

NPAIHB Weekly Update

July 2, 2024

Please sign in using the chat box:

Enter the tribe or organization you are representing
and names of all people participating with you today



NORTHWEST PORTLAND AREA
INDIAN HEALTH BOARD
Indian Leadership for Indian Health

Information for Today's Call

Agenda

- Welcome & Introduction: Bridget Canniff
- Upcoming Indian Country ECHO Sessions
- Upcoming NPAIHB Weekly Update Sessions
- COVID-19 Update: Dr. Frank James, Lummi Nation
- Tribal Public Health Infrastructure Building Part 3: Bridget Canniff
- IHS and/or State Partner Updates
- Questions & Comments

Guidelines

- Please place yourself on mute unless speaking
- Sign in, using chat box, with your tribe/organization and names of all participants
- Use the chat box for questions, for Q&A after updates and announcements



Upcoming Indian Country ECHO telehealth opportunities

- **Harm Reduction ECHO** - 1st Tuesday of every month at 12pm PT
 - Tuesday, July 2nd at 12pm PT
 - Didactic Topic: *Somatic Release and Regulation Practice*
 - To learn more and join: <https://www.indiancountryecho.org/program/harm-reduction/>
- **EMS ECHO** - 1st Tuesday & 3rd Thursday of every month at 5pm PT
 - Tuesday, July 2nd at 5pm PT
 - Didactic Topic: *Blunt and Penetrating Trauma*
 - To learn more and join: <https://www.indiancountryecho.org/program/emergency-medical-services-echo/>
- **Hepatitis C ECHO** – Wednesdays at 11am PT
 - Wednesday, July 3rd at 11am PT
 - Didactic Topic: *Positive Behavior Change & Why Language Matters*
 - To learn more and join: <https://www.indiancountryecho.org/program/hepatitis-c/>
- **VCI ECHO** – 2nd Monday of every month at 12pm PT
 - Monday, July 8th at 12pm PT
 - To learn more and join: <https://www.indiancountryecho.org/program/virtual-care-implementation/>

Weekly Update Schedule Preview: July

July 9: NWTEC Update – TBA

July 16: **No Weekly Update – NPAIHB QBM (Spokane)**

July 23: Public Health Update – Journey of Transformation 10th Grade Curriculum

July 30: Legislative & Policy Update

To be rescheduled for August: New Tribal Memoranda of Agreement for Data Sharing



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Visit www.npaihb.org/weeklyupdate for upcoming topics, past presentations, and more!

Oregon Community Health Conversations

- Join us for a working session at the July QBM in Spokane!

Oregon Community Health Discussion: Social Determinants of Health BRFSS Survey Module Feedback

When: Tuesday, July 16, 12:00 - 1:30 PM

What: Working lunch (lunch provided for discussion session attendees)

Who: Open to all Oregon attendees: OR Tribal Delegates, Tribal Leaders, THDs, Health Program Staff, OR Tribal Members

For more information or to RSVP (not required), please contact Bridget Canniff at bcanniff@npaih.org




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Frank James MD
Public Health Officer

A row of seven light-colored wooden blocks with black letters. The first block is stacked with 'E' on top and 'PA' on the bottom. The other blocks are 'N', 'D', 'E', 'M', 'I', and 'C' respectively, forming the word 'ENDEMIC'.

**E
PA** **N** **D** **E** **M** **I** **C**

ENDEMIC COVID




Original SARS-1 outbreak 2003

- SARS-1 8,000 cases, 800 deaths in 2003 (case fatality rate 10%)
- No test, no vaccine, no antivirals
- With **only** isolation and quarantine/masks Hong Kong public health eliminated the virus from the planet.

- SARS-2 or COVID-19 has caused
- 800 million cases of disease worldwide
- 7 million deaths (case fatality rate <1.0%)

SARS-1 Pandemic-- SARS-2 Endemic

SARS-CoV-1 appeared in 2003 and now has not been seen for decades, never became endemic



SARS-CoV-2 seems like it is here to stay, endemic

SARS-1 Pandemic

SARS-2 Endemic



2020 infectious disease erupted quickly and puts unexpected pressure on our healthcare system.



Unexpected with massive pressure on our schools healthcare system and economy



2024 infection with SARS-CoV-2 is not novel



No an unexpected pressure on schools, healthcare system and economy



Infection is happening all the time. That marks it as endemic.

Our
immunity
has
improved
dramatically

Isolation time after testing positive for COVID

- 14 days
- 10 days
- 7 days
- 5 day
- Now CDC has cut it to 24 hours, after a person is fever-free and symptoms are improving



Pandemic vs Endemic

■ Pandemic

--widespread disease that causes disruption on global scale

■ Endemic

--the constant presence of a disease within a geographic area, less often life ending

WHO has ended their public health emergency for COVID

- BUT they still call COVID a pandemic.
- Their perspective that millions of cases of a relatively new disease every week around the world is not a scenario we should just accept as normal

Endemic

- No longer widespread disruptions

Do not see many with severe disease
and needing hospitalization

- Population immunity from either vaccination and/or prior infection.

- Paxlovid helps prevent hospitalization and chronic disease (Long COVID)

Endemic
does NOT
mean:

COVID is NOT benign or without consequences

Malaria is endemic in Africa **and** it kills nearly half a million people every year

2023 prediction: 20 % chance by 2025 we would see another Omicron-like wave (a major genetic shift).

We need to remain vigilant.

A more severe variant can still emerge.



COVID-19 (SARS-2)

- January **2020**, less than 100 cases had ever been reported anywhere
- January **2021**, there were 5 million cases per week
- January **2022** and **2023**, there were over 20 million cases per week
- January **2024** is less clear—the end of the emergency has led to a dramatic **reduction in testing**

CDC still reports COVID hospitalizations accurately:

- January 2023, **44,000** hospitalizations per week
- January 2024, **35,000** hospitalizations per week

Looking forward

Important to
maintains a robust
surveillance system

So that we could
quickly identify and
address any future
variants

2,000 people are
dying every week
from COVID in the
US now

We continue to learn
more about long
COVID

We are in a different
phase, there are still
reasons to remain
vigilant

Those at
higher risk
for severe
COVID,
mostly **elders**

Use additional measures to protect oneself:

Limit time in crowds

Wear a high-quality mask in poorly ventilated indoor settings- N95

Improve indoor air quality-- ventilation and filtration decreases risk

Early **testing and antivirals** also helpful



Not milder or going away

- Nearly as many hospitalizations in January 2024 as in January 2023
- Clear that COVID is not growing milder and it's not fading away
- The real question, how much COVID illness and death are we willing to accept?

What NOW?

Try not to spread COVID/FLU/RSV or other respiratory diseases:

- Really sick--stay away from others
- Sick but not highly symptomatic--distance and masking are polite and save elders lives
- If around immune compromised OR elders, being extra careful is a kind thing to do (be immunized, test, mask)



Most important actions?

Single best- **be up to date with vaccines**, receiving all the COVID vaccines for which you're eligible.

The CDC/FDA allow healthy adults to receive a **booster four months after your last booster**

Children can also **get booster** vaccine, they often carry the infection to elders

Booster shots are safe, effective and particularly good at reducing hospitalizations and deaths.

If you get COVID, but you've had the vaccine, you are much less likely to get Long COVID

Vaccinations

Being up-to-date: vaccinations should be the **first line of defense**

Vaccination decreases the risk of severe disease and death

Also prevents long COVID

Being boosted makes a big difference

Booster doses save lives, but.....

- As of May 11, 2024, **22.5%** of adults
 - reported having received an updated 2023-24 COVID-19 vaccine
- As of May 11, 2024, **14.4%** of children
 - were reported to be up to date with the 2023-24 COVID-19 vaccine



Masks for breathing IN and OUT

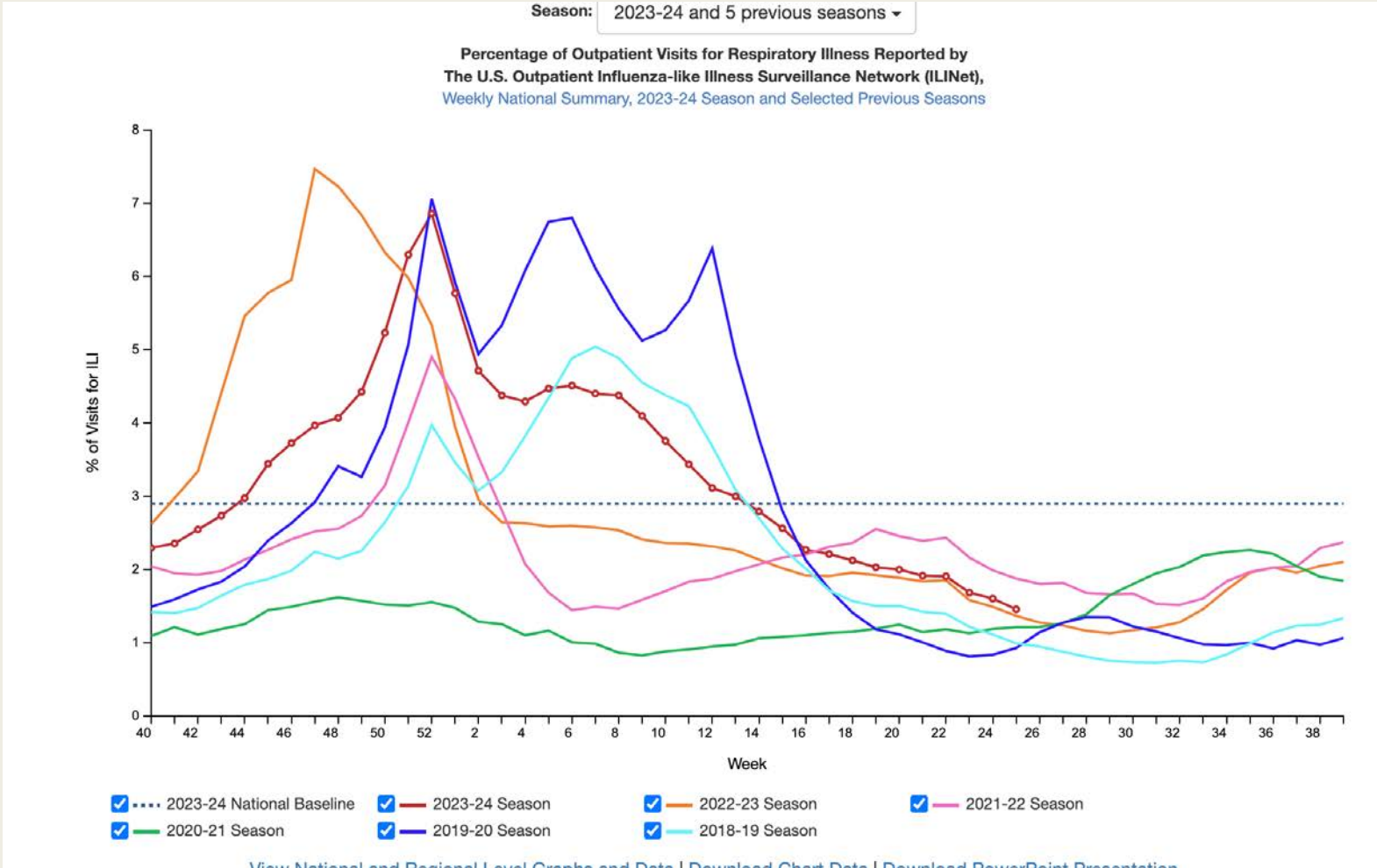
- Masks work to protect immune compromised or elders
- Masks protect you from COVID-19, and all other respiratory viruses
- Wear a mask outside your household bubble-- at the market or on a plane, especially **inside and in crowds**

- **Breathing IN** if you need protection from others in the family or community
- **Breathing OUT** if you need to protect others when you have been exposed **or** are ill with infection

What about testing?

- If symptomatic--sore throat, runny nose, cough or shortness of breath, get tested
- Home tests not accurate for first 48 to 72 hours. Even if your test is negative, **repeat** negative test in 48 hours
- Paxlovid works best within first 5 days. Don't wait till you get very sick.
- Test early, if high risk, talk to health care provider get PCR test (they are accurate early) and Paxlovid

When everyone masked to prevent COVID there were NO FLU cases



Weekly update on current facts

Covid-19 Wastewater Viral Activity Levels

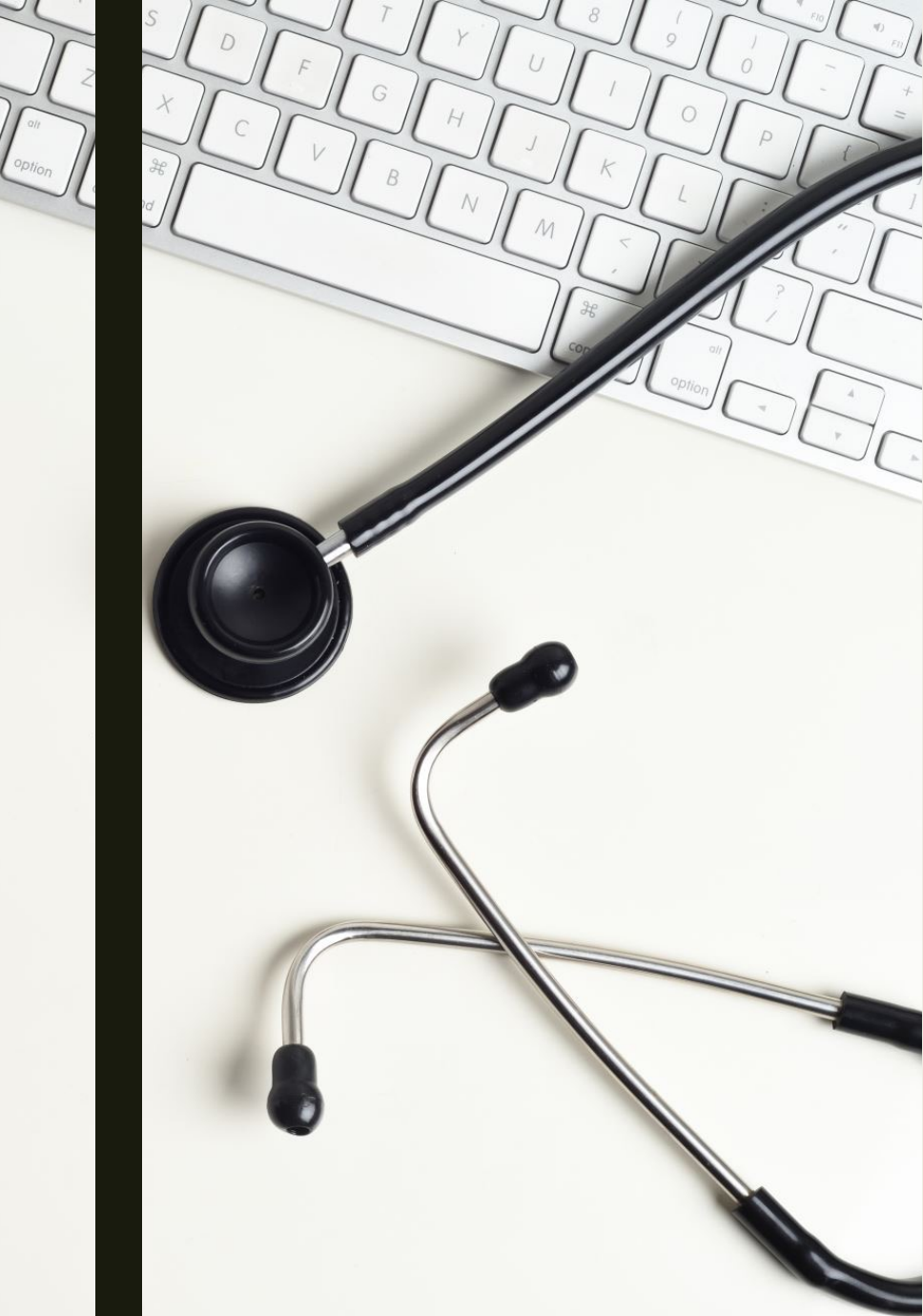


(Source: [CDC](#); Annotations by YLE)

Summer typically is not the season for respiratory infections

- Many reunions, barbecues, graduation parties, weddings and travel
- Temperatures climb, people go indoors to air-conditioning
- **REAL REASON** people are less careful, because people under 50 have mild or even asymptomatic infections

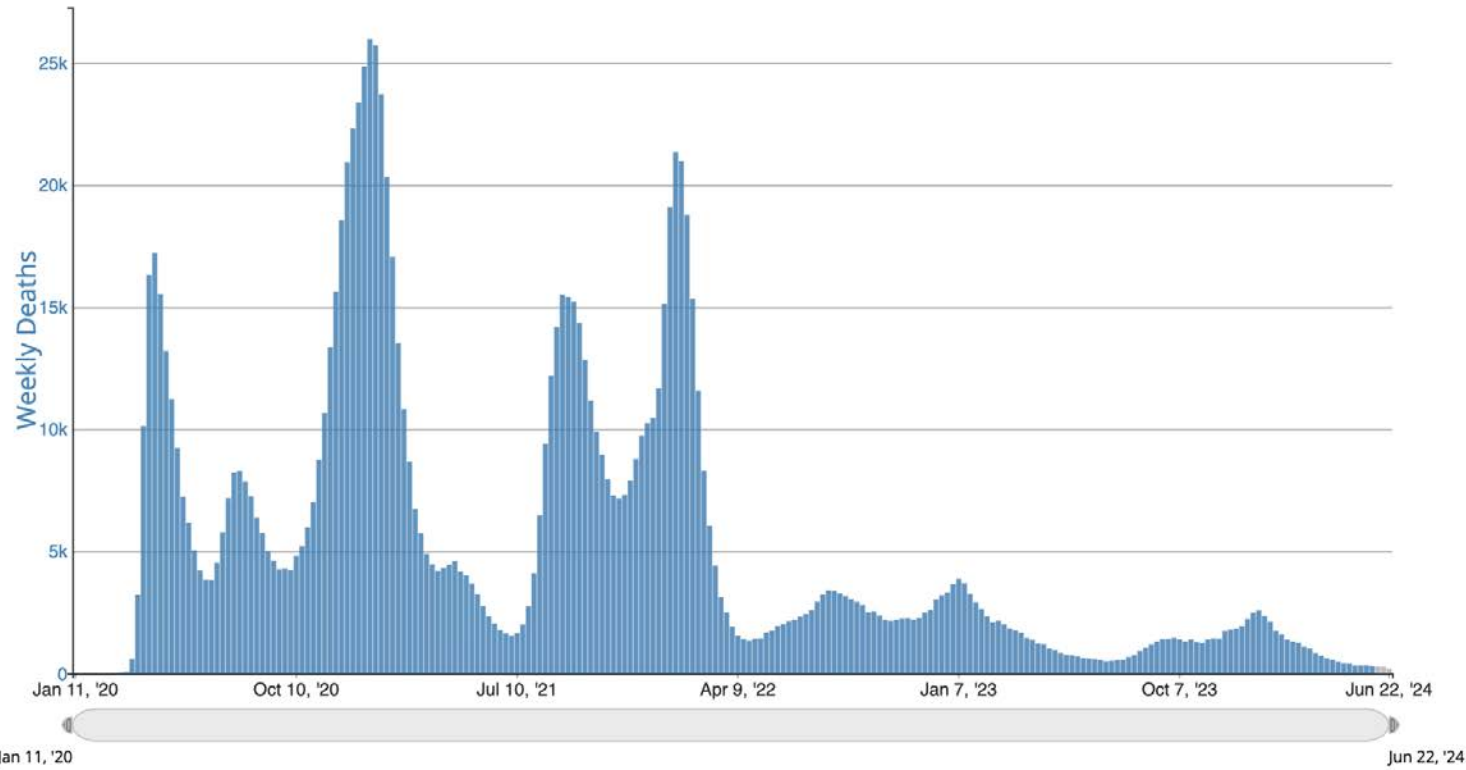




This past week:

- 1.4% more positive tests
- 23.3% rise in hospital emergency department visits
- 25% increase in COVID hospitalizations (last week) many very young children
- 14.3% more deaths (almost all in ELDERLY)

Provisional COVID-19 Deaths, by Week, in The United States, Reported to CDC



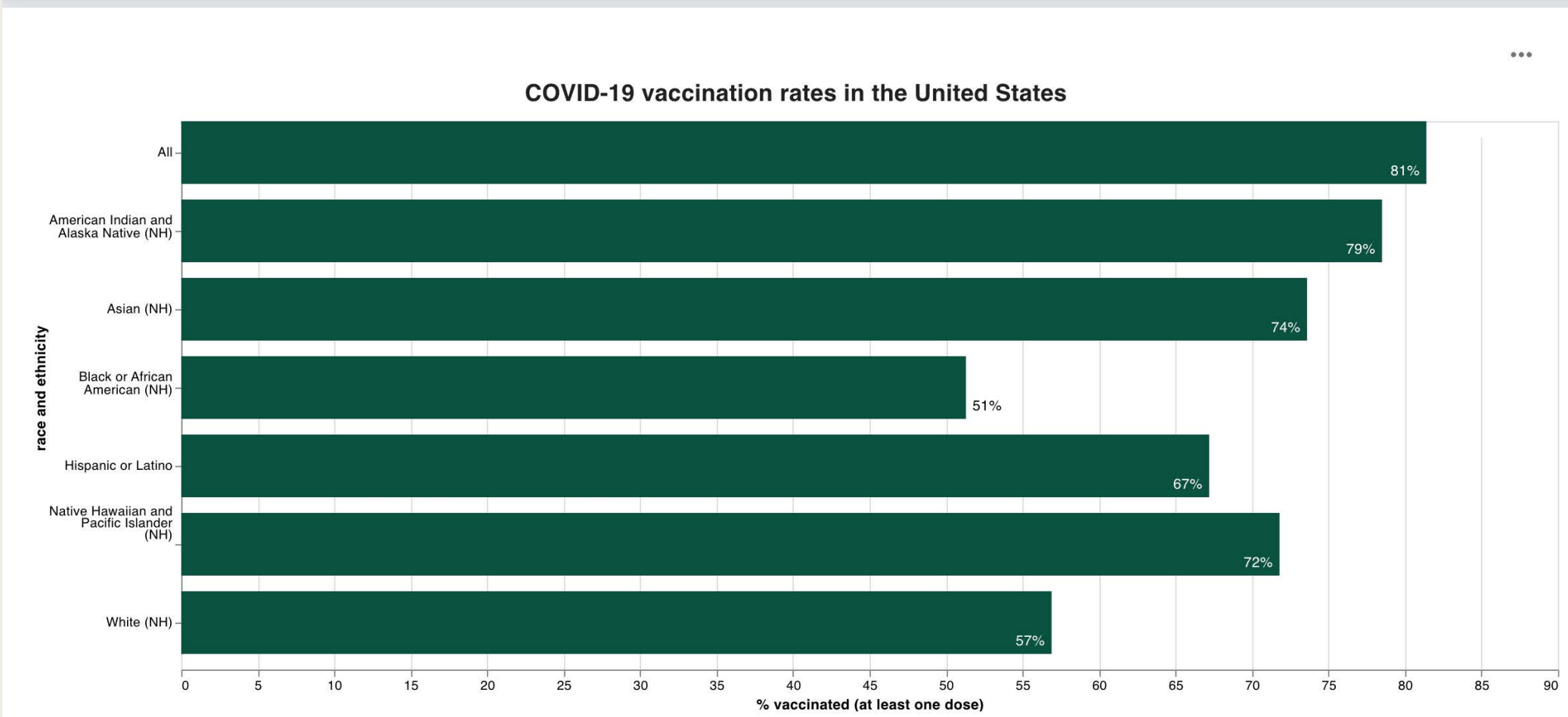
PERCENT
CHANGE CAN
BE MISLEADING

Summary

- COVID now largely ENDEMIC
- ENDEMIC is not good, it is here for years to come
- Likely will be **more severe than FLU**, likely twice death rate (?60,000 per yr)
- Mainly impacting **elders**, those **under 6 months** and **medically fragile**

- Preventing deaths and hospitalizations:
 - *Vaccinate, educate on importance of maintaining strong immunity*
 - *Mask if ill, exposed or at risk*
 - *Test (twice 48 hours apart) or PCR if high risk*
 - **Clean Air- Ventilation and Filtration**, (works for wildfire smoke too!)

AI/AN have highest immunization rates in US



[View methodology.](#)

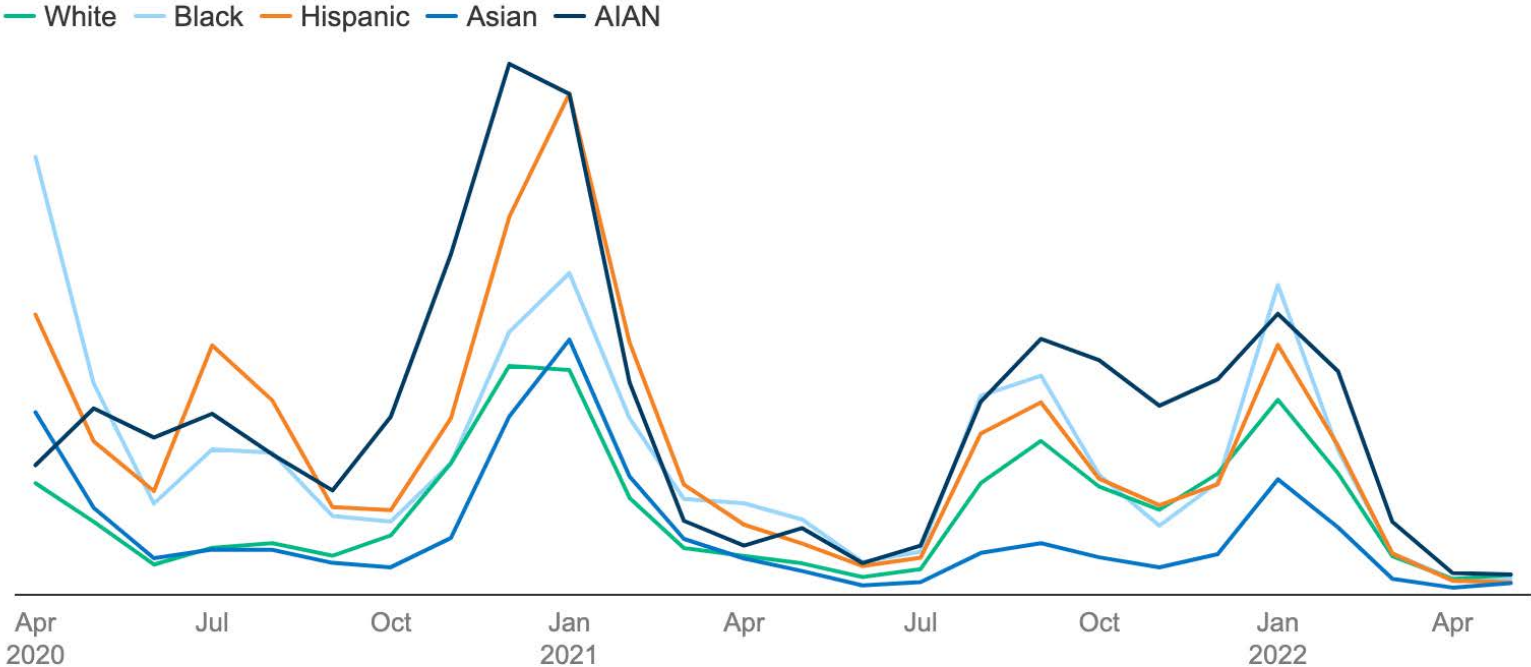
Note. NH: Non-Hispanic. To promote inclusion, we replace the source data labels 'Multiracial' with 'Two or more races', and 'Some other' with 'Unrepresented'.

Sources: CDC COVID-19 Vaccination Demographics in the United States, National (data from March 2023) and American Community Survey (ACS) 5-year estimates (data from 2022)

AI/AN have highest death rate in US

Figure 3

COVID-19 Monthly Age-Adjusted Deaths in the United States per 100,000 by Race/Ethnicity, April 2020 to May 2022



NOTE: Persons of Hispanic origin may be of any race but are categorized as Hispanic for this analysis; other groups are non-Hispanic. AIAN refers to American Indian/Alaska Native. Data for Native Hawaiian and Other Pacific Islander people not shown due to insufficient number of deaths for several months during the analysis period. Age-adjusted rates standardized to 2019 U.S. population estimate. Death data as of August 3, 2022 but only shown through May 2022 because data during recent periods are often incomplete because of the lag in time between when the death occurred and when the death certificate is completed, submitted to NCHS and processed for reporting purposes. This delay can range from 1 week to 8 weeks or more, depending on the jurisdiction and cause of death.

SOURCE: [National Center for Health Statistics. Provisional COVID-19 Deaths by Race and Hispanic Origin, and Age. Date accessed August](#)



Tribal Public Health Infrastructure Building: Part 3

Social Determinants of Health

Bridget Canniff

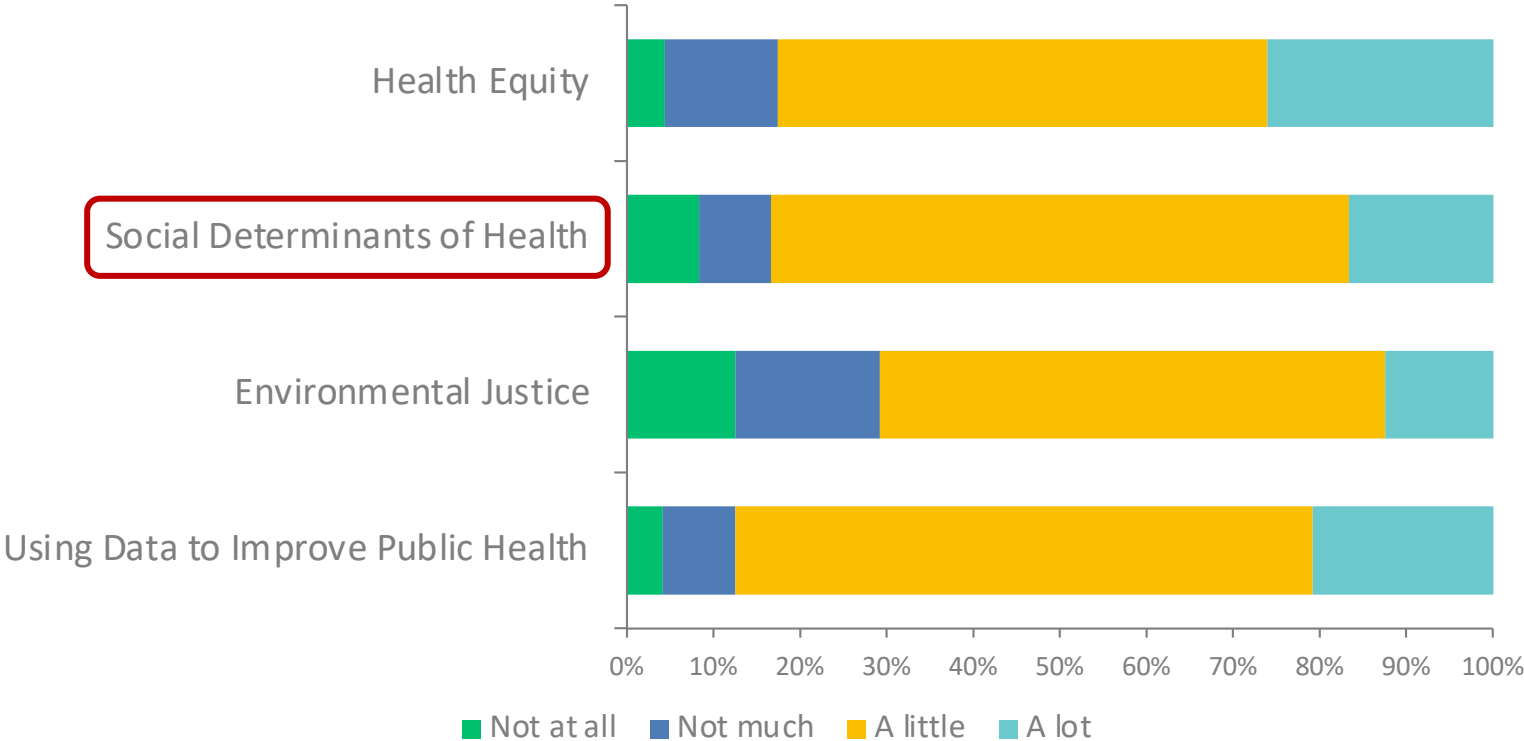
Project Director, Public Health Improvement & Training (PHIT)



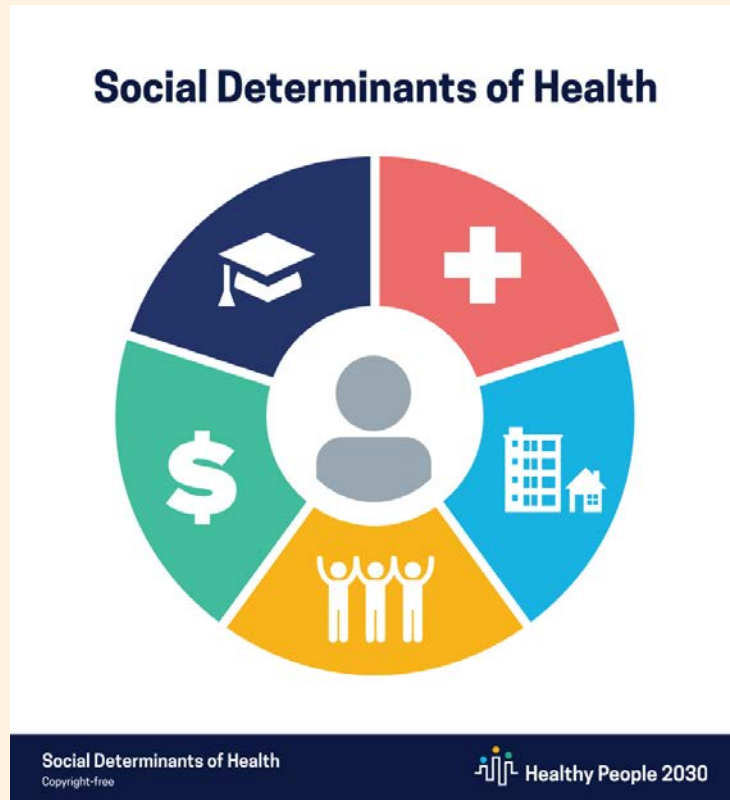
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How confident are you at addressing the following public health concepts with your public health workforce?

Answered: 24 Skipped: 0



Social Determinants of Health



What are social determinants of health?

Social determinants of health (SDOH) are the conditions in the environments where people are born, live, learn, work, play, worship, and age that affect a wide range of health, functioning, and quality-of-life outcomes and risks.

SDOH can be grouped into 5 domains:



Economic Stability



Education Access and Quality



Health Care Access and Quality



Neighborhood and Built Environment



Social and Community Context



SDOH: Economic Stability

- Housing and Homes
- Nutrition and Healthy Eating
- Workplace and Employment



SDOH: Education Access and Quality

- Adolescents
- Children
- People with Disabilities
- Schools



SDOH: Health Care Access and Quality

- Adolescents
- Children
- Community
- Cancer
- Drug & Alcohol Use
- Family Planning
- Health Care
- Health Communication
- Health IT
- Health Insurance
- Oral Conditions
- Pregnancy & Childbirth
- Sensory or Communication Disorders
- Sexually Transmitted Infections



SDOH: Neighborhood & Built Environment

- Environmental Health
- Health Policy
- Housing & Homes
- Injury Prevention
- People with Disabilities
- Physical Activity
- Respiratory Disease
- Sensory or Communication Disorders
- Tobacco Use
- Transportation
- Workplace



SDOH: Social & Community Context

- Adolescents
- Children
- Health Communication
- Health IT
- LGBT
- Nutrition & Healthy Eating
- People with Disabilities



Indigenous Social Determinants of Health

- **Project Partners:**

- Seven Directions, A Center for Indigenous Public Health
- Centers for Disease Control and Prevention (CDC)
- National Network of Public Health Institutes (NNPHI)

- **Purpose:**

- Explore the SDOH from an Indigenous-centered perspective

- **Resources:**

- Six-module training
- Resources for tribal and urban public health systems



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Source: <https://www.indigenousphi.org/isdoh/about>
Seven Directions, A Center for Indigenous Public Health

What are Indigenous Social Determinants of Health?

ISDOH Constructs

Indigenous Knowledge

Language and Identity

Land and Kinship

Sovereignty

Structural and Systemic Factors



- Holistic
- Interconnected
- Community centered

What is the community context? What are the historical and contemporary events that affect our health?

What aspects of our respective cultures inform our health and the health of our community?

Tribal sovereignty offers an important tool to address public health issues. What role does it play in information our community's health?



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Source: <https://www.indigenousphi.org/isdoh/training>
Seven Directions, A Center for Indigenous Public Health

SDOH:Tribal Context

OR Community Health Conversations priority domains for BRFSS survey SDOH module:

- Housing & Food
- Social & Community
- Culture & Spirituality
- Economy & Employment

These top domains were identified by participants in the April QBM session



SDOH: Key Concepts

Housing & Food

- Housing & Shelter
- Food

Social & Community

- Community Involvement
- Social & Emotional Support
- Safe Neighborhoods
- Life Satisfaction

Culture & Spirituality

- Culture
- Spirituality
- Language

Economy & Employment

- Employment
- Economic Development
- Transportation



SDOH: Key Concepts, Ranked

Housing & Food

Social & Community

Culture & Spirituality

Economy & Employment

Ranked voting by participants in the April QBM session

1. Housing & Shelter
2. Community Involvement
2. Culture
3. Food
3. Social & Emotional Support
3. Spirituality
3. Employment
4. Economic Development
5. Safe Neighborhoods
5. Life Satisfaction
5. Language
6. Transportation



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Oregon Community Health Conversations

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Why do the Social Determinants of Health Matter?

- Have a major impact on people's health, well-being, and quality of life
- Contribute to health disparities and inequities

Just promoting healthy choices won't eliminate health disparities.

Public health organizations and partners in sectors like education, transportation, and housing need to take action to improve the conditions in people's environments.



Thank you!

For more information about the Public Health Improvement & Training project at NPAIHB, please contact:

Bridget Canniff
Project Director, PHIT

bcanniff@npaihb.org

503-400-8880



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State Partner Updates



Free COVID-19 Testing Supplies for Tribes

Washington

[Tribal Order Request Form](#)

(<https://app.smartsheet.com/b/form/6574ac36b4f748269cac2507f2ab2f8e>)

Available through July 31, 2024

Individual COVID-19 testing gear: swabs for sample collection, biohazard bags for safe sample storage, transportation bags for secure shipping and ice packs to keep samples cool. Inteliswab® at-home test kits also available in boxes of 48 tests each.

Oregon

[Abbott COVID-19 Tests Request Form](#)

(<https://app.smartsheet.com/b/form/5ebd5f9f9a854d7bab7e00f48d2464bd>)

Abbott BinaxNOW Rapid Antigen Test Kits for clinical use (organizations that have a CLIA waiver) and Abbott ID NOW COVID-19 test kits: request online

[ASPR Self-Test Ordering Form \(OHA\)](#)

(<https://app.smartsheet.com/b/form/f367a9f9517748a4a501cdbc6622f171>)

Federal program providing free self-tests to approved groups, including tribes; minimum order ~450 tests. Contact Stephen Wilcox for more info (Stephen.wilcox@oha.oregon.gov).



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Questions and Comments



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