

Implementation of immunization services within inclusive spaces such as immigration centers has the potential to improve vaccine hesitancy

Integration of Pharmacy Immunization Services at a Local Refugee/Immigration Center in an Urban Setting in Ohio

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Background

- Vaccine hesitancy is an important realm of public health which has been found to be enhanced in migrant groups¹⁻²
- Mistrust of medical professionals and historic experience of xenophobia are common causes of this hesitancy³⁻⁴
- Building immunization services that are inclusive and can integrate good referral services is necessary for aiding immigrant populations¹⁻⁴

Objectives

- To increase access to vaccines for a local refugee population
- To educate patients on the utility of the flu and COVID-19 vaccines
- To develop referral mechanisms with the Be Hope Immigration Center for future follow-up with HomeTown Pharmacy and local medical centers

Methods and Results

- Vaccine clinics set up in and marketed through the Be Hope Immigration Center in Dayton, Ohio
- Vaccinations given for free with pamphlets of information provided in the patients' native language
 - Specifically, the target population's native language is Kinyarwanda
- Implementation of a referral service within the immunization services for patients interested in primary care
- Overall, 15 patients participated in the immunization services. Additionally, two patients utilized referral services through a local clinical or primary care office.



Conclusions

- While the number of patients included in the project were limited, it was clear to the researchers that the impact of vaccine hesitancy was strong in this patient population.
- It was also discovered that much of the target population work 2nd or 3rd shift, indicating hesitancy to come in during their time off as well as highlighting the need for clinics during odd hours

Future Directions

- Investigate potential methods for engaging refugee population to address substantial vaccine hesitancy.
- Research specific reasons for vaccine hesitancy within this population and whether hesitancy is reserved for "optional" vaccines or all vaccines.
- Coordinate better access for refugees to receive vaccines (location and timing of clinics) based on refugee population needs assessment.

References

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