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Promoting Community Health During the COVID-19 Pandemic

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Promoting Community Health During the COVID-19 Pandemic

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SEPTEMBER – OCTOBER 2022

GREATER DANBURY AREA

DR. MAURA CONWAY



Problem Identification and Need

- The COVID-19 pandemic has affected aspects of health and community beyond the acute phase of COVID-19 infection, including chronic health conditions, mental health, substance use, food insecurity, access to healthcare, and housing insecurity. Further, existing disparities in these factors and other social determinants of health such as socioeconomic status, education, neighborhood, and physical environment have been exacerbated by the response to the COVID-19 pandemic.¹
- Preventative health care, health literacy, and social determinants of health are important factors in determining and improving health outcomes within a community.^{2,3}
- Description of need: Community members face negative health impacts as a result of the COVID-19 pandemic and response. They should be made aware of community resources for immediate and long-term solutions to the difficulties they experience.

Public Health Costs

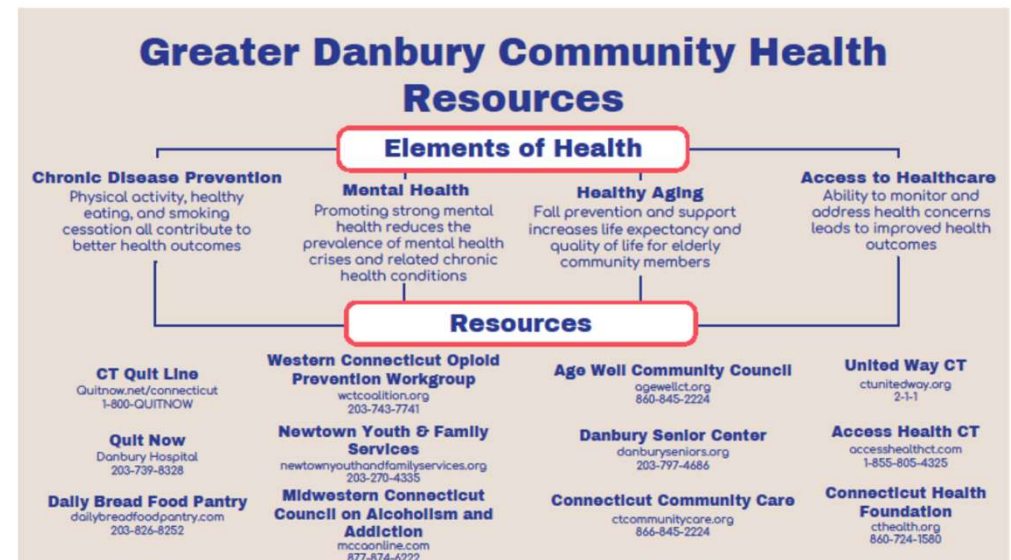
- 12% of households in the Greater Danbury area live below the federal poverty level, 49% of households met the ALICE (asset limited, income constrained, employed; above federal poverty level but unable to meet all basic needs based on localized cost of living and local average household sizes) threshold
- Overall life expectancy decreased by over 3 years for Black and Latino residents compared to 1.4 years for white residents. Deaths in 2020 can be attributed to COVID-19. Disparities in heart disease death rates and other chronic conditions contribute to the gap in life expectancy.
- 54% of Greater Danbury adults aged over 65 report having hypertension, 21% report having diabetes.
- Access to safe sidewalks, recreation, shopping via stores/markets are less available in Greater Danbury area than Connecticut as a whole
- 60% of Black/African American and 71% of Latino residents perceived having access to high-quality fruits and vegetables compared to 83% of white residents
- Many Greater Danbury residents report having health insurance, however 1 in 3 Latino residents lack health insurance
- 13% of adults report experiencing anxiety regularly, 8% report being bothered by depression; 31% of youth report feeling sad or depressed, 7% had attempted suicide
- Drug overdose deaths increased from 60/month to 113/month

Community Perspective on Issue

- Peter Kent, President of Daily Bread Food Pantry: “We primarily serve a demographic of Asset Limited, Income Constrained, Employed (ALICE) people in the Greater Danbury area. These individuals and families are often facing difficulty with low income and low access to food and health services, often unable to access SNAP benefits, school meals, WIC programs for a variety of reasons. Since the COVID pandemic began, the amount of people we service three times a month has increased about five-fold. Although we try to provide what are typically recognized as healthy foods, accessing good meals is often difficult for these families as well for a number of reasons.
- Julie Schmitter, Director of Development at Newtown Youth and Family Services: “We have seen a huge uptick in all psychiatric conditions and we also have an extensive waiting list even though we’ve hired three clinicians and two interns. We’ve especially seen anxiety as the most common diagnosis and the largest age population affected by it is from 11-17. These problems are exacerbated by existing disparities. It would be great if people could have better access to care and know what resources are available in this area.

Intervention and Methodology

- An infographic was created addressing primary health concerns in the Greater Danbury area with resources/community groups that target those problems.
- Infographic was forwarded to community partners that were interviewed for further distribution.




Results/Response

- Infographic distributed to community partners
 - Overall response was positive
 - Suggestions for improvement incorporated into current infographic
- Additional assessments and further development needed to create comprehensive document, determine effectiveness of infographic

Evaluation of Effectiveness and Limitations

- To monitor the response, combined quantitative survey and interviews should be conducted
 - Quantitative: Screen for Record binary response to whether individuals access services or resources that address their area of concern.
 - Qualitative: Individuals describe areas of concern with regards to their health and living conditions, then prompt for efficacy of infographic for alleviating concerns and whether they find intervention helpful.
- Due to limited time during clerkship, quantitative and qualitative evaluations were not performed.
- Limitations:
 - Extended timeline and multi-factorial impact on individual health muddies effect of singular intervention.
 - Self-reported surveys
 - English language only infographic generated
 - Limited distribution, mode of distribution may impact who receives information
 - Data, resources, community groups are subject to change over time

Recommendations for Future Interventions/Projects

- Interview community members that access community resources
 - Assess community health metrics prior to infographic distribution at one single primary care office or group of Nuvance Health primary care offices
 - Perform detailed analysis of what community resources patients access regularly
 - Increase visibility and distribution of infographic
 - Cooperate with community partners to increase visibility and access of their services
 - Determine which interventions are accessed more frequently than others, determine whether those responses suggest more need, ease of access, lack of awareness, etc.
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References

1. Singu S, Acharya A, Challagundla K, Byrareddy SN. Impact of Social Determinants of Health on the Emerging COVID-19 Pandemic in the United States. *Front Public Health*. 2020;8:406. Published 2020 Jul 21. doi:10.3389/fpubh.2020.00406
2. Sørensen K, Van den Broucke S, Fullam J, et al. Health literacy and public health: a systematic review and integration of definitions and models. *BMC Public Health*. 2012;12:80. Published 2012 Jan 25. doi:10.1186/1471-2458-12-80
3. Schroeder SA. We Can Do Better — Improving the Health of the American People. *New England Journal of Medicine*. 2007;357(12):1221-1228. doi:10.1056/NEJMs073350
3. Nuvance Health. Danbury Hospital & New Milford Hospital 2022 CHNA. 2022.
4. Nuvance Health. 2019 Greater Danbury Region Community Health Needs Assessment and Community Health Improvement Plan. 2019.

Interview Consent Form

Thank you for agreeing to be interviewed. This project is a requirement for the Family Medicine clerkship. It will be stored on the Dana Library ScholarWorks website. Your name will be attached to your interview, and you may be cited directly or indirectly in subsequent unpublished or published work. The interviewer affirms that he/she has explained the nature and purpose of this project. The interviewee affirms that he/she has consented to this interview.

Consented:

Name: Peter Kent, President of Daily Bread Food Pantry

Name: Julie Schmitter, Director of Development at Newtown Youth and Family Services