routine vaccinations using a claims-based study.[20] These declines have also been present in global health data. On July 15, 2020, the World Health Organization (WHO) also warned about a stark decrease in life-saving immunizations seen on a global level.[21] The height of the COVID-19 pandemic was claimed as an integral factor for the decline in these routine immunization rates. It is important to note that the larger share of children missing routine immunizations were children of color. The decline in these routine immunizations brought out by the COVID-19 pandemic can prove to be extremely detrimental to children around the world, as it opens the door for outbreaks of preventable diseases, like measles. On May 4, 2022, the United Nations International Children's Emergency Fund (UNICEF), released a report about the increase in measles cases worldwide. They stated that measles cases jumped up by 79% in the first two months of 2022 compared to the previous year. They went on to say that, "In 2020, 23 million children missed out on all basic childhood vaccines. That is the highest number seen since 2009 and 3.7 million more than in 2019"[22]

Figure 1. Vaccination Coverage Rates by Selected Demographic Characteristics



Data is suppressed for estimates of American Indian/Alaska Native, non-Hispanic children and Native Hawaiian or other Pacific Islander, non-Hispanic children. Coverage rates refer to the share of children born in 2016 and 2017 up to date on the combined seven-vaccine series (4:3:1:3:3:1:4) which consists of ≥4 doses of DTaP, ≥3 doses of poliovirus vaccine, ≥ 1 dose of measles-containing vaccine, Hib full series (≥3 or ≥4 doses depending on manufacturer), ≥3 doses of HepB, ≥1 dose of VA R, and ≥4 doses of PCV.*

Source: Hill, H.A., et al., "Vaccination Coverage by Age 24 Months Among Children Born in 2016 and 2017 — National Immunization Survey-Child, United States, 2017–2019," *Morbidity and Mortality Weekly Report 69*, no. 42 (October 2020): 1505–1511, available at http://dx.doi.org/10.15585/ mmwr.mm6942a1.

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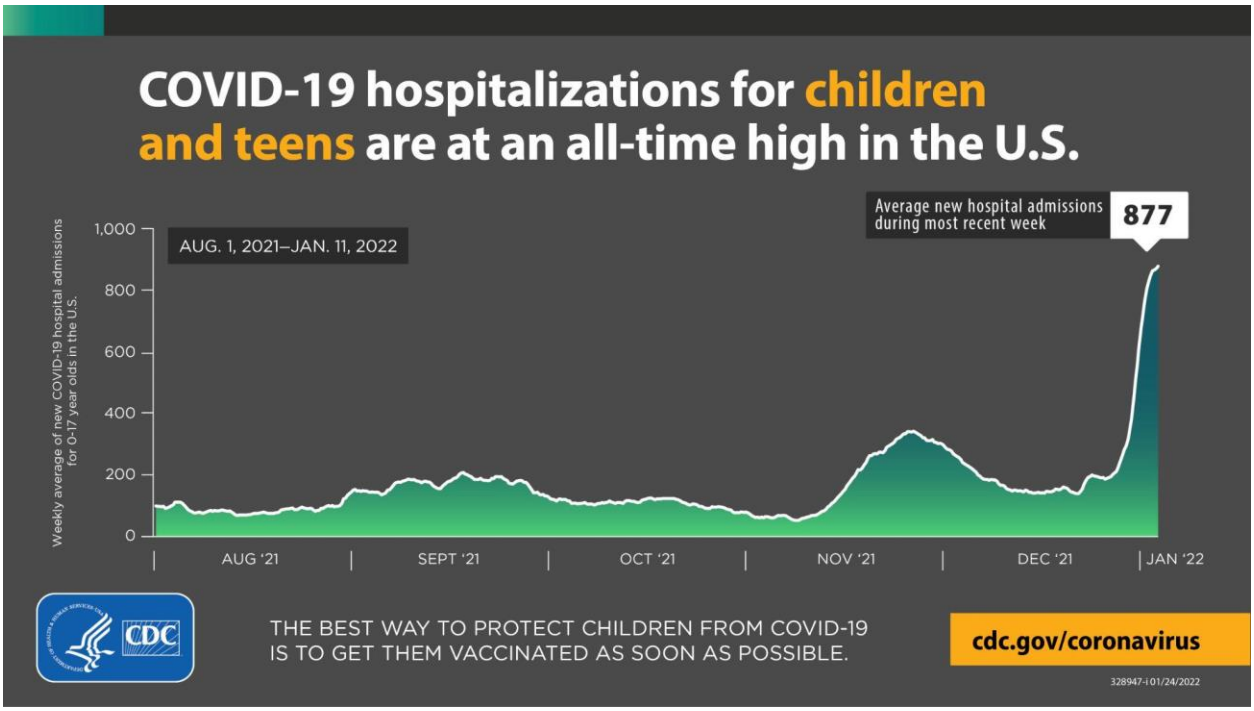
[20] Christine Liow Associate Principal Emily M. Gillen Associate Principal Loren Becker Associate Principal , Christine Liow Associate Principal, Emily M. Gillen Associate Principal, Loren Becker Associate Principal, Alexa Trost Senior Associate, & Joanna Young Principal. (2021, June 9). *Updated analysis finds sustained drop in routine vaccines through 2020*. Avalere Health. Retrieved May 19, 2022, from https://avalere.com/insights/updated-analysis-finds-sustained-drop-in-routine-vaccines-through-2020

[21] World Health Organization. (n.d.). *WHO and UNICEF warn of a decline in vaccinations during COVID-19*. World Health Organization. Retrieved May 19, 2022, from https://www.who.int/news/item/15-07-2020-who-and-unicef-warn-of-a-decline-in-vaccinations-during-covid-19

[22] *Measles cases are spiking globally*. UNICEF. (2022, May 4). Retrieved May 19, 2022, from https://www.unicef.org/stories/measles-cases-spiking-globally

Communities of color are at increased risk and will carry the heaviest burden of these declines. It is pivotal that education campaigns and frontline physicians can effectively communicate the importance of routine childhood immunization to parents. According to the AAP, some techniques such as motivational interviewing and relating to their own personal experiences and choices proved to be effective forms of communication from physicians to vaccine-hesitant parents[23]. Additional resources and strategies for communication can be found here: https://publications.aap.org/view-large/8953174.



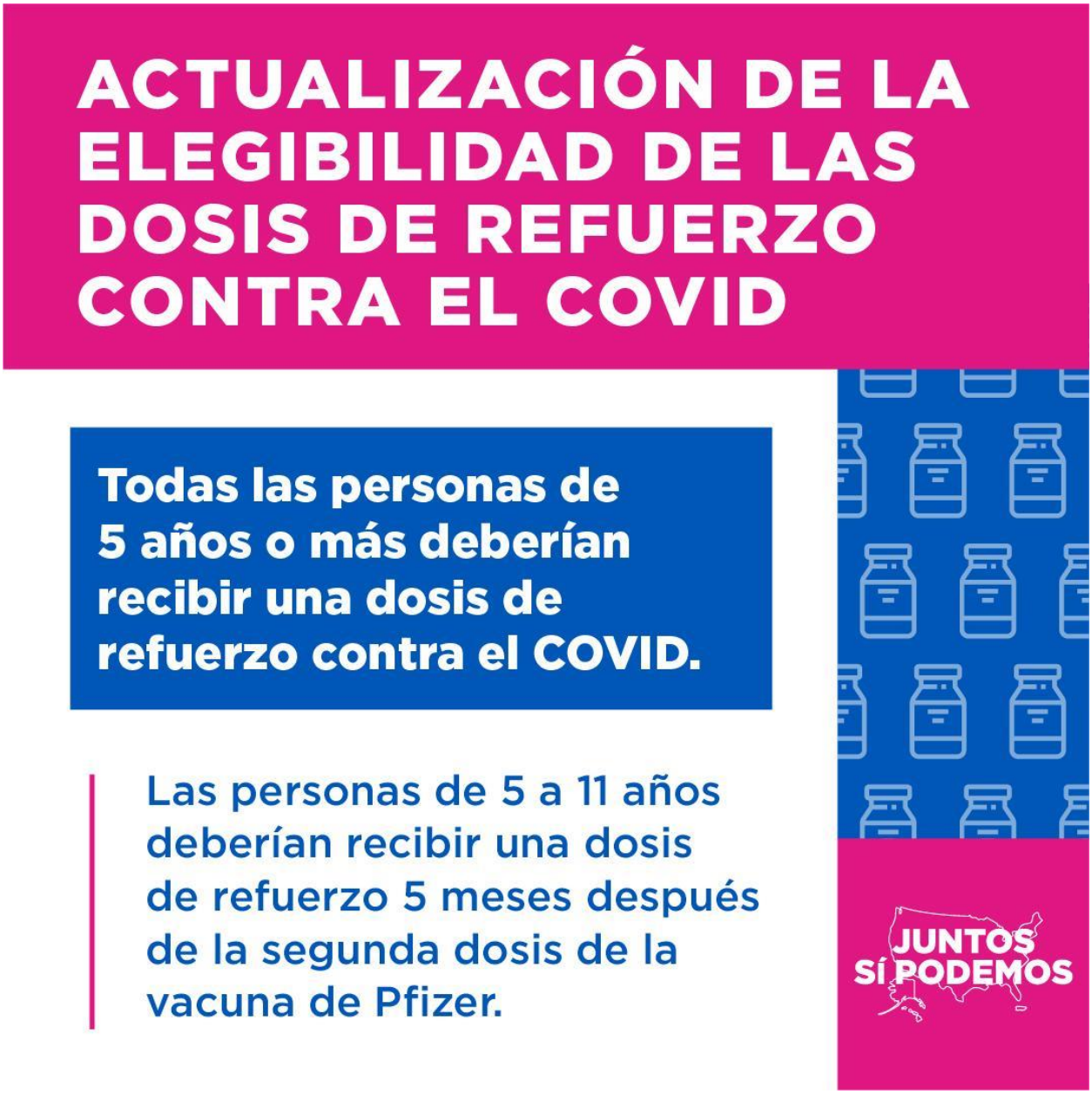
The CDC has officially recommended everyone aged 5 years and older to get a COVID-19 vaccine. As children and teens continue to get vaccinated against COVID-19, CDC has rolled out share new resources for parents, vaccine providers, and partners. A new website for parents and caregivers includes information on COVID-19 vaccination for children and adolescents. Two new fact sheets are available in nine languages that can be printed and shared. In addition, a list of resources for vaccine providers is available to help support conversations with families about vaccination and to highlight ways to improve vaccine accessibility for children, including those with disabilities and special healthcare needs. Jurisdictions, community partners, vaccine providers and others can visit COVID-19 Vaccination for Children for up-to-date information and resources to help inform planning for pediatric vaccination.

See the following for more information:

- Prevention Research Centers
- Building Trust in COVID-19 Vaccines
- Resources to Promote COVID-19 Vaccination for Children & Teens

[23] Edwards, K. M., & Hackell, J. M. (2016, September 1). *Countering vaccine hesitancy*. American Academy of Pediatrics. Retrieved May 19, 2022, from https://publications.aap.org/pediatrics/article/138/3/e20162146/52702/Countering-Vaccine-Hesitancy?_ga=2.198844841.784160730.1652985783-1780178204.1652985783

- Quick Conversations Guide
- Vaccinating Children with Disabilities Against COVID-19
- COVID-19 Vaccination for Children
- Equity in Childhood COVID-19 Vaccination
- COVID-19 Vaccines for Children and Teens
    - Why children and teens should get vaccinated
    - Vaccine safety
    - Side effects
    - Preparing for vaccination



4. FLU VACCINATION

Flu severity varies from year to year, but the flu always poses serious consequences.[24] Although the effectiveness of the flu vaccine may vary, the vaccine lowers the risk of influenza-related illness, hospitalization, and death.[25]

As witnessed during the 2020-2021 flu season, COVID-19 protocols assisted in preventing influenza cases.[268] However, as the nation is moving towards relaxing strict COVID-19 prevention protocols, this can also lead to a resurgence of influenza cases, hospitalizations, and deaths.[27] Consequently, health experts are expecting a harsh 2021-2022 flu season.[2821] With multiple COVID-19 vaccines now available, the CDC recommends that individuals can get vaccinated for COVID-19 and influenza at the same time; dual vaccination provides another incentive to get vaccinated for the flu as it would provide protection from both diseases.[2916]

See the following for more information:
Immunization Action Coalition: Communicating the Benefits of Seasonal Influenza Vaccine during COVID-19
Immunization Action Coalition: Protéjase de la gripe (influenza)...¡Vacúnese!

4.1. VACCINATION FOR ADULTS WITH DIABETES

People with diabetes (type 1, type 2, or gestational), even when well-managed, are at a high risk of flu complications, which can result in hospitalization or even death. About 30% of reported adults hospitalized due to the flu also had a diabetes diagnosis. Being in an immunocompromised state due to influenza can also exacerbate symptoms associated with hyperglycemic state. Such patients are also at risk for hypoglycemia in the case of a reduced appetite due to illness.[30]

Adults with diabetes have three times higher risk of death and six times increased risk of hospitalization. The annual flu vaccine significantly reduces admission rates for stroke, heart failure, and all-cause death during the flu seasons in adults with type 2 diabetes. They are also at an increased risk for renal and cardiovascular complications. Health care professionals should inform their patients with diabetes about the dangers of the flu and strongly recommend they get vaccinated each year after thoughtful and shared decision making with the provider and patient.[31]

See the following for more information:

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[24] Center for Disease Control. "Estimated Influenza Illnesses, Medical visits, Hospitalizations, and Deaths in the United States — 2018–2019 influenza season." *Center for Disease Control* www.cdc.gov/flu/about/burden/2018-2019.html. Accessed 19 Oct. 2020.

[25] Center for Disease Control. "CDC Seasonal Flu Vaccine Effectiveness Studies." *Center for Disease Control*, 1 July 2020, www.cdc.gov/flu/vaccines-work/effectiveness-studies.htm. Accessed 19 Oct. 2020.

[268] "2020-2021 Flu Season Summary." Centers for Disease Control and Prevention. Centers for Disease Control and Prevention, 22 July 2021. Web. 23 Sept. 2021. https://www.cdc.gov/flu/season/faq-flu-season-2020-2021.htm

[27] Kyueun Lee, Hawre Jalal, Jonathan M. Raviotta, Mary G. Krauland, Richard K. Zimmerman, Donald S. Burke, Mark S. Roberts medRxiv 2021.08.29.21262803; doi: https://doi.org/10.1101/2021.08.29.21262803

[2821] Ibid.

[2916] "Frequently Asked Influenza (flu) Questions: 2021-2022 Season." *Centers for Disease Control and Prevention.* Centers for Disease Control and Prevention, 22 Sept. 2021. Web. 24 Sept. 2021. https://www.cdc.gov/flu/season/faq-flu-season-2021-2022.htm#coadmin

[30] Center for Disease Control. "Flu & People with Diabetes." *Center for Disease Control*, August 26, 2021, https://www.cdc.gov/flu/highrisk/diabetes.htm. Accessed 20 Sept. 2021.

[31] National Foundation for Infectious Diseases. "The Dangers of Influenza (Flu): Why People with Diabetes Need to Get Vaccinated." Accessed 19 Oct. 2020.

CDC: What You Need to Know about Diabetes and Adult Vaccines
CDC: Lo que necesita saber sobre la diabetes y las vacunas para los adultos
CDC: A Resource for Nurses: SHARE Vaccine Recommendations for Patients with Diabetes
CDC: Healthy Living with Diabetes: The Simple Step You May be Missing
Immunization Action Coalition: Vaccination for Adults with Diabetes
NFID: The Dangers of Influenza: Why People with Diabetes Need to Get Vaccinated

4.2. VACCINATION FOR ADULTS WITH CARDIOVASCULAR DISEASE

People with heart disease and those who have had a stroke are at a higher risk of developing complications from the flu.[32] A 2020 study that looked at more than 80,000 U.S. adults hospitalized with influenza over multiple flu seasons (2010-11 to 2017-18) found that sudden, serious heart complications were common and occurred in 1 out of 8 patients.[33] These startling figures demonstrate the importance of providers discussing the benefits and risk of the flu vaccine with patients, especially those with underlying heart disease.

A 2018 study found that the risk of heart attack is 6 times higher within a week of a confirmed flu infection.[34] Flu vaccination has been associated with lower rates of some cardiac events among people with heart disease. Health care professionals should inform their patients with heart disease about the dangers of flu and insist they get vaccinated every year.[3523]

See the following for more information:
CDC: What You Need to Know about Heart Disease and Adult Vaccines
CDC: Lo que necesita saber sobre las enfermedades cardiacas y las vacunas para los adultos
NFID: Protect Your Patients with Heart Disease from Fly & Related Complications
NFID: The Dangers of Influenza: Why People with Heart Disease Need to Get Vaccinated

4.3. COVID-19

Coronavirus disease 2019 (COVID-19) is an illness caused by a virus that can spread from one person to seven persons. The CDC has released multiple guidance on protecting one's self from contracting the virus: CDC: How to Protect Yourself and Others

See the following for more information:
CDC: Symptoms of Coronavirus
CDC: Síntomas del COVID-19
CDC: COVID-19 Self-Check Symptoms
CDC: When to get tested
CDC: Pruebas para detectar el COVID-19

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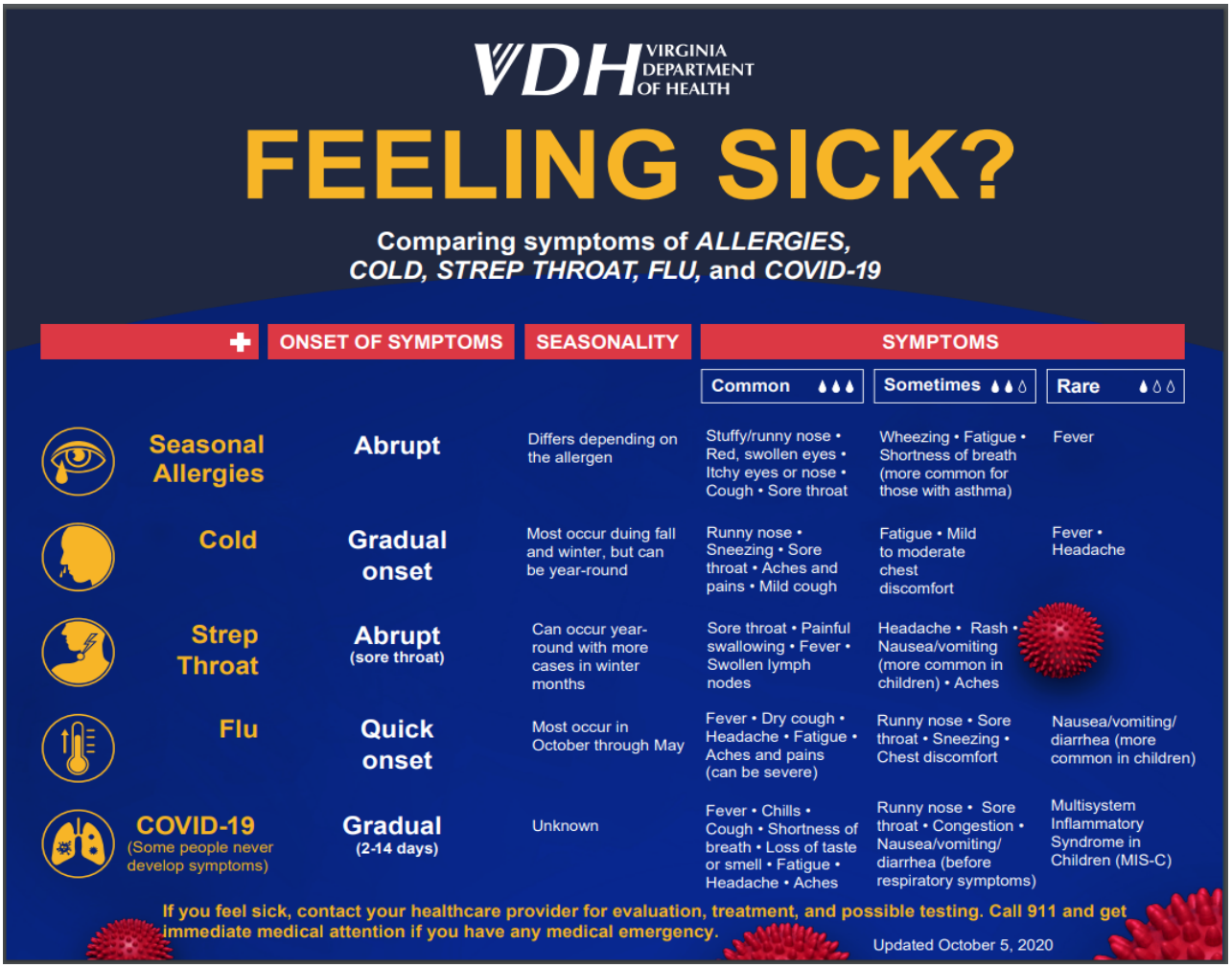
[32] Center for Disease Control. "Flu & People with Heart Disease or History of Stroke." *Center for Disease Control*, August 26, 2021. https://www.cdc.gov/flu/highrisk/heartdisease.htm. Accessed 24 Sept. 2021.

[33] Chow, Eric, et al. "Acute Cardiovascular Events Associated with Influenza in Hospitalized Adults." *Annals of Internal Medicine*, 25 Aug. 2020, doi:10.7326/M20-1509. Accessed 19 Oct. 2020.

[34] Kwong, Jeffrey C., et al. "Acute Myocardial Infarction after Laboratory-Confirmed Influenza Infection." *New England Journal of Medicine*, vol. 378, no. 4, 2018, pp. 345–353., doi:10.1056/nejmoa1702090.

[3523] National Foundation for Infectious Diseases. " The Dangers Of Influenza (Flu): Why People With Diabetes Need To Get Vaccinated." Accessed 19 Oct. 2020.

[CDC: People at Increased Risk]
[CDC: Grupos específicos de personas]



FLU VS. COVID-19 VS. COLD

Although the flu and COVID-19 are both contagious respiratory illnesses, their etiologies differ. This is just one of many differences between the two illnesses even though both share similar symptoms.[36]

Source: Virginia Department of Health. "Feeling Sick?" Virginia Department of Health, 5 Oct. 2020, www.vdh.virginia.gov/content/uploads/sites/182/2020/04/VDH_COVID19_Comparisonchart.pdf. Accessed 19 Oct. 2020.

[36] Center for Disease Control. 'Similarities and Differences between Flu ad COVID-19." *Center for Disease Control*, October 6, 2020. https://www.cdc.gov/flu/symptoms/flu-vs-covid19.htm. Accessed 19 Oct. 2020.

Source: Virginia Department of Health. "¿Se Siente Enfermo?" Virginia Department of Health, 15 Sept. 2021, https://www.vdh.virginia.gov/content/uploads/sites/182/2020/10/Spanish_VDH_COVID19_Comparisonchart.pdf *Accessed 24 Sept. 2021.*

5. VACCINATION COVERAGE AND SAFETY

5.1. VACCINE SAFETY

The public continues to raise concerns about vaccine necessity and safety. Myths and misinformation about vaccine safety can confuse those trying to make a sound decision. The U.S. Department of Health and Human Services has launched several information/education outreach efforts, including Know What to do about the Flu.[37] Additionally, the CDC continuously monitors vaccine safety. Vaccines are rigorously tested for years before they are granted licensure, and after a vaccine is licensed, the CDC continues to monitor its use, efficacy, safety, and side effects.

[37] "Influenza (Flu) Including." *Centers for Disease Control and Prevention*, 26 Sept. 2019, http://www.flu.gov/.

Effective outreach and education about vaccines requires knowledge of your population and individual community, reliability, and trustworthiness. For Hispanic communities, culturally competent communication is essential and includes access to patient-oriented resources in both English and Spanish. Below are links to key websites and brochures.

RESOURCES IN ENGLISH
CDC: Vaccine Safety Information for Health Care Providers
CDC: Vaccine Safety on Influenza (Flu) Vaccines
CDC: Talking to Patients about Vaccine Safety
CDC: Common Vaccine Safety Questions and Concerns
CDC: Vaccine Adverse Event Reporting System (VAERS)
California Department of Health: Vaccine Safety: Answers to Parent's Top Questions
Immunization Action Coalition: Vaccines Work!
Institute for Vaccine Safety, Johns Hopkins University: Components of Vaccines

RESOURCES IN SPANISH
Departamento de Salud Publica de California: La Seguridad de las Vacunas: Respuestas a las Preguntas Más Frecuentes de los Padres
Centro para el Control y la Prevencion de Enfermedades (CDC): Los Adultos tambien necesitan vacunarse
American Academy of Pediatrics: Seguridad de las vacunas: conozca los hechos
CDC: ¿Tiene Influenza?

5.2. PAYING FOR THE FLU VACCINE

NHMA is committed to empowering physicians to lead efforts that improve the health of Hispanics regardless of insurance coverage and status. Most state and local public health departments, Federally Qualified Health Centers (FQHCs), and free clinics offer free or reduced-cost services and vaccines. Pharmaceutical companies may also provide vaccines and other medications for reduced or at no cost regardless of insurance status. If your patient does not have health insurance, please visit: www.healthcare.gov to learn more about affordable health coverage options.

Below are payment methods to cover the cost of a flu vaccine:

Affordable Care Act. All health insurance marketplace plans and most private insurance plans cover most vaccines without charging a copay or coinsurance when immunizations are provided by an in-network provider.
HealthCare.gov: Preventive Care Benefits for Adults

Medicare. Medicare Part B covers one flu shot per flu season. If a patient is a part of original Medicare, they do not pay for the flu shot as long as the health care provider administers the vaccine. If the patient has Medicare Advantage, the shot is still free, but it may need to be administered by a provider who is in the plan's provider network.

AARP: Will Medicare Pay for my Flu Shot?
AARP: ¿Medicare pagará por mi vacuna contra la gripe?

Medicare: Is your test, item, or service covered?
CMS: Seasonal Influenza Vaccines Pricing

Medicaid. Medicaid covers all recommended vaccines for children and some vaccines for adults. There may be a copay or fee for getting vaccinated depending on what state the patient lives in and the health care professional administering the vaccine. Contact the state Medicaid agency for more information.

TRICARE. TRICARE covers all recommended vaccines for people currently serving in the military and their dependents. Depending on the plan, there may be a copay or a fee for getting vaccinated. Learn more about TRICARE coverage for vaccines.

Free and low-cost vaccines. If a patient does not have insurance or if the out-of-pocket (OOP) costs for vaccines are not affordable, the following resources are available to get vaccines for children and adults at a lower cost or for free.

- Vaccines for Children Program (VFC) provides all recommended vaccines at no cost for children under the age of 19 who are: (1) Medicaid-eligible; (2) uninsured; (3) underinsured; or (4) American Indian or Alaska Native.
- Federally funded health centers provide preventive services and wellness care, including vaccines and may offer sliding fees, based on income. Find a health center near you.
- State and local health departments give information where to go for free and low-cost vaccines, including community health centers, schools, and religious centers. Visit the state health department's vaccine resources. Local public health department examples:
    - The Los Angeles County Department of Public Health, in partnership with select LA County Libraries, will offer free flu shots through November.
    - The San Francisco Health Department offers convenient locations for members of the public to easily access free or low-cost flu vaccines
    - The Houston Health Department offers flu shots to uninsured and underinsured people on a sliding scale that ranges from free to $15.
- Most colleges and universities offer free flu shots for their students. Students should check with their school's health services (on the school website) for more information.

6. MISINFORMATION/DISINFORMATIONACCINATION COVERAGE

The malignant spread of false information and propaganda surrounding the safety and efficacy of vaccines has run rampant through the channels of social media and beyond. The Latino community is at increased risk of exposure to this information. Evidence shows that exposure to certain types of media is associated with vaccine hesitancy. A lack of trust in government, institutions or companies is a recurring theme in people's skepticism about the vaccine and acceptance of misinformation. This is especially concerning for the Latino community because Spanish speakers have a higher likelihood of being exposed to COVID-19 and misinformation/disinformation about the efficacy of the vaccine on social media. It is crucial that we provide accurate information both in English and Spanish while effectively communicating and collaborating with Latino communities and healthcare providers so we can increase vaccine uptake in these vulnerable populations.

6.1 Beware: Common Misinformation Themes

- Children do not need the COVID-19 vaccine because they are at low risk of death.
- The risk of adverse events from COVID-19 vaccination are more severe than the potential impact of COVID-19 illness.
- Deaths are more likely to occur from the COVID-19 vaccine than from infection with the virus that causes COVID-19.
- Pediatric vaccination is an experiment on children who are not at risk for COVID-19.
- COVID-19 vaccines are killing, permanently damaging, or disabling children.
- Pharmaceutical companies will not release the final safety data on COVID-19 vaccines for children for several decades.[38]
- The recently released Pfizer document proves that COVID-19 vaccines are not safe and is evidence of a conspiracy between the COVID-19 vaccine manufacturers and the government.
- CDC withheld data depicting that COVID-19 vaccines are not safe or effective.
- President Biden declared the pandemic is over.
- Guidance from governmental health authorities' "flip-flops" or may not "follow the science."
- Stalled vaccination uptake rates indicate the pandemic is over.
- CDC and government officials knew mitigation efforts like vaccines, masks, and tests would be ineffective but continued to push them for political gain
- COVID-19 vaccines cause a significant number of deaths
- For people in their twenties, the risk of death is seven times higher after vaccination than from infection with the virus that
- causes COVID-19
- COVID-19 vaccine-related myocarditis and other COVID-19-related complications caused the deaths of two teenage boys
- and nine US soldiers
- COVID-19 vaccines contain "strange life forms" and can be transcribed into human DNA
- COVID-19 vaccines are not vaccines but experimental gene therapy
- COVID-19 vaccines cause recipients to develop vaccine-induced acquired immune deficiency syndrome (VAIDS)
- Conservative news outlets claimed that athletes are either injured, dead, or require an EKG (heart recording) followingCOVID-19 vaccination.
- The World Council of Health released a guide for followers to "spike protein detox" after vaccination

6.2. Communications Strategies/Resources

Ways to Take Action

- Encourage parents, caregivers, and pediatric healthcare providers to engage in conversations that address vaccine safety concerns by discussing potential side effects, vaccine benefits, and low rates of adverse events.
- Develop and disseminate messages and talking points for pediatric healthcare providers to assist them in their conversations with parents and caregivers.

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[38] National Center for Immunization and Respiratory Diseases, Immunization Services Division , 23COVID-19 State of Vaccine Confidence Insights Report1–3 (2022). U.S. Centers for Disease Control and Prevention.

- Utilize and promote motivators to vaccinate children, such as protection of family members not yet eligible for vaccines and the ability to continue in-person school learning and activities, including games and sports.
- Develop plain language messages using findings from these three recent MMWR reports to educate people on the safety of the vaccine for children and the risk of severe COVID-19 illness in children:
- Approach conversations with empathy and understanding
- Demonstrate humility and active listening
- Try to understand the appeal of the given information, and how to redirect the gaps it fills in the patients mind
- Create and disseminate simple, clear messages about the process for authorizing, approving, making recommendations for, monitoring the safety of, distributing, allocating, and administering COVID-19 vaccines, including data handling.
- Provide regular updates on the benefits, safety, side effects and effectiveness of COVID-19 vaccines and clearly communicate what is known, what isn't known, and what is being done to find out what isn't known.[39]

See the following for more information:
Myths and Facts about COVID-19 Vaccines
Types of False Information
NPR: How to Spot Misinformation
WHO: How to Report Misinformation Online

7. TARGET COMMUNITIES

7.1 Houston

7.1.1. Demographics

In the Houston metro area, 44.5 % of adults and 24.7% of children are Hispanic/Latino - accounting for 2.7 million Hispanics/Latinos. 30.6% of Hispanics in the Houston metro area are uninsured compared to just 8.3% of white residents who are uninsured.

7.1.2. Statistics/Risk Assessment

A new study by the CDC found that Hispanic children were 8 times more likely than white children to be hospitalized because of COVID. Spanish speakers in general are also at elevated risk for COVID-19. Only 25.8% of vaccinated people in the entire state are Latino as of January 24, 2022. The Houston Health Department Health Authority, Dr. David Persse, said there's nothing to suggest that people of Latin descent are predisposed

[39] National Center for Immunization and Respiratory Diseases, Immunization Services Division , 25COVID-19 State of Vaccine Confidence Insights Report1–13 (n.d.). U.S. Centers for Disease Control and Prevention.
Kim, L., Whitaker, M., O'Halloran, A., Kambhampati, A., Chai, S. J., Reingold, A., Armistead, I., Kawasaki, B., Meek, J., Yousey-Hindes, K., Anderson, E. J., Openo, K. P., Weigel, A., Ryan, P., Monroe, M. L., Fox, K., Kim, S., Lynfield, R., Bye, E., … Wortham, J. (2020). Hospitalization rates and characteristics of children aged <18 years hospitalized with laboratory-confirmed COVID-19 — COVID-net, 14 states, March 1–July 25, 2020. MMWR. Morbidity and Mortality Weekly Report, 69(32), 1081–1088. https://doi.org/10.15585/mmwr.mm6932e3
Weis, J. (2022, March 1). Latinos Fall Behind in COVID-19 Booster Shots. Salud America. https://salud-america.org/covid-vaccine-data/
González (KHOU), D. (2020, August 8). Houston health experts highlight Hispanic community's hardships during COVID-19 crisis. Https://Www.Khou.Com/Article/News/Health/Coronavirus/Houston-Health-Experts-Highlight-Hispanic-Communitys-Hardships-during-Covid-19-Crisis/285-B80077f3-7dc8-4bf6-B45f-Ae78dc80100e. https://www.khou.com/article/news/health/coronavirus/houston-health-experts-highlight-hispanic-communitys-hardships-during-covid-19-crisis/285-b80077f3-7dc8-4bf6-b45f-ae78dc80100e
Sukumaran, P. (2020, July 27). Health Experts: Spanish Speakers at Elevated Risk for COVID-19. Salud America. https://salud-america.org/health-experts-spanish-speakers-at-elevated-risk-for-covid-19/
Data and Demographics. (2022). Harriscounty.Hub. https://covid-harriscounty.hub.arcgis.com/pages/data-and-demographics

to being infected with coronavirus. “It appears that this is really more a function of the social determinants of health and poverty,” Dr. David Persse said.

7.1.3. Guidance/Resources

- Public Health Departments local resources: Register for COVID-19 vaccines
- Call 832-927-8787 or sign up online to schedule your child's appointment.
- Make sure to check out the 5-17-year-old local provider list for additional vaccination opportunities.
- Booster doses now available: Schedule your COVID-19 vaccine shot or booster dose in advance, by calling 832-927-8787 or register online. The registration site is not compatible with Internet Explorer. If you do not have transportation for your vaccination appointment, call 832-927-8787.
- Public health page: https://publichealth.harriscountytx.gov/
- Ordering COVID Test kits: https://special.usps.com/testkits
- A patchwork of places offers tests across the state, with many at no cost, according to the Texas Department of State Health Services

7.2. Chicago

7.2.1. Demographics

59% of Chicagoans are Black or Latinx. 28.6% of children in Chicago are Latino. There are over 803,000 Hispanics/Latinos in Chicago. The Latinx uninsured rate is more than 16%, or four times higher than white people.

7.2.2. Statistics/Risk Assessment

Coronavirus tests taken by Latinos also have come up positive nearly 46% of the time, according to an analysis of data from the Illinois Department of Public Health carried out by the Latino Policy Forum. Citing data from the Illinois Department of Public Health, the group notes that nearly 1.8% of the state’s Latino residents have tested positive for the coronavirus, a relatively high rate compared with about 1.1% of African Americans, less than 1% for the state as a whole and 0.3% among the white, non-Hispanic population. When the vaccine was only available to healthcare workers and all vaccine eligibility was linked to employment status, only 18% of COVID vaccines went to Black or Latinx Chicagoans. As of February 22, 2022, the city’s test positivity rate of 1.5%, was in the “low transmission” category, while its rate of occupied hospital and ICU beds was in “lower transmission.” The seven-day rolling average of new daily cases was still at “substantial transmission” at 283 cases, but all those categories were decreasing. More than half of Chicago Public Schools (CPS) students 12 and older are fully vaccinated. However, for students ages 5 to 11, less than one-third have received at least one vaccine dose. The Latinx community continues to have more positive cases of COVID-19 compared to the rest of the city.

7.2.3. Guidance/Resources

- Testing: https://www.chicago.gov/city/en/sites/covid-19/home/covid-testing.html
- Finding a testing site - English: https://www.chicago.gov/content/dam/city/sites/covid-19-vaccine/Documents/comms_tools_flyers/TestingSite_Flyer_8.5x11_Jan2022_ENG.pdf
- Spanish: https://www.chicago.gov/content/dam/city/sites/covid-19-vaccine/Documents/comms_tools_flyers/TestingSite_Flyer_8.5x11_Jan2022_SPA.pdf

- Pediatric COVID-19 testing site: https://schoolinfo.cps.edu/pediatricCovidTestingSites/
- COVID-19 vaccine finders: https://www.chicago.gov/city/en/sites/covid19-vaccine/home/vaccine-finder.html
- City of Chicago Health Department

7.3. Oakland

7.3.1. Demographics

27% of Oakland's population is Latino and 42% of children in Oakland are Latino. About 114,000 Hispanics live in Oakland. Latinos have the highest uninsured rate (13.1%) and were far more likely than Whites (2.7%) to be uninsured.

7.3.2. Statistics/Risk Assessment

65% of all Latinos in Oakland are fully vaccinated. Over the past week, the county has averaged 650 new cases and 0.9 new deaths per day. On Monday (5/16/22), 3,586 new cases and 2 deaths were reported. Between March of last year and Jan. 16, 2021, 176 Oakland residents died due to COVID-19. Of these people, 67 were Black, or 38% of the city's total COVID-19 deaths. Black people make up about 24% of the city's total population. In Oakland, Latinos accounted for the second largest number of deaths at 38, or 22% of the city's total.

7.3.3. Guidance/Resources

- American Rescue Plan Act (ARPA) Listening Session Slides
- Alameda County Healthcare Services Agency Public Health Dept.
- California For All COVID-19 Vaccination Data
- Kaiser Family Foundation Latest Data on COVID-19 Vaccinations by Race/Ethnicity
- City of Oakland COVID-19 Information and Resources

8. VACCINATION COVERAGE AND SAFETY

In 2021, approximately 85% of Hispanics utilized smartphones.[40] Many health providers are taking advantage of new technological resources available to improve patient care.

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[40] O'Dea, S. "Smartphone Ownership in the US by Ethnicity 2021." *Statista.* Statista Inc., 12 May 2021. Web. 24 Sept. 2021. https://www.statista.com/statistics/195001/percentage-of-us-smartphone-owners-by-ethnicity/
Percent of First COVID-19 Vaccine Doses Administered by Race/Ethnicity Over Time. (2021). Chicago.Gov. https://www.chicago.gov/city/en/sites/covid19-vaccine/home/vaccine-data/percent-of-first-covid-19-vaccine-doses-administered-over-time.html
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Access to Preventative Care. (2016). City of Oakland. https://data.oaklandca.gov/stories/s/Access-to-Preventative-Care/nk4s-n4sy/#:%7E:text=Ratio%3A%204.92,the%20citywide%20rate%20(6.4%25).

The CDC released its Digital Media Toolkit for 2021-22 Flu Season. Known this season as the 'I Get It' campaign, the Digital Media Toolkit is designed to assist partners in communicating about the importance of the influenza vaccination. Social media has become an effective tool for expanding providers' reach within the Hispanic community, as well as for fostering engagement and increasing access to credible, science-based health messages. The Digital Media Toolkit provides various resources for social media, including: social media frames, social stories panels, social media graphics, and sample posts for social media accounts.

CDC: Herramientas de Comunicación en Español

Source: Centers for Disease Control and Prevention. "I Get It!" Centers for Disease Control and Prevention, 24 Sept. 2021, https://www.cdc.gov/flu/resource-center/i-get-it.htm. Accessed 24 Sept. 2021.

Health care provider/clinician apps: The CDC website has links to free mobile apps for health care providers. Many apps are available for download, including:

- CDC Downloadable Mobile Apps
- Morbidity and Mortality Weekly Report
- Vaccine Schedules

8.1. RESOURCES FOR HEALTH CARE PROFESSIONALS

The CDC offers numerous education and training programs for health care professionals. A variety of topics and formats are available and all are based on vaccine recommendations made by the Advisory Committee on Immunization Practice (ACIP). Physicians, nurses, health educators, pharmacists, and other health care professionals can also earn continuing education credits/contact hours, when available.

8.2. VACCINE DOCUMENTATION

The CDC has created a CDC Vaccine Schedules app for iOS and Android to track vaccines.

8.3. VACCINE DELIVERY IMPROVEMENT

Below are some tools health care professionals can use to improve administration and documentation of vaccines:

CDC Vaccination Guidance During a Pandemic. The CDC has compiled a collection of federal resources designed to guide vaccine planning during the COVID-19 pandemic.

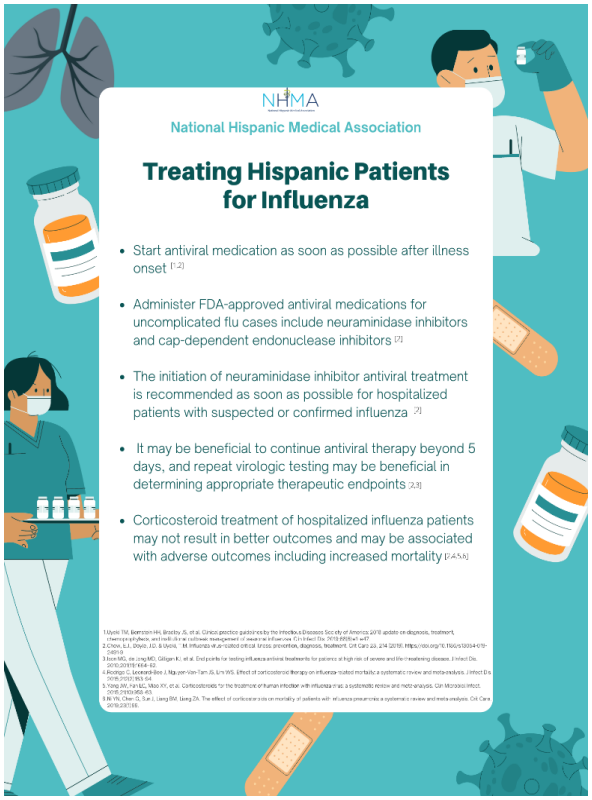
Skills Checklist for Immunization. Use this form as a self-assessment tool to identify areas for improvement in vaccine administration.

CDC Resources for Encouraging Vaccinations During COVID-19 Pandemic. The CDC put together resources that health care professionals can use to reinforce the importance of maintaining routine immunizations during the pandemic.
Updated influenza vaccine recommendations which can help improve influenza vaccination coverage, especially among those at high risk for influenza complications.

9. TREATMENT

If an individual does contract the influenza virus, there is treatment available. The flu can be treated with antiviral drugs, which are prescription medicines that are able to combat the virus within a person's respiratory tract.[41] If a person is sick with the flu, a health care provider may prescribe antiviral drugs as a form of treatment, but antiviral drugs are reserved for those who fall deeply ill; therefore, for fairly healthy people who contract the flu, antiviral drug treatment is not necessary.[4229] If a person is sick with the flu, it is recommended that they take precautions to protect others, including:

- Limiting contact with others as much as possible;
- Covering nose and mouth when coughing or sneezing;
- Hand washing with soap and water;
- Cleaning and disinfecting surfaces and objects; and
- Staying home until you feel better.[4329]



41 "Treatment: What You Need to Know." Centers for Disease Control and Prevention. Centers for Disease Control and Prevention, 31 Aug. 2021. Web. 29 Sept. 2021. https://www.cdc.gov/flu/treatment/treatment.htm

4229 Ibid.

4329 Ibid.

CDC: What You Should Know About Influenza (Flu) Antiviral Drugs
CDC: Treating Influenza (Flu)

10. ADDITIONAL RESOURCES

RESOURCES IN SPANISH
¿Qué es la influenza (gripe)?
Similitudes y diferencias entre la influenza y el COVID-19
Multi-Language flu Fact Sheets from the CDC
Spanish Language | CDC
Top Ten Reasons to Protect Your Child by Vaccinating
CDC COVID-19 Tracker

RESOURCES IN ENGLISH
Key Facts About Influenza (Flu)
Similarities and Differences between Flu and COVID-19
Free CDC Print Materials on the Flu
Summary of Recommendations for Child/Teen Immunization
Talking with Your Patient about Contraindications and Precautions to Influenza Vaccination
Key Vaccination Resources for Healthcare Professionals
Checklist of Current Versions of U.S. COVID-19 Vaccination Guidance and Clinic Support Tools
Coding and Billing for Adult Vaccinations