January 2021

COVID-19 Community Protection



Context for these materials

The ideas presented in this deck reflect the latest public health thinking and scientific evidence as of February 2021. However, the COVID-19 landscape is changing dramatically daily, and so must our recommendations over time.

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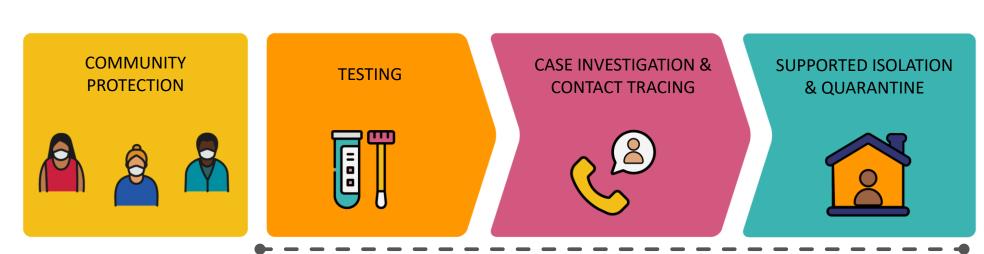
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What is Community Protection?

Community protection (also known as mitigation) is one piece of the broader public health response for pandemic control and care delivery. Community protection activities are important during all phases of the pandemic and are especially important to maintain during the vaccine rollout.

Individuals, businesses, and communities can take action to slow the spread of COVID-19. Other critical components of the response include <u>testing</u>, case investigation & <u>contact tracing</u>, supported isolation & quarantine, and vaccination.





Overview: CDC Framework for Community Protection

Protection Strategies	Recommended Practices
1. Promote Behaviors that Prevent Spread	 Stay home when <u>sick</u> or after <u>close contact</u> with someone with COVID-19 Practice <u>hand hygiene</u> and respiratory etiquette Properly use <u>face covering (masks)</u> to protect oneself and others Promote clear and concise <u>messaging</u> about preventative behaviors
2. Maintain Healthy Physical Environments	 Intensify <u>cleaning and disinfection</u> of frequently touched surfaces, ensuring <u>safe and correct use</u> (and then storage) of <u>EPA-approved disinfectants</u> Ensure ventilation systems operate properly and increase circulation of outdoor air Modify layouts to promote social distance of at least 6 feet between people Install physical barriers and guides to support <u>social distancing</u> where appropriate

Overview: CDC Framework for Community Protection

Protection Strategies	Recommended Activities
3. Maintain Healthy Operations in Group Settings	 Create static groups or "cohorts" of individuals and avoid mixing between groups Conduct daily health checks such as <u>temperature screening</u> or <u>symptom</u> screening
4. Prepare for When Someone Gets Sick	 Isolate and safely transport those who are sick to home or a health care facility Follow <u>CDC guidance for caring for oneself and others who are sick</u> Notify those who have had <u>close contact</u> with a person diagnosed with COVID-19 and advise them to stay home and <u>self-monitor for symptoms</u>, and follow <u>CDC guidance</u> if symptoms develop Follow CDC <u>criteria to discontinue home isolation</u>

Health Inequities and Community Protection Strategies

While instrumental in slowing the spread of COVID-19, community protection strategies may actually <u>increase the</u> <u>disparities</u> already caused by the pandemic if proper support is not provided for those most at-risk. For many community members, observing guidelines for masking, distancing, and staying at home is impossible without additional resources. We can <u>promote health equity</u> by addressing barriers to community protection so that everyone has an opportunity to participate in these strategies.

Equity Challenges to Consider:

- Lack of information about available resources and services in preferred format or language
- Widespread misinformation about COVID-19 and COVID-19 vaccines across social media platforms
- Mask-related challenges for essential workers and members of the deaf community
- Increased risk of exposure to COVID-19 for those who rely on public transportation or must work outside of home
- Difficulty social distancing in crowded living environments
- Need for material resources to safely isolate and quarantine at home
- Financial concerns due to risk of unemployment or lost income while in quarantine

Community Protection Recommendations: Challenges & Considerations

Health Communication

Sharing <u>reliable and concise health information</u> with the public is key during the COVID-19 pandemic. Community protection strategies require voluntary and broad public participation; therefore, <u>effective health communication</u> plays a major role in not only informing the public but also addressing fears and misinformation to assure buy-in.

<u>Health communication</u> recommendations:

- Be Proactive: Messages around social distancing, masking, testing, vaccination, and other COVID-19 related topics must be prominent and provide relevant and tailored information. Partnering with trusted local leaders is key to reaching different segments of the population, particularly traditionally underserved groups.
- **Know the Audience:** Research the intended audience—understand baseline knowledge, barriers to adoption, and pre-existing misinformation—before devising a communications strategy. Engage community members to help tailor messages around the target audience's needs and to provide feedback on strategy.
- **Be Transparent:** Avoid transmitting conflicting messages by being transparent throughout communications with the public rather than explicitly persuading or convincing. Be very clear about what is not known.

Health Communication: Equity Considerations

Challenges

- <u>Spread of misinformation</u> about COVID-19 and COVID-19 vaccines across social media platforms.
- <u>Vaccine hesitancy</u> among segments of the population.
- <u>Lack of access</u> to health information and language barriers for those who have limited English proficiency.

Considerations

- Know the audience landscape and tailor communications to reflect local context and concerns, particularly for communities of color and underserved communities.
- Identify, recruit, and equip local partners from trusted backgrounds: community activists, faith leaders, and others who are influential and trusted local figures.
- Craft digestible information in the languages spoken by the target population with consideration for cultural sensitivities.
- When possible, create communications materials specific to the context in which they are publicized.
- Ensure people have access to <u>support services and</u>
 <u>other resources</u> that enable them to safely isolate and
 quarantine.

Masking

<u>Wearing masks</u> helps prevent the spread of COVID-19 and will continue to be an important measure for protecting communities during vaccine rollout and with new, more transmissible <u>variants</u>. <u>Research</u> shows that masks mandates are associated with a decline in the daily COVID-19 growth after state face mask orders were signed.

Who should wear masks and where:

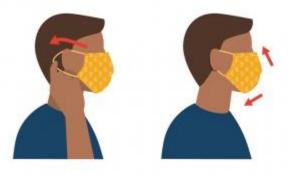
- Everyone ages 2 and older, in public settings.
- People who are caring for someone who is sick with COVID-19 (at home or in a non-health care setting).
- If you are sick with COVID-19 or think you may have COVID-19 (even at home).

Mask efficacy:

 <u>Surgical or KN95 masks</u> significantly reduce numbers of emitted particles; cloth and paper masks also offer meaningful reductions.

How to properly wear masks:

- Wash hands before putting on mask.
- Wear mask over the nose and mouth and secure under the chin.
- Fit mask snugly against the sides of face.



Source: https://www.cdc.gov/coronavirus/2019-ncov/prevent-getting-sick/how-to-wear-cloth-face-coverings.html

Masking: Equity Considerations

Challenges

- <u>Shortage</u> of personal protective equipment puts health workers, <u>farmworkers</u>, and other essential workers at risk.
- Masks also present a challenge for members of the <u>deaf community</u>, clinicians with hearing loss, and patients with hearing loss in medical care settings.

Considerations

- The CDC has developed a <u>Personal Protective</u> <u>Equipment (PPE) Burn Rate Calculator</u> to help health care facilities and non-health care facilities to <u>plan and optimize the use of PPE</u> in response to COVID-19.
- Individuals and organizations should continue to advocate for masks and PPE from government and pursue all <u>available avenues</u> to secure access.
- Many people will struggle to understand communication delivered through a mask. It is advised that you face the person, get their attention before speaking, speak reasonably slowly, raise the volume of voices slightly, and check for understanding.

Social Distancing

<u>Social distancing</u>, or physical distancing, is another way to reduce the spread of COVID-19. Experts recommend that people <u>stay at least 6 feet</u> (about 2 arm lengths) from others who don't live with them. Avoiding crowds and restricting gathering sizes are important because the more people are in contact with each other, the more likely they are to be exposed to COVID-19 and its <u>new variants</u>.

- <u>Studies</u> suggest that the virus can spread easily from person to person, even among people who do not have symptoms.
 It is important to stay at least 6 feet away from others even if you—or they—do not have any symptoms.
- Since COVID-19 can <u>remain in the air and on surfaces</u> for several hours or days, the <u>CDC recommends</u> various measures for enhancing indoor settings including <u>improving</u> <u>ventilation</u> to reduce the concentration of viral particles in the air.



Source: https://www.hopkinsmedicine.org/health/patient-safety-infographic

Social Distancing: Equity Considerations

Challenges

- Social distancing may be difficult for people <u>experiencing homelessness</u>, people with <u>disabilities</u>, <u>young children</u>, or for people living in <u>close quarters</u> and <u>congregate housing</u>.
- Essential workers, over-represented by marginalized communities, are at increased risk of exposure to COVID-19 due to many factors including reliance on mass transportation, and may face difficulties engaging in social distancing and other community protection activities.

Considerations

- It is important to recognize these challenges when advising community members about social distancing practices.
- Ensure people have access to <u>support services and</u> <u>other resources</u> to successfully socially distance at home in particular.
- Include <u>COVID-19 testing</u>, daily <u>in-person or virtual</u> <u>symptom monitoring</u>, and access to <u>adequate PPE</u> into workplace preparedness, response, and control plans.
- Social distancing policies and gathering size restrictions in restaurants/bars and other public settings should be accompanied by additional policies that enable people to work from home, provide income assistance, and access to material resources.

Quarantine & Isolation

<u>Quarantine</u> and <u>isolation</u> are important practices to limit the spread of COVID-19. The CDC recommends a quarantine period of 14 days for exposed contacts, and isolation of at least 10 days following symptom onset for symptomatic cases, and 10 days following positive test for asymptomatic cases.

- In order to quarantine or isolate effectively people need food, medication, a safe home environment with a separate bedroom (and ideally bathroom), cleaning supplies, and PPE.
- Research indicates that adherence to quarantine and isolation measures can significantly reduce disease spread and mortality during the COVID-19 pandemic.



Quarantine & Isolation: Equity Considerations

Challenges

- For individuals and families with limited resources, securing adequate food, medication, cleaning supplies, and PPE can be a challenge.
- Home environments may be crowded, inadequately apportioned, and insufficiently maintained.
- Financial concerns due to risk of unemployment or lost income complicate efforts to adhere to quarantine guidance.

Considerations

Strategies to improve the success and equity of isolation and quarantine is outside the scope of this document. For more information on quarantine and isolation considerations, please visit these more comprehensive PIH resources:

- Care Resource Coordination slide deck
- Care Resource Coordination white paper
- Contact Tracing slide deck

Conclusion

Slowing the spread of COVID-19 starts with **sharing relevant and reliable public health information**, **promoting mask wearing, maximizing social distancing**, and supporting the most vulnerable to **obtain the necessary resources to safely quarantine and isolate**.

Community protection, supplemented with widespread testing, case investigation and contact tracing, supported isolation and quarantine, and vaccination, comprises the essential components of an **effective pandemic response**. In order to ensure that efforts are **equitable,** attention must focus on access barriers across the response cascade and work to target support to ensure the most marginalized communities are represented when planning and implementing interventions.

Appendix

Supporting evidence: Mask use

At places of work:

In settings where maintaining adequate physical distance isn't feasible (e.g. congregate environments, close working quarters) adherence to mask wearing has been associated with a 70% reduction in risk of infection.

In the home:

Households with confirmed COVID-19 cases, where all family members/habitants used masks reduced secondary transmission within the house by 79%.

Advocating broad adoption:

Public mask mandates, while often politically fraught, are <u>associated with marked declines in COVID-19 cases</u>.

Supporting evidence: Mask type

- Both cotton and medical face masks have been shown to <u>reduce the respiratory droplets and</u> <u>aerosols</u> that are the main source of COVID-19 transmission
- Standard medical procedure masks, and multi-layered cotton and polyester face coverings all block aerosols emitted during coughing. While medical masks can provide up to 99% blockage of aerosols, multi-layered fabric masks also provide substantial blocking of 51%
- Masks made of different materials may also provide a <u>protective effect to the wearer</u> from outside aerosols

US Public Health Accompaniment Unit

For more information please contact <u>LearningCollab@pih.org</u>

