



Coronavirus Virtual Town Hall: Improving Health Within Our Communities

FAQ

April 29, 2020

Town Hall Question and Answer Sessions

****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.****

Q: Is it appropriate to care for my family members with COVID at home?

A: The majority of those infected with COVID will have mild symptoms such as a fever and cough and can recover safely at home while maintaining appropriate safety precautions. For example, whenever possible, have the sick individual use a separate bathroom, avoid sharing items such as towels or sheets, wear a facemask around the home, wash hands often, and clean surfaces regularly. Certain groups are at higher risk of severe illness, such as the elderly and those with underlying conditions such as lung and heart disease or diabetes. **In this instance, a healthcare provider should be contacted as soon as symptoms begin.** For more information see the “How to Care for Someone at Home During COVID-19” Factsheet which may be found at: <http://caih.jhu.edu/news/covid19>

Q: If I know someone who is concerned about increased risk of sexual, physical, or domestic abuse, what resources can I provide to them?

A: First, assure these individuals that they are not alone and that there are several free resources available to them. Ensure that they have a safety plan in place if their situation becomes too dangerous. Below are some available resources they may reach by telephone:

- National Domestic Violence Hotline: 1-800-799-7233 (24/7, confidential, free)
- The National Sexual Assault Hotline: 800-656-HOPE (4673) (24/7, confidential, free)
- StrongHearts Native Helpline 1-844-762-8483 (7 am-10 pm CT, confidential)
- SAMHSA Disaster Distress Helpline: 1-800-985-5990 (24/7, confidential, free)

For more information please see the “Managing Stress during COVID-19” Factsheet which may be found at: <http://caih.jhu.edu/news/covid19>

Q: What are some things we can do to maintain mental health and wellness?

A: Ways to cope with stress:

- National Domestic Violence Hotline: 1-800-799-7233 (24/7, confidential, free)
- Take breaks from watching, reading, or listening to news stories, including social media. Hearing about the pandemic repeatedly can be upsetting.
- Take care of your body.
 - Take deep breaths, stretch, or meditate
 - Try to eat healthy, well-balanced meals.



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- Exercise regularly, get plenty of sleep.
- Avoid alcohol and drugs
- Make time to unwind. Try to do some other activities you enjoy.
- Connect with others. Talk with people you trust about your concerns and how you are feeling.

For more information please see the “Managing Stress during COVID-19” Factsheet which may be found at: <https://www.cdc.gov/coronavirus/2019-ncov/daily-life-coping/managing-stress-anxiety.html>

Q: What resources are available for staff and employee mental health?

A: You may seek professional counseling resources, use applications like Headspace or others for distance/telemedical counseling with varying degrees of formality, or you may make a request to the Employee Assistance Program: <https://www.opm.gov/policy-data-oversight/worklife/employee-assistance-programs/>. Seek immediate medical attention if you are experiencing a mental health emergency.

Q: What is the role of community health workers in the response to the coronavirus?

A: Prevention, Detection, and Response. Workers engage in activities to promote behaviors that slow the spread of the virus (e.g., social distancing, handwashing, staying at home, wearing a mask), promote mental and physical health and resilience, and deliver food, medication, and other essential items to elders and other vulnerable people. They can perform health checks and refer patients to a testing center. They also make calls to patients and families for monitoring and support, arrange for food deliveries, and refer to other services as needed.

Q: What tips are recommended for those going to and coming home from work?

A: When working directly with individuals who are or may be infected with COVID-19, workers should ensure proper use of PPE, shower at work if possible, wipe items down, use different shoes for work and home, and wash work clothes that may have come into contact with contamination. An infographic with recommendations has been created and is available here:

http://caih.jhu.edu/assets/documents/Tips_for_Keeping_Healthcare_Workers_and_Families_Safe.pdf

Q: Is the IHS endorsing a standard of practice regarding working with tribes?

A: IHS is drafting interim guidance on roles and responsibilities for CHWs and CHAs.

Q: What information is there regarding the vaccine trial ongoing at Oxford? I have read that it is possible a vaccine might be available in the fall if the vaccine is proven efficacious.



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A: Many vaccines against the novel coronavirus are in the early stages of development. Given the urgency of the situation, researchers are working on an accelerated timeline. There is promising work coming out from the team in Oxford; however important work remains to be done to see whether or not it is safe and efficacious. Hopefully there will be a new vaccine available much sooner than would typically be the case (5+ years). The earliest projections are that a vaccine could be available as early as Dec 2020 but there is still much work to be done to ensure safety and efficacy.

Q: What are some cultural and tribal considerations?

A: The culture and traditions of Native American peoples are a source of strength and resilience. Be aware of cultural practices that may need to be modified in this time to slow the spread of the virus and protect vulnerable populations. Think about how to help those people find shelter and isolate as a means of caring for vulnerable populations.

CDC has put together “tribal-specific” guidelines:

<https://www.cdc.gov/coronavirus/2019-ncov/community/tribal/social-distancing.html>

<https://www.cdc.gov/coronavirus/2019-ncov/community/tribal/faq-burial-practice.html>

JHCAIH has resources here: <http://caih.jhu.edu/news/covid19>

Q: Are CHW’s trained to perform contact tracing?

A: CHWs who are trained to do so might be asked to assist with contact tracing and making calls. National CHR is working on this to provide recommendations. We are supporting local, state and area efforts.

Q: Are CHWs being given hazard pay?

This is dependent upon where the employee is working and if they are federal employees. If the community health representative (CHR), health educator (HE), or health promotion and disease prevention (HPDP) coordinator is a federal employee in direct patient care or working within a high risk area then yes, hazardous duty pay can be granted; however, that employee may need to check with his/her supervisor as it is contingent upon if the supervisor put their name in for hazardous pay and it is approved by IHS Headquarters and the Department of Health and Human Services.

If the CHR, HE, HPDP coordinator is a federal employee and is working from telework or not within a high risk area, then he/she would not receive hazardous duty pay.

Q: What are the curfews in place?

A: Please seek local guidance.



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Q: How can a site go about looking for a safety officer?

A: Contact “Environmental Health” or “Sanitarian” at a local service unit level.

Q: What data do we have regarding different COVID-19 outcomes in some tribal populations versus others?

A: Initial analyses show more severe disease and outcomes in Native American populations, likely driven by social determinants and various underlying medical conditions such as heart and lung disease, diabetes, hypertension, and obesity. We are learning day by day as new information becomes available.

Q: What information is there regarding issues currently facing Navajo nation?

A: As of today (April 29, 2020), there are over 1800 confirmed cases tested positive. There are many people living in isolation and quarantine. Resources are being mobilized to care for those who are separated from their community. Certain communities with water scarcity are having difficulty with following sanitation guidelines. There are currently efforts to address that. There is a plan to facilitate medical volunteers in the Navajo Nation from UCSF. Here is a helpful resource with updated case counts: <https://www.ndoh.navajo-nsn.gov>

Q: What options do Tribes do when a multi-generational home has a positive COVID-19 of one member and they doesn't have IHS coverage?

A: See Guidance on treatment of non-IHS beneficiaries who may be treated in times of public health need. The goal is to test, treat, isolate household members and potentially find other shelter for the sick family member outside of the home. Some tribes are in the process of identifying and standing up isolation sites or alternative care sites.

Q: Is there online training for CHW certification? i.e. Training people to become CHWs to help with home healthcare?

A: The recommendation is to contact your local CHR program for possible quick hire and information on how to take Basic CHR training. Another option is to research state CHW associations to learn how to meet state-wide competencies.

Q: How can we get more ABBOTT rapid test kits?

A: There is a fixed number of ABBOTT rapid test kits currently being distributed to communities. Many people are currently advocating through various channels to increase the number of test kits available, while also working to develop a cohesive strategy to ensure those that need tests will receive them.

Q: Are there any guidelines for people going to grocery stores?



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A: COVID-19 is transmitted via respiratory droplets, therefore it is possible that the virus may be resting on surfaces and transmitted by touch. Whenever you travel outside the home, ensure you are engaging in frequent hand washing, particularly when returning home. There is currently no evidence to suggest COVID-19 is transmitted by food. However, the virus may remain on paper bags and cardboard boxes, so be sure to decontaminate your countertops after placing your groceries down. Wash your fruits and vegetables before eating them. Try to avoid going grocery shopping during peak hours.

Tips for grocery shopping:

1. Stay home if feeling sick
2. Use curbside grocery services, if available
3. Maintain social and physical distancing while in the store
4. Wear a mask
5. Use hand sanitizer
6. Limit contact with people
7. Wash hands thoroughly when returning home
8. Decontaminate surfaces where food services have come into contact
9. Wash fruits and vegetables that may have come into contact with respiratory droplets

For more guidelines and information, please visit:

http://caih.jhu.edu/assets/documents/Grocery_Shopping_During_COVID-19.pdf and

<https://www.cdc.gov/coronavirus/2019-ncov/daily-life-coping/essential-goods-services.html>

Q: Should we be concerned about meat packing plant outbreaks and food distribution safety?

A: Issues around COVID-19 transmission in the meat packing and food distribution plants are due to close contact precautions between and amongst people involved in processing these foods. As of now, there is no concern for COVID-19 transmission via the food itself.

Q: Would it be recommended for child care/head start staff to wear cloth masks when returning to care/school?

A: Childcare and Headstart staff are expected to be wearing masks. Children greater than five years of age should be wearing a cloth mask, even when asymptomatic, due to COVID-19 carrier risk. It is important that these protective masks do not cause a choking hazard in the wearers. For more information about mask-wearing guidelines please visit: <https://www.cdc.gov/coronavirus/2019-ncov/prevent-getting-sick/diy-cloth-face-coverings.html>

Q: Is this presentation available for download or archived in order to share with others?



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A: Yes, the recording will be posted on YouTube on 30 April and shared via email when available on the CAIH website.

The recording of the Town Hall meeting from April 22nd is currently available here:

https://www.youtube.com/watch?v=o6_cerLIW7w

For further information about town halls, please visit:

<http://caih.jhu.edu/news/coronavirus-virtual-town-hall-improving-health-within-our-communities>

UNANSWERED QUESTIONS

Q: UV light for sanitizing rooms: is this valid and what are the guidelines for using it?

A: The World Health Organization does not recommend using UV light to kill the COVID-19 virus.

Please visit a resource developed by CAIH and IHS about how to disinfect your home:

http://caih.jhu.edu/assets/documents/COVID-19_Protecting_Your_Home_Protected.pdf

Q: Is there a model for engaging with tribes around practice for addressing COVID-19. Some IHS's are not informing leadership...Is there a standard of practice around pandemics?

IHS, tribal leadership, and the CDC are working together to develop new response activities and plans.

There are resources available at:

<http://www.ncai.org/Covid-19>

<https://www.nihb.org/covid-19/tribal-response/>

<https://sites.google.com/g.harvard.edu/covid-19-resources/home>

Q: Is there any opinion as to the rate of false negative tests?

False negative tests can occur, especially because the COVID-19 diagnosis tests and antibody tests are new and have been developed over the past few months. Some of the tests are being improved.

A 'false negative' is when your test result incorrectly says you are negative for the disease, but you actually do have the disease. This could make you think that you do not have the disease and are not infectious, which could affect how you seek care and your behaviors that could impact transmission. It is important to continue to practice safe behaviors.

Q: Do you have information on how long people who tested positive will continue to test positive, even though they have completed isolation and are considered recovered? Thanks.



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A: Because most people won't be tested for COVID-19 multiple times, we don't yet have a good estimate of this. Here are the CDC recommendations about when you are safe to stop isolating:

<https://www.cdc.gov/coronavirus/2019-ncov/if-you-are-sick/steps-when-sick.html>

Q: Can you share information about each of the 12 IHS regions in terms of cases that we do know about — for example Navajo + Pueblo Hotspots — in addition to those, can you share where you are seeing multiple cases (e.g. >2) in various parts of Indian country — for each of the 12 IHS regions?

Case counts, as well as the number of tests administered, in each of the 12 IHS regions can be found here: <https://www.ihs.gov/coronavirus/>

Navajo Nation is being hit hard by COVID-19 since its first case in mid-March, 2020. This site updates a map showing the number of cases in each area on Navajo Nation. You can find the updated map here:

<https://www.ndoh.navajo-nsn.gov/COVID-19>

Q: Should there be a penalty for people who test positive for the COVID-19 and actually don't stay home? There have been some well checks been done and they found out they were actually out and about getting supplies. Just because their severity isn't as bad as others. More particular to the Navajo Nation. I kind think the lock down of the weekends is what causing the spikes week.

While our team doesn't review penalties and policies for COVID-19, we do recommend that everyone follows tribal guidance and CDC guidance to stay home. People can run essential errands, like grocery shopping and going to the pharmacy, but should limit all non-essential outings. People should also protect themselves and others while shopping, by running errands alone (leaving other family members at home if possible), wearing a mask, and washing their hands before and after shopping. If someone is feeling sick, they should stay home and not run any errands. Here is more guidance and tips from the CDC: <https://www.cdc.gov/coronavirus/2019-ncov/daily-life-coping/essential-goods-services.html>

Q: In Montana like other places, we are struggling to get data on the spread through Indian Country. Do you have any good models of data sharing between tribes and public health agencies?

A: Data on COVID-19 cases for the 12 IHS service area are available here:

<https://www.ihs.gov/coronavirus/> This map has data county-level data of COVID-19 cases, but does not contain data by tribal communities: <https://coronavirus.jhu.edu> . The Navajo Epidemiology Center works closely with numerous county and state jurisdictions to ensure that it has access to data for all Navajo Nation cases and they report up-to-date data: <https://www.ndoh.navajo-nsn.gov/COVID-19> . It is best to work directly with local and state jurisdictions to advocate for access to tribal data. Having this information is critical for tribal leaders to respond to the pandemic.



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Q: Our tribe sent out messages on Facebook about NOT prohibiting sweats but to minimize people attending. Allowing cultural practices but enforcing social distancing

A: Although some events might not be prohibited, it is safest to yourself and your family to stay home when possible. If you do attend events, it's important to wear a mask, practice social distancing (staying at least 6 feet from others), avoid touching your face, and wash your hands before and after leaving the home.

Life can be stressful during the COVID-19 outbreak, and there are many ways to practice traditional activities in a modified way to help keep people healthy. Our team developed this resource to outline some safe practices:

http://caih.jhu.edu/assets/documents/Stop_the_Spread_Protect_yourself_family_community_spiritual.pdf