

Talking About Vaccine Safety with Vulnerable Populations

Informed and Developed by Peer Outreach Workers that have these conversations everyday on the streets of Thunder Bay

Special Considerations for People Who Use Drugs and People that are Homeless or Under-Housed.



1. Build Trust and a Relationship First

Hesitancy and mistrust of vaccines are often tied to larger mistrust of the medical system and government. It will take time and multiple visits to build trust as a health care provider. First show up for clients and help them in other areas so they believe you have their best interest at heart, then you can bring up vaccines. Always provide wrap-around care.

Wrap-Around Care Includes: (Ask clients what they need, don't make assumptions)

CARE is defined as: listening, showing up, advocating, meeting clients where they are at, as well as the following when able:

- Addictions support
- Food and water
- Access to safe shelter
- Mental health needs
- Physical health needs
- Harm reduction
- Referral to services
- Transportation
- Basic needs (clothing, hygiene supplies, PPE)



2. Use a Peer-led Approach

Peers come from their own lived experiences and are relatable for clients. People with lived experience are often the most appropriate and trusted individuals to provide information and resources addressing concerns about vaccines.

“From my experience, I still have my own hesitancy, but I'll get vaccinated cause I know it's good for me. I think it's the need to control the situation, control what happens to me. But I know it's the right thing to do for me and my community; it's the best thing to help prevent the spread. I'm okay with some vaccines and not others, it doesn't make sense” (Peer Outreach Worker). ”



3. Recognize and Respect Client Priorities and Values

It's about really understanding a client's situation. COVID and vaccine fatigue is real and there are many other crises people are managing. Clients may be dealing with withdrawals, unsafe drugs, getting daily food, shelter and staying safe. Don't assume people are able to prioritize preventative health. Be ready to support a client to get vaccinated when they want it, recognizing that a client's priorities may change each day.

DO

- ✓ **Meet People Where They Are At.** Don't rush conversations about vaccines. Try to keep the door open for future conversations. Take advantage of when clients are willing and able to discuss vaccines and get them to a clinic that day, if possible.
- ✓ **Reduce Barriers.** Make transportation available, make sure clinics are culturally safe, know local low-barrier clinics and pop-up clinics (e.g. no ID needed), send clients to a clinic with a peer or outreach worker, make sure various vaccine brands are available to accommodate preferences.
- ✓ **Show Respect and Empathy.** Don't flinch or make assumptions when you see track marks; actually listen and be attentive. Body language is huge. Drop the medical for a second and just engage as a human.
- ✓ **Give Value to the Vaccine.** Incentivize getting vaccinated based on current life circumstances (cash, food, or services). If incentivizing vaccinations, make sure to get informed consent so that people understand why they are getting vaccinated and don't feel forced.
- ✓ **Have One-on-One, Tailored Conversations.** Let people know that they are at an increased risk if they get sick. They are more likely to be severely ill and hospitalized if they get COVID or the flu. They don't necessarily have time or a place to be sick if they don't have a safe space to rest and recover. They can also easily spread it to others in shelters, encampments, etc. Use Motivational Interviewing techniques.
- ✓ **Share Your Own Experiences.** "I got _____ vaccine because _____," or "I vaccinated my children because _____." Storytelling and social proof are often more effective to explain the reasons for getting vaccinated rather than providing statistics and medical terms.
- ✓ **Use a Trauma-Informed Approach.** Lots of clients have had choice taken away from them in their life so reintroduce choices for them to feel more empowered and to help with trusting relationships.

DON'T

- ✗ **Don't** bring up vaccines before you have a trusting relationship with the client.
- ✗ **Don't** tell people what to do.
- ✗ **Don't** talk about vaccines when people are dope sick, in a crisis, or have other more urgent needs.

Be Ready to Talk About

Common Questions People Are Asking About Vaccines

- Why should I care?
- When or where can I get vaccinated?
- Is it going to make me sick?
- Do I need it or have to get it?
- Did you get the COVID / flu vaccine? Why?

Common Misconceptions We Hear From Clients

- I'll get sick if I get the vaccine.
- It's better for me to get sick and for my immune system to fight it off.
- COVID is over.
- Vaccines alter your DNA.
- Vaccines are a form of government control (e.g. ongoing colonization, microchips).
- It was developed too fast.
- I'm feeling fine so I don't need it.

Special Considerations to be culturally sensitive: Vaccine strategies cannot follow a 'one size fits all' approach.

Check out the **WISE Practices for COVID Vaccinators Webinar**

Visit the webinar [here](#).

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Developed by the **Peer-to-Peer Vaccine Safety Project**



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Anishinabek Family Care



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