



Best Practices for Vaccine Uptake for Low-Income Latino Communities

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EXECUTIVE SUMMARY

This report focuses on efforts undertaken by La Clinica del Pueblo to provide insights regarding best practices for vaccine uptake for low-income Latino communities. Using a participatory methodology called World Cafe, we engaged Promotores de Salud (Health Promoters) in group discussions to gather insights and develop collective knowledge on best practices for vaccination campaigns. The session was held in July 2024 with 19 participants.



PROMOTORES DE SALUD AT LA CLINICA DEL PUEBLO:

Promotores de Salud, or Community Health Workers, play a vital role at La Clinica del Pueblo by supporting community outreach, providing individual and group health education, offering social support, and engaging in advocacy. During the COVID-19 pandemic, they were a crucial part of our vaccination campaign efforts, assisting patient registration for vaccination appointments, distributing PPE (Personal protective equipment), and educating the community.

Given the proven public health strategy that Promotores de Salud are, and that the Latino immigrant community had among the highest incidence and transmission rates of COVID-19 in the Washington DC metropolitan area¹, we set out to understand on a deeper level the barriers faced by the community and the role promotores could play in addressing them. To achieve this, we implemented a series of community-based data collection strategies throughout the pandemic.



COMMUNITY BARRIERS & ENABLERS TO VACCINE ACCESS:



From 2021 to 2023 La Clinica del Pueblo conducted several participatory methodologies to capture barriers to vaccination for the low-income Latino immigrant community. Our 2021 white paper [“Mapping Barriers and Enablers of COVID-19 Vaccine Uptake”](#)² showed that the primary obstacles to COVID-19 vaccination were lack of confidence in the vaccine (36%), language barriers (18%), and challenges of taking a day off from work (18%).

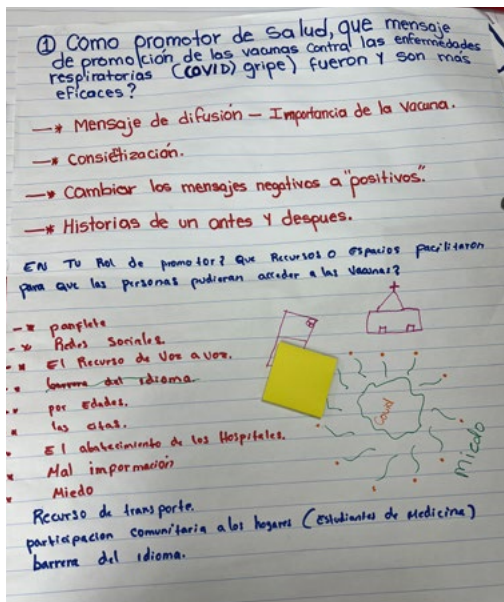
These barriers were further validated by our 2023 white paper [“Exploring Obstacles to Covid-19 And Flu Vaccination Uptake Among Low-Income Latino Immigrants in the Washington, D.C. Metropolitan Area Through a Participatory Rapid Appraisal.”](#)³ This study, conducted after the end of the public health emergency, highlighted how several factors heighten the populations vulnerability to severe complications from respiratory infections. These include limited access to health insurance due to immigration status, type of employment, inadequate availability of culturally tailored healthcare services, and the routine experience of discrimination when seeking healthcare. Many of these complications could be prevented through timely vaccinations.

Building on the findings of our 2023 white paper, which underscored structural and systemic barriers to vaccination, one key recommendation was that health departments should leverage Community Health Workers to amplify public health campaigns as they are trusted community messengers. Guided by this recommendation, we convened group discussions with our Promotores de Salud at La Clinica to learn what barriers to vaccine uptake they saw in the community and what messaging and strategies worked to overcome those barriers during the COVID public health emergency.

METHODOLOGY:

The World Café methodology consists of dividing the promotores into groups of 4 or 5 participants, at 4 different tables which have poster paper and markers for notetaking. There are three rounds of questions, and the groups rotate randomly in between each question except for one participant at each table who is labeled the “table host” and is tasked with sharing the insights of their previous group to their new group. The three questions asked were:

1. As a community health worker, what health promotion messages against respiratory diseases (COVID and flu) were and are most effective? / *Como promotor de salud ¿qué mensajes de promoción de la salud contra las enfermedades respiratorias (Covid y gripe) fueron y son más eficaces?*
2. In your role as a community health worker, what resources or spaces facilitated access to vaccines for people? / *En tu rol de promotor de salud ¿qué recursos o espacios facilitaron para que las personas pudieran acceder a las vacunas?*
3. How can we better the healthcare system to generate trust with the Latine immigrant community? / *¿Cómo podríamos mejorar el sistema de salud para generar confianza con la comunidad inmigrante latina?*



The table host takes notes throughout the discussion of these questions, and shares insights from all their discussions at the end of the session.

ANALYSIS:

After our World Cafe with the Promotores de Salud, La Clinica's Health Equity team analyzed video recordings of our Promotores responses as well as their written notes to uncover repeated themes and insights relating to strengths and challenges of vaccine dissemination programs.

- 1. Question 1:** As a community health worker, what health promotion messages against respiratory diseases (COVID and flu) were and are most effective? / *Como promotor de salud ¿qué mensajes de promoción de la salud contra las enfermedades respiratorias (Covid y gripe) fueron y son más eficaces?*
- **INFORM** what the vaccine is, what its intended purpose and side effects are, and what the effects of COVID can be for those who are unvaccinated. Also inform what other things one can do to keep themselves and their community safe, such as handwashing and masking when sick. Currently, the community needs to be informed on the necessity for continued vaccination against COVID, even post pandemic.
 - The importance of informing the community was illustrated through a participant who said *"No one wanted to get vaccinated because they were scared of the secondary effects [of the vaccine]...but they were very different from the secondary effects of COVID...It wasn't the vaccine, but rather the virus that was hurting us... And people had this problem, they didn't understand the difference between what the vaccine is and what COVID is." / "Nadie quería vacunarse porque tenían miedo a los efectos secundarios [de la vacuna]... pero era muy distinto a los efectos secundarios del COVID... No era la vacuna, si no la enfermedad en sí que nos lastimaba...Y la gente tiene ese problema, no entiende la diferencia entre la vacuna y lo que es el COVID."*
- Appeal to **COMMUNAL NEEDS** – vaccination is not just to protect you but can also protect your family and the more vulnerable members of your community (children, the elderly, the sick).

- **ADDRESS BARRIERS** – Connect patients with FREE vaccination, give information in appropriate language about where to access vaccination resources. Provide additional incentives such as food distribution.
 - **METHODS USED** – Face to face conversations, flyers, signing people up for vaccination appointments, distributing additional services (i.e. food), social media posts. They emphasized the importance of positive messaging.
2. **Question 2:** In your role as a community health worker what resources or spaces facilitated access to vaccines for people? / *En tu rol de promotor de salud ¿qué recursos o espacios facilitaron para que las personas pudieran acceder a las vacunas?*

When asked about the tools and spaces that helped people access vaccines, points that were repeatedly brought up included:

- **Go into communities** rather than depending on them coming to you – this includes going to churches, schools, pharmacies, and community clinics.
- **Rely on people with community reach to relay the message** – people want it to come from a source they trust.
- In addition to educating the community, also **provide resources** to curb viral transmission such as hand sanitizer and masks.
- They also spoke to the necessity of **tools that promote access** to the vaccine resources being promoted, such as **transportation** to vaccination sites (physical access) or the provision of **interpreters** (language access). This is further illustrated by the following participant comments:
 - *“The resource of transportation is very important because many people don’t have access to a vehicle...they don’t have a church or a hospital close by where they can acquire information or the vaccine” / “El recurso de transporte es muy importante porque muchas personas no tienen acceso a un vehículo...no tienen una iglesia o un hospital cercano a donde ir a adquirir esta información o a donde ir a adquirir la vacuna.”*
 - *“Language barriers in this country were very bad...here the language is English and many people do not speak it. There was a problem to be able to communicate oneself and obtain information” / “La barrera del idioma en este país fue algo muy mal...aquí el idioma es inglés y muchas personas no lo hablan. Hubo un problema para poder comunicarse y poder adquirir información.”*

Many of the points brought up by our promotores related to the decentralization of the provision of health education and services in order to increase access.

3. Question 3: How can we improve the healthcare system to generate trust with the Latine immigrant community? / *¿Cómo podríamos mejorar el sistema de salud para generar confianza con la comunidad inmigrante latina?*

Lastly, we asked the Promotores how we could better the healthcare system in a way that generates trust with the immigrant Latine community:

- Guaranteeing **culturally and linguistically appropriate care** through the use of interpreters. A participant shared:
 - *“To better the healthcare system, and the help to our community, [we need] bilingual people to act as interpreters.” / “Para mejorar el sistema de salud, y la ayuda más que nada a la comunidad, [se necesita] personas bilingües que sirvan como intérpretes.”*
- Improving **health education**.
- **Making healthcare free** or subsidized, or implementing a universal healthcare system.
- **Making vaccination more physically accessible** by bringing vaccine sites to people’s communities, making home visits, or increasing access to transportation to vaccination sites.



DISCUSSION:



To validate the findings, we triangulated the information collected through the World Cafe by comparing it to a secondary source and previous participatory white papers published by La Clinica as part of the Unidos Esperanza project. For example, we consulted an implementation support guide on “The role of community health workers in COVID-19 vaccination”⁴ developed by the World Health Organization (WHO) & UNICEF. This guide emphasizes many of the best practices our Promotores de Salud identified. Specifically, Community Health Workers are trusted members of the community which is vital to vaccination campaigns and makes them effective messengers to inform on vaccine importance, effects, and dispel misinformation.

This is emphasized by our 2021 white paper where it was recommended that “vaccine promotion campaign[s] should include trusted community voices that educate and reassure the Latinx community about taking the vaccine.” It is further validated by our 2023 PRA white paper where it was recommended that “Health departments should leverage Community Health Workers to amplify public health campaigns as they are trusted community messengers.”

The WHO & UNICEF report also showcases that Community Health Workers can be a connector between the community and available resources, such as scheduling vaccination appointments and arranging transportation to the vaccination site. Our 2021 white paper further emphasizes the importance of providing conveniently located vaccination services with navigation, elaborating “Vaccination venues must be geographically accessible...it is important to have promotores on site to help people complete forms and answer questions or concerns...”

PROMOTOR-LED VACCINATION CAMPAIGN BEST PRACTICES:



Based on the insights and recommendations from our Promotores de Salud, which has been consistent through multiple methodologies over the years, La Clinica continues to affirm the following best practices for future vaccination campaigns:

- Create culturally and linguistically appropriate public health campaigns that inform the community on the purpose and effects of the vaccine, as well as the potential impacts of not being vaccinated. Emphasize the importance of keeping up with vaccines, even post pandemic. Appeal to communal values through reminders that being vaccinated not only protects the individual, but also vulnerable members of the community. Utilize positive messaging.
- Address barriers to vaccination by connecting patients with free vaccination and giving vaccination information in the appropriate language. It can also be effective to provide additional incentives to vaccination, such as distributing food at a vaccination site.
- Leverage Community Health Workers to amplify vaccination campaigns as they are trusted community messengers.
- Make vaccines physically accessible. Host vaccination campaigns in sites that are easily accessible to the community or provide transportation to access those sites. Staff vaccination sites with language-concordant staff or utilize medical interpreters.

CONCLUSION:

It is crucial to identify best practices for future vaccination campaigns on individual, communal, and systemic levels. At La Clinica del Pueblo, our Promotores de Salud provide invaluable knowledge on what worked and did not work during the COVID-19 pandemic regarding vaccination strategies. Their insights complement best practices in vaccination campaigns by capturing the effectiveness of certain messaging and strategies in the predominantly low-income Latino immigrant communities in the Washington DC metropolitan area, like those served by La Clinica del Pueblo.



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