COVID-19 Mitigation Policies & Structural Vulnerability
Friday, September 10, 2021
10:20-10:45 am

(U54MD004811-09S1)
COVID-19 Policy Research Team

Lisa Cacari Stone, PhD
Blake Boursaw, MSc
Xiliang Zhu, PhD
Carlos Linares, MD, MPH
Jessica Reno, MPH
Jin Su Lee, PhD
Usamah Wasif, MA
Maya Ma, MSc
UNM Indigenous People’s Land and Territory Acknowledgement

Founded in 1889, the University of New Mexico sits on the traditional homelands of the Pueblo of Sandia. The original peoples of New Mexico - Pueblo, Navajo, and Apache - since time immemorial, have deep connections to the land and have made significant contributions to the broader community statewide. We honor the land itself and those who remain stewards of this land throughout the generations and also acknowledge our committed relationship to Indigenous peoples. We gratefully recognize our history.

Developed by the Special Assistant for American Indian Affairs to the UNM President in consultation with the Native American Faculty Council. Approved and adopted by President Garnett S. Stokes, February 2020

Art by Jennifer Ober
Outline

1. Need for Equity Research in a time of COVID-19
2. Effectiveness of worldwide COVID-19 government interventions
4. COVID-19 Policy Data Systems
5. Discussion: What do these findings mean for Equitable Allocation of COVID-19 Vaccines?
6. Questions
Need for Equity Research in a time of COVID-19

- A Legacy of Human Rights Violations and Community Mistrust of Western Medicine and Research.
  - Historical and contemporary experiences of mistreatment of communities of color by government, academic and healthcare institutions have led to an entrenched distrust of motives and actions.

- Lack of attention of the impact of COVID-19 on rural racial/ethnic populations in the U.S.
  - The pandemic’s impact coupled with intertwined risk factors exacerbate the vulnerabilities of racial and ethnic communities living in rural areas.

- Need to understand effectiveness of pandemic mitigation policies.
  - Racial/ethnic and distributions in COVID-19-related infection and mortality rates; particularly among Latinx, American Indian/Alaska Natives (AIAN) rural/frontier populations.

- Need for data transparency, sharing and collection by race, ethnicity and geographies.
  - Open access data by race/ethnicity, geography and other socio-demographic groups are imperative for guiding policy interventions and assuring all populations have an equal chance to health and well-being.

Sources:
Project Period: March 31, 2021-April 1, 2022

National Institutes of Health: $1,400,000 M

Principal Investigators: Lisa Cacari Stone (Contact PI) TREE Center (NIMHD Grant # U54 MD004811-10); Tassy Parker (Seneca, Beaver Clan), Director, CNAH; & Nina Wallerstein, Director, CPR

Consortium Partners: First Nations Community HealthSource, Cultivating Communities, National Latino Behavioral Health Association, Healthy Native Communities Partnership, Inc., New Mexico Black Leadership Council, Pacific Institute for Research and Evaluation and Indian Country GrassRoots Support and UNM Clinical and Translational Science Center

Communities of Practice Network: 200+ partnered organizations

Co-Investigators: Nancy Pandhi, Akshay Sood, Shannon Sanchez-Youngman, Vincent Werito, Lorenda Belone, Daniel Shattuck and Laura Parajon, Nathania Tsosie, Rebecca Rae, Carlos Linares, Jeff Carter, Nora Chavez & Christina Alaniz

National Research Center of Excellence

IMPACT

$7,400,000; 2017-2022

NMIHD/NIH, U54 MD004811

Principal Investigator/ Director: Lisa Cacari Stone, PhD

3 Cores - Leadership/Administrative, Community engagement & Investigator Development

- 40+ faculty (90% URM’s), 17 departments across UNM Health Sciences and UNM Main Campus

3 research supplements ($685K)

- Diversity supplement;
- Alzheimer’s/Aging;
- & COVID-19 Policy Study

Multi-disciplinary team science on health disparities across diverse populations

3 research supplements

16 Pilot projects ($700K)

- (under-represented minority/ESI);
- > 75 collaborating individual partners;

- 9 focused on Latinx populations; 5 focused on Native American populations; 1 API; 1 Transgender
- > 45 students mentored; 6 new grants

16 Pilot projects ($700K)

- (under-represented minority/ESI);
- > 75 collaborating individual partners;

- 9 focused on Latinx populations; 5 focused on Native American populations; 1 API; 1 Transgender
- > 45 students mentored; 6 new grants

2 major research projects

- have made significant progress in developing and implementing multi-level interventions with long-term partnerships:

- San Felipe Pueblo & Albuquerque Immigrant Organizations & Families

Scholarly Products= 339

- academic and community products (21 books; 114 journal articles; over $8M in 30 new grants; 100+ presentations); 20 Policy Briefs; and 9 Research Training Tools.

Place-based Engagement in 4 regions of state & over 175 partners;
Communities of Practice for Dissemination;
Equity Policy Institute (12 teams, 100+ partners, Policy Briefs, Digital Stories)

2 research supplements

PLACE-BASED ENGAGEMENT

• treecenter@unm.edu
• https://twitter.com/unmtreecenter
• https://www.linkedin.com/in/lisa-cacari-stone-5336b011/
• https://www.youtube.com/channel/UCoiBFaaV-pyzq8UHYhIqWg
Effectiveness of worldwide COVID-19 government interventions

From 46 NPI the Top 10 most effective are:

1. Small gathering cancellation
2. School closure
3. Border restriction
4. PPE availability
5. Individual movement restrictions
6. National lockdown
7. Mass gathering cancellation
8. Educate & actively communicate with the public
9. Gov assistance to vulnerable populations
10. Actively communication with managers


More effective to reduce transmission
US Policy Overview

• First 100 days Biden Administration

• Rollout of vaccinations to rollback of restrictions

• State policy responses to COVID-19 have decreased

• Fewer states had active closure and containment policies than at any point since April 2020

• States with early policies of universal eligibility did not always vaccinate fastest

• Regional and political variation in policy stringency has continued, and even widened: Dems and NE
State-Level COVID-19 Mitigation Policies & Social Vulnerability

US State level analysis: Social Vulnerability Index (SVI)

- States with HIGH inequity levels did NOT see benefits from policy
- States with LOW inequity levels did see benefits from policy

Inequity and vulnerability matter

*Analysis by Blake Boursaw and Usamah Wasif
Policy, case incidence, and mortality latent class analysis

NEW MEXICO

Case Incidence

Mortality Rate

policy_cat
- Contact
- Event
- Gatherings
- Mask
- Movement
- School
- StayAtHome
- Testing
- Transport
- Travel
- Workplace

Date

Category

Cases, Deaths, Total, Contact, Event, Gatherings, Mask, Movement, Stay at Home, Testing, Travel, Workplace

Incorporate vaccination policy and progress data

- Vaccine policies
  - Vaccine prioritization by sector (healthcare workers, first responders, correctional staff, etc.)
  - Vaccine eligibility by age group
  - Vaccine prioritization by race/ethnicity
  - Vaccine eligibility enforcement
  - Vaccine eligibility by health risk

- Vaccination rates
  - Percent with at least one dose
  - Percent fully vaccinated
Discussion: What do these findings mean for Equitable Allocation of COVID-19 Vaccines?

- Impact of policies vs. Tackling long-term persistent social inequities
- Maximum benefit (minimize harm)
  - Promote public health, economic & social well-being, human well-being
- Equal concern
  - Equal respect
- Mitigation of health inequities
- Promote Fairness & Justice
- Data Transparency & Sovereignty
- Evidence-based
  - Diversity of views
- Engage community members
- Ensuring effective community engagement, building local vaccine acceptability and confidence, and overcoming cultural, socioeconomic, and political barriers that lead to mistrust and hinder uptake of vaccines.

Sources:
Contact:

Carlos Linares: clinaresKoloffon@salud.unm.edu

Dr. Lisa Cacari-Stone: lcacari-stone@salud.unm.edu
Thank you!