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](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

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

Erin Arendse and Jorge Reyes Salinas, Equality CA
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.
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 $\rightarrow$ Man $\rightarrow$ Masculine $\rightarrow$ Attracted to Women
  - Female $\rightarrow$ Woman $\rightarrow$ Feminine $\rightarrow$ Attracted to Men
BREAKING IT DOWN: MULTIPLE SPECTRUMS

- Sex Assigned at Birth
- Gender Identity
- Sexual Orientation
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: 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.
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

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](http://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

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

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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
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](https://californiaimmunizationcoalition.org/events/cic-covid-conversations-11)
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

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| 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!