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

April 25, 2023

iREACH

resource. engage. connect.

AIM

Association of Immunization Managers

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

PRESBYTERIAN
Community Health


Our purpose is to improve the health of the patients, members and communities we serve
PRESBYTERIAN

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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 particiapnts

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

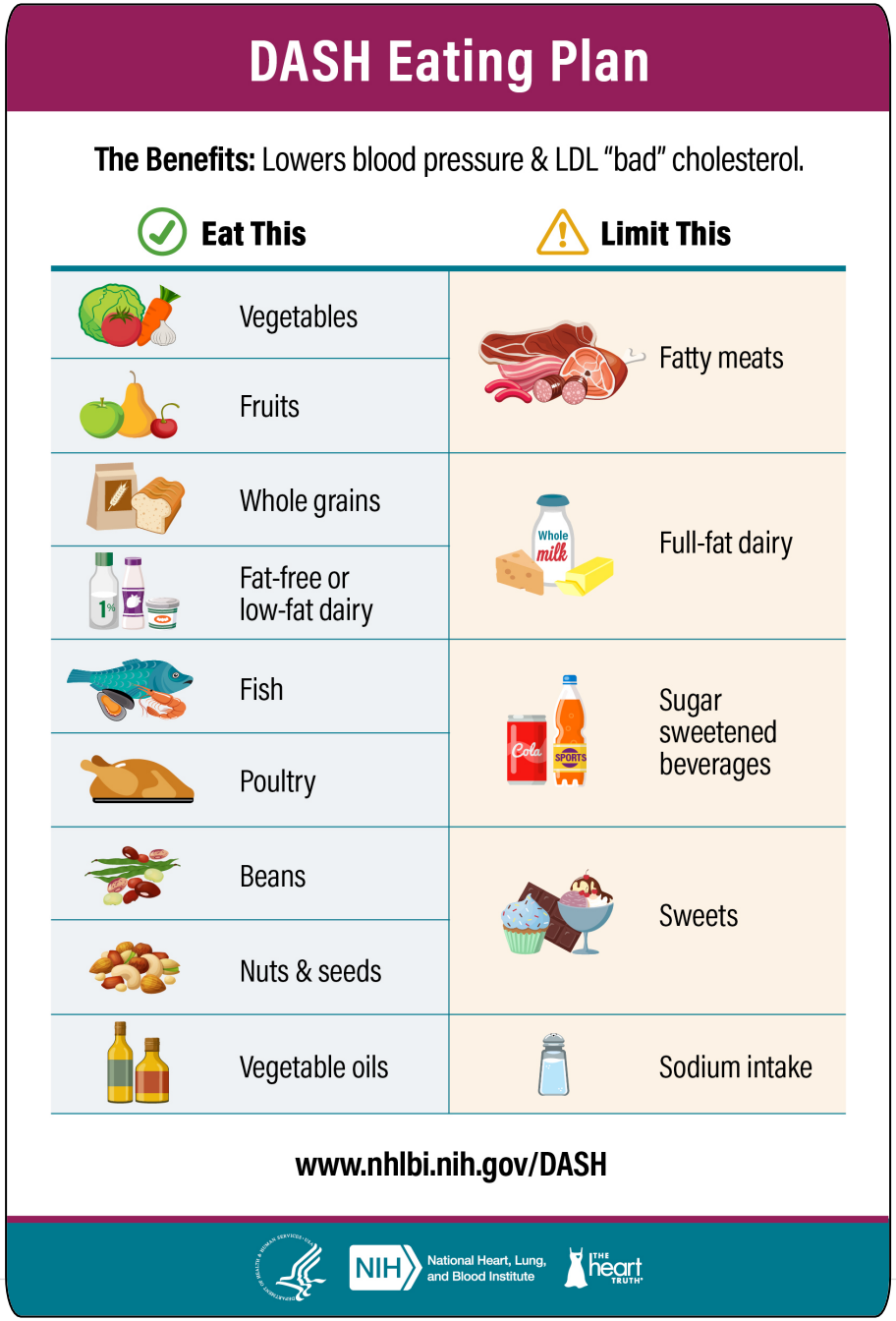
Classes are offered in-person at our 3 teaching kitchens or virtually, and in English & Spanish

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.**



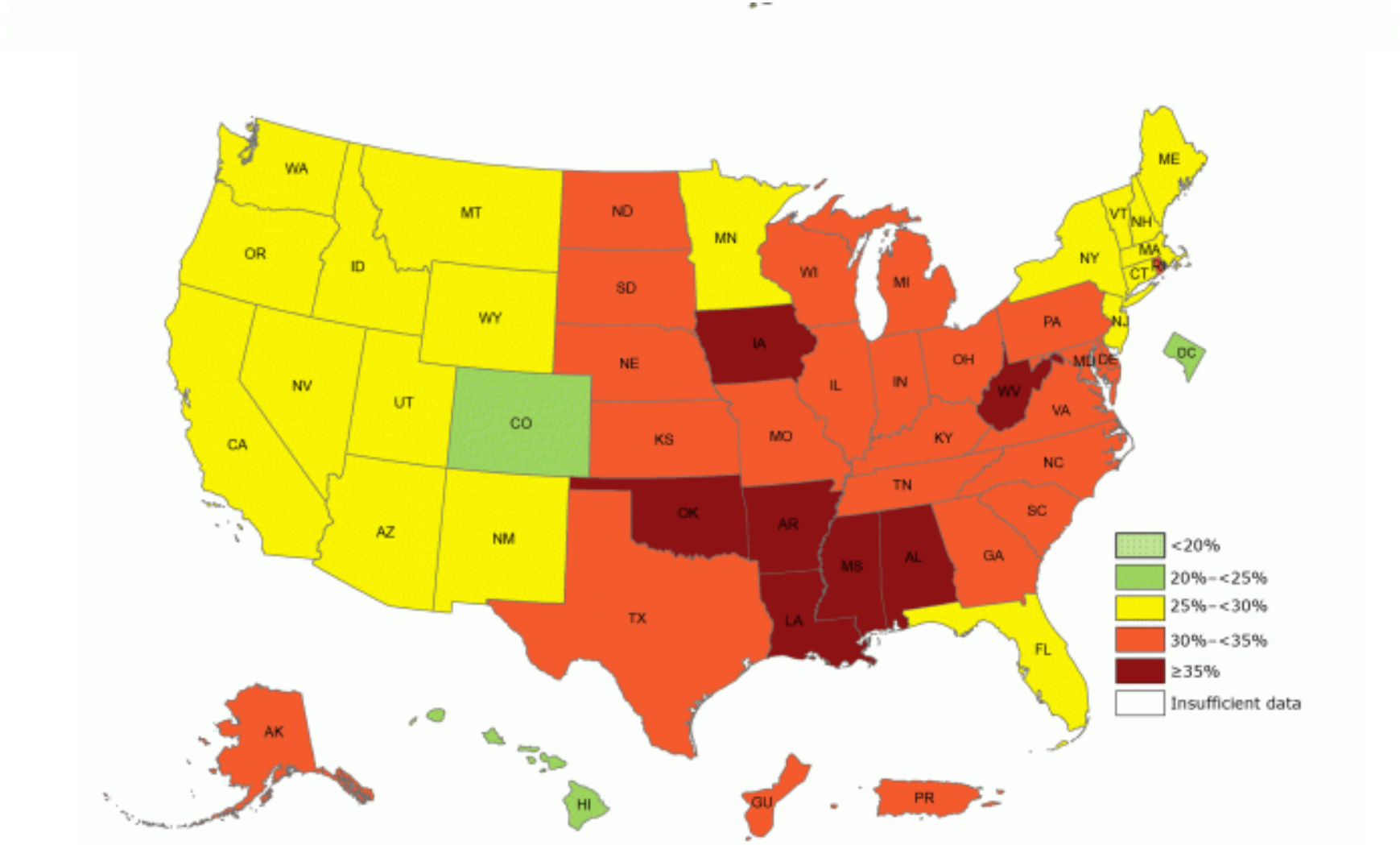
1.) https://nesr.usda.gov/dietary-patterns-and-risk-cardiovascular-disease
2.)https://nesr.usda.gov/dietary-patterns-and-body-weight-or-risk-obesity
3.) https://nesr.usda.gov/dietary-patterns-and-risk-type-2-diabetes

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*

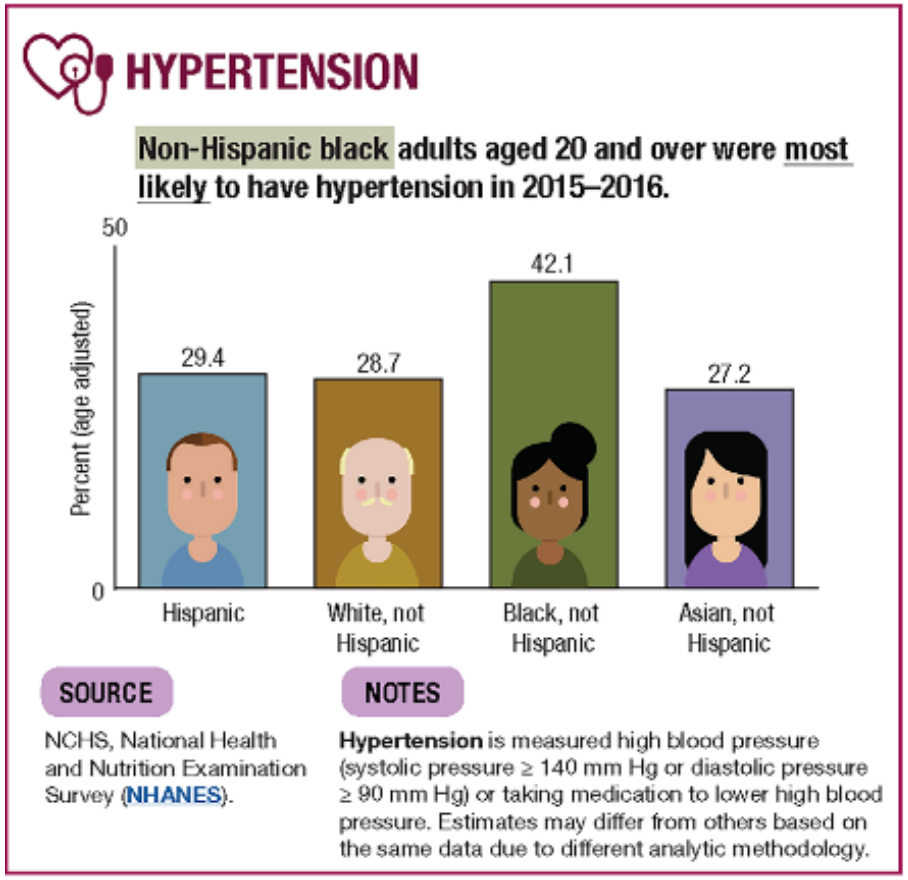
https://www.ncbi.nlm.nih.gov/pmc/articles/PMC2729116/

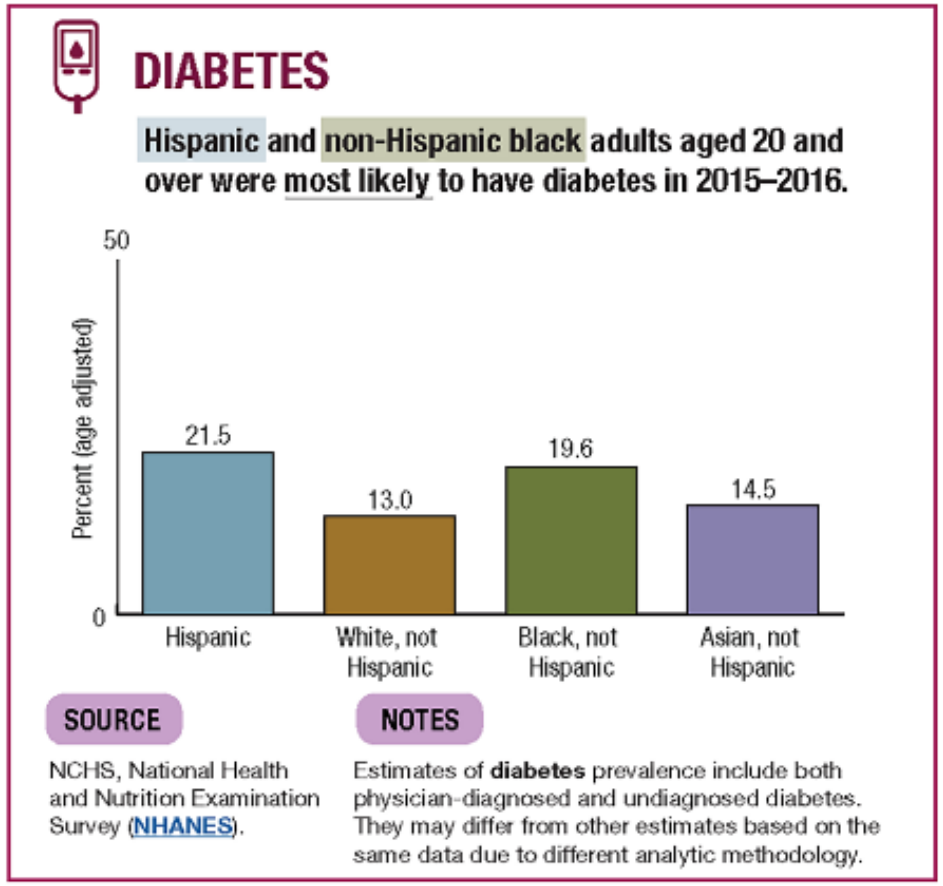
CDC Behavioral Risk Factor Surveillance System (BRFS) Obesity Maps 2015-2017



https://www.cdc.gov/pcd/issues/2019/18_0579.htm

Disparities Continue Across Race/Ethnicity & Chronic Health Conditions



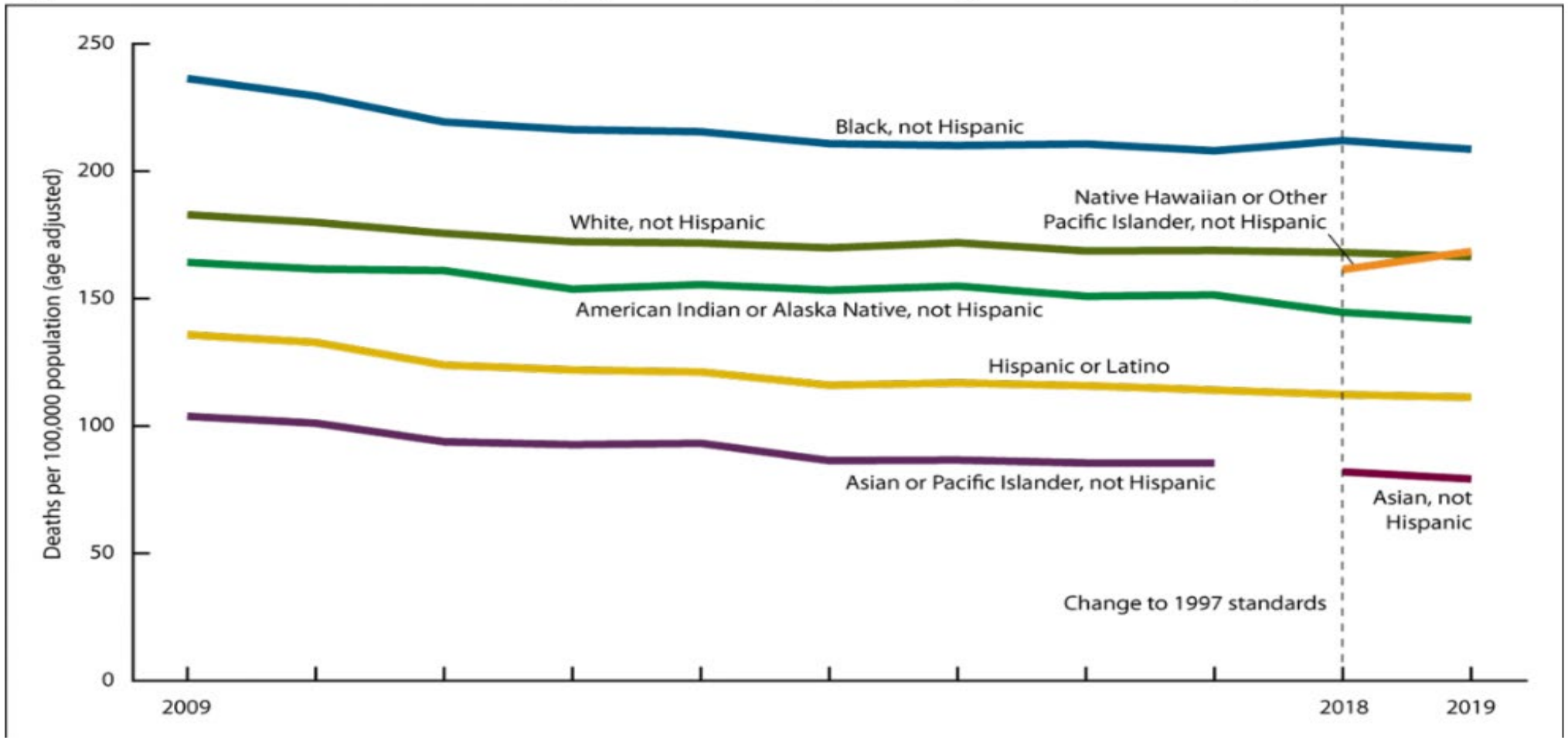


Heart disease is the leading cause of death in the United States across all race/ethnicities. However, there are higher rates of heart disease, death from heart disease and diabetes in black and Hispanic populations.

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

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.

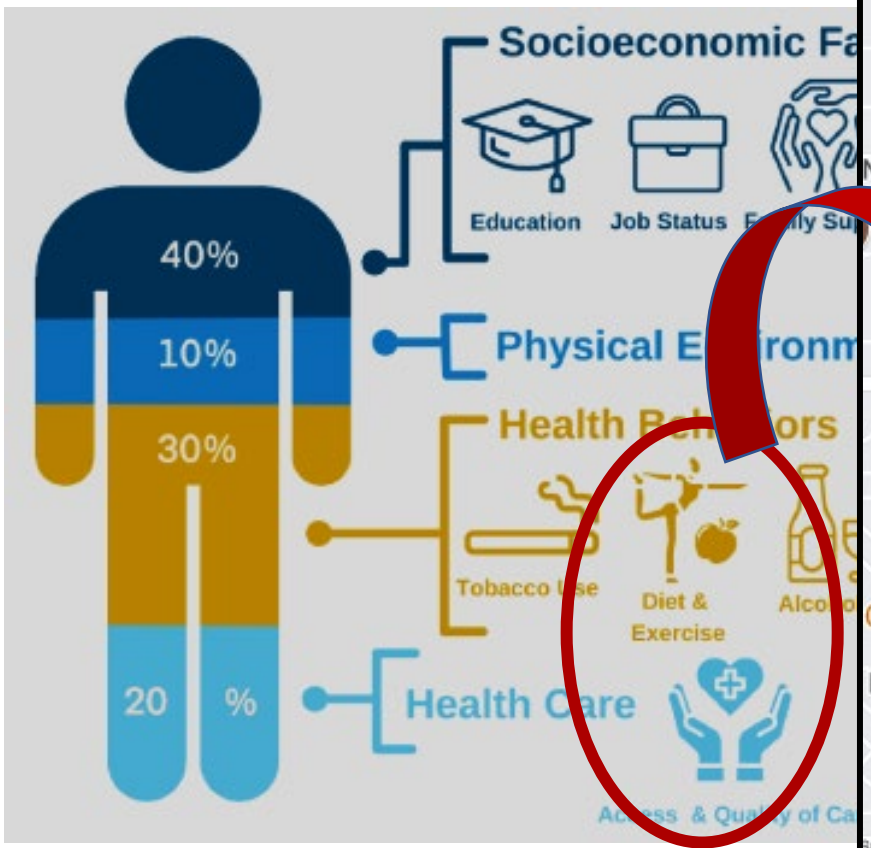
Figure 2. Heart disease death rates, by race and Hispanic origin: United States, 2009–2019

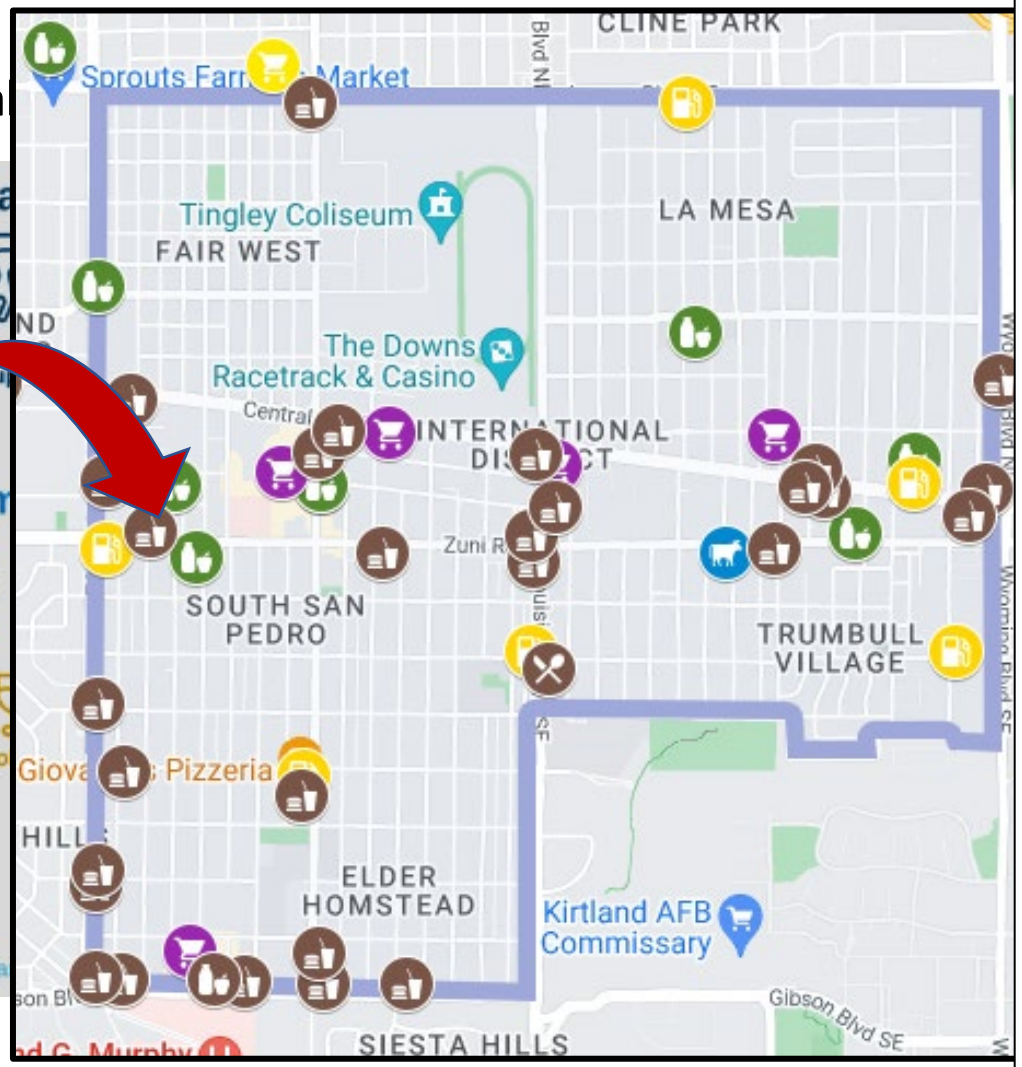


Source: https://www.cdc.gov/nchs/hus/topics/heart-disease-deaths.htm

Why are there differences?

Social determinants of hea





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

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Adult Vaccination Recommendations

Iyabode (Yabo) Akinsanya-Beysolow
MD, MPH, FAAP

Table 1 Recommended Adult Immunization Schedule by Age Group, United States, 2023

Vaccine	19–26 years	27–49 years	50–64 years	≥65 years
COVID-19	2- or 3- dose primary series and booster (See Notes)			
Influenza inactivated (IIV4) or **Influenza recombinant** (RIV4)	1 dose annually			
or	or			
Influenza live, attenuated (LAIV4)	1 dose annually			
Tetanus, diphtheria, pertussis (Tdap or Td)	1 dose Tdap each pregnancy; 1 dose Td/Tdap for wound management (see notes)			
	1 dose Tdap, then Td or Tdap booster every 10 years			
Measles, mumps, rubella (MMR)	1 or 2 doses depending on indication (if born in 1957 or later)			For healthcare personnel, see notes
Varicella (VAR)	2 doses (if born in 1980 or later)		2 doses	
Zoster recombinant (RZV)	2 doses for immunocompromising conditions (see notes)		2 doses	
Human papillomavirus (HPV)	2 or 3 doses depending on age at initial vaccination or condition	27 through 45 years		
Pneumococcal (PCV15, PCV20, PPSV23)	1 dose PCV15 followed by PPSV23 OR 1 dose PCV20 (see notes)			See Notes
				See Notes
Hepatitis A (HepA)	2, 3, or 4 doses depending on vaccine			
Hepatitis B (HepB)	2, 3, or 4 doses depending on vaccine or condition			
Meningococcal A, C, W, Y (MenACWY)	1 or 2 doses depending on indication, see notes for booster recommendations			
Meningococcal B (MenB)	2 or 3 doses depending on vaccine and indication, see notes for booster recommendations			
	19 through 23 years			
***Haemophilus influenzae* type b** (Hib)	1 or 3 doses depending on indication			

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 2 Recommended Adult Immunization Schedule by Medical Condition or Other Indication, United States, 2023

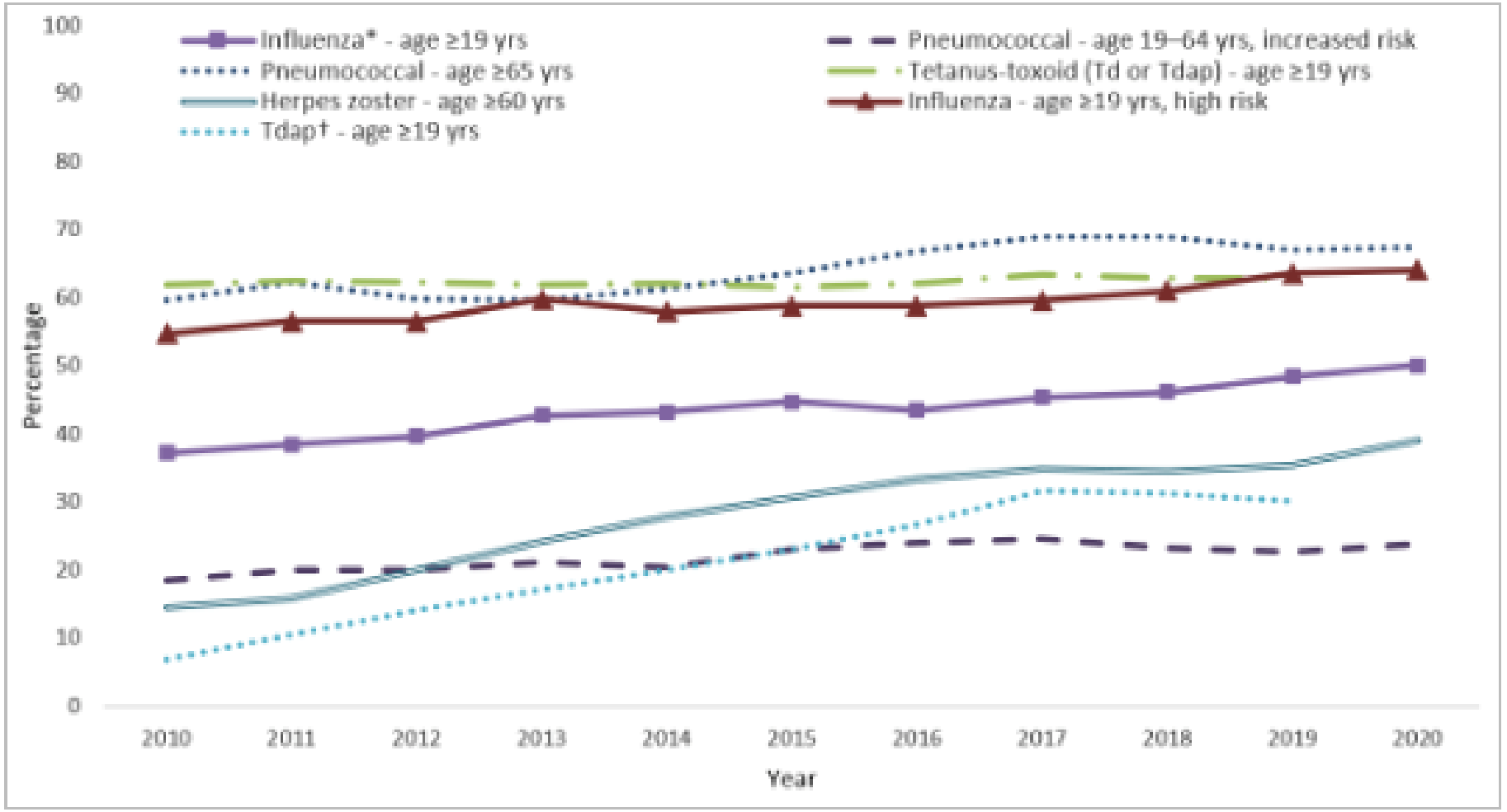
Vaccine	Pregnancy	Immuno-compromised (excluding HIV infection)	HIV infection CD4 percentage and count		Asplenia, complement deficiencies	End-stage renal disease, or on hemodialysis	Heart or lung disease; alcoholism[a]	Chronic liver disease	Diabetes	Health care personnel[b]	Men who have sex with men
			<15% or <200 mm³	≥15% and ≥200 mm³							
COVID-19		See Notes									
IIV4 or RIV4 or LAIV4	1 dose annually									or 1 dose annually	
	Contraindicated						Precaution				
Tdap or Td	1 dose Tdap each pregnancy	1 dose Tdap, then Td or Tdap booster every 10 years									
MMR	Contraindicated*	Contraindicated		1 or 2 doses depending on indication							
VAR	Contraindicated*	Contraindicated			2 doses						
RZV		2 doses at age ≥19 years			2 doses at age ≥50 years						
HPV	Not Recommended*	3 doses through age 26 years			2 or 3 doses through age 26 years depending on age at initial vaccination or condition						
Pneumococcal (PCV15, PCV20, PPSV23)		1 dose PCV15 followed by PPSV23 OR 1 dose PCV20 (see notes)									
HepA	2, 3, or 4 doses depending on vaccine										
HepB	3 doses (see notes)	2, 3, or 4 doses depending on vaccine or condition									
MenACWY	1 or 2 doses depending on indication, see notes for booster recommendations										
MenB	Precaution	2 or 3 doses depending on vaccine and indication, see notes for booster recommendations									
Hib		3 doses HSCT[c] recipients only			1 dose						

- 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
- Precaution–vaccination might be indicated if benefit of protection outweighs risk of adverse reaction
- Contraindicated or not recommended–vaccine should not be administered.

  *Vaccinate after pregnancy.
- No recommendation/ Not applicable

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.

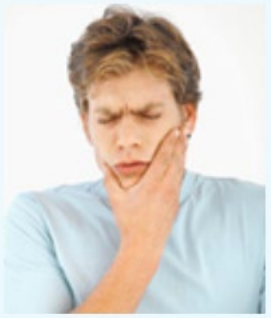
https://www.cdc.gov/vaccines/imz-managers/coverage/adultvaxview/pubs-resources/vaccination-coverage-adults-2019-2020.html

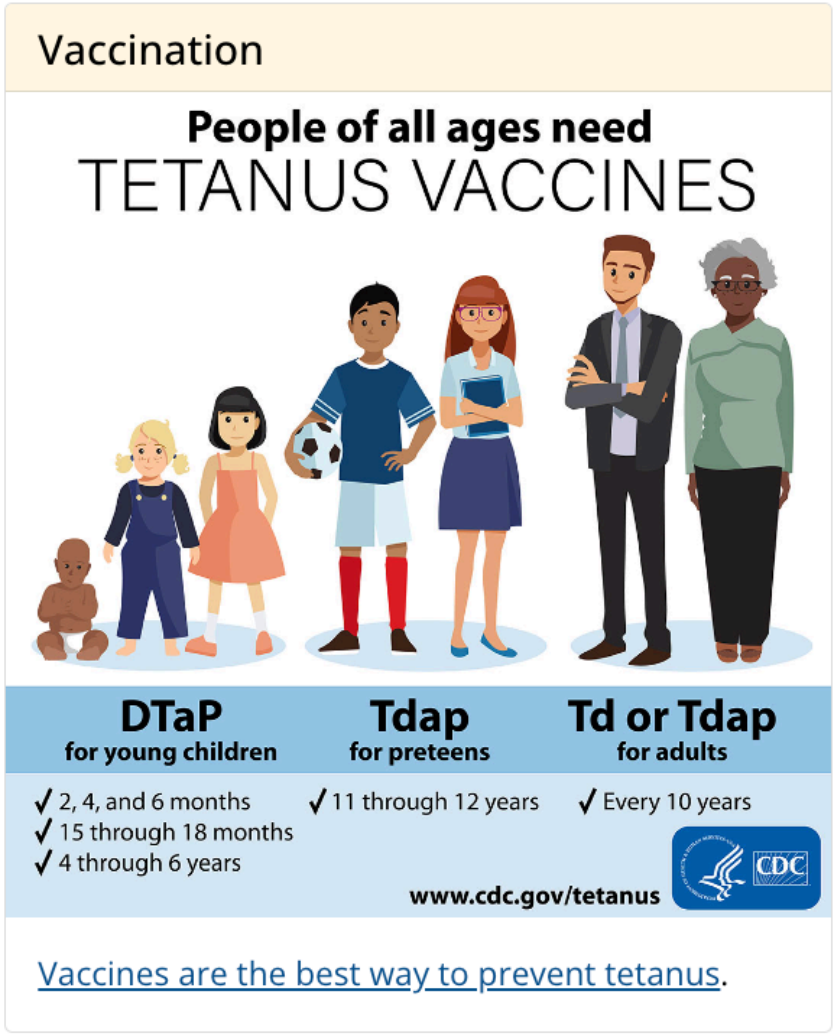
Tetanus and Tetanus vaccination

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**.

The first sign is most commonly spasms of the muscles of the jaw, or "lockjaw."





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.

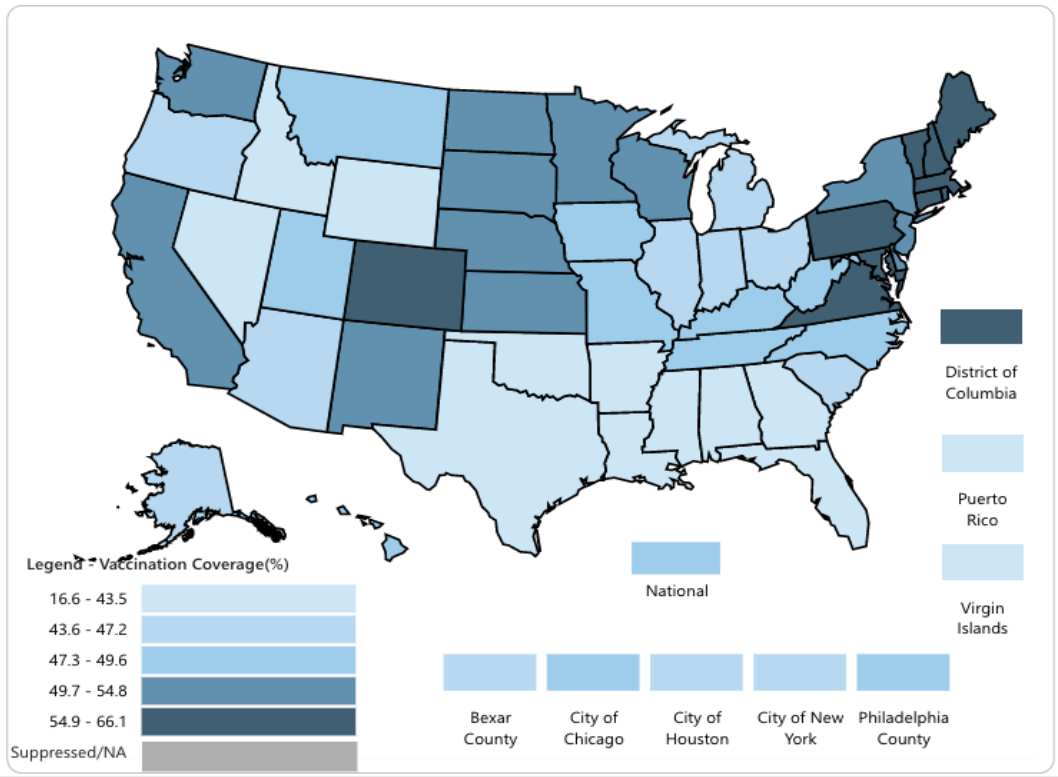
- People 65 and older should get a higher dose or adjuvanted flu vaccine, including: Fluzone High-Dose Quadrivalent, Flublok Quadrivalent, or Fluad Quadrivalent vaccine. These vaccines are preferred for people 65 years.

- 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.

https://www.cdc.gov/flu/prevent/vaccinations.htm and https://www.cdc.gov/flu/highrisk/65over.htm#anchor_1554994347538


Daily Update for the United States
Cases
New Cases (Weekly Total)
101,437
Case Trends
Feb 2023
Apr 2023
Deaths
New Deaths (Weekly Total)
1,327
Death Trends
Feb 2023
Apr 2023
Hospitalizations
New Admissions (Daily Avg)
1,814
Admission Trends
Mar 2023
Apr 2023
Vaccinations
% with Updated Booster Dose
16.7%
Total Population
Total Cases
104,348,746
Total Deaths
1,128,404
Current Hospitalizations
9,922
Total Updated Booster Doses
55,577,285
CDC | Data as of: April 18, 2023 3:59 PM ET. Posted: April 18, 2023 5:04 PM ET


Flu Vaccination Coverage by Jurisdiction:
Data Collection Period: 01/29/2023 - 02/25/2023
Legend - Vaccination Coverage(%)
16.6 - 43.5
43.6 - 47.2
47.3 - 49.6
49.7 - 54.8
54.9 - 66.1
Suppressed/NA
District of Columbia
Puerto Rico
National
Virgin Islands
Bexar County
City of Chicago
City of Houston
City of New York
Philadelphia County

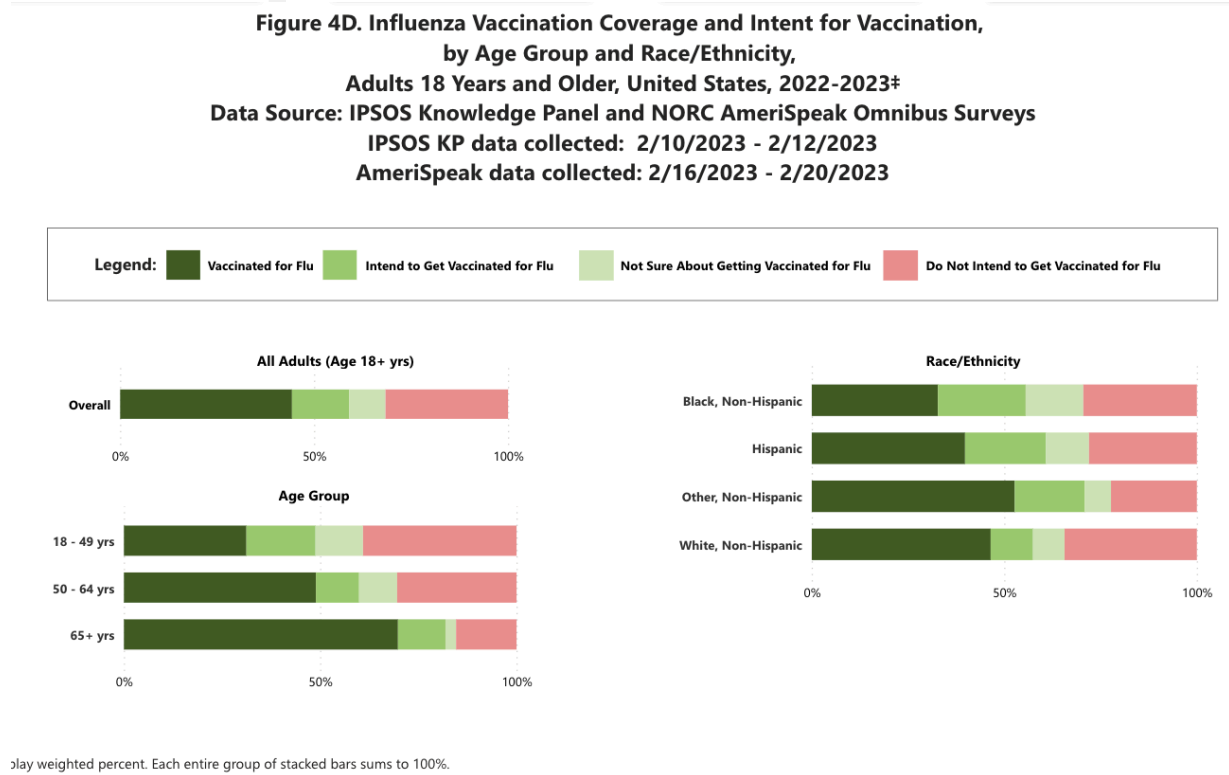


Figure 4D. Influenza Vaccination Coverage and Intent for Vaccination,
by Age Group and Race/Ethnicity,
Adults 18 Years and Older, United States, 2022-2023‡
Data Source: IPSOS Knowledge Panel and NORC AmeriSpeak Omnibus Surveys
IPSOS KP data collected: 2/10/2023 - 2/12/2023
AmeriSpeak data collected: 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
All Adults (Age 18+ yrs)
Overall
0%
50%
100%
Age Group
18 - 49 yrs
50 - 64 yrs
65+ yrs
0%
50%
100%
Race/Ethnicity
Black, Non-Hispanic
Hispanic
Other, Non-Hispanic
White, Non-Hispanic
0%
50%
100%
lay weighted percent. Each entire group of stacked bars sums to 100%.

COVID-19 vaccines

As of 4/18/2023

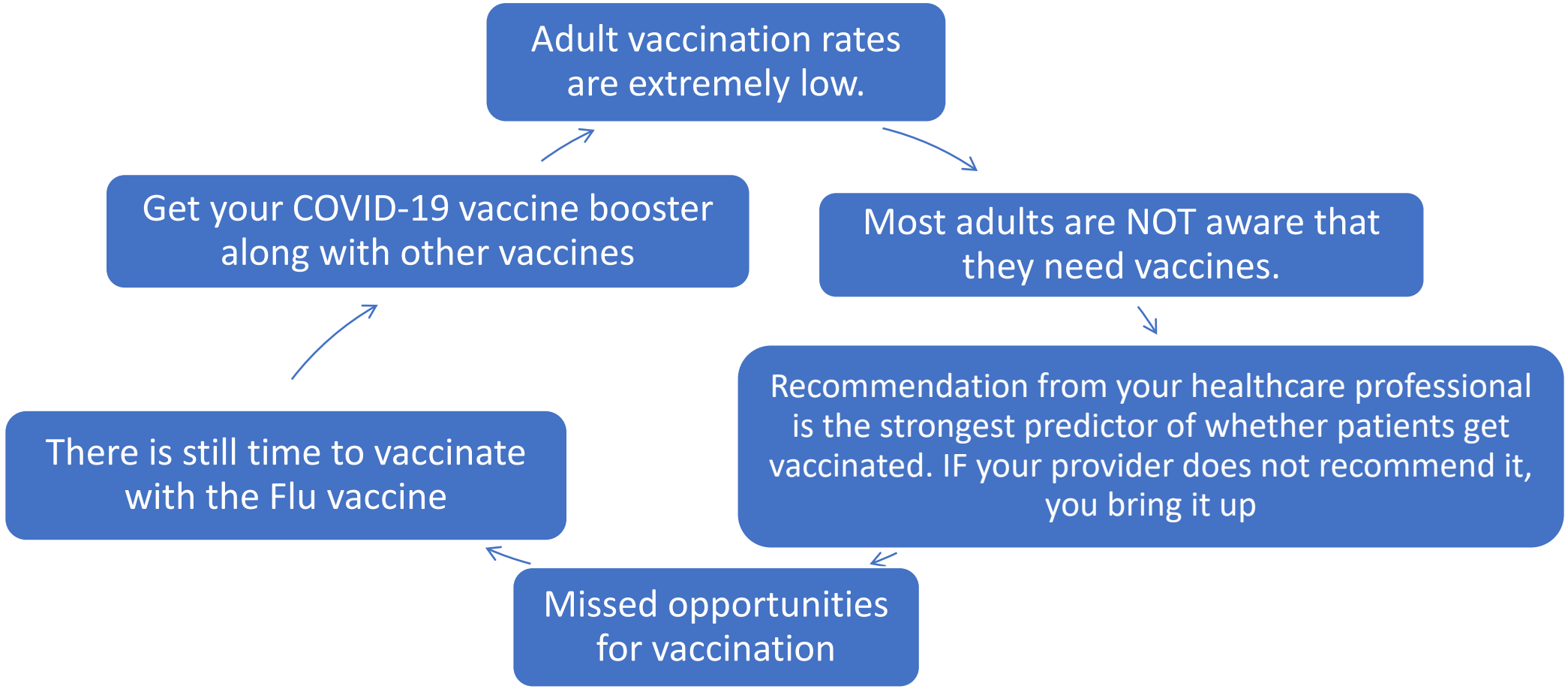
- Monovalent (one strain, original COVID-19 vaccine) is no longer authorized in the U.S.
- Moving forward, the bivalent (Omicron) strain vaccine should be used for all doses (primary or booster doses) for people 6 months and older.

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
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

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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
  - identify reasons for vaccine hesitancy using Listening Sessions
  - identify Trusted Messengers representing priority populations
  - develop culturally and linguistically appropriate communications to dispel dis-and-misinformation negatively impacting vaccination uptake
  - coordinate and promote vaccination clinic opportunities
- Equipping Trusted Messengers to
  - educate community members about COVID-19 and flu vaccinations
  - promote clinic opportunities for vaccination uptake
- Connecting partners with clinic providers to
  - Increase mobile ‘pop-up’ COVID-19 and flu vaccination clinic opportunities

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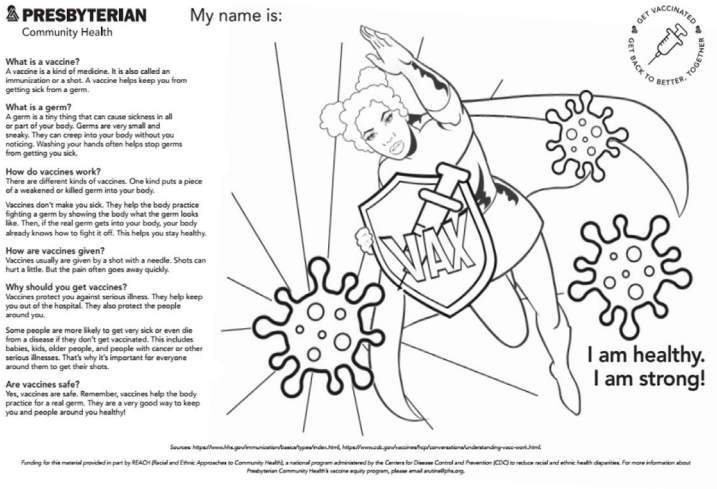
OUR REACH

- 6,354 COVID-19 Vaccines
- 5,683 Flu Vaccines
- 40+ Community Partners
- 60+ Vaccine Clinics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My name is:

What is a vaccine?
A vaccine is a kind of medicine. It is also called an immunization or a shot. A vaccine helps keep you from getting sick from a germ.

What is a germ?
A germ is a tiny thing that can cause sickness in all or part of your body. Germs are very small and sneaky. They can creep into your body without you noticing. Washing your hands often helps stop germs from getting you sick.

How do vaccines work?
There are different kinds of vaccines. One kind puts a piece of a weakened or killed germ into your body.

Vaccines don't make you sick. They help the body practice fighting a germ by showing the body what the germ looks like. Then, if the real germ gets into your body, your body already knows how to fight it off. This helps you stay healthy.

How are vaccines given?
Vaccines usually are given by a shot with a needle. Shots can hurt a little. But the pain often goes away quickly.

Why should you get vaccines?
Vaccines protect you against serious illness. They help keep you out of the hospital. They also protect the people around you.

Some people are more likely to get very sick or even die from a disease if they don't get vaccinated. This includes babies, kids, older people, and people with cancer or other serious illnesses. That's why it's important for everyone around them to get their shots.

Are vaccines safe?
Yes, vaccines are safe. Remember, vaccines help the body practice for a real germ. They are a very good way to keep you and people around you healthy!

Sources: https://www.hhs.gov/immunization/basics/types/index.html, https://www.cdc.gov/vaccines/hcp/conversations/understanding-vacc-work.html.

Funding for this material provided in part by REACH (Racial and Ethnic Approaches to Community Health), a national program administered by the Centers for Disease Control and Prevention (CDC) to reduce racial and ethnic health disparities. For more information about Presbyterian Community Health's vaccine equity program, please email avutina@phe.org.

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

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Fall Open House

Leveraging other REACH-funded programs within our department to support our overall goal to meet the needs of our marginalized communites 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