

In response to the call for abstracts for supplemental issue of Journal of Health Care for the Poor and Underserved focused on Public-Private Partnerships and Health Equity

Title: Improving COVID-19 vaccination equity for the refugee community: Cross-sector collaboration between an academic medical center, international family medicine clinic, resettlement agency, and health department

### Introduction

Established public-private partnerships can potentially improve equity in COVID-19 vaccine access among underserved populations. Refugee populations in the United States are underserved due to a variety of barriers, including a lack of meaningful language access, leading to challenges with understanding evolving vaccination eligibility criteria and how to schedule appointments. We describe efforts aimed at increasing access to COVID-19 immunizations for a local refugee population, which leveraged a cross-sector collaboration between an academic medical center and international family medicine clinic, a resettlement agency, and a local health department. From March–June 2021, we proactively reached out to refugee community members to offer and schedule COVID-19 vaccine appointments at a nearby clinic.

### Methods

Using existing patient/client databases, 1,327 individuals and 7 neighborhood clusters were identified for telephone, electronic, and door-to-door outreach to the refugee community. The hospital call center reached out to all 1,327 individuals. Cross-sector team members sent texts/emails to clients and distributed fliers during door-to-door outreach. All outreach efforts offered next-week appointment scheduling at a mass vaccination clinic, which provided access to live and telephone interpreters. Evaluation metrics included: number of outreach calls made, number of vaccine appointments scheduled, and qualitative feedback from team members.

### Results

Patients/clients contacted represented more than 20 countries of origin; top 3 languages were Dari ( $n=268$ ), Arabic ( $n=188$ ), and Nepali ( $n=127$ ). More than 1,500 outreach calls were made using interpreters, resulting in 312 scheduled appointments; 613 of those called reported being already vaccinated or scheduled. Individualized follow-up was done for 313 who either declined or were hard-to-reach. Based on these data, we project that 70.3% of the refugee population over the age of 12 years old were vaccinated as of July 2021, consistent with the overall percentage of the health district. Qualitative team feedback identified 3 important project characteristics: proactive outreach, offering immediate appointment scheduling, and mission driven explicitly by health equity.

### Discussion

This project demonstrates that cross-sector collaboration and commitment to equity can increase opportunities for refugees to obtain the COVID-19 vaccine. Targeted outreach, follow-up and interpreter access at vaccination sites can help with reducing disparities in COVID-19 vaccination uptake in refugee populations.

Keywords: Health Equity; Covid-19 Vaccines; Community-Academic Partnerships; Refugees