Vaccine Hesitancy Among Ukrainian New Arrivals

Immunization Branch California Department of Public Health



Questions

During today's session, please use the Q&A panel to ask your questions so presenters can respond directly.



Resource links will be dropped into the "Chat."



Housekeeping

Reminder to Panelists:

- Please mute yourself when not speaking.
- Please monitor the Q&A panel for questions you may be able to answer.

Reminder to Attendees:



Today's session is being recorded. Today's slides and recording will be emailed to participants .



If you have post-webinar questions, please email Billie Dawn Greenblatt at billiedawn.greenblatt@cdph.ca.gov



Speakers



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Acknowledgement

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- 1. <u>Connecting with Ukrainian</u> <u>Refugees: Meeting Their Needs</u> <u>with Better Care and Key Services</u>
- 2. <u>Fostering COVID-19 Vaccine</u> <u>Confidence in Russian and</u> <u>Ukrainian Speaking Communities</u>





Objectives



- 1) Discuss some of the unique physical and mental health needs of Ukrainian new arrivals.
- 2) Review strategies for building positive relationships with Ukrainian new arrivals.
- 3) Understand health requirements for the U4U program in CA, including vaccinations and testing.
- 4) Review key resources, benefits, and services available to new arrivals through the US and California state governments.



What is a Refugee?

- According to the <u>UN Refugee agency</u>, a refugee is "someone who had been forced to flee his or her country because of persecution, war or violence. A refugee has a well-founded fear of persecution for reasons of race, religion, nationality, political opinion or membership in a particular social group. Most likely, they cannot return home or are afraid to do so. War and ethnic, tribal and religious violence are leading causes of refugees fleeing their countries.
- 52% of all refugees and other people in need of international protection come from just three countries: <u>Syria</u>, <u>Ukraine</u>, and <u>Afghanistan</u>."



Ukrainian New Arrivals

- 51 million internally displaced people in the Ukraine as of May 2023
- 6.2 million refugees from Ukraine have been recorded globally (as of July 2023)
- In 2022, President Biden announced, "<u>Uniting for Ukraine</u>" and later "<u>Additional Ukraine Supplemental Appropriations</u> <u>Act, 2022</u>" which create funding and support infrastructure for U.S. states to accept Ukrainian arrivals.
- Since escalation of Russian aggression, California has taken in one of the <u>largest Ukrainian communities in the U.S.</u>
- In response, the <u>CA Department of Public Health</u>, and <u>CA</u> <u>Department of Social Services</u> have both put together extensive resources for arrivals and those supporting them.

USA for UNHCR



Ukrainian			
New	Arrivals		

U4U Arrivals by CA Counties (9/14/23)							
County	# of Supporter Applications*	% CA	Estimated Arrivals, n (%)				
TOTAL	34056	100	17709				
Los Angeles	10760	31.6%	5595	31.6%			
Sacramento	8473	24.9%	4406	30.6%			
San Diego	2177	6.4%	1132	6.4%			
Santa Clara	1837	5.4%	955	5.4%			
Orange	1768	5.2%	919	5.2%			
Placer	1706	5.0%	887	5.0%			
San Francisco	1064	3.1%	553	6.3%			
Contra Costa	954	2.8%	496	2.8%			
Alameda	881	2.6%	458	2.6%			
San Mateo	841	2.5%	437	2.5%			
San Bernardino	282	0.8%	147	0.8%			
Stanislaus	241	0.7%	125	0.7%			
Riverside	380	1.1%	198	1.1%			
Fresno	362	1.1%	188	1.1%			
Ventura	291	0.9%	151	0.9%			
El Dorado	244	0.7%	127	0.7%			
Marin	240	0.7%	125	0.7%			
Yolo	228	0.7%	119	0.7%			
Sonoma	146	0.4%	76	0.4%			
Santa Barbara	142	0.4%	74	0.4%			
San Joaquin	118	0.3%	61	0.3%			



PATHWAYS FOR ENTRY INTO U.S.

Humanitarian Immigrants

- People granted asylum
- Special immigrant visa holders from Iraq and Afghanistan
- Cuban and Haitian entrants
- Humanitarian parolees from Ukraine
- Temporary Protected Status
 - Examples include student or with work visas
 - Able to stay in county temporarily for work and travel
- Uniting for Ukraine Program
 - Pathway to temporary entry into US for a 2-year period





Uniting for Ukraine Program

- Pathway to temporary entry into the US for a 2year period.
- Participants must have U.S. sponsor who agrees to provide them with financial support.
- Sponsors can be churches, friends, family, etc.
- Many new arrivals are families consisting of women and children or children traveling solo, this is because the Ukrainian government has restricted men ages 18-60 from leaving the country due to the war.



Masha Djuric, Public Health Nurse Supervisor, CoSD

Vaccination Requirements in CA for New Arrivals



Vaccination Requirements

To stay in the US, new arrivals must receive or provide proof of the following **within 90 days of arrival to the US:**

- Polio, Measles, & COVID-19 vaccinations
- Tuberculosis (TB) IGRA blood test
 - Ages 2+

Uniting for Ukraine (U4U) Medical Screening and Vaccine Attestation

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U4U Arrivals in the U.S. must complete the medical screening and <u>vaccine</u> <u>attestation requirements</u> (<u>bit.ly/U4UAttestation</u>) or they will be considered in violation of their United States Citizenship and Immigration Services (USCIS) humanitarian parole.

Within 90 days after arrival to the United States, you must attest to having received:

- Polio, Measles, & COVID-19 vaccines
- · Tuberculosis (TB) IGRA blood test (ages 2 years and older)

Facts about Tuberculosis (TB):

- TB is commonly spread through the air. Anyone can be infected with TB, even those who had the BCG vaccine.
- TB is a serious illness. You can have TB germs in your body and not feel sick. But taking medicine can prevent you and your family from getting sick.
- High quality, effective treatment is available in the U.S. at no or low cost.
- If your Tuberculosis IGRA blood test is positive, you need a chest X-ray.
- Persons in the U.S. with TB disease must be treated, and care is coordinated by county public health TB programs.
- TB can only be treated effectively with medication from a doctor.
- Your medical information is kept private and confidential by medical staff

For more information on the attestation including access to free services, visit the California Department of Public Health, <u>Office of Refugee Health Website</u> (<u>bit.ly/CDPHORH</u> or <u>bit.do/U4Uvaccines</u>).



Facts about Vaccines:

- Millions of people have been safely vaccinated in the U.S.
- Thousands of people take part in studies before vaccines are licensed by the Food and Drug Administration (FDA) in the U.S.
- Once licensed, there are systems that track health effects to make sure vaccines are safe for everyone.
- Children need certain vaccines before entering school or childcare in California.
- Vaccines are available in the U.S. at no or low cost.
- If you were immunized prior to arrival, please submit a valid vaccination record.



Vaccination Requirements

- Note: <u>As of 9/30/2023 Afghan and Ukrainian Humanitarian arrivals will not be eligible for Office of Refugee Resettlement (ORR)</u> <u>services</u>. This would also prohibit ORR programs from vaccinating and TB screening requirements for the attestation of new arrivals.
 - Derivative Ukrainian Parolee clients (e.g. spouse, child, guardian of a parolee) who arrive after September 30, 2023, would still eligible, if they are on a follow to join case with a client who arrived February 24, 2022 and September 30, 2023.
 - Similarly for Afghan Parolees, if the new arrival is joining a client with parole who arrived between July 31, 2021 and September 30, 2023.
 - Humanitarian arrivals 19+ will need to sign up for Medi-Cal (which can cover polio vaccine for attestation) or would need to private pay if they are not eligible for Medi-Cal or another county program.
 - <u>VFA providers</u> can offer all other vaccines to adults 19+, including measles, mumps, rubella.
 - COVID-19 is also available through Bridge Access Program providers.
 - Polio and other vaccinations for youth 18 and under are available through the Vaccines For Children (VFC) Program.

Please reach out to your <u>Local Health Department</u> for additional questions and support about this change.



Vaccine Requirements for School and Childcare

Assessing Ukrainian Immunization Records



This resource is designed to help local health departments, school nurses, and other health care providers assess immunization records from Ukraine.

Background

Since 2022, California has welcomed over 20,000 Ukrainian refugees as part of the <u>Uniting for Ukraine (U4U)</u> program. Ukrainians arriving through the U4U program must complete the <u>online tuberculosis and vaccine</u> <u>attestation</u> on the U.S. Citizenship and Immigration Services (USCIS) website within 90 days of arrival in the United States. In addition, children will need to receive required immunizations for school or child care in California. This guide will help you determine which immunizations are typically administered in Ukraine and whether or not they fulfill immunization requirements for school or child care entry in California.

What's Included in This Guide

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Californ	ia Department of Public Health, Immunization Branch	IMM-1470 (8/23)

ASSESSING UKRAINIAN IMMUNIZATION RECORDS TOOL

California has a robust school and childcare requirements for vaccination, and new arrivals are not exempt. Due to differences in vaccine availability, schedule, and rates in home country, many refugees will have a lot of catch up in order to attend school or childcare.

 Reminder: For a child to be enrolled in school, if they received OPV on or after 4/1/2016, child may need to repeat with IPV dose in U.S.



Understanding Vaccine Hesitancy in Population



VACCINE HESITANCY

"The delay in acceptance or refusal of safe vaccines despite availability of vaccination services "

People Are Either:

- Vaccine acceptors confidence in vaccines, believe they work and are safe, get vaccinated, strongly trust providers, immunize children
- Vaccine hesitant this group is growing, diverse group. Unsure about vaccines, delay or choose only some, sometimes are over concerned about side effects and efficacy, like trustworthy providers, and want info from them. Tend to under immunize children
- Vaccine rejectors reject all vaccines and very concerned about side effects, and doubt vaccines work. Generally small group of people. Don't trust doctors, get info from social media and conspiracy theories, don't immunize kids

<u>COVID-19 vaccine hesitancy among marginalized populations in the U.S. and Canada</u>



Common Concerns and Issues Impacting Vaccine Rates

Before the war, vaccination rates in Ukraine were among the lowest in Europe. Childhood vaccination coverage consistently fell below WHO target thresholds required to establish herd immunity for some of the most serious diseases.

- Fear of adverse events connected to vaccine
- General mistrust of government
- Myths and misconceptions spread from messengers trusted within the community such as churches and political groups
- Language and cultural barriers
- Dissatisfaction with and mistrust of healthcare providers
- Feeling judged or misunderstood
- Trauma





Fear of Adverse Events

- Getting sick from the vaccine especially if they are currently healthy
- Having history of poor experiences with faulty or mismanaged vaccines
- Unknown consequences of vaccine (e.g., Guillain-Barré Syndrome)



Misinformation via Russian social media campaigns in home nation

Vaccine misinformation can lead to increased vaccine hesitancy and reduced vaccination uptake

For countering vaccine misinformation public health authorities should focus on:



Mis-and-Dis-Information

- Mistrust in government connected to historic corruption within Ukraine, many Ukrainian new arrivals have expressed the following: "If something looks like it comes from government, it isn't trusted."
- Many Ukrainian new arrivals have misconceptions about vaccines caused by Russian-led social media mis-disinformation campaigns prevalent before the war
- One of the primary misconceptions among Ukrainian new arrivals which prevents uptake of vaccination is that vaccines use fetal tissue derived from abortions (so it is unchristian to be vaccinated)







Language and Cultural Barriers

- Limited English proficiency
- Not wanting to speak Russian
- Not enough Ukrainian providers or timely interpretation
- Not enough materials in Ukrainian
- Washington State surveyed Ukrainian New Arrivals 10 out of 12 people feel language was the big barrier to accessing health services and impacted their relationships with doctors.
- Need for Ukrainian medical translators and navigators and tools

Billie Dawn Greenblatt, Health Educator, CDPH

Strategies to Improve Messaging and Combat Vaccine Hesitancy



Language and Cultural Barriers

- <u>When appointment is made, ask patient which language they prefer and come prepared with interpreter.</u>
- Reminder: patients have a right to interpreter; kids cannot do it. Adults in the family can help, but patients should be encouraged to request a professional interpreter to prevent errors and bias.
- If an interpreter cannot be secured in time for the visit or meeting or if they going somewhere without an appointment, they or their provider can use the Language Line at 1-800-874-9426.
- The law states that they must be provided with an interpreter if requested.
- Ensure materials are available in both Ukrainian and Russian
- Speak directly to patient not interpreter
- Try not to switch thoughts midway through
- Avoid cultural sayings and slang when talking and communicating (remember interpretation can very widely from one culture to another)
- Contradict them respectfully



Trusted messengers and Community Partners

- Create and leverage relationships with vaccine acceptors as trusted messengers in their community.
 - Ask them why they chose to get vaccinated and how they talk with friends and family about their decision
- Join community without agenda to build trust
 - Recognize their trauma to better inform relationship building
- Understand which medical providers are trusted in the community (e.g., some may feel better seeing specialist rather than a primary care physician.) Explain the role of the primary care physician as a bridge to other needed services (e.g., PAPs, contraceptive care, diabetic care, etc.) and how they work alongside specialists to provide comprehensive care.



Keep Information Clear and Factual



Work with translator in advance when able



Make sure to discuss and translate sayings and aphorisms



Try to avoid using colloquialisms when communicating



Cultural Competency

Cultural competency means **being aware of your own cultural beliefs and values and how these may be different from other cultures**—including being able to learn about and honor the different cultures of those you work with.



Cultural Humility

- Don't make assumptions about community
- Be inquisitive ask about what you don't know or understand
- Listen with interest and curiosity
- Be aware of own possible biases (e.g., everyone also speaks Russian)
- Attempt to stay neutral and non-judgmental about what you hear
- Recognize inherent status of privilege (non-refugee)
- Be willing to learn from clients

Understand Trauma and Trauma Informed Approach

Centering your communication with clients and patients in empathy about what they might be going through emotionally due to current and historical circumstances



Brené Brown on Empathy vs Sympathy Trauma Informed Care Implementation Resource Center CA Surgeon General Trauma Informed Training



Stress and the Brain



Stress and the Brain



Motivational Interviewing

Motivational Interviewing is a strategy for supporting clients and patients in changing their mind about a health behavior. According to the site <u>Excellence in Motivational Interviewing</u>, motivational interviewing (MI) is:

- MI is a guiding style of communication, that sits between following (good listening) and directing (giving information and advice).
- MI is designed to empower people to change by drawing out their own meaning, importance and capacity for change.
- MI is based on a respectful and curious way of being with people that facilitates the natural process of change and honors client autonomy.

Communicating With Vaccine Hesitant Families: Proven Tools & Strategies <u>Click here to watch.</u> <u>Q & A PDF</u> Presentation Slides PDF



Tarek Salih, Medical Officer CDPH

Strategies to Improve Messaging



Use the "Truth Sandwich" to Address Myths

- 1. Start with the truth.
- 2. Indicate the misconception. Avoid amplifying the specific language if possible, and don't repeat what's not true.
- 3. Return to the truth. Always repeat truths more than lies.



Excerpted from <u>Communicating about the COVID-19 vaccines: Guidance and</u> <u>sample messages for public health practitioners</u> webpage Public Health Institute, Berkeley Media Studies Group



Example of "Truth Sandwich"

- Start with the truth: COVID-19 vaccination is the best way to build protection against the disease.
- Sandwich the myth: Some people mistakenly think that getting the disease is a better way to build immunity.
- End with the truth: However, the risk of severe illness and death from COVID-19 far outweighs any benefits of natural immunity. Updated COVID-19 vaccines are safe and effective and our best tool to protect ourselves and loved ones from COVID-19.





Conversation Methodology

aka Answering Tough Questions/Having Tough Conversations



To address patients concerns related to myths and misinformation, use the 3-5-3 method.



3 Steps to Initiating/Continuing Conversations


3 Steps to End the Conversation

2



"I want you to get vaccinated today, but ultimately it's your choice."

"I'm here as a resource to help you." 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.

Offer to find a vaccine

3

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





Strategies to Improve Messaging

- Use clear and consistent language
- Know you audience and understand what concerns they have
 - Stakeholder and public comments essential to feeling the pulse of communities
- Understand that anti-vaccination sentiment and misinformation is rampant
- Physicians and other healthcare providers are <u>still</u> trusted messengers and the personal connection between provider and patient is essential



Strategies to Improve Messaging

- 2021 National Immunization Survey-Adult COVID Module
- Assessed prevalence of a provider recommendation for COVID-19 vaccination, vaccination status, and attitudes towards vaccination via nationally representative cellphone survey in adults (≥18)
 - Likelihood of receiving ≥1 dose of a COVID-19 vaccination increased if respondent had received a provider recommendation
 - + no provider recommendation: 61.9% were vaccinated
 - +provider recommendation: 77.6% were vaccinated (adjusted prevalence ratio [aPR] = 1.12)

Source (slide courtesy of Wendy Kray, MPH):

Nguyen KH, Yankey D, Lu P, et al. "Report of Health Care Provider Recommendation for COVID-19 Vaccination Among Adults, by Recipient COVID-19 Vaccination Status and Attitudes — United States, April–September 2021." MMWR Morb Mortal Wkly Rep 2021;70:1723–1730. DOI: http://dx.doi.org/10.15585/mmwr.mm7050a1



Masha Djuric, Public Health Nurse Supervisor, CoSD

Scenarios



Scenario 1

Yesenia is a 20-year-old female. She has been reluctant to get her vaccines because she feels healthy, was vaccinated as a child, and has no pressing medical issues. What strategies might you use to support her in becoming vaccinated?



Scenario 2

Oleg is a 68-year-old retired engineer who is deeply religious and involved in his religious community in San Diego. He is married and has three adult children who also live near him. When asked about getting his COVID-19 vaccine he says that he would rather not but doesn't want to give details. In talking more, he begins to hint at some general misconceptions about the U.S. government and the COVID-19 vaccine. How might you help him decide to get vaccinated?



Scenario 3

Katya and Sergey have a wonderful toddler named Vlad. Both will soon begin working again, and you have been supporting them in getting ready to get Vlad into daycare. You expected that he would be missing some vaccines because of his age. They are both frustrated by the requirements for vaccination and are worried about the number of vaccine doses their son is expected to received.



Questions

During today's webinar, please use the Q&A panel to ask your questions so our subject matter experts can respond directly.







Anya Gutman, Health Educator, CDPH

Resources



Washington Department of Health Webinars

- Webinar: <u>Ukrainian Vaccination</u> <u>Records Webinar (recording)</u> | <u>Slides</u> <u>(PDF)</u> | <u>Transcript (PDF)</u>
- E course: <u>General health</u> <u>needs/resources for Ukrainian</u> <u>refugee arrivals</u>
- E course: <u>COVID-19 vaccine hesitancy</u> <u>in Ukrainian and Russian-speaking</u> <u>communities</u>
- Webinar: <u>https://nrcrim.org/authenti</u> <u>cally-involving-ukrainian-</u> <u>communities-public-health-response-</u> activities



About Modules Certificates

In this training, you will learn how to provide better care for Ukrainian new arrivals based on the



General Resources

Best Practices in Vaccine Outreach: National Resource Center for Refugees, Immigrants, and Migrants (NRC-RIM)

- Authentically Involving Ukrainian Communities in Public Health Response Activities Webinar <u>Recording</u> | <u>Slides</u> | <u>Website</u>
- <u>Utilizing Community Health Boards to Build Community Capacity</u>
- Social Support Services for RIM Communities: A Checklist for Health Departments
- <u>Community Engagement Toolkit</u>

Other Refugee Health Resources and Information:

- <u>Ukrainian Refugee Backgrounder</u> on Ukrainian conflict and cultural context of refugee arrivals (Cultural Orientation Resource Exchange [CORE])
- <u>Brief Overview for Clinicians Caring for Ukrainian New Arrivals</u> (Center of Excellence in Newcomer Health)
- <u>Resources for Ukrainian Arrivals</u> (California Department of Social Services)



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- New resource for clinicians and other health care providers.
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Shots for School

Welcome to Shots for School



En Español

News:

- The School and Childcare Roster Lookup (SCRL): This new tool allows School and Child Care staff to check if children meet immunization requirements based on records found in the California Immunization Registry (CAIR). Register for SCRL at CAIR Hub.
- **2022-2023 Audits:** Annual financial and compliance audits of public schools will include an immunization component for schools with kindergarten or 7th grade.

- <u>CDPH website and resource page</u> for school and child care staff as well as parents/guardians
- Includes information on Requirements, Implementation Steps, Medical Exemptions, Tools & Resources



Parents' Guide to Required Immunizations

Parents' Guide to Immunizations Required for School Entry

Students Admitted at TK/K-12 Need:

- Diphtheria, Tetanus, and Pertussis (DTaP, DTP, Tdap, or Td) 5 doses (4 doses OK if one was given on or after 4th birthday.
 3 doses OK if one was given on or after 7th birthday.)
 For 7th-12th graders, at least 1 dose of pertussis-containing vaccine is required on or after 7th birthday.
- Polio (OPV or IPV) 4 doses
 (3 doses OK if one was given on or after 4th birthday)
- Hepatitis B 3 doses (Not required for 7th grade entry)
- Measles, Mumps, and Rubella (MMR) 2 doses
 (Both given on or after 1st birthday)
- Varicella (Chickenpox) 2 doses

These immunization requirements apply to new admissions and transfers for all grades, including transitional kindergarten.

Students Starting 7th Grade Need:

- Tetanus, Diphtheria, Pertussis (Tdap) —1 dose (Whooping cough booster usually given at 11 years and up)
- Varicella (Chickenpox) 2 doses (Usually given at ages 12 months and 4-6 years)

In addition, the TK/K-12 immunization requirements apply to 7th graders who are new admissions.

Records:

California schools are required to check immunization records for all new student admissions at TK/Kindergarten through 12th grade and all students advancing to 7th grade before entry. Parents must show their child's Immunization Record as proof of immunization.

IMM-222 School (4/23)

California Department of Public Health • Immunization Branch • ShotsForSchool.org

JCDPH

Flyer in English

посібник для батьків по імунізації ОБОВ'ЯЗКОВО ДЛЯ ВСТУПУ ДО ШКОЛИ

Починаючи з 1 липня 2019 року

Учням, зарахованим до ТК/К-12 потрібно мати наступне:

- Дифтерія, правець і кашлюк (DTaP, DTP, Tdap aбo Td) 5 доз (4 дози прийнятні, якщо одна з них була введена на 4-тий день народження або пізніше 3 дозя достатні, якщо одна з них була введена на 7-ий день народження або пізніше.) Для учнів 7-12 класів потрібна принаймні 1 доза вакцини, що містить кашлюк, на 7-ий день народження або пізніше.
- Поліомієліт (ОПВ або ІПВ) 4 дози (З дози достатні, якщо одна з них була введена на 4-й день народження або пізніше)
- Гепатит В З дози (Не потрібно для вступу до 7-го класу)
- Кір, паротит і краснуха (MMR) 2 дози (обидві вводяться в 1-й день народження або пізніше)
- Вітряна віспа 2 дози

Ці вимоги щодо імунізації поширюються на нещодавно прийнятих та переведених до всіх класів, включаючи перехідний дитячий садок.

Учням 7 класу потрібні наступні щеплення:

- Правець, дифтерія, кашлюк (Tdap) 1 доза (Бустерну дозу вакцінації від коклюшу зазвичай призначають у віці від 11 років)
- Вітряна віспа 2 дози (зазвичай призначаються у віці 12 місяців і 4-6 років)

Крім того, вимоги щодо імунізації ТК/К-12 поширюються на учнів 7-го класу, які:

- раніше мали дійсне звільнення через особисті переконання, заявлені до 2016 року при вступі до Перехідного дитячого садку/дитячого садку по 6-й клас,
- є нещодавно прийнятими.

Записи:

Школи Каліфорнії зобов'язані перевіряти записи про імунізацію всіх нових учнів, яких зарраховують до Перехідного дитячого садку / дитячого садку по 12-й клас включно, а також усіх учнів, які переходять до 7-го класу перед вступом. Батьки повинні показати довідку про щеплення своєї дитини як підтвердження імунізації.

IMM-222 Ukrainian School (1/19) California Department of Public Health - Immunization Branch - ShotsForSchool.org

Flyer in Ukrainian



WHO Immunization Dashboard

Regions

Step 1

Vaccine schedule

- Use WHO tool to determine what vaccines are given abroad: <u>WHO</u> <u>Immunization Data Search</u>.
- Under "all topics" select "vaccine schedule" and choose the country of interest under "all regions & countries."
- In following window, "filter by disease."



Step 2



Ministry of Health Ukraine





Ministry of Health Ukraine



Digital Vaccine Record (DVR)

Users can now retrieve both their COVID-19 Vaccine **Records and California Immunization Records!**

🗶 State of California	English Español 简体字 MORE	× 1	
Digital Vaccine Record			
		6:11	
Welcome to the Digital Vaccine Record (DVR) portal		myvaccinerecord.cdph.ca.gov	
		Case State of Cathornia English Español 简体字 MORE ✔	
Get a digital copy of your vaccine record. Just enter a few de Record with a QR code or your California Immunization Reco		Digital Vaccine Record	
vaccination wherever you go.		California Immunization Rec	
f you are a parent or guardian and have multiple vaccine rea email address, enter each Digital Vaccine Record request se	0	Name: Test User Date of Birth: 11/25/1999	
NOTE: It is possible that some or all vaccine doses you recei	ved were not reported to the California Immunization	Date Issued: 10/04/2022	
Registry (CAIR), and therefore your Digital Vaccine Record r accinations were required to be reported to CAIR and effect eported.		Coronavirus (COVID-19)	
	Dependence of Defense ladies Uselab Comission on	Diphtheria, Tetanus, Acellular Pertussis (DTP/aP)	
f you received your vaccinations from a federal agency (e.g Veterans Affairs), you may need to contact those agencies f	•		
f you have questions about your vaccination record, <u>visit ou</u>	r FAQ	Haemophilus influenzae type B (Hi	
		Hepatitis A (HepA)	
Please select from one of the options below:			
O I want my COVID-19 Vaccine Record with QR co	de	Hepatitis B (HepB)	
O I want my California Immunization Record		Human Papillomavirus (HPV)	
O I want both			
		m n < >	

Includes all routine immunizations

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- Shows vaccines that may be • overdue, upcoming & completed
- Available in multiple languages (Simplified & Traditional Chinese, Arabic, Spanish, Tagalog, Vietnamese, Korean)
- May be used as documentation for school or child care immunization requirements



Find BAP Pharmacies



Find COVID-19 vaccine locations near you (vaccines.gov)

COVID-19 Access (covidaccess.com)



How to Pay for Vaccines

New CDC resource covers:

- Private Insurance
- Medicare
- Medicaid
- Military
- No Insurance (for adults and children)



COVID-19 Vaccine Resources

How to Pay for Vaccines (CDC)

How Will I Pay for My Family's Vaccinations? - Vaccinate Your Family



CA DMHC Resource

HEALTH CARE RIGHTS

COVID-19 Tests, Vaccines & Treatment

Health Plan Enrollees Have the Right to COVID-19 Tests, Vaccines and Treatment with No Cost-Sharing

Health plans' regulated by the California Department of Managed Health Care (DMHC) must cover COVID-19 tests, vaccines and treatment² with no health plan prior authorization or enrollee cost-sharing. Enrollee cost-sharing includes co-pays, co-insurance, deductibles or other enrollee out-of-pocket costs not including health plan premiums.

Continued Access to COVID-19 Tests, Vaccines and Treatment with No Cost-Sharing

California state laws add six months to the federal COVID-19 public health emergency requirements on health plans to continue covering COVID-19 tests, vaccines and treatment from any licensed provider (inor out-of-network) with no prior authorization or enrollee cost sharing. The public health emergency ends on May 11, 2023, and state laws extend these requirements for six months through November 11, 2023.

After November 11, 2023, enrollees can continue to access COVID-19 tests, vaccines and treatment with no prior authorization or cost sharing when they access these services through their health plan's network. Health plan enrollees can be charged cost-sharing only if these services are provided out of network after November 11, 2023.

Did You Know? Health plan enrollees have the right to eight free over-the-counter at-home COVID-19 tests a month. Health plans must continue to cover the same number of at-home tests after the public health emergency. Contact your health plan for details.

> Contact the DMHC Help Center at <u>www.HealthHelp.ca.gov</u> or 1-888-466-2219. You can also find more information and resources at <u>www.covid19.ca.gov</u>.

¹ Commercial and Medi-Cal managed care plans regulated by the DMHC.

² Treatment means therapeutics approved or granted emergency use authorization by the federal Food and Drug Administration for treatment of COVID-19 when prescribed or furnished by a licensed health care provider acting within their scope of practice and the standard of care (HSC Section 1342.2 (h)(1)).

980 9th Street, Suite 500 Sacramento, CA 95814

Need Help?

Visit HealthHelp.ca.gov to submit a complaint form online or call 1-888-466-2219

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Frequently Asked Questions (FAQs)

Where can I find more information about COVID-19 tests, vaccines and treatment?

Your health plan should provide you with information about how to get COVID-19 tests, vaccines and treatment. You can also find more information at <u>www.covid19.ca.gov</u>.

How do I get a free at-home COVID-19 test?

Health plans are required to cover eight free over-the-counter at-home tests per covered individual per month. Contact your health plan directly for help to get free at-home COVID-19 tests, or to find other COVID-19 testing options. You can also visit <u>www.covid19.ca.gov</u> for more information.

What should I do if I receive a charge or bill for receiving a COVID-19 test, vaccine or treatment?

If you have health coverage through a health plan and receive a charge or bill related to the coverage or administration of a qualifying COVID-19 test, vaccine or treatment, you should first contact your health plan to file a grievance, sometimes called an appeal, and include a copy of the bill.

The health plan will review the grievance and should ensure you are not charged or are reimbursed if you already paid a bill. If you do not agree with your health plan's response or if the plan takes more than 30 days to fix the problem, you should contact the DMHC Help Center at <u>www.HealthHelp.ca.gov</u> or **1-888-466-2219**.

What happens when the federal Public Health Emergency ends on May 11, 2023?

California state laws add six months to public health emergency requirements on health plans to continue covering COVID-19 tests, vaccines, and treatment from any licensed provider (in- or out-of-network) with no enrollee cost-sharing or prior authorization. After November 11, 2023, enrollees can continue to get COVID-19 tests, vaccines and treatment with no prior authorization or cost sharing when they access these services through their health plan's network. Health plan enrollees can be charged for cost-sharing only if these services are provided out of network after November 11, 2023.

What happens when California's State of Emergency ends?

There are no changes to enrollee access to COVID-19 tests, vaccines or treatment when the California State of Emergency ends.

What if I don't have health insurance?

There are many options you can explore to <u>find health care coverage</u> that fits your needs. Additionally, the Department of Health Care Services (DHCS) is accepting claims for individuals enrolled in the COVID-19 Uninsured Group Program. Individuals must apply for the COVID-19 Uninsured Group Program through a Medi-Cal Qualified Provider (QP). More information is available on the <u>DHCS website</u>.

Visit www.covid19.ca.gov for more COVID-19 information and resources.

February 17, 2023

980 9th Street, Suite 500 Sacramento, CA 95814 Visit HealthHelp.ca.gov to submit a complaint form online or call 1-888-466-2219 Managed

CA Department of Managed Healthcare Resources



Additional Resources

EZIZ	ENHANCED BY Google
Home	Immunization Resources for Ukrainian Arrivals
Vaccine Programs	This page contains immunization resources for Ukrainian arrivals through the Uniting for Ukraine program, their healthcare providers, local health departments, and community partners.
Vaccine Management	Ukrainians arriving through the Uniting for Ukraine program must complete the
Storage Units	online tuberculosis and vaccine attestation on the U.S. Citizenship and Immigration Services (USCIS) website within 90 days of arrival in the United States.
Temperature Monitoring	To schedule an appointment for required vaccinations or tuberculosis screening, visit
EZIZ Training	the Refugee Health Assessment Program County Clinics page to check if your county has a Refugee Health clinic.
Job Aids & Resources	If your county does not have a Refugee Health clinic, these resources may assist with free or low-cost immunizations:
Contact VFC Phone: 1-877-243-8832 Business hours: Monday - Thursday: 9 am - 4:30 pm Friday: 9 am - 4 pm Fax: 1-877-329-9832 Find a VFC field representative in your area	 Some local health departments offer free or low-cost vaccines or may have information about other providers in their community. Vaccines for Children (VFC) and Vaccines for Adults (VFA) providers offer free or low-cost vaccines for eligible children and adults. Visit My Turn to book your COVID-19 and flu vaccines. Local pharmacies also offer immunizations for older children and adults, but the cost is typically higher than the locations mentioned above. Check with the pharmacy about the cost.
 Find other VFC provider offices in your area Send us your comments at MyVFCVaccines@cdph. ca.gov Sign up to receive EZIZ news and 	General Information • U4U Medical Screening and Vaccine Attestation flyer Ukrainian • Vaccine Information Statements (CDC) Ukrainian Russian (Immunize.org) • Vaccinate All 58 Ukrainian Russian • Get the Facts on COVID-19 Campaign Ukrainian Russian (University of Minnesota) • California Immunization Registry Notice to Patients and Parents Ukrainian Russian

Vaccine Information Statements (CDC) | Ukrainian | Russian (Immunize.org)

Access these resources at the <u>EZIZ page for</u> <u>Ukrainian Resources</u>



Find VFC Sites for Clients



Thank you!

