

Union County Equity Plan
Report Demonstrating Progress
September 15, 2021

- 1. Please review the jurisdiction's response to questions #1 and #2 in the accepted equity documentation, as well as recent race/ethnicity data. Describe any improvements in equity gaps as evidenced in the data. Provide a status update on progress the LPHA and its partners have made to eliminate vaccine access barriers and implement plans to close vaccine equity gaps among specific racial and ethnic populations. Please be specific, provide an example of work about which the LPHA and its partners are particularly proud, and describe any tangible impacts in the community.*

In reviewing the data in the Union County Equity Plan there is evidence that vaccination rates among all racial/ethnic groups are continuing to increase. The increases vary a bit but are consistent in their upward trend which is good news and means progress is being made. The data may not include all of the potential increases we could see from mandates being implemented at the state and federal levels. It is possible these mandates will lead to increases in our vaccination rates. There were likely a number of people that had not yet gotten the vaccine but will not request an exception that will now go ahead and get it if they fall under the mandate. Recently we have also seen the first vaccine receive full FDA approval which could get some people that were waiting for this to go ahead and get vaccinated.

CHD is continuing to work closely with our Community Based Organizations (CBOs) and other community partners to eliminate vaccine access barriers and implement activities aimed at closing vaccine equity gaps. We recognize there are many issues contributing to the inequities that are best address by the CBOs, so CHD will support them in any way that we can in their efforts to build trust and increase access in the communities experiencing vaccine inequities and provide information that will help more people continue to opt for vaccine.

CHD is also continuing to explore the addition of a mobile vaccine unit to our resources that will increase low-barrier access options for all of our community including those experiencing inequities. CHD is also committed to offering vaccine clinics at a variety of community settings including schools (K-12 and Eastern Oregon University), community events, at businesses and in agricultural settings, and other locations when requested and we have staff available. We are continuing to look ahead to vaccine clinics for boosters potentially opening door for people that haven't yet been vaccinated to do so, and preparing for the younger age groups to be eligible and making sure we are meeting them in the places that are best for this group.

CHD and our partners are continuing to use diverse channels to provide information about vaccine safety, efficacy and where to get it in the most common languages used in our

community including social media, radio, mail, newspaper, town halls, and outreach events. We have information on how to get vaccinated translated into Spanish, Marshallese, Chuukese, Pohnpeian and Palauan and people can speak with someone in these languages if they have questions or need information about the vaccine.

Recently CHD was proud to be able to support one of our CBOs, Northeast Oregon Network (NEON), in vaccinating a group of agricultural workers. CHD was contacted by NEON who has been working specifically on conducting outreach and education among this group. Through this work they identified a group that was interested in getting the vaccine but they were leaving the area in a few days and due to their work hours and transportation barriers had a difficult time making it to our vaccine clinics or to a pharmacy. NEON asked if we had the Johnson and Johnson vaccine available because the one dose vaccine would be the best option since they were leaving the area, and also asked if we could help with transportation to our vaccine clinic or even go to their worksite in the evening to administer the vaccine. CHD gladly agreed to go to them to provide the vaccine in the evening after their work was completed for the day. NEON agreed to help with interpretation that was needed and a CHD staff member would provide the vaccine. The location was in an outlying community and the turnaround time needed to be quick, but we were able to make it happen in just a few short days and as a result able to provide about a dozen vaccines to people that would probably not have otherwise gotten it! These examples of working with our partners and doing whatever we can to get people the coverage they need to stay safe are definitely points of pride for our team.

Another point of pride is the information we have developed locally in multiple languages. CHD and our partners have developed and shared videos and written information via social media posts, on our websites, on flyers, and on mailed postcards in the most commonly used languages in our community. CHD has also promoted and participated in events hosted by our CBOs to reduce vaccine access barriers and close equity gaps. Here are a few highlights that show these efforts.

Multi-language vaccine clinic promotion videos (cut and paste for best result)

AylInn (Chuukese): <https://www.facebook.com/chdinc.org/videos/10158939883715569/>

Dale (Marshallese): <https://www.facebook.com/chdinc.org/videos/10158937378145569/>

Theresa (Spanish): <https://www.facebook.com/chdinc.org/videos/10158930283350569/>

Nancy (Spanish): <https://www.facebook.com/chdinc.org/videos/10158920292415569/>

Center for Human Development, Inc (CHD)
Published by George Thompson • March 17 •

COVID-19 VACCINE

It is of most to return to normal life as soon as possible. The most effective vaccines are the key to how we will slowly but surely return community activity to how COVID-19.

SIGN UP FOR VACCINE EMAIL UPDATES HERE:
WWW.CHDINC.ORG/SUBSCRIBE

REGULAR UPDATES ON OUR WEBSITE WWW.CHDINC.ORG/COVID19 AND SOCIAL MEDIA.

PLEASE CALL IF YOU HAVE ANY ADDITIONAL QUESTIONS
962-962-8800 OR EMAIL VACCINES@CHDINC.ORG

IF YOU KNOW SOMEONE OR HAVE A FAMILY MEMBER OR NEIGHBOR THAT IS HAVING DIFFICULTIES ACCESSING THIS INFORMATION WE ASK YOU TO PLEASE SHARE AND ENCOURAGE THEM TO CALL 962-962-8800

CHD

LA VACUNA CONTRA COVID-19

Todos queremos volver a la normalidad lo más pronto posible. Las vacunas más efectivas son la clave para lograr la reanudación comunitaria contra el COVID-19.

REGÍSTRATE AQUÍ PARA RECIBIR ACTUALIZACIONES DE VACUNAS POR CORREO ELECTRÓNICO:
WWW.CHDINC.ORG/SUBSCRIBE

ACTUALIZACIONES PERIÓDICAS EN NUESTRO SITIO WEB:
WWW.CHDINC.ORG/COVID19 Y REDES SOCIALES

POR FAVOR LLAME SI TIENE ALGUNA PREGUNTA ADICIONAL
962-962-8800 O ENVÍE UN CORREO ELECTRÓNICO A VACCINES@CHDINC.ORG

SI CONOCE A ALGUIEN O TIENE UN FAMILIAR O VECINO QUE TIENE DIFICULTADES PARA ACCEDER A ESTA INFORMACIÓN, LE PEDIMOS QUE LO COMPARTA Y LO ANIME A LLAMAR AL 962-962-8800

CHD

COVID-19 WA

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WWW.CHDINC.ORG/SUBSCRIBE

ACTUALIZACIONES PERIÓDICAS EN NUESTRO SITIO WEB:
WWW.CHDINC.ORG/COVID19 Y REDES SOCIALES

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WWW.CHDINC.ORG/COVID19 Y REDES SOCIALES

CHD

Northeast Oregon Network - NEON
March 15 •

Eligible Union County residents can get help signing up for the vaccine. Here is information in various languages on how to get information and help signing up.

Center for Human Development, Inc (CHD)
Published by IG Center for Human Development • April 9 •
Instagram •

Union County Vaccine Registration & Language Help

If you know someone or have a family member or neighbor that is having difficulties accessing this information we ask you to please share and encourage them to call one of the following:

Chuukese	Alexandrea Mailo (Chuukese), CANN(503) 586-8643 Alynn Lambert (Chuukese), NEON(541) 910-6312
Marshallese	Ronica Remiers (Marshallese), CANN(503) 735-5942 Dale Naba (Marshallese), NEON(541) 910-6308
Palauan	Benne Moses-Mesubed (Palauan), CANN(541) 786-8483
Pohnpeian	Kasilda Aldens (Pohnpeian), CANN(541) 786-3045
Spanish/Español	Teresa Aguilera (Spanish), NEON(541) 910-0336

[HTTPS://WWW.CHDINC.ORG/GET-VACCINATED](https://www.chdinc.org/get-vaccinated)
(541) 962-8800

Center for Human Development, Inc (CHD)
Published by IG Center for Human Development • March 18 •
Instagram •

Clinica de primero y segunda dosis de la vacuna contra la COVID-19 están abiertos:
Lunes, 29th de Marzo, 2021
Todos en la Fase 1A, Grupos 1, 2, 3 y 4 son elegibles y Fase 1B grupos 1-6
1B Grupo 6: • Adultos de 45 a 64 años con condiciones subyacentes que aumentan su riesgo* • Trabajadores agrícolas de temporada • Trabajadores de la industria de maíces • Trabajadores en plantas que procesan alimento

* Condiciones de salud subyacente con mayor riesgo definidas por Los Centros para el Control y Prevención de Enfermedades o CDC

- Cáncer • Enfermedad renal crónica • Enfermedad pulmonar obstructiva crónica o COPD) • Síndrome de Down • Condiciones del corazón como insuficiencia cardíaca o arteriopatía coronaria • Sistema inmune comprometido por un trasplante de órgano o por tener VIH • Obesidad o un índice de masa corporal mayor a 30 kg/m2 • Mujeres embarazadas • Anemia drepanocítica • Diabetes mellitus tipo 2

Para más información: <https://sharedsystems.dhsosha.state.or.us/.../ls3527A.pdf>
Para preguntas llame: 541-962-8800 o 541-910-0336

See Translation

CHD CLINICAS DE LA VACUNACIÓN CONTRA EL COVID-19	1B GRUPO 6 CITAS DISPONIBLES
<p>Clinica de primero y segunda dosis de la vacuna contra la COVID-19 están abiertos: Lunes, 29th de Marzo, 2021 Todos en la Fase 1A, Grupos 1, 2, 3 y 4 son elegibles y Fase 1B grupos 1-6</p> <p>1B Grupo 6: • Adultos de 45 a 64 años con condiciones subyacentes que aumentan su riesgo* • Trabajadores agrícolas de temporada • Trabajadores de la industria de maíces • Trabajadores en plantas que procesan alimento</p>	<p>* Condiciones de salud subyacente con mayor riesgo definidas por Los Centros para el Control y Prevención de Enfermedades o CDC:</p> <ul style="list-style-type: none"> • Cáncer • Enfermedad renal crónica • Enfermedad pulmonar obstructiva crónica o COPD) • Síndrome de Down • Condiciones del corazón como insuficiencia cardíaca o arteriopatía coronaria • Sistema inmune comprometido por un trasplante de órgano o por tener VIH • Obesidad o un índice de masa corporal mayor a 30 kg/m2 • Mujeres embarazadas • Anemia drepanocítica • Diabetes mellitus tipo 2

2. *Please review the jurisdiction's response to question #6 and provide an update on the LPHA and its partners' work to address the vaccine needs of migrant and seasonal farmworkers in the jurisdiction and share the outcomes of these efforts.*

CHD and our partners are continuing to conduct outreach and providing vaccine information to our agricultural workers and helping them access vaccine. CHD and Northeast Oregon Network (NEON), one of the CBOs funded to serve Union County, plan to focus on one-on-one outreach to our local agricultural workers using existing connections to this community. NEON also has an employee assigned as part of their job to work on providing education and outreach to the agricultural community. This staff member is reaching out to all of the farm owners they can identify to build relationships with them and provide information and educational visits where they bring Gatorade and snacks and talk about the vaccine and what to do if you get COVID. They are also distributing Personal Protective Equipment and connecting with people at hotels and where they may be living/staying after work hours to provide education. When there are larger groups, NEON with work with CHD to will help organize events or coordinate transportation to vaccine clinics or pharmacies. They also plan to hand out "care kits" that contain things that might be helpful after being vaccinated like Gatorade and food that will help people take care of themselves after receiving the vaccine. They are also working with owners to help them support employees in taking the day after getting vaccinated off in the event that the employee does have an immune response to the vaccine.

Recently we had an experience that demonstrates the outcomes of these efforts, see the story shared in our response to Question 1.

3. *The pandemic has demonstrated and elevated the structural barriers that perpetuate health inequities. To dismantle those structural barriers in the long-term so that health equity can be achieved across all populations statewide, transforming how public health works with communities to engage in multi-directional communication and dialogue with, share power with and center in decision making communities most affected by those inequities is essential.*

- a. *Please provide an example of feedback the LPHA and its partners received from a community experiencing vaccine inequities, how the LPHA and its partners worked collaboratively with the community to address the feedback and then shared back with the community the outcome or resolution.*

Very early in our COVID-19 response CHD recognized that we needed our partners to help us do the best possible job in meeting the needs of our community. Very early on we set up regular cooperator calls and meetings with a very broad group of stakeholders. This included representatives from CBOs that work closely with communities experiencing vaccine inequities. The focus of these meetings are to support partnership and collaboration so we are best able to meet the needs of our diverse community members. We gave space for everyone to share what they were seeing and give feedback on things we could to address inequities. One example that sticks out was when we were holding mass vaccination clinics. CHD and our partners discussed

having separate, population specific clinics for our community but the feedback we heard is that many of our community members experiencing vaccine inequities would actually prefer to go to the same vaccine clinic as everyone else rather than being singled out or having something separate just for them. At the same time one of our CBO partners did shared that sometimes members of the community experiencing inequities may feel nervous going to a vaccine clinic held at a location they have never been, doing something they have never done before, not knowing what to expect. This can be particularly true when you could also be feeling nervous about getting the vaccine. As a group we discussed how we might respond to this feedback and we came up with the idea of filming a video of the entire process at our vaccine event. This way, if people were wondering what it would be like to attend the clinic we could share the video with them so they would know what to expect. The result is a short video of our vaccine clinic and the steps from start to finish. We shared this back with our CBOs so they could share it with the communities they serve. A similar video was also made for Eastern Oregon University students, faculty and staff, featuring their mascot Monty the Mountaineer to help the EOU Community have an idea of what to expect at our vaccine events. This is a fairly simple but meaningful example of feedback we received from a community, how we collaboratively worked with the community to address the feedback and how we shared back the resolution. These videos can be viewed here:

CHD video: <https://www.facebook.com/chdinc.org/videos/10158904679160569/>

Monty video: <https://www.facebook.com/eouadmissions/videos/1814710608703238>

b. Please provide an example of how the LPHA and its partners have shared power with and centered the communities experiencing inequities in decision making to determine strategies to increase vaccine access for communities.

The structure CHD set up early on in our response was aimed at sharing power with our community and centering the communities experiencing inequities in decision making to determine strategies to increase vaccine access. Our regular meetings with CBOs focus on hearing input from each other and supporting each other in the efforts being made to address inequities. The CBOs know their communities and planned outreach and education accordingly and CHD is available to support them. They are also essential in giving CHD feedback on how to do our work in a way that would best meet the needs of the community.

One example of sharing of power and centering communities experiencing inequities was a vaccine postcard that was very collaboratively created and distributed to our community. One of our CBO partners expressed concerns at our regular meetings about members our community, often those who are elderly, that may not be connected to social media or use the Internet being able to obtain information about how to get vaccinated. They shared that other counties had sent a postcard out to the members of their community ages 65 and older. The group agreed that this would be a great idea and we engaged in a very collaborative process to create this postcard. There was a smaller work group of CBO representatives that did the initial work, we had some back and forth over email, and spent quite a bit of time during our regular meetings discussing the postcard. Time and care were put into the messages contained

on the card with input from all participating partners making sure that this message would resonate with our community and its residents. We wanted to try and address barriers to getting vaccine that people may have such as transportation. We wanted to give them options of different places to go. We also wanted to make sure that persons whose primary language is other than English would also be reached through this postcard. Three of our partners contributed to the cost of the mailing. A true collaborative effort where power was shared and representatives of the communities experiencing inequities were incorporated. This is the postcard that we developed and mailed.

It's Your Choice!

Why Get Vaccinated?

- It's safe, effective and free.
- It's the best way to stay healthy and protect our families.
- It's the fastest way to get back the personal freedoms that we all miss.

Did you know?

- Vaccines became available quickly because foundational research began decades ago.
- Vaccines cannot give you COVID-19 or interact with your DNA in any way.
- Vaccines provide a blueprint to your immune system on how to fight a virus.

We may be independent, but we're not immune.

Questions about vaccine safety?

Call your medical provider or dial 211.

We're Here When You're Ready!

Need help getting your vaccination? Union County has options!

- Call the Center for Human Development at (541) 962-8800, then press 8
- Call the Union County Wrap Line at (541) 962-1610
- Walk-ins available at Safeway, Walmart, and Bi-Mart pharmacies

Need a ride?

- Call Community Connection at (541) 963-2877
- Call Eastern Oregon Center for Independent Living at (541) 889-3119

¿Hablas Español?

Para obtener información sobre cómo hacer una cita para la vacuna contra COVID-19, por favor llame Teresa Aguilera al NEON (541) 910-0336.

For assistance in Chuukese, Marshallese, Palauan, or Pohnpeian visit:

<https://cann.us/resources/>

