

CICT among Refugees, Immigrants, and Migrants: A Checklist for Health Departments

Case investigation and contact tracing (CICT) is an important tool for controlling the spread of COVID-19 and other infectious diseases. Consider the following actions when conducting CICT among refugee, immigrant, and migrant (RIM) communities.

While this resource was originally developed for COVID-19 CICT, the methods and approach described in the guide could easily be applied to CICT for other diseases.

Community Engagement and Partnerships

Develop partnerships with community-based organizations (CBOs), grassroots organizations, faith-based organizations and other community groups. Maintain those relationships across outbreak response activities
Partner with health clinics who have established and trusted relationships with communities to raise awareness about CICT
Create informal and formal partnerships between health departments and communities such as community liaisons and/or community advisory boards
Hire bilingual and bicultural staff from local communities to serve as CICT professionals
Develop culturally and linguistically appropriate messaging about CICT
Raise community awareness of CICT by working with CBOs to communicate with community members, particularly before community testing events

The National Resource Center for Refugees, Immigrants, and Migrants (NRC- RIM) is funded by the U.S. Centers for Disease Control and Prevention to support state and local health departments working with RIM communities. Learn more at nrcrim.umn.edu. Last update: 08/18/2023.

	Connect with your <u>State Refugee Health Coordinator</u> , who can introduce you to clinical and community partners working with refugee populations and resources in your state
Zultı	ural and Linguistic Considerations
esti	ng (see our testing toolkit for additional information and resources)
	Overcome stigma about testing by performing community outreach in advance of the event; hand out information and masks in the community around the testing event
	Offer testing at locations that are accessible and appropriate for the community (see our testing toolkit for more resources)
	Collaborate and co-brand testing events with community partners
	Provide bilingual and bicultural staff or interpreters at testing locations who align with the communities expected to attend the testing event
	Offer culturally and linguistically appropriate education on topics such as what to do while waiting for a test result, the process of CICT, and information about isolation and quarantine
	Provide specific details and reassurance about receiving phone call(s), including the exact number that will appear on their phone, if called; emphasize the importance of answering the call and encourage them to save the CICT number in their phone, if known at the time of testing
	Confirm the phone number is recorded correctly by making a quick call on-site
ase	Investigation and Contact Tracing Phone Calls
	Alert individuals that they will receive a call from the health department

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- Some organizations are using text or video messages to prepare the community for calls; ideally messages will be sent in their preferred language (see NRC-RIM developed CICT video messages as an example)
- o Other organizations have a universal 1-800 number that people can recognize or call back; provide this at testing locations, if possible

Hire bilingual and bicultural staff from local communities to serve as CICT professionals
When bilingual and bicultural staff are not available, use professional interpreters – avoid using family members as interpreters and never use children as interpreters
Provide training to CICT professionals on how to work with interpreters and training for interpreters on the goals and process of CICT
Consider cultural preferences that could impede information collection (e.g. individuals from some cultures may prefer to speak to a CICT professional of the same gender)
Explore any barriers to following guidelines and offer resources and referrals
Approach the CICT encounters with the understanding that some members of RIM communities may have distrust of government authorities, may have concerns about their legal status in the US and may have suffered oppression and/or violence by government authorities in their country of origin
Consider revising CICT scripts that begin with reassuring information in clear and simple language
Include information in the script about confidentiality; provide clear details about with whom information will be shared (and with whom it will not be shared) – cover this information early in the call

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□ Acknowledge the difficulty some RIM community members will face - many of whom are essential workers - when asked to isolate or quarantine □ Provide culturally and linguistically appropriate health education about isolation and quarantine, particularly if not provided at the testing location □ Partner with CBOs to identify options for providing social support services, including existing services for housing, food, child-care, or employment support □ Partner with CBOs to distribute items that will help stop the spread of the outbreak such as masks, soap, hand sanitizers, household cleaners, or other items specific to the disease of concern □ Support those living in housing arrangements that make isolation and quarantine difficult; see CDC guidance and support those living shared housing and households living in close quarters □ Consider the use of temporary housing facilities for quarantine or isolation for those who cannot quarantine or isolate in their homes