



Congressional Briefing and National Webinar

April 26, 2022
3:30 – 5:00 PM Eastern

 @HealthyAmerica1

 tfah.org

ISSUE REPORT

Ready or Not:

PROTECTING THE PUBLIC'S HEALTH FROM
DISEASES, DISASTERS, AND BIOTERRORISM **2022**

*SPECIAL SECTION: Lessons of the Pandemic's Tragic
Death Toll: What Needs to be Done to Save Lives During
the Next Public Health Emergency?*



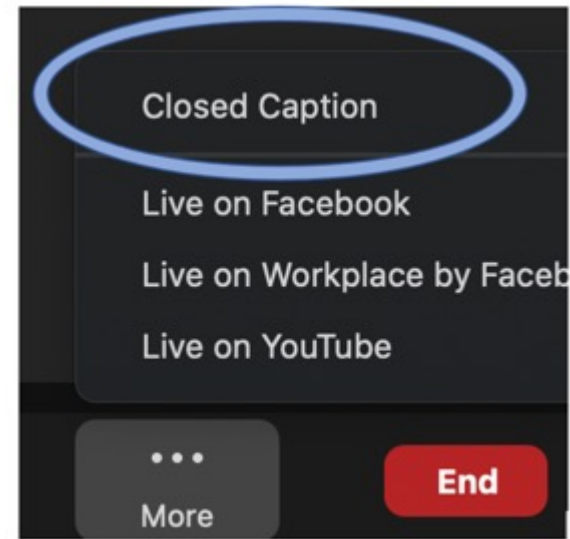
MARCH 2022



Closed Captioning

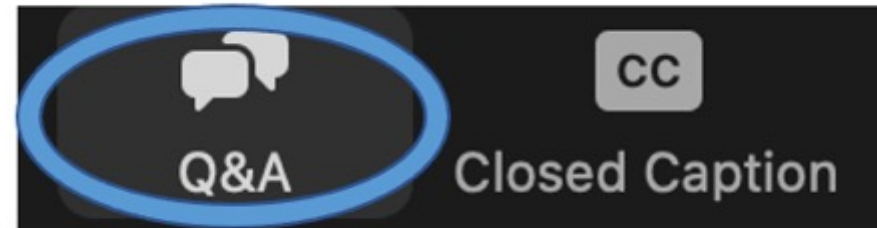
To see real time captioning:

1. At the bottom of your screen, click to open **More**
2. Click **Closed Caption**



Q&A Feature

1. At the bottom of your screen, click to open the Q&A panel
2. Type your question in the Q&A box
3. Hit Enter



Moderator



J. Nadine Gracia, MD, MSCE
President and CEO
Trust for America's Health

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Agenda

Welcome and overview of *Ready or Not* report

Presentations from panelists

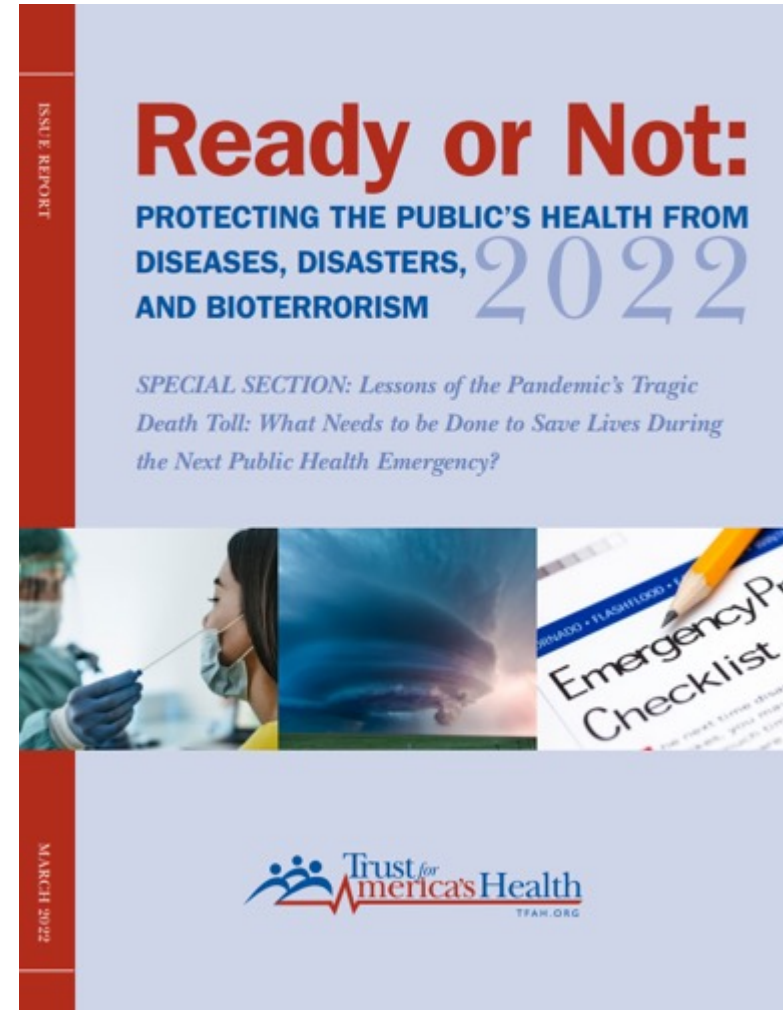
Questions and Answers

Closing



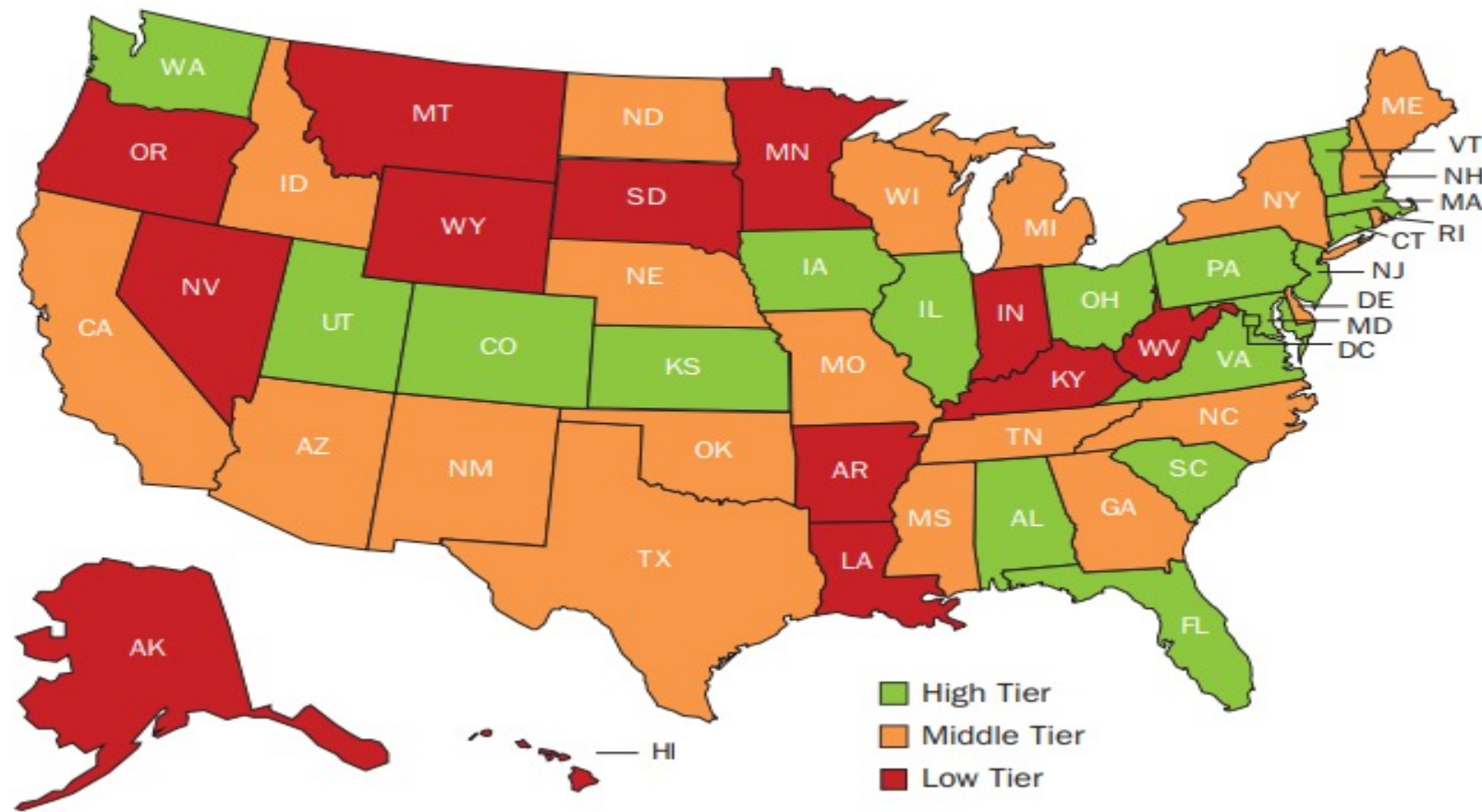
Ready or Not Report 2022

- Examines the country's level of public health emergency preparedness on a state-by-state basis using 10 key indicators
- Highlights lessons of the COVID-19 pandemic
- Focuses on recommended policy action in seven priority areas



Ready or Not State-by-State

Indicators of State Public Health Emergency Preparedness
State performance, by scoring tier, 2021



Key Findings

Progress



- Almost all states reported having a laboratory surge plan
- Most states are accredited in the areas of public health, emergency management, or both
- More states joined Nurse Licensure Compact
- Seasonal flu vaccination rate rose significantly in recent years – but still far below the 70% target



Key Findings

Challenges

- Public health infrastructure weakened by chronic underfunding
- Public health workforce was depleted before pandemic
- Only half of the U.S. population is served by a comprehensive public health system
- Only 28 percent of hospitals, on average, earned a top-quality patient safety grade, down slightly from 31 percent in 2020
- Just over half of workers used paid time off in a given month

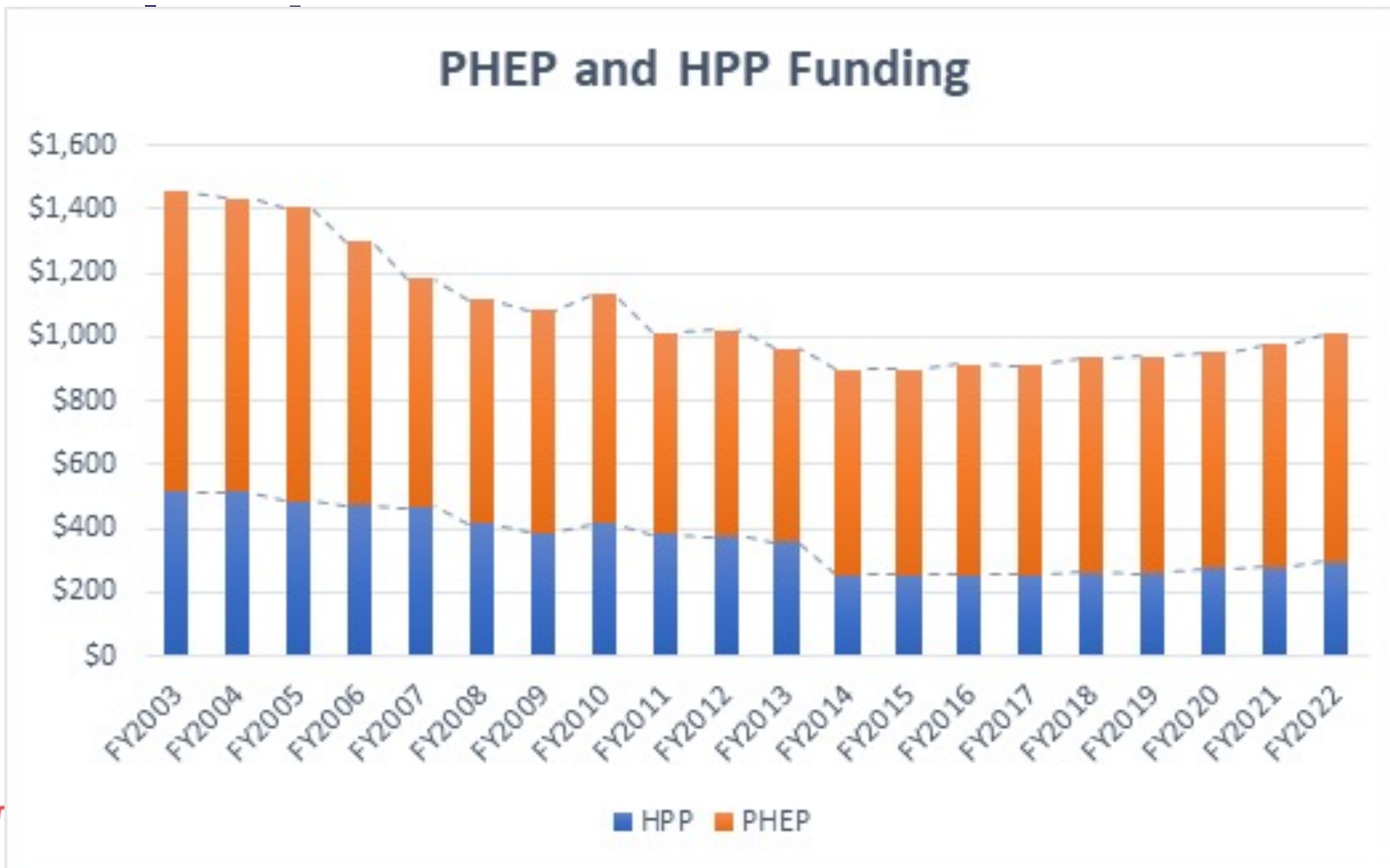


Lessons of COVID-19 Pandemic

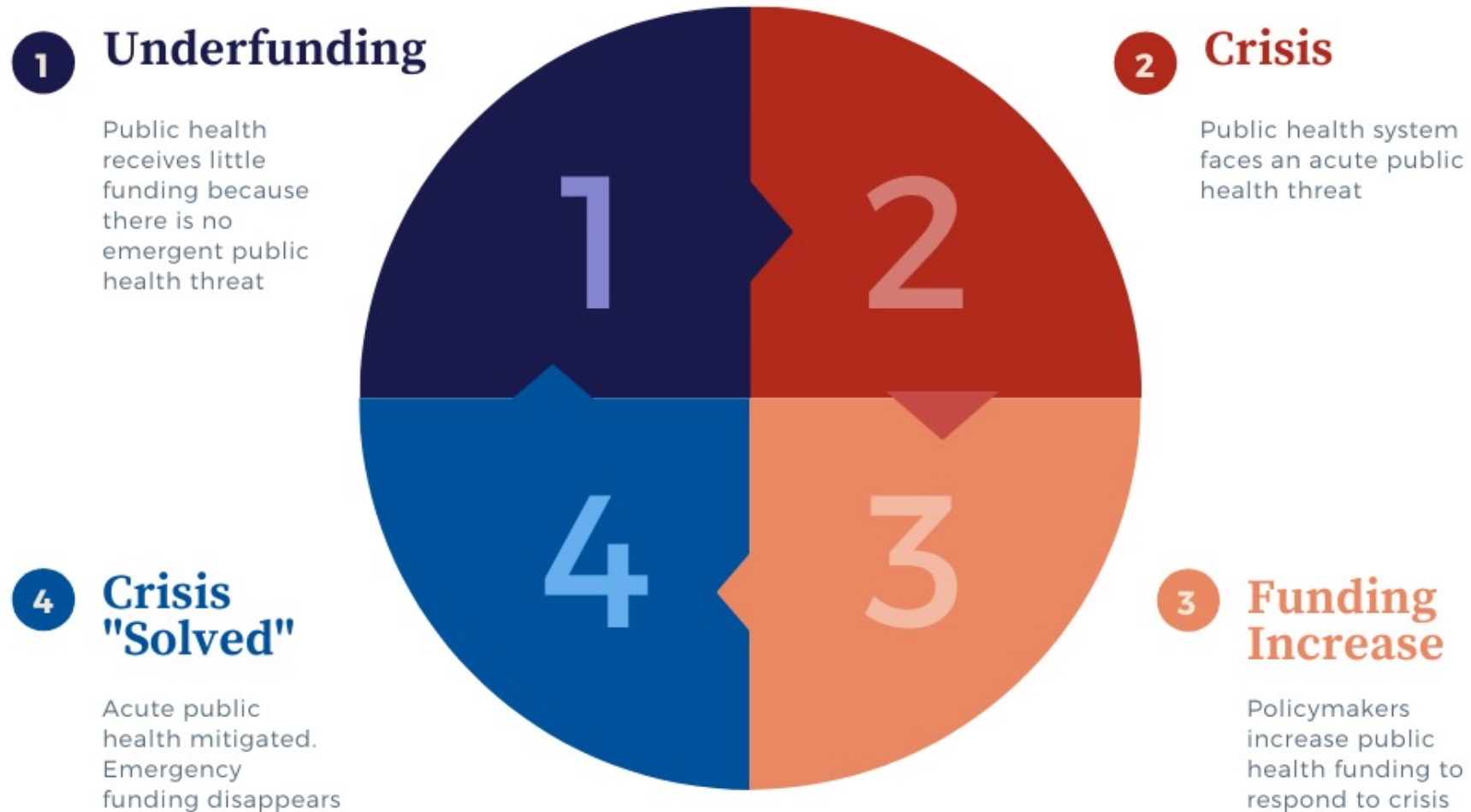
- Equity must be central in public health preparedness and response
- Increased, flexible, and sustained funding is needed across the public health system
- Modernized health data and disease tracking systems are needed
- Coordinated and consistent leadership, based in science are critical




Preparedness Funding to States Has



Boom and Bust Cycle of Public Health



Key Federal Recommendations

- Invest in public health infrastructure, data modernization
 - Prioritize investments in healthy equity and social determinants of health to help build resilient communities
 - Provide job-protected paid leave
 - Accelerate development and distribution of medical countermeasures
 - Strengthen the healthcare system's ability to respond and recover from health emergencies
 - Invest in public health communications; earning and building trust
 - Create a COVID-19 Commission
- 

For More Information

- Report and findings at <https://www.tfah.org/report-details/ready-or-not-2022/>
- Follow TFAH on Twitter @HealthyAmerica1
- Contact TFAH at: info@tfah.org



Welcome to Our Panelists



Leandris Liburd, PhD, MPH, MA
Associate Director for
Minority Health and Health Equity
Centers for Disease Control and
Prevention



Thomas Dobbs, MD, MPH
State Health Officer
Mississippi State
Department of Health



Céline Gounder, MD, ScM, FIDSA
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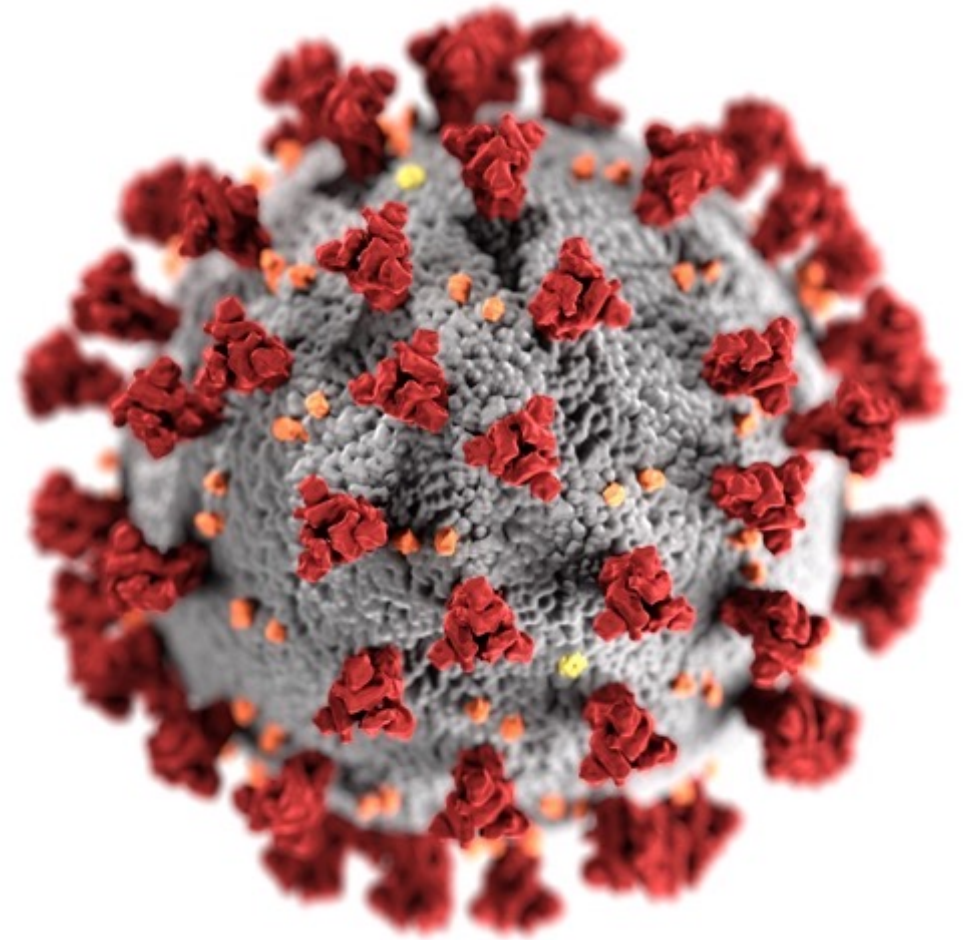


Leandris Liburd, PhD, MPH, MA
Associate Director for Minority Health and
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cdc.gov

Advancing Health Equity to Strengthen Public Health Systems

Leandris Liburd, PhD, MPH, MA,
Associate Director for Minority Health & Health Equity, CDC
April 26, 2022



cdc.gov/coronavirus

Pursuing Health Equity



CDC Proclaims Racism Public Health Crisis, Calls for Health Equity

The agency said the systemic racism rooted in unequal social determinants of health burden impacts health for marginalized communities.



'In the end, everything is about equity': How experts say the pandemic could invigorate climate change action



SCIENTIFIC AMERICAN®

PUBLIC HEALTH | OPINION

Data and Technology Can Help Us Make Progress on COVID Inequities

LEADERSHIP

Op-Ed: Employers' diversity and equity efforts often overlook people with disabilities



WSJ NEWS EXCLUSIVE

A City's Only Hospital Cut Services. How Locals Fought Back.

Apollo-owned LifePoint is embroiled in a dispute in central Wyoming that now stretches to Washington



Health Equity Executive Order 13985

Our country faces converging economic, health, and climate crises that have exposed and exacerbated inequities...

Our Nation deserves an ambitious whole-of-government equity agenda that matches the scale of the opportunities and challenges that we face.



Executive Order 13985 On Advancing Racial Equity and Support for Underserved Communities Through the Federal Government, 1/20/21 (<https://www.whitehouse.gov/briefing-room/presidential-actions/2021/01/20/executive-order-advancing-racial-equity-and-support-for-underserved-communities-through-the-federal-government/>)

CDC CORE Health Equity Science and Intervention Strategy

- In 2021, CDC launched an agency-wide strategy that aims to integrate health equity into the fabric of all we do.
- Vision: All people have the opportunity to attain the highest level of health possible.



Supporting Partners at All Levels

- **\$3 billion** awarded to **64 jurisdictions** to support local health departments and community-based organizations to increase vaccine access, acceptance, and uptake
- **\$2.25 billion** awarded to health departments across the U.S. and its territories to work in collaboration with community partners
- **\$348 million** to organizations for community health worker (CHW) services to support COVID-19 prevention and control
- **\$32 million** to organizations for CHW services to support training, technical assistance, and evaluation



CDC Chief Health Equity Officer



Chief Health Equity Officer

Charge

- Develop a CDC COVID-19 Response Health Equity Strategy to address the increasing health disparities and inequities worsened by the pandemic
- Coordinate efforts with HHS and redouble CDC's commitment to diversity, equity, and inclusion to help CDC achieve its public health mission



CDC's COVID-19 Health Equity Strategy: Why?

- COVID-19 may worsen already existing health and social inequities.
- Data highlight groups at increased risk of severe illness from COVID-19.
- Effective public health intervention planning accounts for the individuality of the populations to increase the chances for success.



CDC's Commitment to Preparedness & Future Response Efforts

- CDC firmly believes that issues of health equity and health disparities will continue to arise in future pandemic response efforts.
- The CHEO Unit was established to centralize CDC's efforts to prepare, address, and respond to issues of health equity not only for the COVID-19 response but for future response efforts as well.
- The work of CHEO is centered around priorities that will continue to be important as work shifts to planning and preparation for future pandemic response efforts.



Strategies to Advance Health Equity

- Understand how **differences in access** affect communities
- Develop and **implement approaches** to address these differences
- Consider their **impact** on different groups
- Mobilize **community engagement** and support
- Identify **inequitable conditions** in the social environment
- Change **community dynamics** to support health
- Implement **public health policies** that address underlying causes of health inequities



CDC Resources



Health Equity in Action Webpage

- Showcases CDC's collaborative efforts to address health disparities among populations at higher risk for severe COVID-19 and advance health equity
- Identifies the populations of focus for CDC Health Equity activities
- Serves as a resource for partners, media, policy makers, and others interested in CDC's health equity efforts during the COVID-19 response

Project Spotlight:

National Resource Center for Refugees, Immigrants, and Migrants (NRC-RIM)



Communities served: Refugees, immigrants, and migrants (RIM) in the United States.

Partner: University of Minnesota

Purpose: NRC-RIM is funded by CDC to provide assistance and resources to state and local health departments working with RIM communities that are disproportionately affected by COVID-19.

Link to project website: <https://nrcrim.umn.edu/>

Description: RIM communities are disproportionately affected by COVID-19 because of long-standing systemic, health, and social inequities. COVID-19 particularly affects people in these communities who experience economic challenges or who are working in essential jobs, like farmworkers and food processing plant employees. Some state and local health departments may not yet be fully equipped to manage COVID-19 outbreaks among culturally and linguistically diverse populations. NRC-RIM offers a centralized, multidisciplinary hub where local health departments and community-based organizations can access data-driven approaches to support effective COVID-19 prevention among RIM communities.



<https://www.cdc.gov/coronavirus/2019-ncov/community/health-equity/he-in-action.html>

Connect With Us!



- *Health Equity Matters* is a quarterly e-newsletter that shares news, perspectives, and progress related to minority health and health equity. <https://www.cdc.gov/minorityhealth/newsletter.html>
- *Health Matters for Women* is a monthly e-newsletter that provides information on what is happening in women's health around CDC and other agencies. <https://www.cdc.gov/women/newsletter/index.htm>
- *Conversations in Health Equity* is a blog devoted to increasing awareness of health inequities and promoting national, state, and local efforts to reduce health disparities and achieve health equity. <https://blogs.cdc.gov/healthequity/>
- Engage with us on Twitter **@CDCHealthEquity** and LinkedIn **@CDCComhhe**.



Let's work together to
achieve health equity.



CDC Washington Office

Web: www.cdc.gov/washington

Phone: 202-245-0600

Email: cdcwncovresponse@cdc.gov

The findings and conclusions in this report are those of the authors and do not necessarily represent the official position of the Centers for Disease Control and Prevention.





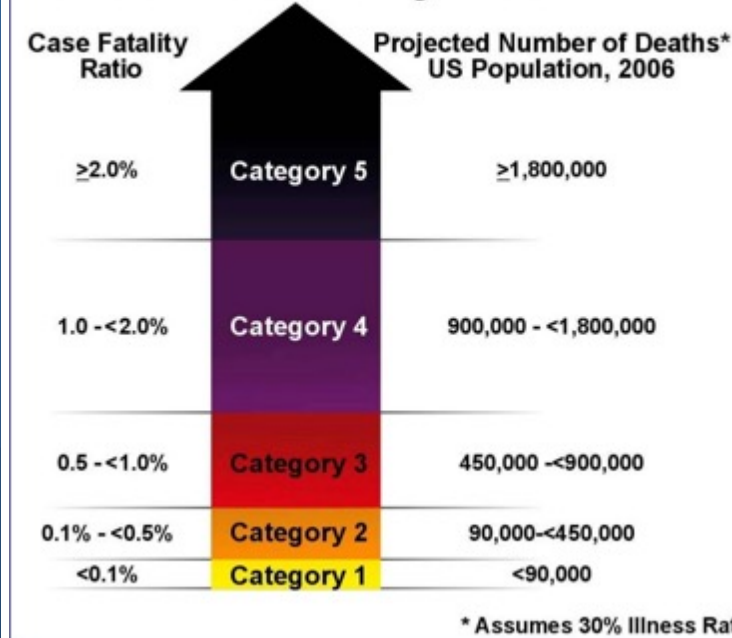
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TFAH Ready or Not Congressional Briefing and National Webinar

Thomas Dobbs, MD, MPH
4/26/22

Pandemic Severity Index

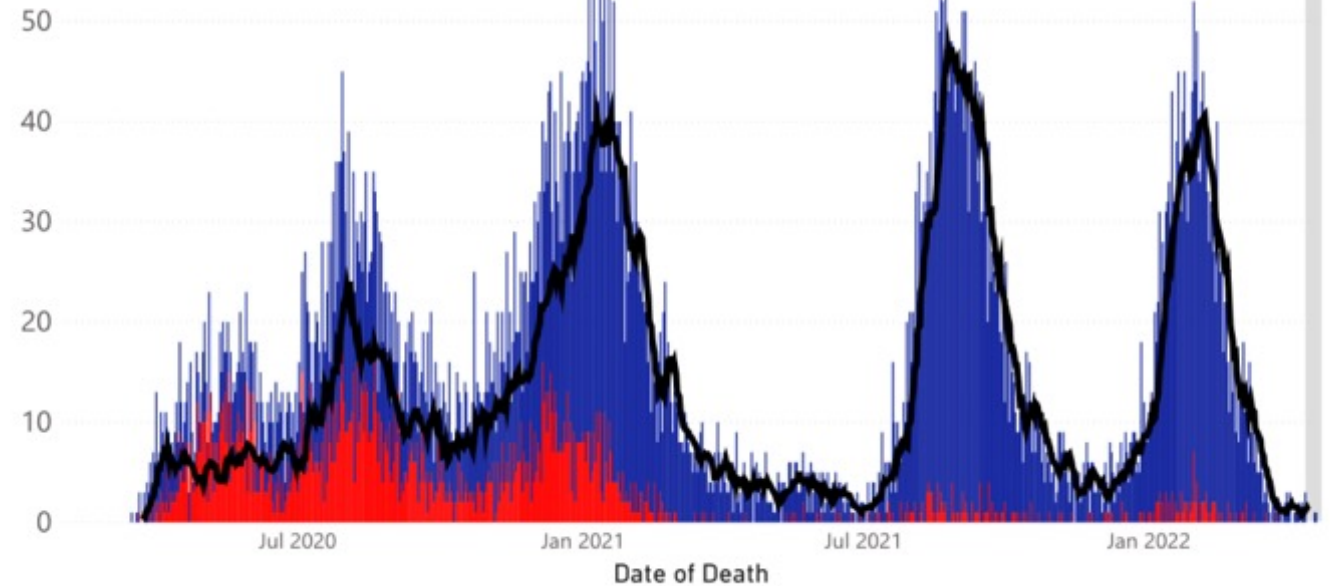


Deaths by Date of Death through April 21, 2022**, Mississippi

Resident of LTCF Deaths — 7 Day Average

ICF-IID, Assisted Living, and Personal Care Homes

able delays in reporting



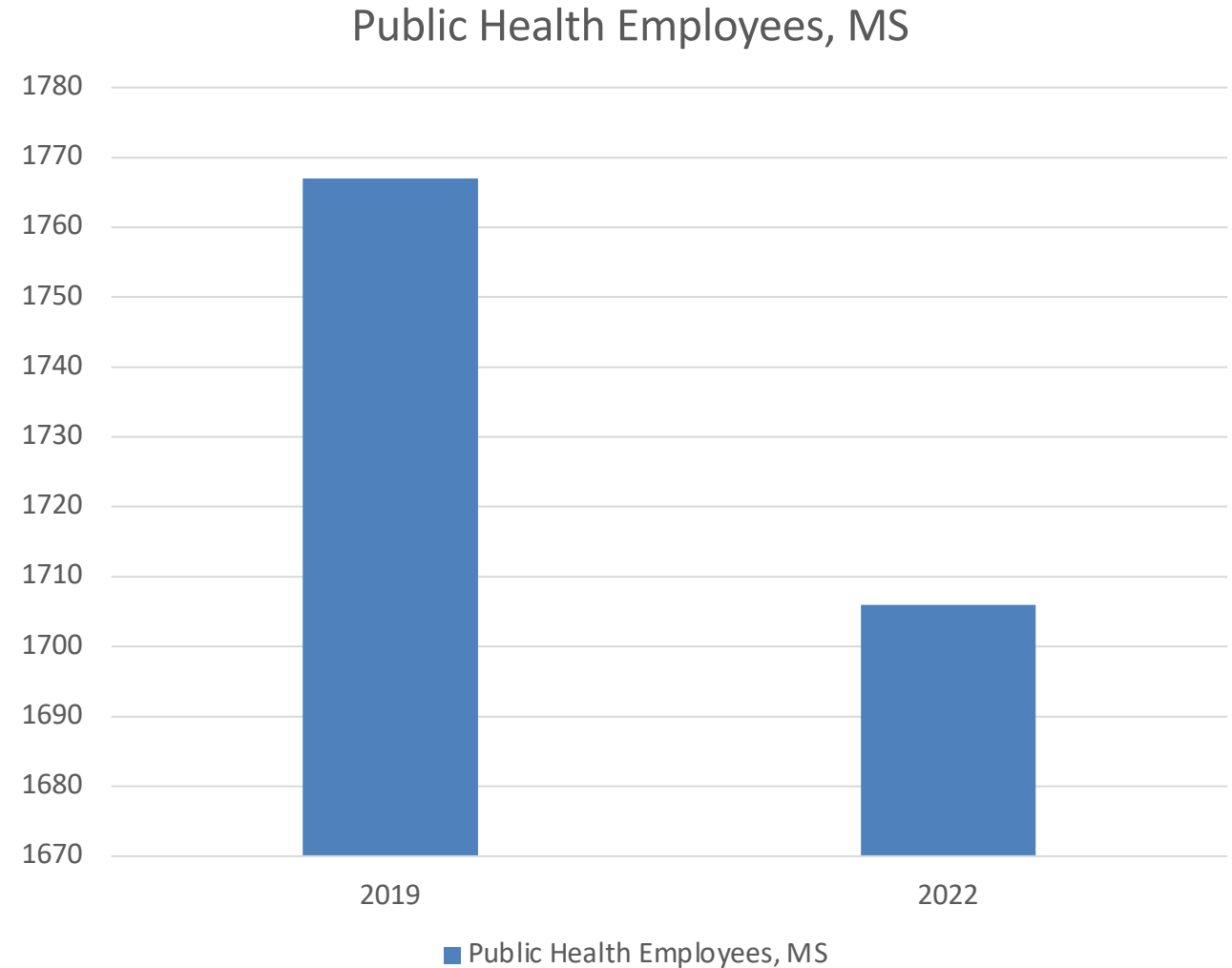
COVID Deaths in Mississippi

- Mississippi has lost 12,424 lives from COVID
- >1,000 under 50
- 13 children
- Mississippi lost to Vietnam War – 637
- Mississippians lost to WWII – 3,555

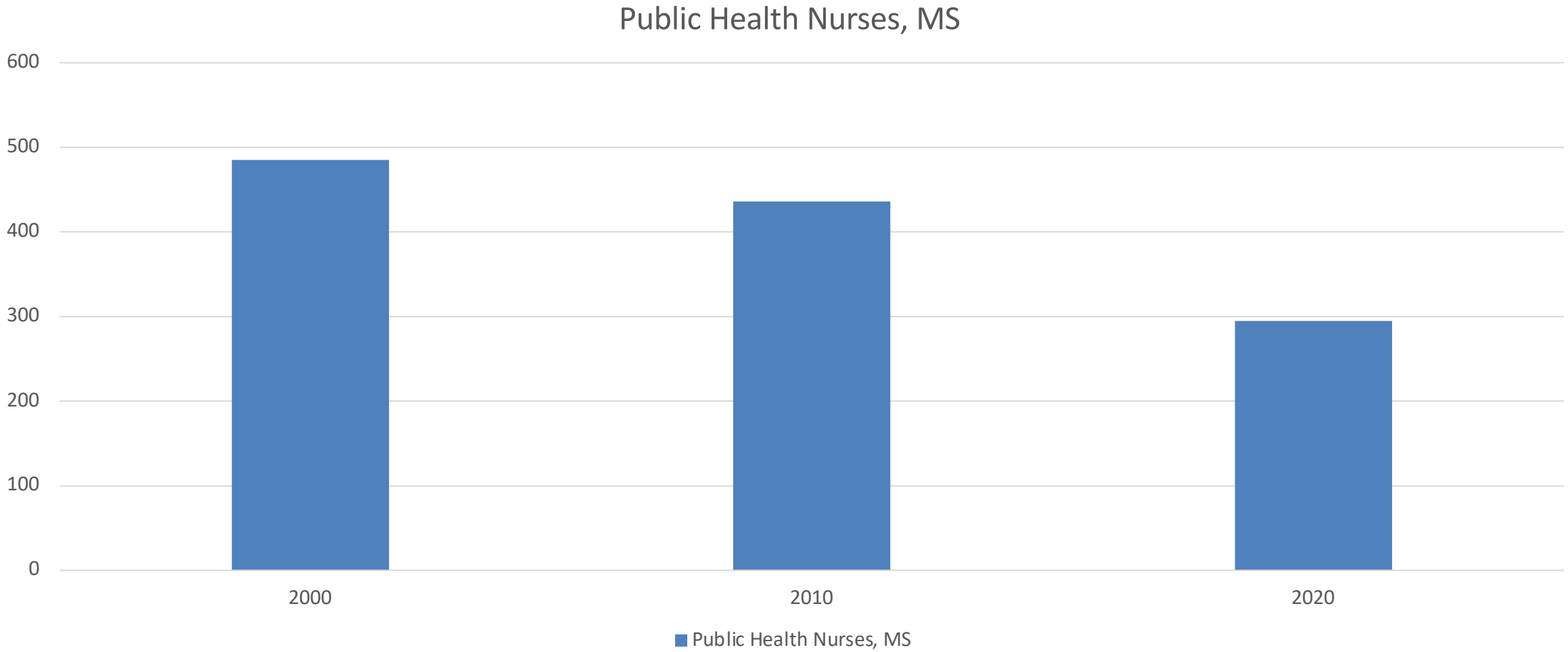


Challenges and Opportunities

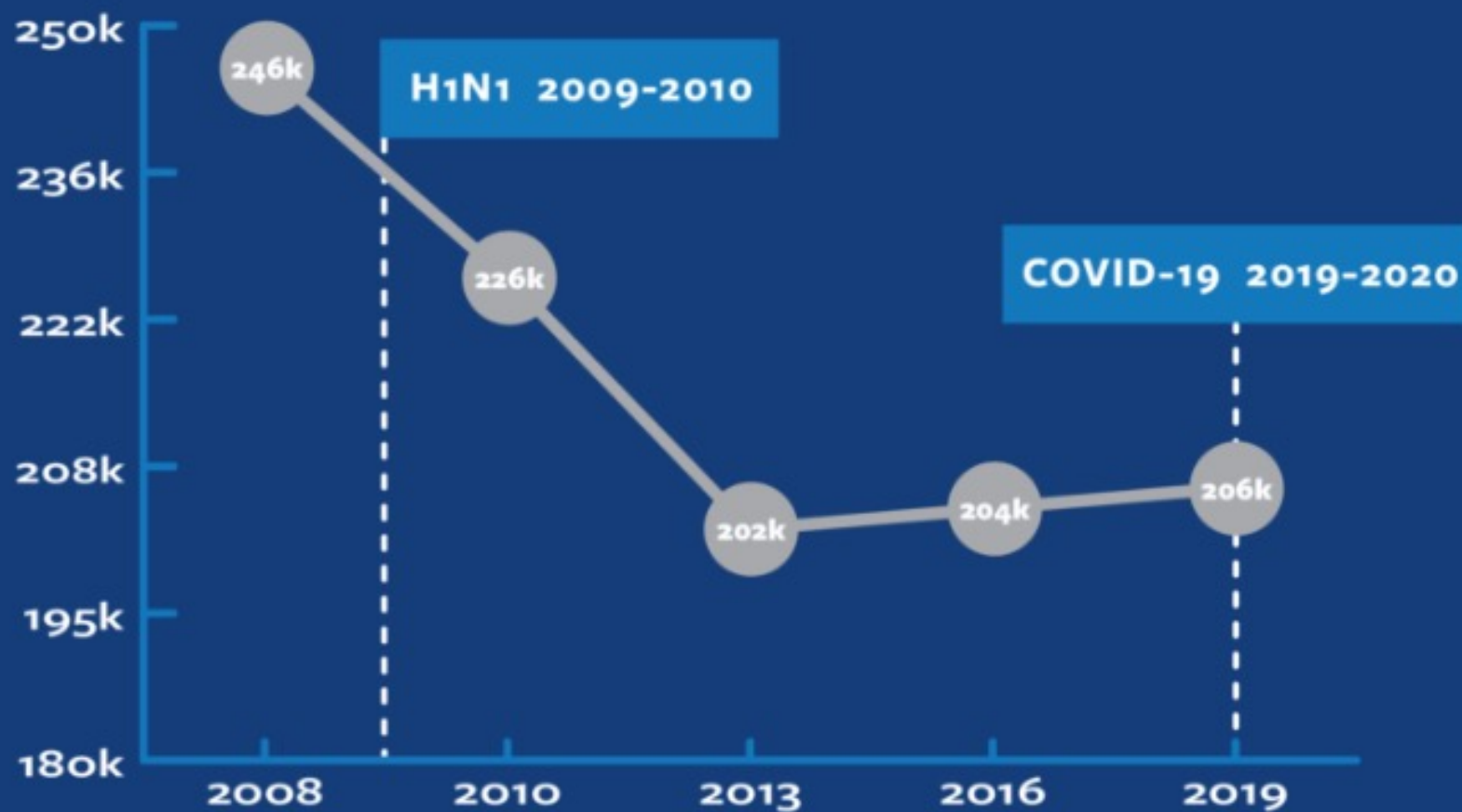
- Underfunded Operations
- Siloed/Restricted funding
- Short term, siloed & reactive planning
- Overly prescriptive funding does not meet community needs
- Under-developed workforce (MS has a smaller public health workforce post-pandemic and expanded responsibilities)
- Uncompetitive Salaries



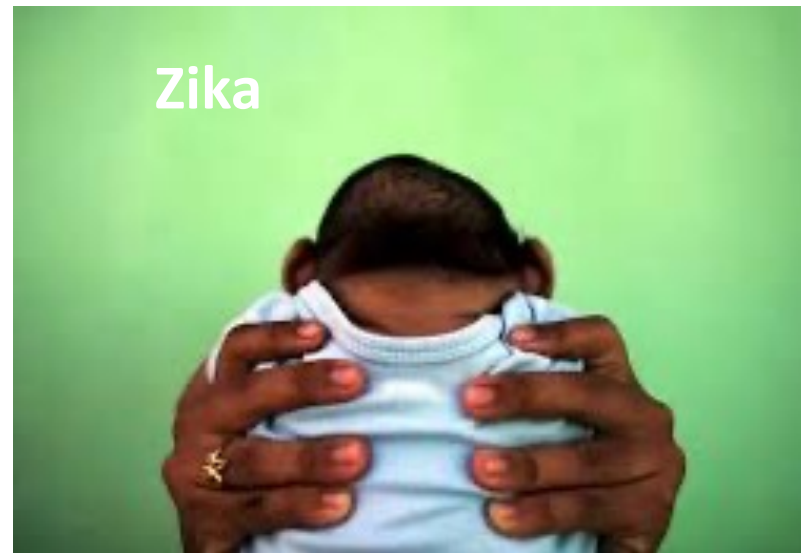
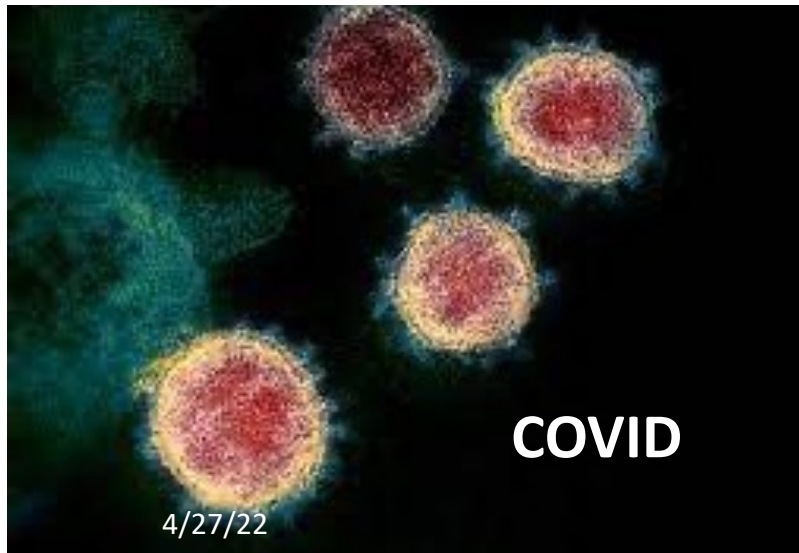
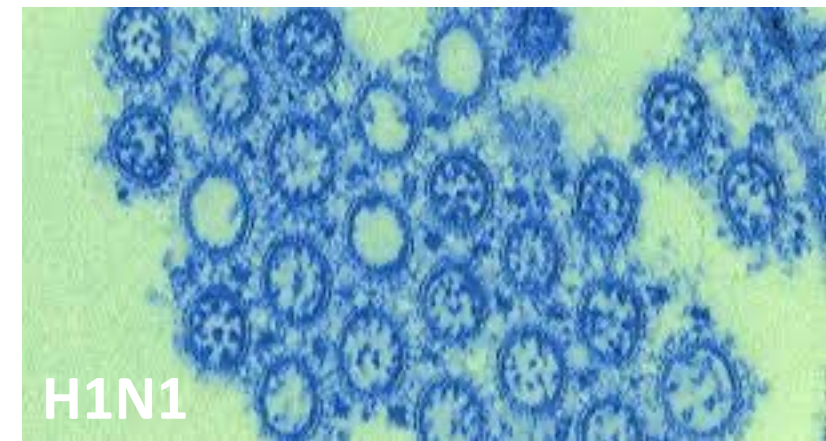
Increased Demands with Shrinking Workforce



**But the number of public health workers has declined...
at a time we need them most.**



Source: Analysis by JP Leider and the de Beaumont Foundation using data from ASTHO and NACCHO Profile Surveys 2008, 2010, 2013, 2016, and 2019.



There is always a new public health threat evolving around the corner. People just don't know about it.... We are perpetually responding/waiting but under resourced to fully meet the challenge.



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Submit Questions for Our Panelists



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Thank You to Our Moderator and Panelists



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Thank you!

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The recording and slides will be available at tfah.org.

