

FAQ

April 22, 2020

Town Hall Questions and Answers

Please note that information about COVID-19 is rapidly evolving and new resources are becoming available almost daily. For up-to-date information, please check reputable websites, many of which are referenced throughout this document.

Question: What are risk factors for COVID?

Answer: People who are at higher risk of severe COVID-19:

- 1) People older than 65.
- 2) People who live in nursing homes or long-term care facilities
- 3) People with underlying medical conditions, particularly if not well-controlled.
 - a) People with chronic lung disease or severe asthma
 - b) People with serious heart conditions
 - c) Peoples who are immunosuppressed
 - i) Cancer treatment
 - ii) HIV/AIDS
 - iii) Prolonged corticosteroids
 - iv) Smoking
 - d) People with severe obesity (BMI>40)
 - e) People with diabetes
 - f) People with liver disease
 - g) People with chronic kidney disease on dialysis

Additional information can be found on <u>https://www.cdc.gov/coronavirus/2019-ncov/need-extra-precautions/people-at-higher-risk.html</u>

Q: How can caring for the deceased be expected to change during COVID-19?

A: The expectation is that we continue to honor and respect the deceased and that family wishes are respected with regard to burial or cremation. It is important to try to incorporate protective measures to prevent spread from the deceased and to continue avoiding large gatherings. Please see: https://www.cdc.gov/coronavirus/2019-ncov/community/tribal/faq-burial-practice.html

Q: Regions and tribes have different care-taking roles, where can we find information regarding proper PPE procedures?

A: Materials with information regarding proper PPE procedures can be found on the website at: <u>https://www.cdc.gov/coronavirus/2019-ncov/hcp/using-ppe.html</u>

Q: How can we address isolation and recovery if there is a shortage of housing and other facilities?

A: People should reduce the errands they run to limit exposure, and when possible, it's best to not take family members with you when running errands so they are not exposed. Vulnerable members should avoid caring for children, since children might pass the virus to them (even if the child isn't experiencing symptoms). It's important to separate or isolate household members who are sick as much as possible.



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For more information regarding tips for families living in close quarters, please visit: https://www.cdc.gov/coronavirus/2019-ncov/daily-life-coping/living-in-close-quarters.html

Q: Are there any behavioral health resources / mitigation efforts being implemented?

A: Every location has a hotline number available for the public to call with their specific health needs. For other behavioral health resources please check the IHS resources page and Center for American Indian Health COVID-19 response page for tips on Behavioral Health related response items. There are several resources posted on the CAIH page regarding Elder Mental health, Stress and Anxiety Management, and Stigma that can be found here: <u>http://caih.jhu.edu/news/covid19</u>

Q: What if you have an N95 mask at home that you purchased before COVID-19. Can you still use those or not?

A: Yes, you can use this mask while in public spaces.

Q: Are the PSA Posters available for sharing on Facebook and websites?

A: Some posters are available for use on the CAIH website: <u>http://caih.jhu.edu/news/covid19/</u>

Q: How are communities addressing the need for recovery centers/places to isolate in?

A: This is very location dependent. The Navajo Nation has an incident management team working with the IHS, FEMA, the States, and the National Guard to identify locations in the community. They are currently coordinating equipment acquisition and assisting with staffing to create centers for different levels of care, including for those who only need a safe place to isolate rather than medical care. Isolation centers and Alternative Care Sites for medical care are being established in Navajo Nation and will take place elsewhere in Indian Country. This is very dependent on your location.

Q: What is the update on Contact tracings and strategies to establish this?

A: There are several platforms to facilitate contact tracing. Many communities are training additional workers to assist with this. Some communities have adopted a digital tracing platform. The IHS is currently exploring these options.

Q: Is there sufficient infrastructure to support telehealth across the Navajo nation?

A: This strategy is being more widely deployed, particularly during the COVID-19 response. Limitations in connectivity and in access to technology preclude full implementation of telehealth but in some communities, work is underway to address these limitations.

Q: Will there be education material that will come out about how to treat yourself at home if you

have COVID19? What resources are available for them to understand how to treat themselves? A: There are currently several published guides on the CAIH website with information regarding how to treat yourself and loved ones. These can be found at: <u>http://caih.jhu.edu/news/covid19</u>



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Q: In the reported numbers for the Navajo Nation, some of the numbers are the same as what the State of New Mexico is reporting - is this because the individual who is positive is an enrolled member of the Navajo tribe?

A: Yes, some are posted on <u>https://www.ndoh.navajo-nsn.gov/COVID-19</u> and <u>https://www.ihs.gov/coronavirus/</u>. Please check the website weekly for updates as resources are created.

Q: How have families in the more rural eastern agencies been provided with water and/or sanitizer so they can practice good hand hygiene?

A: There are many activities underway to provide hand-washing stations and sanitizer to communities with limited water availability. As one example, the JHCAIH team has been working with groups and organizations on Navajo Nation to build and deliver hand-washing stations. In addition, the Navajo Water Project is facilitating expanded water deliveries to homes across Navajo Nation and is supporting out-of-work families in paying their water and electric bills.

Q. What are the most concerning symptoms that should prompt testing or self-isolation?

A: If you think you have been exposed to COVID-19 and develop a fever and symptoms, such as cough or difficulty breathing, call your healthcare provider for medical advice.

Symptoms may appear between 2-14 days after exposure to the virus. Symptoms include:

- 1. Fever
- 2. Cough
- 3. Shortness of breath or difficulty breathing
- 4. Chills
- 5. Muscle Pain
- 6. Headache
- 7. Repeated shaking
- 8. Sore throat
- 9. New loss of taste or smell

Make sure to seek medical attention or call 911 immediately if you are experiencing trouble breathing, persistent pain, confusion or inability to arouse, or bluish lips or face.

Q: Someone I know is not amenable to social distancing or PPE use. How do I explain to them why it's important?

A: Social distancing cuts down on how many people you come in contact with. So if a sick person practices social distancing, they reduce how many people they expose to the virus, preventing spread of the virus. This protects people who are more at risk for serious illness and reduces the burden on healthcare facilities. Because we know there are many cases in which people with COVID-19 have had mild or no symptoms while transmitting the virus, this means that even if you feel healthy, you may still risk spreading the virus to others, and even if you do not have contact with people at greater risk for serious illness, those you do contact may later come in contact with those at high risk. Lastly, having a low risk for serious illness does NOT mean you have no risk.



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Q: Where can I go to find proper PPE?

A: CDC recommends wearing cloth face coverings in public settings where other social distancing measures are difficult to maintain (e.g., grocery stores and pharmacies). Make sure it fits snugly, allows for breathing, and can be laundered or washed frequently. Cloth face coverings fashioned from household items or made at home from common materials at low cost can be used as an additional, voluntary public health measure. Cloth face coverings should not be placed on young children under age 2, anyone who has trouble breathing, or is unconscious, incapacitated or otherwise unable to remove the mask without assistance.

The cloth face coverings recommended are not surgical masks or N-95 respirators. Those are critical supplies that must continue to be reserved for healthcare workers and other medical first responders, as recommended by current CDC guidance.

For more information, please visit: <u>https://www.cdc.gov/coronavirus/2019-ncov/prevent-getting-sick/diy-cloth-face-coverings.html</u>

Q: When going to the grocery store, what are proper actions I should take? Do I wear a mask? Do I bring my own reusable bags?

A: A mask should be worn when going out in public. A handsewn mask will suffice. You should maintain at least 6 feet of distance with others and wash your hands before and after leaving your home. Certain grocery stores have enforced that people DO NOT bring reusable bags for shopping. Here are some additional helpful tips: <u>http://caih.jhu.edu/assets/documents/Grocery_Shopping_During_COVID-19.pdf</u>

Q: What are some safe and daily practices that I can do to prevent infectivity in the home?

A: Community members can practice routine cleaning of frequently touched surfaces, such as tables, doorknobs, light switches, handles, desks, toilets, faucets, sinks, and electronics (see below for special electronics cleaning and disinfection instructions). You can use household cleaners and EPA-registered disinfectants that are appropriate for the surface, following label instructions.

- Labels contain instructions for safe and effective use of the cleaning product including precautions you should take when applying the product, such as wearing gloves and making sure you have good ventilation during use of the product.
- Surfaces that should be commonly cleaned or disinfected: Tables, Bedroom or Bathroom, Kitchen, Electronics, Laundry
- Continue to wash hands with soap for 20 seconds and avoid touching your face (especially eyes, nose, mouth).
- For more information, please visit: <u>https://www.cdc.gov/coronavirus/2019-ncov/prevent-getting-sick/cleaning-disinfection.html</u> and <u>http://caih.jhu.edu/assets/documents/COVID-19_prevent_spread.pdf</u>

Q: What are some things people can do to maintain wellness within the family?



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A: Connect with family and friends with appropriate distancing. Take breaks from news and social media to prevent stress and anxiety. Make time to do fun and enjoyable activities. Maintain physical health with healthy, balanced meals, regular exercise and sleep, relaxation techniques such as stretching or meditation, and avoidance of alcohol and drugs.

https://www.cdc.gov/coronavirus/2019-ncov/daily-life-coping/managing-stress-anxiety.html

Q: What activities can I do outside while maintaining 'social distancing'? Can I exercise outside?

A: Staying physically active is one of the best ways to keep your mind and body healthy. In many areas, people can visit parks, trails, and open spaces as a way to relieve stress, get some fresh air and vitamin D, stay active, and safely connect with others.

DO: Visit parks that are close to your home, prepare before you visit, and remain 6 feet away from others ("social distancing") to prevent COVID-19 transmission. Check local sites for National Park use. **DON'T:** If you are sick or were recently exposed to COVID-19, DON'T visit parks, use playgrounds, hot tubs, spas, water playgrounds, or participate in organized sports activities.

For more information check out: https://www.cdc.gov/coronavirus/2019-ncov/daily-life-coping/visitors.html

UNANSWERED QUESTIONS

Q: What are some of the common cultural barriers you are seeing on the ground in preventing social distancing and isolation?

In some places there has been a lack of awareness of the seriousness of this disease and this has been accompanied by a lack of compliance with social distancing guidance. Many people are used to physical closeness with extended family and friends and these practices are hard to change. Other factors that make it difficult to comply with social distancing and isolation/quarantine guidance include

- Water insecurity and challenges with frequent hand washing
- Multi-generational homes and crowded living conditions put people at increased risk of household transmission
- Scarcity of food resources
- Limited options for childcare when needing to leave the home for essential errands

Q: Any other ways we can support IHS in their COVID-19 outreach efforts?

You can help IHS spread the word about COVID-19, and encourage community members to practice safe behaviors that stop the spread of COVID-19. The JHU/CAIH team worked with IHS and tribal members in various communities to develop some communication materials, here: http://caih.jhu.edu/news/covid19

If you are able (and not experiencing any COVID-19 symptoms), you can help more vulnerable community members, like elders or neighbors with health conditions, through activities like delivering



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their groceries or essential supplies like medicine. Please also listen for opportunities to help and volunteer. These may be publicized and posted on IHS or tribal websites.

Q: In light of the need for Native foster families in Indian Country and global data that demonstrates pandemics to be a time when vulnerable children and families experience increased trauma, how can Native child welfare organizations reassure potential caregivers?

Potential caregivers may utilize the tips listed in the <u>"Talking to Kids about Coronavirus (COVID-19)"</u> and the strategies on how to support a grieving child or teen in <u>"Children and Grief During COVID-19"</u> to help vulnerable children and families who may experience increased trauma. If you think your child is experiencing thoughts of suicide, call the 24/7 National Suicide Prevention Lifeline at **1-800-273-8255**, visit **suicidepreventionlifeline.org** for a live chat, or text the Crisis Text Line by **texting START to 741-741**.

Q: Are there pandemic plans in place that are specific to American Indians and are these accessible on the internet?

A: There are multiple pandemic preparedness plans developed by IHS, state government, and national governments, with some developed before we knew about the COVID-19 pandemic. Most of these plans are not posted on the internet, but you can refer to your tribal website's coronavirus page or the IHS and CDC websites to see updates on new plans in response to COVID-19.

Q: Maybe too radical for this call, but I want to keep thinking with everyone about non-Western ways of prevention i.e. centering Elders, traditional medicine, etc.

The culture and traditions of Native American peoples are a source of strength and resilience. The wisdom of tribal elders and Native healers are important to incorporate in the response to this virus.

Q: In terms of front lines with healthcare providers, how are you all utilizing social workers and other health-allied advocates surrounding the mental health stability and other realms through this time simultaneously? For example, suicide and substance misuse prevention, etc.

IHS mental health program providers are coordinating efforts locally to respond to behavioral health needs and providing support through daily huddles, virtual check-ins, tele-behavioral health services and advanced care referrals.

Q: As a CHR finding oneself on the frontlines of this COVID-19 outbreak, has there been a centralized effort via IHS or other agency to provide the proper training to these individuals?

Yes, IHS is working with JHCAIH to provide a May Seminar series to support CHR frontline staff with outreach, virtual home visits, BP's and resiliency efforts.