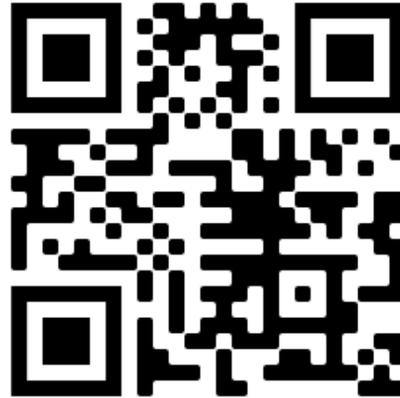


COVID-19 Disparities and Vaccine Hesitancy: Moving Toward Health Equity – Part II

SW DEI Collaborative

To receive credit for this session as Diversity, Equity & Inclusion Hours:



**Applies only to members of The
University of Arizona College of
Medicine - Tucson**

- Go to: <https://signup.com/go/rDDMwiv>
- Sign up for the session that corresponds with today's date
 - (phone number is not required)

Introduction

Valerie Romero-Leggott
University of New Mexico
Health Sciences Center

Panelists

- Joshua Lee, MD – University of Arizona
- Gayle Dine'Chacon, MD – University of New Mexico
- Amira del Pino-Jones, MD – University of Colorado
- Ricardo Correa, MD – University of Arizona
- Nicole Jacobs, PhD – University of Nevada Reno
- Francisco Moreno, MD – University of Arizona

Moderator: Valerie Romero-Leggott, MD - University of New Mexico

Rural Disparities in Pandemic Impact

Joshua Lee, MD

Banner University Medicine-Tucson

College of Medicine –Tucson, U Arizona

Rural Impact

- Both the infectivity rates and the death rates are markedly different between urban and rural counties
- Rural counties (NW in particular) also have the overlay of high percentages of indigenous peoples

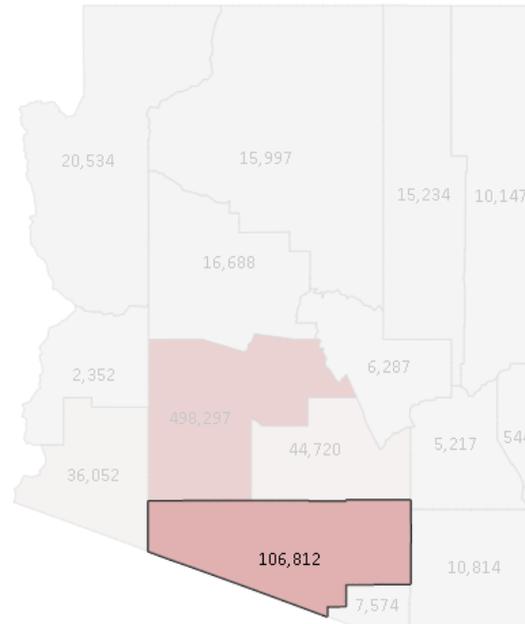
Pima County

Show case counts or population rates in the map below?

Cases

Select a county to filter the other numbers.

Deaths will not be shown for counties with fewer than three deaths.



Number of Cases	Number of Deaths	Number of COVID-19 Tests
106,812	2,075	600,611
Number of New Cases reported today*	Number of New Deaths reported today*	Number of New Tests reported today*
269	3	2,455
Rate of cases, per 100,000 population	Rate of fatalities, per 100,000 population	Total Percent Positive**
10,224.4	198.63	12.4%
Total COVID-19 Diagnostic Tests***	New Diagnostic Tests reported today*	Diagnostic Tests Percent Positive**
553,598	2,392	12.8%
Total COVID-19 Serology Tests	New Serology Tests reported today*	Serology Percent Positive**
47,013	63	8.0%

*Counts of new cases, deaths, and numbers tested reflect increases in the total numbers compared to the previous day.

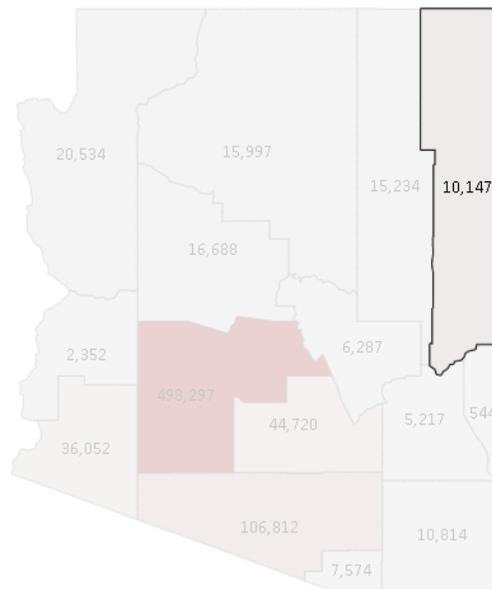
Apache County

Show case counts or population rates in the map below?

Cases

Select a county to filter the other numbers.

Deaths will not be shown for counties with fewer than three deaths.



Number of Cases	Number of Deaths	Number of COVID-19 Tests
10,147	350	27,330
Number of New Cases reported today*	Number of New Deaths reported today*	Number of New Tests reported today*
37	1	63
Rate of cases, per 100,000 population	Rate of fatalities, per 100,000 population	Total Percent Positive**
14,130.7	487.41	13.1%
Total COVID-19 Diagnostic Tests***	New Diagnostic Tests reported today*	Diagnostic Tests Percent Positive**
26,377	61	13.0%
Total COVID-19 Serology Tests	New Serology Tests reported today*	Serology Percent Positive**
953	2	16.0%

*Counts of new cases, deaths, and numbers tested reflect increases in the total numbers compared to the previous day.

**Percent positive is defined as number of people with a positive test result, reported electronically out of all people with COVID-19 testing reported electronically completed in AZ.

What drives the differential?

- Different housing density
- Markedly different access to care – no tertiary care facilities
- Differential utilities and water/sewage
- Differential trust in healthcare structures

Covid-19 and Vaccine Hesitancy: American Indians

Gayle
Dine'Chacon,
MD

Native American
Budget and
Policy Institute
University of New
Mexico

American Indian/Alaska Native

- Pueblos, Tribes and Nations have inherent sovereign rights and a political relationship through treaties with the U.S. Government that does not derive from race or ethnicity. Tribal members are citizens of three sovereigns: their tribe, the United States and their state in which they reside. (ncai.org)
- Thus, tribal governments have the right to govern themselves and all matters that involve their tribal members. This includes protecting the health, safety and welfare of all their tribal members within their tribal lands.
- The Public Health authority for pueblos, tribes and nations is the responsibility of the tribal government. Federal and state tribal consultation and collaboration is key to addressing the Covid-19 pandemic in native communities.

Vaccine trials on Navajo Nation

- Navajo Nation, early in the pandemic, had the highest infection rate per capita. Higher than New York at the same time.
- In August 2020, the Navajo Nation IRB **expeditiously** approved Johns Hopkins Center for American Indian Health Pfizer/BioNTech vaccine trials on the Navajo Nation. Trials were also undertaken with the White Mountain Apache Nation in Arizona.
- History of distrust:
 - Havasupai vs. ASU
 - NN IRB moratorium on genetics research
 - H/O forced sterilization in native women from IHS.

DISCOVER THE WORLD'S MOST

SCIENTIFIC EXPLORATION
SHOULD NOT BE
TRIBAL EXPLOITATION

Paid for by the Havasupai Tribe

GENETICPIRACY.COM



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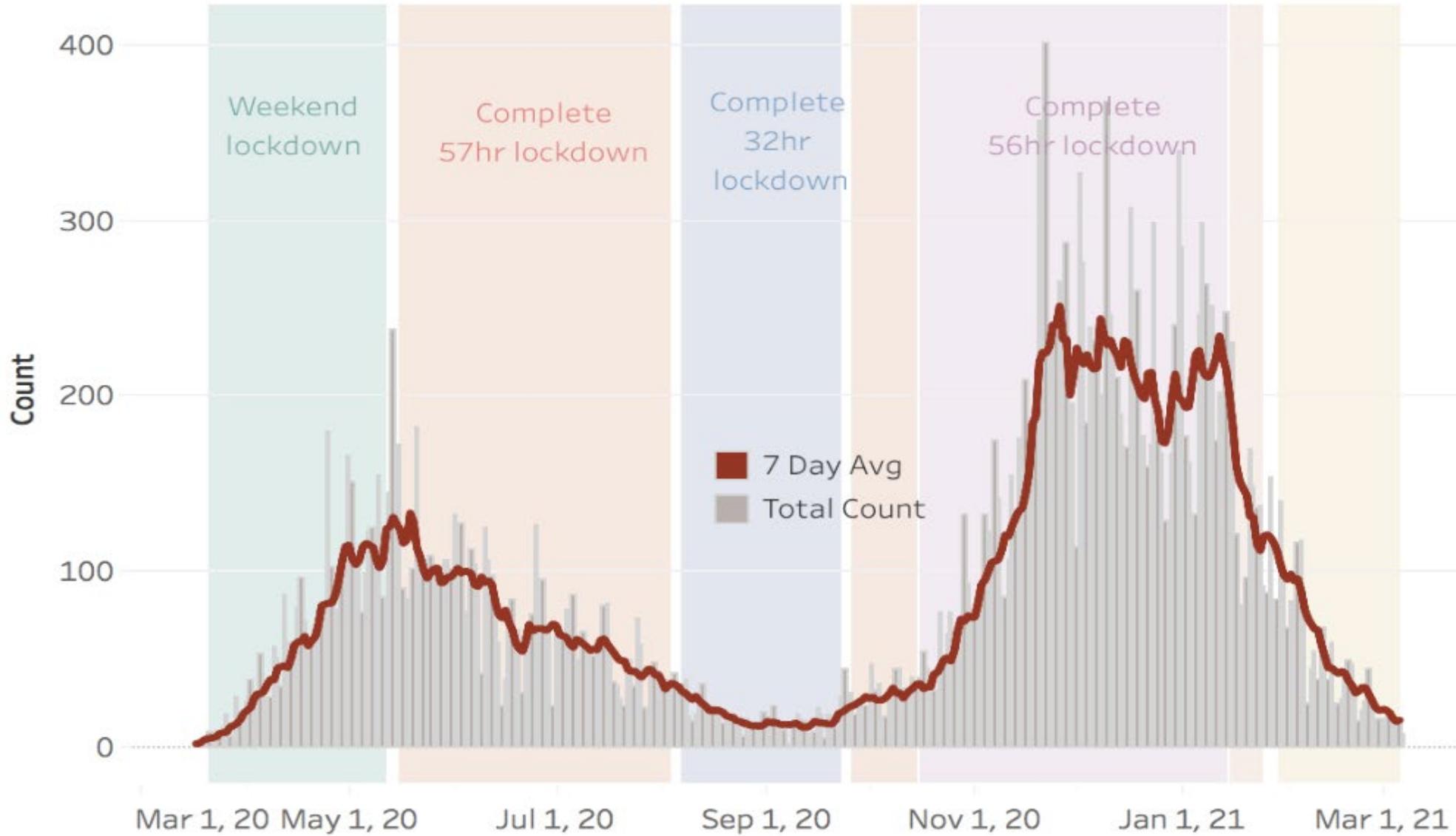
CLEAR CHANNEL

1943

Vaccine Roll Out

- Tribal sovereignty: choice of State or Indian Health Service (IHS) vaccines and prioritization of vaccine roll out.
- Native people get their healthcare from a variety of sources, IHS, tribal-controlled clinics, urban health clinics or none of the above.
- The NN vaccine roll out began on December 15, 2020.
- NN total doses administered (3/4/21): 142,607
- NN total fully immunized(3/4/21): 51,994
- NN currently in Phase 2: any remaining phase 1 and general pop.
- The highest number of positive covid cases in (Spring) May was 238 and (Fall) November was 401. 7 day avg (1/12/21): 233 cases
- 7 day avg (3/6/21): 14.8 cases

Daily Confirmed Cases on Navajo Nation in All





Medical assistant Vangie Yazzie (left) administers the Pfizer COVID-19 vaccine to Galena Dineyazhe (right) as director of nursing Monica Jones (back right) watches at the Dr. Guy Gorman Senior Care Home on the Navajo Nation in Chinle, Ariz. on Dec. 18, 2020.

THOMAS HAWTHORNE/THE REPUBLIC

Vaccine hesitancy vs acceptance

- Survey of 1,435 AI/AN across US: 75% willing to receive a Covid-19 vaccine. (Urban Indian Health Institute)
- Overwhelming motivation: responsibility to protect Native community and cultural preservation.
- Constant consistent public health messaging that is culturally relevant
- Priority on who gets vaccinated decided by tribe/community.
- Early trials and leading by example
- Exerting sovereign public health authority
- Taking responsibility leads to resilience

African-American and Refugee Communities

Amira del Pino-Jones, MD
University of Colorado



Education



MAYOR HANCOCK HOSTED PANEL DISCUSSING VACCINE INEQUITY

 CORCORAN O'LEARY * FEBRUARY 8, 2021 * FEATURED * NEWS



Hart Van Denburg/CPR News

Ellis Linville, Sr., gets his second COVID-19 shot, from Dr. Sunita Sharma at Shorter AME Church in Denver, Sunday, Feb. 7, 2021.



Hart Van Denburg/CPR News

Fred Gayles of Denver reacts to getting his first COVID-19 vaccination, at the National Western Complex in Denver on Saturday, Feb. 6, 2021. SCL Health partnered with dozens of community organizations including The Center for African American Health, The Senior Hub and The Center on Colfax, as well as the city and state, to create this pop-up clinic designed to get vaccinations into vulnerable seniors from underserved communities.

Outreach – Churches and Community Centers

Hospital Resources

- Patient Navigator Project – Case Management/Language Services
- Interpreter-Video chat devices in every room
- Handouts on COVID (including post-discharge instructions) reviewed using Language Services
- Remote Patient Monitoring Program – Expanded to include non-English speaking patients

Elevating Black Voices: Colorado Doctors Stress Importance Of Diversity In Medical Field

By [Conor McCue](#) February 3, 2021 at 11:55 pm Filed Under: [Coronavirus](#), [Denver News](#)



(credit: Vaughn Browne)

“I grew up with the sense that you have to think about things beyond just yourself and your home, but think about how your actions can impact your community,” Lisa said. “For us, I thought it was important to participate in the trial because this was something we could do to make our community better.”



(credit: Lisa Wynn)

Wynn and Browne are among the many Black men and women going above and beyond amidst the health crisis of our time, but, looking across their facilities they see few colleagues who look like them.

LATINX

Ricardo Correa, MD, EdD, FACP, FACE.

University of Arizona College of Medicine-Phoenix

Phoenix VAMC

PACH Clinic

@drRicardoCorrea, ricardocorrea@arizona.edu

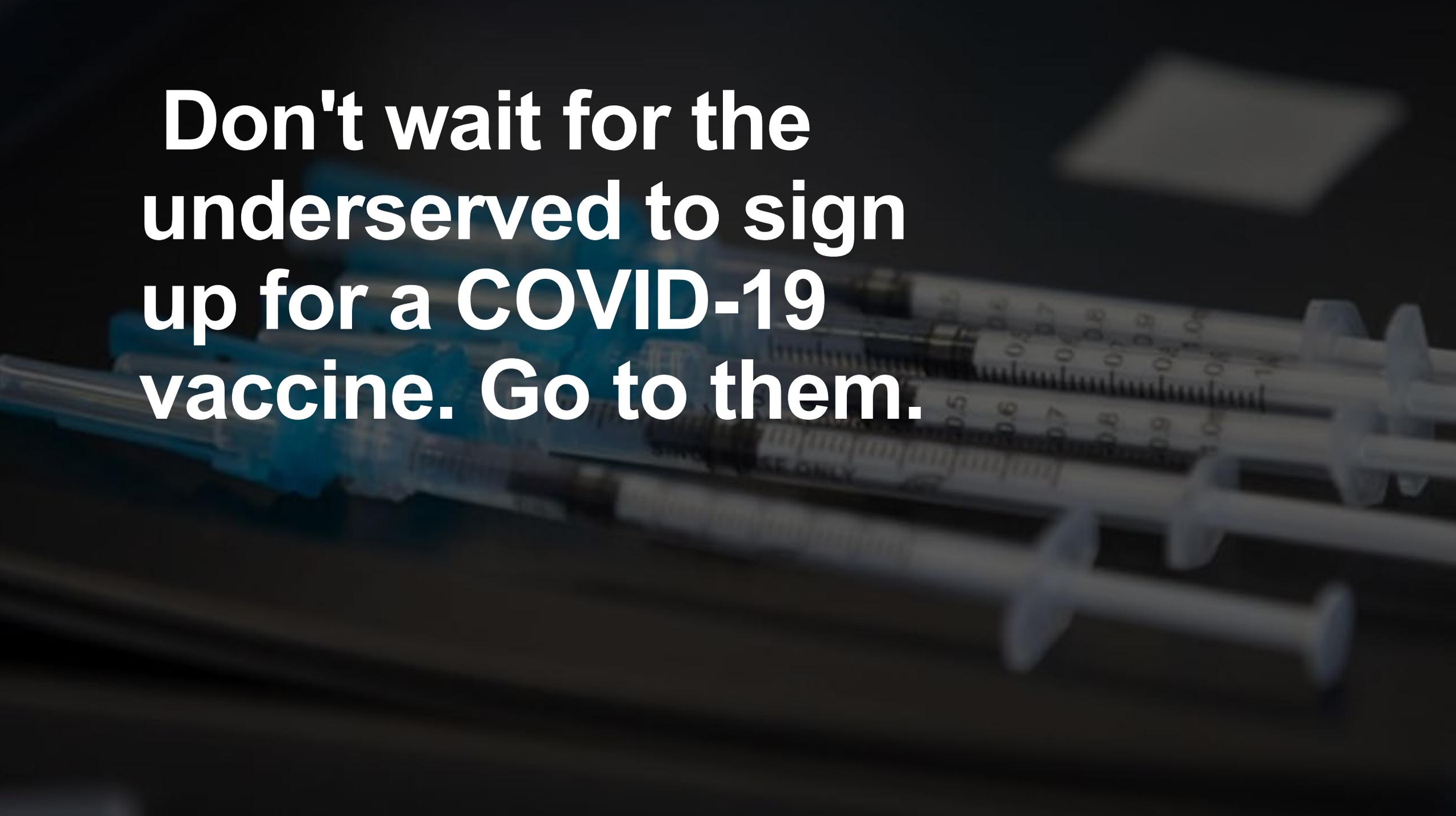


Getting an Appointment



Vaccination Drive thru

Don't wait for the underserved to sign up for a COVID-19 vaccine. Go to them.



STRATEGIES

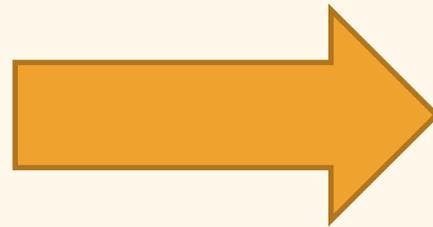
- **Build trust and prove our trustworthiness**
 - Black, Latinx and Native populations have been on the receiving end of some of the worst medical atrocities ever committed on people because of who they are.
- **Go where they are**
 - Deploying community-based teams that can go door to door, block by block, registering people and setting up vaccine clinics in locations and during times that work for the community

STRATEGIES

- **Don't let these problems fester**
 - Latinx population is more likely to be obese and suffer diabetes, and 10 percentage points more likely to live in poverty and be uninsured compared with Arizona's general population
 - Important undocumented population
- **Make it equitable, swift and transparent**
 - Calls to build a database that can better identify communities that have been disproportionately harmed during the pandemic
 - Deliver vaccines to those hard-hit communities in a more thoughtful, intentional way

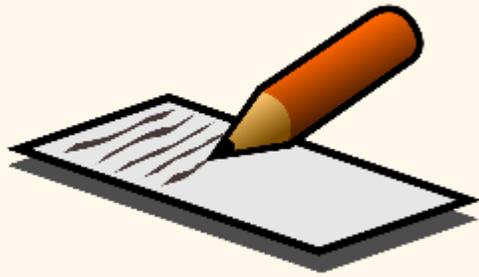
STRATEGIES

- Education and outreach campaign



#VacunateYA

Education and Outreach Campaign



EXAMPLE

MITO	REALIDAD
	
<p>La vacuna Covid-19 no es segura porque se desarrolló y aprobó demasiado rápido.</p>	<p>Las vacunas disponibles para combatir COVID-19 han pasado por rigurosos estudios y procesos de aprobación para garantizar que sean lo más seguras posible. Permanecen bajo estricta vigilancia para garantizar su seguridad.</p> <p><small>*Comunicación de prensa sobre el COVID-19, gub</small></p>



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COVID-19

New Orleans Catholics urged by archdiocese to avoid Johnson & Johnson vaccine

State public health officials push back against archdiocese's claim that fetal tissue links taint the vaccine, which the Vatican has approved.

NEWS

Catholic leaders advise getting available vaccine, despite concerns with Johnson & Johnson shot



Helping the community

GOOD MESSAGE

Family oriented Messages

Best way to protect yourself and your whole family is to get vaccinated.

Dispel myths & Misconceptions

Prevent misunderstandings about the covid vaccine. Explain benefits, side effects and safety.

Vaccine protects both healthy and high-risk individuals

Discuss exposures and risks for healthy and vulnerable patients and family members in the household.

Recommend vaccine! Let them know you were vaccinated

Provider recommendations increase likelihood of patients getting vaccinated.

Trust is vital!

Recommendations

- Government
 - New economic relief for small businesses and families; job training
 - CDC Guidance in Spanish
 - Support providers- Medicare, emergency Medicaid, PPE, licensing
 - Public charge not enforced, detention ctrs, prisons, schools
 - Cultural and language services & Leaders needed
- Health Industry - affordability
 - Insurance copays for testing, healthcare/meds
 - Pharmaceutical Companies – pt assistance
- Health Care Systems
 - Health education, referrals, follow-up of all patients, training and research
- Communities
 - Media, Churches, Senior Centers, Schools, Nonprofit minority organizations



[@drricardocorrea](https://twitter.com/drricardocorrea)

[#VacunateYA](https://twitter.com/hashtag/VacunateYA)

How Medical Educators are Addressing Disparities

Nicole Jacobs, Ph.D.

University of Nevada, Reno School of Medicine



Education

- Skills and Training
- Supporting growth

Representation

- More than a single number
- What positions do minorities hold?

Opportunity

- How many leaders in an organization?
- How many senior leaders...?

Workforce Diversity Efforts

Increasing the Diversity of the Healthcare Workforce: Representation Matters!

- Outreach to K-12 students
- Pipeline programs
- Black Men in White Coats
- Partnerships with HBCUs, HSIs, MSIs
- Holistic Review for selection (MMI)
- Second Look events
- Scholarships/fundraising for URM students
- Mentoring
- Implicit Bias Training (admissions and search committees)
- Tracking of data (recruitment, retention, advancement/graduation, climate surveys)
- Building the Next Generation of Academic Physicians (BNGAP)

Efforts to Increase the Cultural Humility of the Workforce

- Implicit bias assessments and training to mitigate biases in the curriculum
- Diversity and anti-racism curricula
- Community engagement programs
- Trainings: Safe Zone, Microaggressions and Bystander Intervention
- Diversity Dialogues
- Health Care Disparity Forums
- Health Equity Grand Rounds
- Affinity groups: SNMA, LMSA, APAMSA, MedPride, FGLI, AMWA, GWIMS

Patient Care

- Increase access to care
 - Student Outreach, rural, and satellite clinics
 - Telemedicine visits to mitigate obstacles to healthcare during COVID-19
 - Partnering with community groups
- Reduce implicit bias in care
 - Use of evidence-based practice guidelines to guide COVID-19 care
- Tailor care to known needs
 - Essential health care services for medically underserved communities during COVID 19- primary care and mental health

Patient Care

- Culturally sensitive patient education materials
- Patient Care Quality Improvement Initiatives
- Build workforce that reflects diversity of patients in our communities
 - Bilingual and bicultural staff/providers
- Relationship centered communication for physicians
- Scholarly Concentration in Medical Social Justice

Research

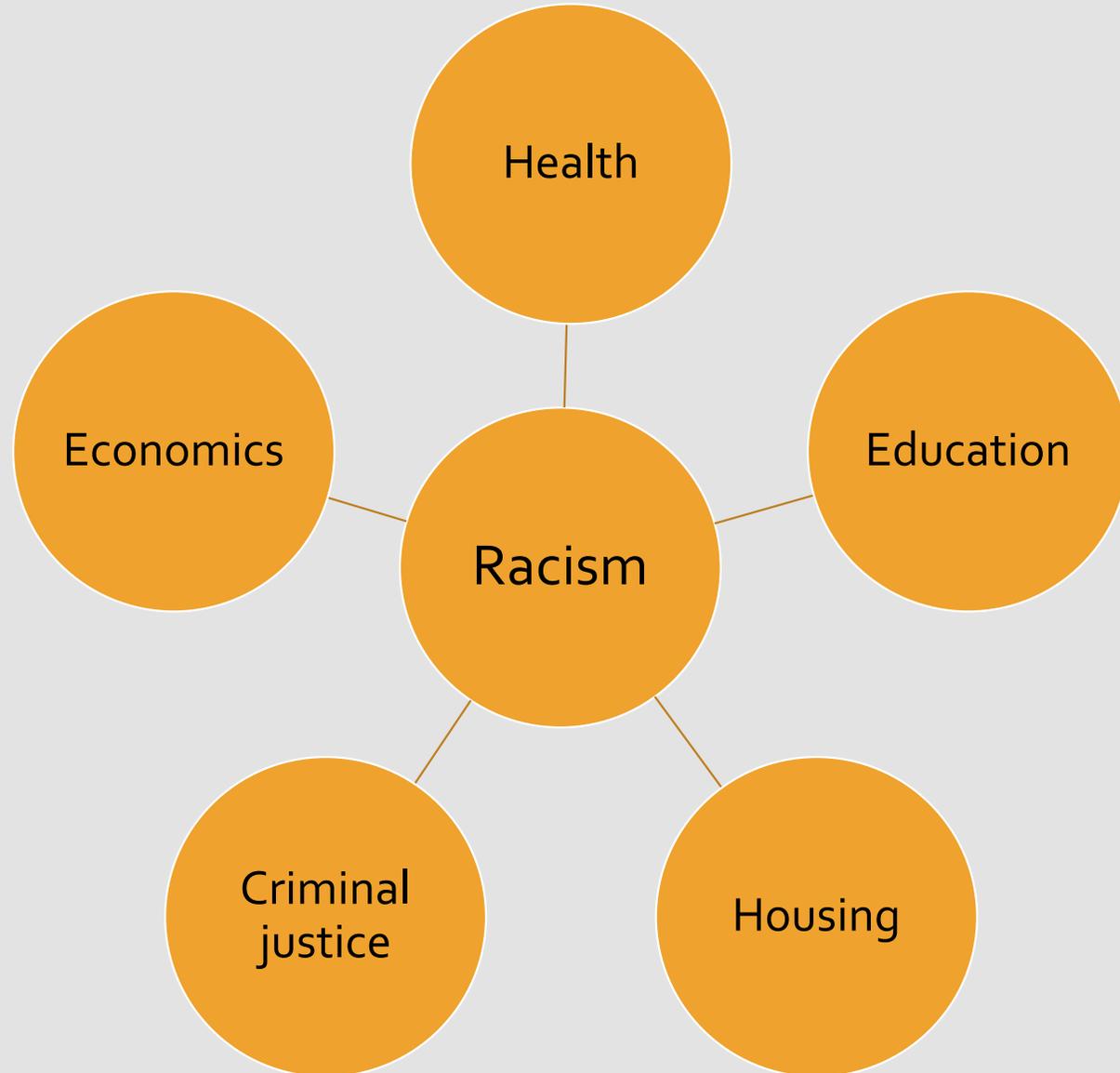
- Health Care Disparities
- Community of Bilingual English Spanish Speakers
- Implicit Bias Research Group at UNR Med
- Latino Research Center / Hispanic Center of Excellence
- Research pilot funding
- All of Us research project (NIH UA/Banner grant)
- INBRE, CTRIN

Recommendations to Address Health Care Disparities and Vaccine Hesitancy



Francisco Moreno, M.D.
University of Arizona

Dismantling Systemic Racism



Recommendations: Community

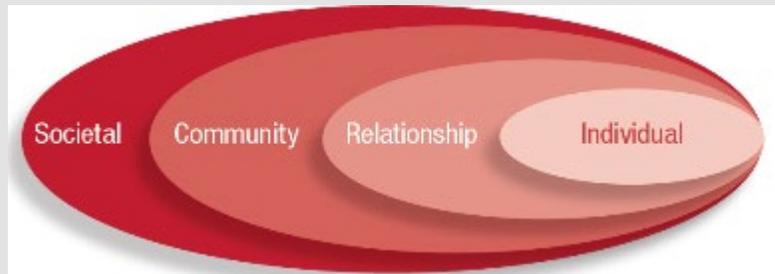
- Get involved, ask, listen, reflect
- Vote (Government & organizations)
- Take on leadership roles
- Make diversity and inclusion an agenda
- Volunteer or donate
- Urge schools to integrate diversity into the curriculum
- Speak openly about race

silence is the voice
of complacency

Recommendations: Institutional

- Increase diversity of workforce at all levels
- Mentorship and professional development of workforce
- Increase cultural competence and humility training of all clinicians
- Address SDOH early/often
- Patient advocacy
- Dismantle systemic racism in institution (policies and procedures)

Recommendations: Individual

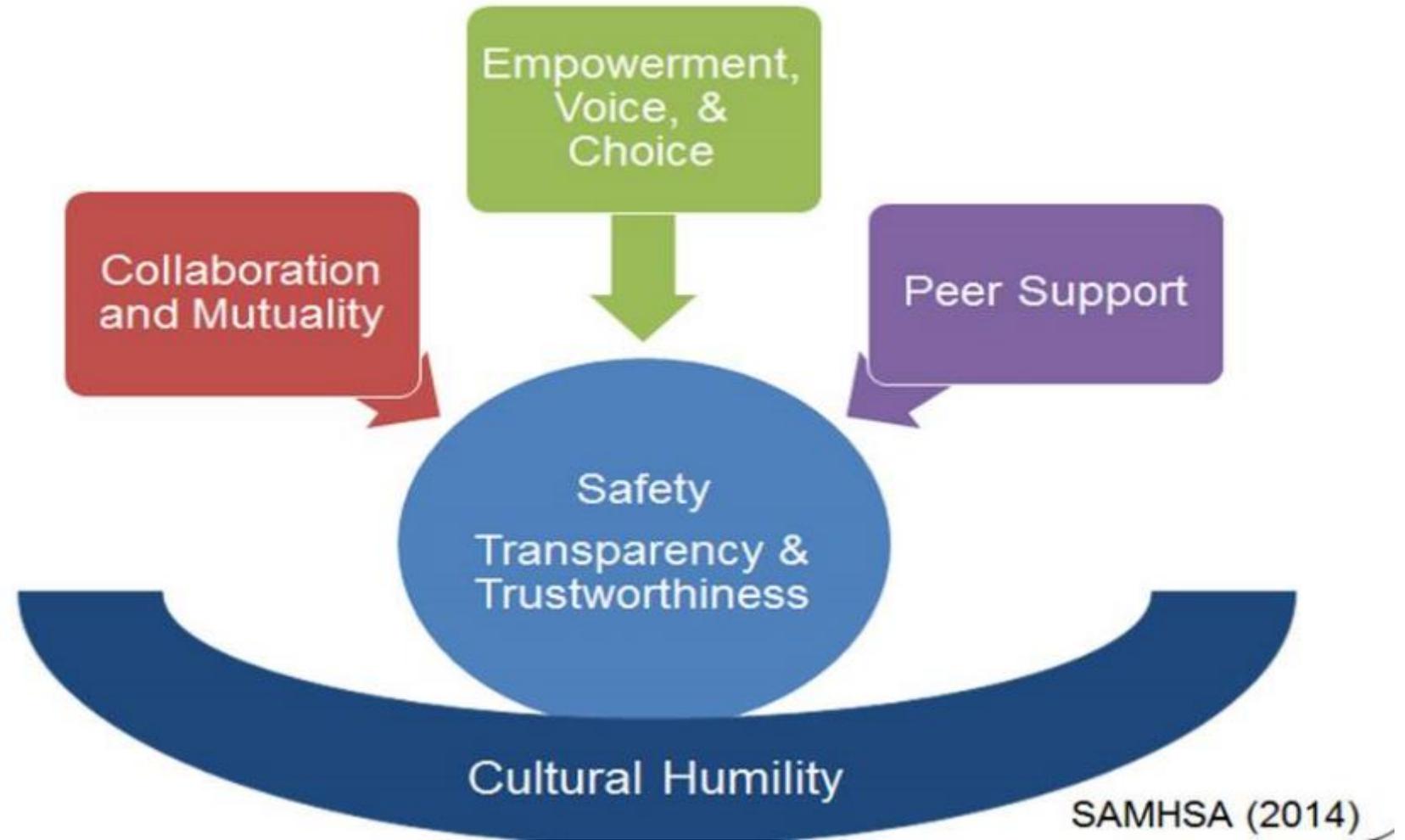


- Implicit bias training for providers
- Ensure screening for mental health during visits
- Use language-sensitive patient information and use medical interpreters when necessary
- Utilize patient-centered communication
- Practice advocacy at all levels
- Refer for social services when SDOH identified
- Offer telehealth services
- Train providers/staff cultural sensitivity
- Get involved with community organizations
- Focus on building trust and acknowledging historical transgressions

What is Racial Trauma?



What is Trauma Informed Care?



NON TRAUMA INFORMED

- POWER OVER
- YOU CAN'T CHANGE
- JUDGING
- PEOPLE NEED FIXING FIRST
- OPERATE FROM THE DOMINANT CULTURE
- PEOPLE ARE OUT TO GET YOU
- RIGHT/WRONG
- HELPING
- "YOU'RE CRAZY!"
- COMPLIANCE/OBEDIENCE
- NEED-TO-KNOW BASIS FOR INFO
- PRESENTING ISSUE
- "US AND THEM"
- LABELS, PATHOLOGY
- FEAR-BASED
- I'M HERE TO FIX YOU
- DIDACTIC
- PEOPLE MAKE BAD CHOICES
- BEHAVIOR VIEWED AS PROBLEM
- WHAT'S WRONG WITH YOU?
- BLAME/SHAME
- GOAL IS TO DO THINGS THE 'RIGHT' WAY
- PRESCRIPTIVE
- PEOPLE ARE BAD
- CONSIDER ONLY RESERCH AND EVIDENCE

- POWER WITH
- YOUR BRAIN IS 'PLASTIC'
- OBSERVING
- PEOPLE NEED SAFETY FIRST
- CULTURAL HUMILITY
- PEOPLE CAN LIVE UP TO THE TRUST YOU GIVE THEM
- MULTIPLE VIEWPOINTS
- LEARNING
- "IT MAKES SENSE"
- EMPOWERMENT/COLLABORATION
- TRANSPARENCY AND PREDICTABILITY
- WHOLE PERSON AND HISTORY
- WE'RE ALL IN THIS TOGETHER
- BEHAVIOR AS COMMUNICATION
- EMPATHY-BASED
- SUPPORT HEALING
- PARTICIPATORY
- PEOPLE WHO FEEL UNSAFE DO UNSAFE THINGS
- BEHAVIOR VIEWED AS SOLUTION
- WHAT HAPPENED TO YOU?
- RESPECT
- GOAL IS TO CONNECT
- CHOICE
- PEOPLE ARE DOING THE BEST THEY CAN
- CONSIDER ALSO LIVED EXPERIENCE

TRAUMA INFORMED CARE

COVID related health disparities



Arizona CEAL COVID Consortium

1OT2-HL-156812: The overarching aim is to gain better understanding of the underlying factors for the disproportionate burden of COVID-19 in people of color within Arizona (11-state alliances)

<https://covid19community.nih.gov>

NIH All of Us Research Program

The world's largest research and most diverse platform supporting precision medicine.

Incorporates biological samples for biomarkers and genomic analysis, EHR, participant provided information, environmental assessments.

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COVID-19 is an emerging, rapidly evolving situation.

- [Get the latest public health information from CDC »](#)
- [Get the latest research information from NIH »](#)
- [NIH staff guidance on coronavirus \(NIH Only\) »](#)

Home » News & Events » News Releases

NEWS RELEASES

Tuesday, June 16, 2020

All of Us Research Program launches COVID-19 research initiatives

NIH effort expands data collection to shed light on pandemic's spread and impact.

[📧](#) [📧](#) [f](#) [🐦](#) [+](#)

The *All of Us* Research Program, part of the National Institutes of Health, today announced that it is leveraging its significant and diverse participant base to seek new insights into COVID-19—through antibody testing, a survey on the pandemic's impacts and collection of electronic health record information.

All of Us will make data gathered through these activities broadly accessible to approved researchers over time, in future releases of its data platform, the [Researcher Workbench®](#), now in beta testing. Analyses may help reveal the origins of entry, spread and impact of COVID-19 in the United States.

"With our nearly 350,000 participant partners across the country, *All of Us* will

The future of health begins with you

All of Us
RESEARCH PROGRAM

Enrollment in the All of Us Research Program is open to

Institute/Center
[All of Us Research Program](#)
[NIH Office of the Director \(OD\)](#)

Contact
AllofUsPress@mail.nih.gov
301-827-6877

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Research Career Development Program for Underrepresented Early Career Faculty



The primary objective of the AIRE program is to provide advanced training in an interprofessional environment to qualified candidates from backgrounds underrepresented in the biomedical sciences, who are committed to addressing respiratory & related disparities through impactful research from basic to the full translational continuum and implementation. AZ-PRIDE mentees will receive training that facilitates successful team science career development and that contributes to decreases in health disparities.

AIRE Mentees will receive training that facilitates successful team science career development, including funding for a small research project.

Training will include Didactic instruction in:

- Grantsmanship (NIH Style writing, and reviewing grants)
- Scientific Writing: Abstract/Poster/Audiovisual content writing, Scientific publications, Research report composition, Dissemination strategies
- Presentations and Bioethics
- Advanced Research Methodology (Tailored to trainee needs) in the following content areas: Community-Based Participatory Research, Design & Analysis of Health Outcomes & Effectiveness Research, Basic and Advanced Epidemiological/Biostatistical Methods, Transomics and Biomarker discovery, Data-science and machine learning, Wearables and devices
- Interprofessional Career/Leadership Development
- Structured Mentoring by a team of content experts
- Research experience (includes funding for select small projects) with mentor/instructor support in:
- Conceptualization, Design, Implementation, Analysis, Reporting

****Special 2021 COVID-19 Expanded Focus:****

Extensive research expertise 59 new research studies related to COVID-19 across the Clinical-translational research spectrum. Extensive research grant funding \$40 Million related to COVID-19 as of December 2020. Over 50 faculty from the University of Arizona Health Sciences and other campuses available for COVID-19 specific mentorship.

Program Components:

- Summer Institute 1: August 5th, to 13th 2021 in Tucson Arizona (or virtual as needed)
- Summer Institute 2: August 4th, to 12th 2022 in Tucson Arizona (or virtual as needed)
- Winter Institute (mid-year): January 10th, to 14th, 2020 in Tucson Arizona (or virtual as needed)
- Mentoring, Writing and Statistics support, and Didactic Instruction (virtual ongoing)



COST

All Expenses Paid Program!
The AIRE program will provide advanced research career training in lung and sleep-related breathing disorders.



ELIGIBILITY

Junior Faculty members underrepresented in the biomedical sciences workforce. (See link below for eligibility requirements)
<http://azpride.uahs.arizona.edu>



APPLY

****AIRE is still recruiting for Cohort 8 - Winter 2021. We are currently working out a contingency plan to hold sessions virtually if we are unable to do so on-site due to COVID-19. Selection is ongoing.**

Thank you

Part I & Part II Recordings:

<https://telemedicine.arizona.edu/webinars/previous>

Chris Martin, Assistant Director of T-Health,
Arizona Telemedicine Program

Allie Joseph, Executive Administrator,
UNM Health Sciences Center Office for Diversity, Equity & Inclusion

Meg Elcock, Administrative Assistant
UNM Health Sciences Center Office for Diversity, Equity & Inclusion

Dr. Ricardo Correa
University of Arizona, Phoenix

Don't forget to receive credit for this session
as Diversity, Equity & Inclusion Hours

(Applies only to members of The University of
Arizona College of Medicine – Tucson)



Q & A

Anayansi Lombardero, PhD

Francisco Lucio, JD

Valerie Madera-Garcia, MPH

Victoria Murrain, DO

Jose Rodriguez, MD

Q & A

Please type questions in the chat