

Welcome to Talking with Patients in the LGBTQ+ Community about COVID-19 Vaccines



June 22, 2022

12:00PM-1:00PM



Continuing Medical Education Disclosure

Eric Ball has disclosed a relevant financial relationship with Merck as a member of the Pediatric Vaccine Advisory Board. This has been mitigated by peer review of the presentation.

All other planners, staff and others involved with this activity have reported no relevant financial relationships with ineligible companies whose primary business is producing, marketing, selling, re-selling, or distributing healthcare products used by or on patients.

This activity has not received commercial support.

Housekeeping



For Panelists: Please remember to mute yourself when not speaking.



For Attendees: Please access today's slides through the following link:
<https://eziz.org/covid/crucialconversations>



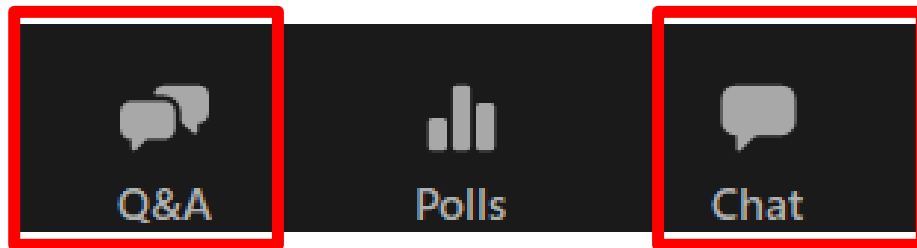
Please use “Q&A” to ask questions.



If you have technical difficulties, please contact hailey.ahmed@cdph.ca.gov

Questions & Answers and Discussion

During today's session, please use the Q&A panel to ask your questions.



Please use the Chat panel for discussion.

Poll: Your feedback is appreciated!

How confident are you in talking about COVID-19 vaccination with patients in the LGBTQ+ community?

1. Very confident
2. Confident
3. Somewhat confident
4. Slightly confident
5. Not confident



Agenda: Wednesday, June 22, 2022

No.	Item	Speaker(s)	Time (PM)
1	Welcome	Rachel Jacobs, CDPH	12:00 – 12:05
2	Talking with Patients in the LGBTQ+ Community about COVID-19 Vaccines	Erin Arendse, Equality CA	12:05 – 12:30
3	3-5-3 Conversation Methodology	Eric Ball, MD, FAAFP, #ThisIsOurShot	12:30 – 12:40
	Questions & Answers		12:40 – 12:55
4	Resources, Polls, and Wrap-Up	Rachel Jacobs, CDPH	12:55– 1:00

Talking with Patients in the LGBTQ+ Community about COVID-19 Vaccines

Erin Arendse and Jorge Reyes Salinas, Equality CA



EQUALITY CALIFORNIA



- ▶ Equality California brings the voices of LGBTQ+ people and allies to institutions of power in California and across the United States, striving to create a world that is healthy, just and fully equal for all LGBTQ+ people.
- ▶ We advance civil rights and social justice by inspiring, advocating, and mobilizing through an inclusive movement that works tirelessly on behalf of those we serve.

BACKGROUND

According to Gallup Poll:

- 7.1% of all adults in the United States self-identify as LGBTQ+ .
- 10.5% of Millennials self-identify as LGBTQ+ .
- And 21% of Gen Z adults are LGBTQ+.

It is safe to assume you work with LGBTQ+ people every day!



WHAT IS LGBTQ+?

- ▶ **Lesbian:** Women who have primary sexual, romantic, and/or emotional ties to **other women**.
- ▶ **Gay:** Men who have primary sexual, romantic, and/or emotional ties to **other men**.
- ▶ **Bisexual:** People who have sexual, romantic, and/or emotional ties to **two or more genders**.
- ▶ **Transgender:** Anyone who has a gender identity that is not the same as the sex they were assigned at birth.
- ▶ **Queer:** A term some people use to identify themselves with a flexible and inclusive view of gender and/or sexuality.
- ▶ **Plus:** We use this to include all other sexual orientations and gender identities.



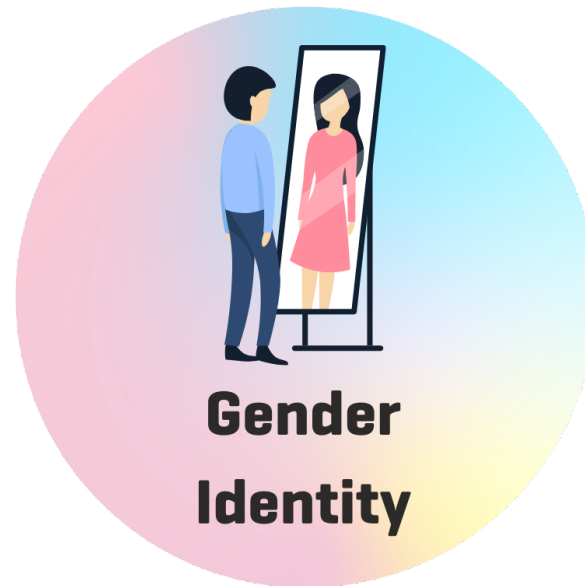
GENDER & SEXUAL ORIENTATION

We have been taught that...

- ▶ Sex = Gender
- ▶ Sex = Either Male or Female
- ▶ Based on the sex we were assigned at birth, we had paths mapped out for us:
- ▶ Male → Man → Masculine → Attracted to Women
- ▶ Female → Woman → Feminine → Attracted to Men



BREAKING IT DOWN: MULTIPLE SPECTRUMS



SEXUAL ORIENTATION



Sexual Orientation: How a person experiences **physical, romantic, and/or emotional attraction** to others.

- ▶ **Identity:** Do you consider yourself gay, lesbian, bisexual, straight, queer, or something else?
- ▶ **Behavior:** What gender(s) do you have sex with?
- ▶ **Attraction:** What gender(s) are you attracted to?

SEX ASSIGNED AT BIRTH



The medical classification of female, male, or intersex, is often classified by anatomical, chromosomal, and hormonal characteristics, including secondary sex characteristics.

Intersex: A general term used for a variety of conditions in which a person is born with reproductive or sexual anatomy that doesn't seem to fit the typical definitions of female or male.

GENDER IDENTITY



Gender Identity: The subjective experience of one's own gender.

- ▶ **Cisgender:** People who have a gender identity that is the same as the sex that was assigned to them at birth.
- ▶ **Transgender:** People who have a gender identity that is not the same as the sex they were assigned at birth.
- ▶ Ask patients about their **current** gender identity.

Our gender identity may or may NOT match our appearance, body, or others' perception of us.

NAMES & PRONOUNS

- ▶ Transgender and gender-variant people often change their names to affirm their gender identity.
 - ▶ This name can be different than what is on their insurance or identity documents; referred to as their “dead name” or “legal name”.
- ▶ It is important to use names and pronouns that affirm a transgender or gender variant person’s current gender identity.



If you don't know someone's pronouns, it is best to use gender-neutral pronouns "they/them" or refer to them by their name.

BEST PRACTICES

- ▶ Avoid making **assumptions** about people's sex assigned at birth, gender identity, or sexual orientation based on how they look (gender expression).
- ▶ Avoid **conflating** sex assigned at birth with gender identity.
- ▶ **Create** staff LGBTQ+ education opportunities and resources.
- ▶ Staff **hiring and retention** for LGBTQ+ folks
- ▶ Use **gender-neutral** language.
- ▶ **Promote** your organization through LGBTQ+ media channels.



PERCEIVE

- ▶ Patients start collecting cues about whether the agency is a safe and welcoming place well before they arrive.
- ▶ Positive and inclusive symbols, images, and artwork
- ▶ Positive and inclusive brochures and pamphlets that represent their experiences as LGBTQ+ people
- ▶ Positive and inclusive language



FEEL

- ▶ Gender identities and expressions are acknowledged by staff, and they are affirmed, and respected.
- ▶ Welcomed to use their chosen names and pronouns
- ▶ Build relationships with the LGBTQ+ community, legal, and employment organizations to connect patients with



LGBTQ+ YOUTH

When compared with their heterosexual, cisgender counterparts, a greater share of LGBTQ youth experienced the following:

- ▶ getting kicked out of their homes.
- ▶ being homeless for more than one year.
- ▶ getting victimized while they were homeless.
- ▶ 7x more acts of violence.



LGBTQ+ Youth Outreach and Communications



The Process

**Get boosted so we can leave our mark
at Pride and beyond.**



FINDINGS



Findings

Information calms concerns: LGBTQ+ youth want detailed information about the vaccines; what's in them and how they work. They are reassured when they hear what side effects to expect, and that they can usually be managed with over-the-counter (OTC) medications.

Good messages follow a formula: Acknowledge concerns to build trust; affirm vaccination is a personal choice; empower their research; provide information and sources.

Protecting loved ones resonates: Both English- and Spanish-speakers respond well to messages about COVID vaccines and boosters as a way to protect family and partners

Liken to other forms of protection: Comparing the COVID vaccine to condoms, PrEP, and birth control resonates.

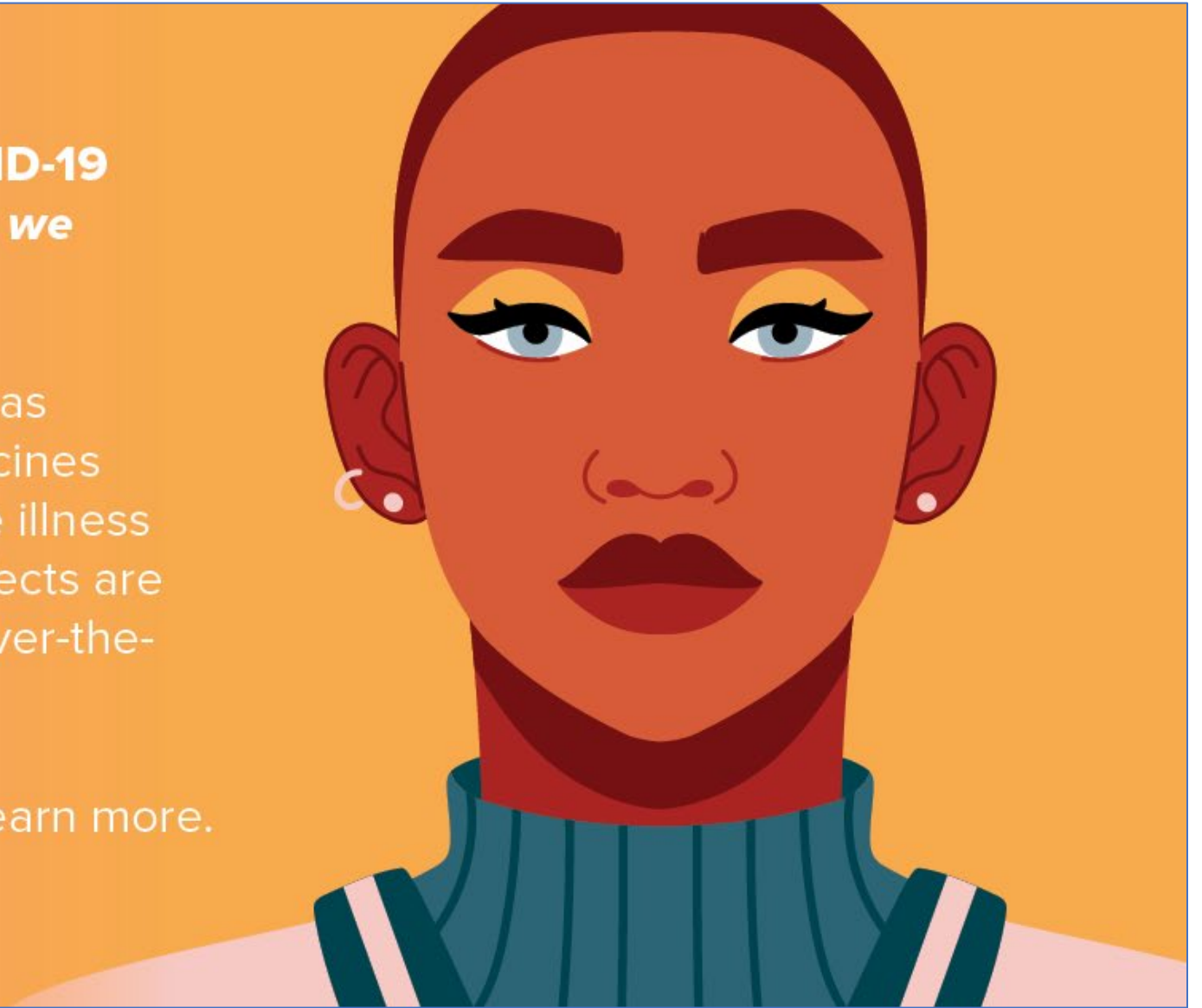
Inclusive imagery is essential: This generation of LGBTQ+ youth seems uniquely concerned with equity and inclusion and is sensitive to imagery or messages that address only a narrow segment of people.

Take COVID as seriously as they do: Levity, humor, and social pressure all backfire by triggering negative feelings in a group that is already anxious about COVID and life as a whole.

I was hesitant about COVID-19 vaccines at first. *How can we trust they're safe?*

I did some research and was reassured to learn that vaccines significantly prevent severe illness and death, and the side effects are usually manageable with over-the-counter medication.

Visit **covid19.eqca.org** to learn more.



**Get boosted so we can leave our mark
at Pride and beyond.**





We use condoms and PrEP to have safer sex. The COVID vaccine is just another kind of protection.



Whether it's with sex, love, or healthcare, my parents don't always get it. **It's up to me to make my own choice.** I'm choosing to get vaccinated against COVID-19.

Thank you!



3-5-3 Conversation Methodology

Eric Ball, MD, FAAFP

#ThisIsOurShot, American Academy of Pediatrics (AAP-CA), California Immunization Coalition (CIC)



COVID-19 Vaccine Language Tips

Do Say	Don't Say
Vaccination	Injection or shot
A safe and effective vaccine	A vaccine developed quickly
Authorized by FDA based on clinical testing	Approved by FDA; Operation Warp Speed; Emergency Use Authorization*
Get the latest information.	There are things we still don't know.
Keep your family safe; keep those most vulnerable safe.	Keep your country safe.
Public Health	Government
Health/medical experts and doctors	Scientists
People who have questions	People who are hesitant, skeptical, resistant, or “anti-vaxxers”

* *The perceived speed of vaccine development is a current barrier among many audiences.*
 These recommendations are based partly on research conducted by the de Beaumont Foundation.



Hierarchy of Information Needs

As those undecided navigate the decision-making process, safety is the most important consideration.

Safety: How will the vaccine affect me? What side effects can I expect?

Efficacy: Do the vaccines work? If I already had COVID-19, why do I need to get the vaccine?

Development Process: How were the vaccines developed so quickly?

Access: Do I need insurance?



Conversation Methodology for Social Media



To address patients concerns about COVID-19 vaccines, use the 3-5-3 method.



3 Steps to Initiating Conversations

1

Ask and listen to the answer

“What do you think about the vaccine?”

“Why do you feel that way?”

“What concerns do you have about the vaccine?”

2

Create an alignment of safety

“I would be scared too. Let’s do what’s safe here.”

“We both want what's safest for you.”

3

Find common goals

“We all want to be able to safely be with our loved ones again.”

“What reasons would motivate you to get vaccinated?”

Find their personally motivating reason.



5 Key Messages

1. The vaccine will keep you safe.

The vaccine will protect you from getting very sick. Over 216 million Americans have been safely vaccinated and are now protected.



5 Key Messages

2. Side effects are common.

Side effects are a sign your body is activating to protect you. For a few days after vaccination, many people temporarily feel:

- Sore arm (at administration site)
- Tired or fatigue
- Headache
- Muscle pain
- Joint pain



5 Key Messages

3. Vaccines are very effective.

Each vaccine is extremely effective at preventing hospitalization and death from COVID-19 and its variants. It will allow us to do the things we love and miss most. Vaccinated individuals can get a mild COVID-19 infection.



5 Key Messages

4. The vaccine is built on 20 years of research and science.

It is good to be careful when new things come along. Health experts took all the necessary steps to produce a safe vaccine, and it was built on 20 years of research and science.



5 Key Messages

5. Have questions? Please ask.

I'm glad that you want to know more. Ultimately, the choice is yours. If you have questions, talk with your doctor or healthcare provider soon. Go to myturn.ca.gov or text your zip code to GETVAX or VACUNA to get your free vaccine today.



3 Steps Post-Conversation

1

Acknowledge their agency and personal choice

“I want you to get vaccinated today, but ultimately it’s your choice.”

“I’m here as a resource to help you.”

2

Keep lines of communication open

Trust is a journey. Give folks a way to reach you that you are comfortable with as they consider their decision.

3

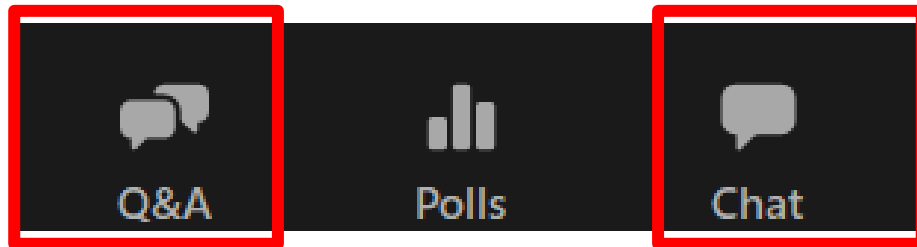
Offer to find a vaccine

Offer myturn.ca.gov or have them text their zip code to GETVAX or VACUNA to find a free vaccine location in their neighborhood.



Questions & Answers and Discussion

During today's session, please use the Q&A panel to ask your questions.



Please use the Chat panel for discussion.

Resources & Poll

Rachel Jacobs, CDPH

Poll: Your feedback is appreciated

How confident are you in talking about COVID-19 vaccination with patients in the LGBTQ+ community?

1. Very confident
2. Confident
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Resources

- [VA58 LGBTQ+ Information Digest](#)
- [Equality CA LGBTQ+ COVID-19 Animated Video](#)
- [Equality CA Diversity, Equity, and Inclusion Training Courses](#)
- [VA58 English Pride Graphics](#)
- [VA58 Spanish Pride Graphics](#)
- [HHS LGBTQ+ COVID-19 Toolkit](#)



Toolkits, Fliers, Conversation Guides, and Videos

[#ThisIsOurShot Toolkit](#) [COVID-19 Crucial Conversations](#)

#THIS IS OUR SHOT **VACU NATE YA** **COVID-19 VACCINE CONVERSATIONS**
TOP 5 MESSAGES

SAFETY
The vaccine will protect you from getting very sick from COVID. Over 150 million Americans have been safely vaccinated and are now protected.

SIDE EFFECTS
Side effects are common. They are a sign your body is building up its defenses to protect you. Many people temporarily feel:

1. Sore arm (near site of vaccination)
2. Fatigue
3. Headache
4. Muscle pain
5. Joint pain

EFFECTIVENESS AND VARIANTS
Each vaccine is nearly 100% effective at preventing hospitalization and death from COVID and its variants! It will allow us to do the things we love and miss most. Vaccinated individuals can get a mild COVID infection.

SPEED
It's good to be careful when new things come along. Health experts took all the necessary steps to produce a safe vaccine, and it was built on 20 years of research and science.

QUESTIONS?
I'm glad you want to know more. Ultimately, the choice is yours. If you have questions, talk with your doctor or healthcare provider soon. Text your zip code to **GETVAX (438829)** to get your free vaccine today.

Help spread the truth about COVID vaccines.

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LANGUAGE DO'S & DON'TS

Do Say

- Vaccination
- A safe and effective vaccine
- Authorized by FDA based on clinical testing
- Get the latest information
- Keep your family safe; keep those most vulnerable safe
- Public Health
- Health / medical experts and doctors
- People who have questions

Don't Say

- Injection or shot
- A vaccine developed quickly
- Approved by FDA, Operation Warp Speed, Emergency Use Authorization¹
- There are things we still don't know
- Keep your country safe
- Government
- Scientists
- People who are hesitant, skeptical, resistant, or 'anti-vaxxers'

1. The perceived speed of vaccine development is a current barrier among many audiences. These recommendations are based partly on research conducted by the de Beaumont Foundation.

Messaging Elements That Resonate

Validate Concerns & Answer Questions
Acknowledge people's hesitancy rather than challenge it. Provide scientifically-based plain language answers.

Moments Missed
Reference things the people miss most. With many feeling COVID-19 fatigue, missed moments (especially human connections that we took for granted like visiting family and friends) serve as a powerful reminder of the ultimate end goal: vaccination as a pathway to the possibility of regaining these moments.

Protection
Emphasize "protecting myself, loved ones, and those in my community" (rather than "coming together as a nation").

Positive Tone
Be inviting and respectful as opposed to demanding. Acknowledge that the "choice is yours to make," which connects with the deeply rooted American value of liberty.

Messaging Elements That DON'T Resonate

Negativity & Fear
People push back when reminded of how difficult a year it's been—it tends to put them in a pessimistic, hopeless or frustrated frame of mind. Fear tactics are likely to backfire because this does little to generate trust or answer people's questions about vaccines.

Guilt
References to "many people already stepping up" can come off as pushy or accusatory. Those who are hesitant do not see themselves as "free riders" letting others take risks first; rather, they are worried about being "guinea pigs" for new COVID-19 vaccines.

Overpromising
Avoid claims that are unproven. Being overly rosy may cause concern. Be clear about the facts without any sugarcoating. Most people understand that mass vaccination is a long-term process. Avoid messages that inadvertently imply that vaccine availability will "flip the switch."

"Back to Normal"
Some just want things to "get back to normal," but for others, post-pandemic life will never be "the way it was." It's more about getting back to life rather than back to normal. Messages that focus on economic recovery—rather than public health—do not perform well.

Research, insights, & content provided by Kaiser Family Foundation, AdCouncil, & COVID Collaborative

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TOP 5 REASONS
Your Kids Should Get the COVID-19 Vaccine

With students heading back to in-person instruction, here are some things you need to know about protecting your children with the COVID-19 vaccine.

- Unvaccinated children are at risk of getting COVID-19**, and can suffer very serious complications, and potential long-term impacts that we are still learning about. The vaccine is safe and effective, and no long-term problems have been seen for any vaccine.
- The science behind the vaccine** has been under development and studied by The U.S. Department of Health and Human Services for over 20 years.
- Getting those who are eligible vaccinated** can help keep school communities safe.
- Kids have missed critical social and emotional milestones** with their school community. Getting them safely back to the classroom and their favorite afterschool activities helps support their mental health and wellness.
- Vaccines are safe, effective, and free**, regardless of insurance or immigration status.

Get your children back to school safely. Get them vaccinated against COVID-19 today! Learn more at [VaccinateALL58.com](https://www.vaccinateall58.com).

VaccinateALL58.com

Upcoming Webinar: CIC COVID Conversations

CDPH invites you to join the California Immunization Coalition (CIC) for an upcoming COVID Conversations #11 featuring Dr. Yvonne A. Maldonado, MD, FAAP, FPIDS, FIDSA, Stanford University School of Medicine and Dr. Robert Schechter, MD, MSC, Chief Immunization Branch, CDPH.

Topic: Preparing California for Infant/Toddler COVID-19 Vaccinations

When: Wednesday, June 22, 2022

Time: 6:00PM – 7:00PM PDT

To register and send questions in advance use the

[**COVID Conversations Webinar**](#)



For California COVID-19 Vaccine Providers



Every Monday:

My Turn and myCAvax Office Hours

Next session: Monday, June 27, 12PM

Every Friday:

Provider Office Hours

Next session: Friday, June 24, 9AM

Additional Support

Type of Support

Description

Updated 6.6.22



COVID-19 Provider Call Center

The COVID-19 Call Center for Providers and Local Health Departments is dedicated to medical providers in California and their COVID-19 response, specifically addressing questions about State program requirements, enrollment, and vaccine distribution, including the Vaccine Marketplace.

- Email: covidcallcenter@cdph.ca.gov
- Phone: (833) 502-1245, Monday through Friday from 8AM–6PM



Enrollment Support

For Provider enrollment support, please contact myCAvax Clinic Operations at

- Email: myCAvaxinfo@cdph.ca.gov

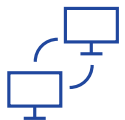


myCAvax Help Desk

Dedicated staff provide up-to-date information and technical support on the myCAvax system.

- Email: myCAvax.HD@Accenture.com
- Phone: (833)-502-1245, option 3, Monday through Friday 8AM–6PM

For training opportunities: <https://eziz.org/covid/education/>

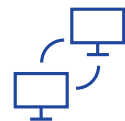


My Turn Clinic Help Desk

For **onboarding support** (those in the process of onboarding): myturnonboarding@cdph.ca.gov

For **technical support** with My Turn Clinic for COVID-19 and flu vaccines: MyTurn.Clinic.HD@Accenture.com or (833) 502-1245, option 4: Monday through Friday 8AM–6PM

For job aids, demos, and training opportunities: flu at <https://eziz.org/covid/myturn/flu/> and COVID at <https://eziz.org/covid/myturn/>



Archived Communications

For archived communications from the COVID-19 Provider Call Center about the California COVID-19 Vaccination Program visit

- Website: [EZIZ Archived Communications](#)

Special Thanks to Today's Presenters:

Erin Arendse, Equality CA

Jorge Salinas Reyes, Equality CA

Eric Ball, MD, FAAFP

Webinar Planning & Support:

Rachel Jacobs, Cheri Banks, Cecilia LaVu,
Blanca Corona, Hailey Ahmed, and Michael Fortunka



Thank you for your commitment to protect the health
and well-being of all Californians



And for joining today's webinar!