REACHing For Health Equity: Promoting Healthy Nutrition/Food Hubs and Vaccines

April 25, 2023
Today’s Panelists

Ashley Dunworth  Dr. Iyabode Beysolow  Serena Ortiz  Sophie Tate
Agenda

• Health Equity, Vaccine & Nutrition Strategies: Ashley Dunworth

• Adult Vaccination Recommendations: Dr. Iyabode Beysolow

• REACH Recipient: Presbyterian Healthcare Services: Serena Ortiz and Sophie Tate
Health Equity, Vaccine & Nutrition Strategies

Ashley Dunworth MS, RDN, CDCES Presbyterian Healthcare Services
Presbyterian Community Health

Health Equity, Vaccine & Nutrition Strategies
Our purpose is to improve the health of the patients, members and communities we serve.
We are a locally owned, not-for-profit healthcare system of **NINE** hospitals, a medical group and health plan.

Founded in New Mexico in 1908, we are the state’s **LARGEST** private employer with nearly **14,000 EMPLOYEES**.

We serve more than **875,000 PATIENTS AND MEMBERS** throughout New Mexico.

We have more than **1,600 PROVIDERS** in **50 SPECIALTIES**, at more than **100 CLINICS** throughout the state.

We are integrated with Presbyterian Health Plan, New Mexico’s largest health plan provider with more than **580,000 MEMBERS**.
Health equity is at the core of all our strategies.
Healthy Eating & Active Living (HEAL) Classes

2022 Participation
A total of 507 HEAL classes were offered to the community with 2243 total unique participants.

“I am now more mindful and aware of what I am eating and what that does to my body.”

Classes are offered in-person at our 3 teaching kitchens or virtually, and in English & Spanish.
Healthy Lifestyle Habits & Prevention of Chronic Health Conditions

There is strong and consistent evidence that consumption of the **DASH diet** results in reduced blood pressure and decreased risk of cardiovascular disease.

**Plant based-dietary patterns** show more favorable outcomes on weight and risk of obesity.

There is an increased associated risk with dietary consumption **high** in red meat and sugar-sweetened foods and drinks, French fries, refined grains, and high-fat dairy products for risk of **type 2 diabetes**.

Health Disparity is defined as, "significant disparity in the overall rate of disease incidence, prevalence, morbidity, mortality or survival rates in the population as compared to the health status of the general population.” --National Center for Minority Health and Health Disparities, 2000

Diet-related disparities are defined as “differences in dietary intake, dietary behaviors, and dietary patterns in different segments of the population, resulting in poorer dietary quality and inferior health outcomes for certain groups and an unequal burden in terms of disease incidence, morbidity, mortality, survival, and quality of life.”--Journal of the American Dietetic Association, 2009

https://www.ncbi.nlm.nih.gov/pmc/articles/PMC2729116/
CDC Behavioral Risk Factor Surveillance System (BRFS) Obesity Maps 2015-2017

https://www.cdc.gov/pcd/issues/2019/18_0579.htm
Heart disease is the leading cause of death in the United States across all race/ethnicities. However, there are higher rates of heart disease, death from heart disease and diabetes in black and Hispanic populations.

**Hypertension**
- Non-Hispanic black adults aged 20 and over were most likely to have hypertension in 2015–2016.
- Hispanic: 26.4%
- White, not Hispanic: 28.7%
- Black, not Hispanic: 42.1%
- Asian, not Hispanic: 27.2%

**Diabetes**
- Hispanic and non-Hispanic black adults aged 20 and over were most likely to have diabetes in 2015–2016.
- Hispanic: 21.5%
- White, not Hispanic: 13.0%
- Black, not Hispanic: 19.6%
- Asian, not Hispanic: 14.5%

**Source:** https://www.cdc.gov/nchs/hus/spotlight/2019-heart-disease-disparities.htm

**Source:** NCHS, National Health and Nutrition Examination Survey (NHANES).

**Notes:**
- Hypertension is measured high blood pressure (systolic pressure ≥ 140 mm Hg or diastolic pressure ≥ 90 mm Hg) or taking medication to lower high blood pressure. Estimates may differ from others based on the same data due to different analytic methodology.
- Estimates of diabetes prevalence include both physician-diagnosed and undiagnosed diabetes. They may differ from other estimates based on the same data due to different analytic methodology.
Although heart disease death rates generally decreased for all race and Hispanic-origin groups, death rates continued to remain highest for non-Hispanic Black people.

Figure 2. Heart disease death rates, by race and Hispanic origin: United States, 2009–2019

Source: https://www.cdc.gov/nchs/hus/topics/heart-disease-deaths.htm
Why are there differences?

Social determinants of health

International District in Albuquerque, NM

- 5.2 square miles
- ~35,000 people reside
- Median household income $26,200/year (federal poverty line)
- 48% Hispanic, 11% Native American
  - 5 food pantries
  - 6 grocery stores
  - 7 convenient stores
  - 32 fast food restaurants
- 4.8% of total deaths are from heart disease*(2017-2021)

https://bccurbanag.com/about-the-international-district/
https://ibis.doh.nm.gov/topic/population/Characteristics.html
Adult Vaccination Recommendations

Iyabode (Yabo) Akinsanya-Beysolow
MD, MPH, FAAP
### Table 1  
**Recommended Adult Immunization Schedule by Age Group, United States, 2023**

<table>
<thead>
<tr>
<th>Vaccine</th>
<th>19–26 years</th>
<th>27–49 years</th>
<th>50–64 years</th>
<th>≥65 years</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>COVID-19</strong></td>
<td></td>
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<tr>
<td><strong>Influenza inactivated (IV4) or Influenza recombinant (RIIV) or Influenza live, attenuated (LAIV)</strong></td>
<td></td>
<td>1 dose annually</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Tetanus, diphtheria, pertussis (Tdap or Td)</strong></td>
<td></td>
<td>1 dose Tdap each pregnancy; 1 dose Td/Tdap for wound management (see notes)</td>
<td></td>
<td>1 dose Tdap, then Td or Tdap booster every 10 years</td>
</tr>
<tr>
<td><strong>Measles, mumps, rubella (MMR)</strong></td>
<td></td>
<td>1 or 2 doses depending on indication (if born in 1957 or later)</td>
<td></td>
<td>For healthcare personnel, see notes</td>
</tr>
<tr>
<td><strong>Varicella (VAR)</strong></td>
<td>2 doses (if born in 1980 or later)</td>
<td></td>
<td></td>
<td>2 doses</td>
</tr>
<tr>
<td><strong>Zoster recombinant (RZV)</strong></td>
<td>2 doses for immunocompromising conditions (see notes)</td>
<td></td>
<td></td>
<td>2 doses</td>
</tr>
<tr>
<td><strong>Human papillomavirus (HPV)</strong></td>
<td>2 or 3 doses depending on age at initial vaccination or condition</td>
<td>27 through 45 years</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Pneumococcal (PCV15, PCV20, PPSV23)</strong></td>
<td>1 dose PCV15 followed by PPSV23 OR 1 dose PCV20 (see notes)</td>
<td></td>
<td></td>
<td>See Notes</td>
</tr>
<tr>
<td><strong>Hepatitis A (HepA)</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
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<tr>
<td><strong>Hepatitis B (HepB)</strong></td>
<td></td>
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<td></td>
</tr>
<tr>
<td><strong>Meningococcal A, C, W, Y (MenACWY)</strong></td>
<td></td>
<td></td>
<td>1 or 2 doses depending on indication, see notes for booster recommendations</td>
<td></td>
</tr>
<tr>
<td><strong>Meningococcal B (MenB)</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Haemophilus influenzae type b (Hib)</strong></td>
<td></td>
<td></td>
<td></td>
<td>1 or 3 doses depending on indication</td>
</tr>
</tbody>
</table>

*Recommended vaccination for adults who meet age requirement, lack documentation of vaccination, or lack evidence of past infection.  Recommended vaccination for adults with an additional risk factor or another indication.  Recommended vaccination based on shared clinical decision-making.  No recommendation/Not applicable.*
<table>
<thead>
<tr>
<th>Vaccine</th>
<th>Pregnancy</th>
<th>Immune-compromised (excluding HIV infection)</th>
<th>HIV infection CD4 percentage and count</th>
<th>Asplenia, complement deficiencies</th>
<th>End-stage renal disease, or on hemodialysis</th>
<th>Heart or lung disease; alcoholism</th>
<th>Chronic liver disease</th>
<th>Diabetes</th>
<th>Health care personnel</th>
<th>Men who have sex with men</th>
</tr>
</thead>
<tbody>
<tr>
<td>COVID-19</td>
<td>See Notes</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>IIV4 or RIV4 or LAIV4</td>
<td>1 dose annually</td>
<td></td>
<td></td>
<td></td>
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<td></td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>Tdap or Td</td>
<td>1 dose Tdap each pregnancy</td>
<td></td>
<td></td>
<td>1 dose Tdap, then Td or Tdap booster every 10 years</td>
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<tr>
<td>MMR</td>
<td>Contraindicated</td>
<td></td>
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<td></td>
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<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>VAR</td>
<td>Contraindicated</td>
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<td></td>
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<tr>
<td>RZV</td>
<td>2 doses at age ≥19 years</td>
<td></td>
<td></td>
<td>2 doses at age ≥50 years</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>HPV</td>
<td>Not Recommended</td>
<td>3 doses through age 26 years</td>
<td></td>
<td>2 or 3 doses through age 26 years depending on age at initial vaccination or condition</td>
<td>1 dose PCV15 followed by PPSV23 OR 1 dose PCV20 (see notes)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Pneumococcal (PCV15, PCV20, PPSV23)</td>
<td>3 doses (see notes)</td>
<td></td>
<td></td>
<td>2, 3, or 4 doses depending on vaccine</td>
<td>2, 3, or 4 doses depending on vaccine or condition</td>
<td></td>
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<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>HepA</td>
<td>1 or 2 doses depending on indication, see notes for booster recommendations</td>
<td></td>
<td></td>
<td>2 or 3 doses depending on vaccine and indication, see notes for booster recommendations</td>
<td>3 doses HSCCT recipients only</td>
<td>1 dose</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>HepB</td>
<td>3 doses (see notes)</td>
<td></td>
<td></td>
<td>2, 3, or 4 doses depending on vaccine or condition</td>
<td>3 doses HSCCT recipients only</td>
<td>1 dose</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>MenACWY</td>
<td>1 or 2 doses depending on indication, see notes for booster recommendations</td>
<td></td>
<td></td>
<td>2 or 3 doses depending on vaccine and indication, see notes for booster recommendations</td>
<td>3 doses HSCCT recipients only</td>
<td>1 dose</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>MenB</td>
<td>Precaution</td>
<td></td>
<td></td>
<td></td>
<td>Precaution—vaccination might be indicated if benefit of protection outweighs risk of adverse reaction</td>
<td>Contraindicated or not recommended—vaccine should not be administered.</td>
<td>3 doses (see notes)</td>
<td>1 dose</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

*Recommended vaccination for adults who meet age requirement, lack documentation of vaccination, or lack evidence of past infection.

a. Precaution for LAIV4 does not apply to alcoholism. b. See notes for influenza; hepatitis B; measles, mumps, and rubella; and varicella vaccinations. c. Hematopoietic stem cell transplant.
FIGURE. Estimated proportion of adults aged ≥19 years who received selected vaccines, by age group and risk status — National Health Interview Survey, United States, 2010–2020

Abbreviations: Td = tetanus and diphtheria toxoids; Tdap = tetanus toxoid, reduced diphtheria toxoid, and acellular pertussis vaccine.

Tetanus and Tetanus vaccination

What is Tetanus (lockjaw)?

• Tetanus is an infection caused by a bacteria (germ) called *Clostridium tetani*.

• Spores of tetanus bacteria are everywhere in the environment, including soil, dust, and manure.

• The spores develop into bacteria when they enter the body.

• Tetanus is *not spread from person to person*.

https://www.cdc.gov/tetanus/about/causes-transmission.html
Flu vaccination

• Everyone 6 months and older should get a flu vaccine every season with rare exceptions. Vaccination is particularly important for people who are at higher risk of serious complications from influenza.

• People 65 and older should get a higher dose or adjuvanted flu vaccine, including: Fluzone High-Dose Quadrivalent, Flublok Quadrivalent, or Fluvad Quadrivalent vaccine. These vaccines are preferred for people 65 years.

• Flu shots also are recommended for pregnant people and people with certain chronic health conditions.

• The nasal spray flu vaccine is approved for use in people 2 years through 49 years of age. People who are pregnant and people with certain medical conditions should not receive the nasal spray flu vaccine.
Flu Vaccination Coverage by Jurisdiction:
Data Collection Period: 01/29/2023 - 02/25/2023

Figure 4D. Influenza Vaccination Coverage and Intent for Vaccination, by Age Group and Race/Ethnicity, Adults 18 Years and Older, United States, 2022-2023*

Data Source: IPSOS Knowledge Panel and NORC AmeriSpeak Omnibus Surveys
IPSOS KP data collected: 2/10/2023 - 2/12/2023
AmeriSpeak data collected: 2/16/2023 - 2/20/2023

Legend: [Vaccinated for flu] [Intend to Get Vaccinated for flu] [Not Sure About Getting Vaccinated for flu] [Do Not Intend to Get Vaccinated for flu]

[Map showing flu vaccination coverage by jurisdiction]

[Bar chart showing vaccination coverage by age group and race/ethnicity]
COVID-19 vaccines

As of 4/18/2023

• Monovalent (one strain, original COVID-19 vaccine) is no longer authorized in the U.S.

• Moving forward, the bivalent (Omicron) strain vaccine should be used for all doses (primary or booster doses) for people 6 months and older.

People who have never had a COVID-19 vaccine

• Get a bivalent (Omicron) COVID-19 vaccine today.

Who should get a second Omicron booster?

• People 65 years of age and older who have received a single dose of a bivalent vaccine may receive one additional dose if it has been at least four (4) months since their first bivalent dose.

• Most immunocompromised people who have already received a bivalent COVID-19 vaccine, they may receive another dose of a bivalent COVID-19 vaccine if it has been at least two (2) months since their first bivalent COVID-19 vaccine dose. Their Healthcare provider may recommend additional doses over time.
Adult vaccination rates are extremely low.

Most adults are NOT aware that they need vaccines.

Recommendation from your healthcare professional is the strongest predictor of whether patients get vaccinated. IF your provider does not recommend it, you bring it up.

Missed opportunities for vaccination

Get your COVID-19 vaccine booster along with other vaccines

There is still time to vaccinate with the Flu vaccine

There is still time to vaccinate with the Flu vaccine

Get your COVID-19 vaccine booster along with other vaccines
REACH Recipient: Presbyterian Healthcare Services
Serena Ortiz and Sophie Tate
COVID-19 & FLU
Community-based Vaccine Equity Strategies

Serena Ortiz, Project Coordinator & Community Engagement
Sophie Tate, Community Food Project Coordinator

PRESBYTERIAN
Community Health
PRES COMMUNITY HEALTH REMAINS COMMITTED

Our focus remains increasing COVID-19 and flu vaccinations among priority populations by:

• Working together with community partners to
  o identify reasons for vaccine hesitancy using Listening Sessions
  o identify Trusted Messengers representing priority populations
  o develop culturally and linguistically appropriate communications
to dispel dis-and-misinformation negatively impacting vaccination uptake
  o coordinate and promote vaccination clinic opportunities

• Equipping Trusted Messengers to
  o educate community members about COVID-19 and flu vaccinations
  o promote clinic opportunities for vaccination uptake

• Connecting partners with clinic providers to
  o Increase mobile ‘pop-up’ COVID-19 and flu vaccination clinic opportunities
OUR REACH

6,354 COVID-19 Vaccines
5,683 Flu Vaccines
40+ Community Partners
60+ Vaccine Clinics
Fresh Produce Programs

• Food Farmacy is a weekly produce distribution to over 250 patients, referred by their physicians and community health workers based on diet-related health issues and food insecurity. We partner with a local food distributor to support 17 local farms for this program.

• The FreshRx Farmers' Market program distributes vouchers to farmers' markets, again to patients who screen for food insecurity and diet-related health issues. We partner with New Mexico Farmers' Marketing Association for this program.

• The Food Hub at Whittier is a free produce food pantry, free hot/prepared food kitchen, vaccine clinic, and pathway navigation hub on Albuquerque Public Schools grounds. We talk more about this on the podcast!

• We also have a Community Garden onsite at our Resource Center on the hospital campus; we grow 28 rows of fruits and vegetables for use in our cooking classes onsite, as well as in our distribution at the Food Hub.

• We can also adapt parts of these programs to accommodate pop-up events, where we invite other community resources to table.
Whittier Elementary Food Hub & Vaccine Clinic
Fall Open House

Leveraging other REACH-funded programs within our department to support our overall goal to meet the needs of our marginalized communities by addressing health-related social needs from several angles in this model.

Vaccines
Of the 137 patients that walked through the open house, 44% were vaccinated either with COVID-19 or flu!

Food Farmacy
An in-person model of FF was implemented, where volunteers assisted patients in choosing produce and pantry items.

Kitchen/Demos
A recipe demonstration, using the food patients received, was conducted in the community kitchen while they walked through -- samples provided

Tabling
Representatives of each of our community health and health plan programs provided information, including CHWs, PSS, insurance agents, etc.
Resources
REACHing for Vaccine Equity podcast series

- A limited series podcast (8 total) featuring the work of iREACH recipients!
- **Episode 3** - highlights the work of the Presbyterian Community Health.
- Subscribe to the podcast on Apple Podcasts or Spotify or listen on the [AIM website](#).
Resources from Presbyterian Healthcare Services

• Learn more about Presbyterian Community Health Here: https://www.phs.org/Pages/default.aspx

• Supporting Community Health: https://www.phs.org/community/committed-to-community-health/Pages/default.aspx

• Upcoming events at Presbyterian Healthcare Services: https://www.phs.org/about-us/events/Pages/default.aspx