



APIC COVID-19 and Flu Resource Corner

September 22, 2022

In collaboration with the Asian and Pacific Islander American Health Forum (APIAHF), APIC is disseminating COVID-19 and Influenza-related resources to increase vaccination coverage at the national level. See below for relevant resources and distribute them throughout your communities.

COVID -19 and Influenza Information and Resources

CDC Recommends the [First Updated COVID-19 Booster](#)

The CDC recommends use of updated COVID-19 boosters from Pfizer-BioNTech for people ages 12 years and older and from Moderna for people ages 18 years and older.

Updated COVID-19 boosters add Omicron BA.4 and BA.5 spike protein components to the current vaccine composition, helping to restore protection that has waned since previous vaccination by targeting variants that are more transmissible and immune-evading.

- Importantly, [the previous formulations \(monovalent mRNA COVID-19 vaccines\) are no longer authorized as booster doses](#) for individuals 12 years of age and older.

CDC [Flu 2022 Talking Points](#)

In brief:

- Everyone 6 months and older should get a flu shot.
- The best time to get vaccinated is September, October, or early November.
- It's safe to get a flu vaccine and COVID-19 vaccine at the same time.

Novavax COVID-19 Vaccine: [CDC Recommends use for Adolescents](#)

The CDC signed a decision memo that Novavax's COVID-19 vaccine be used as another primary series option for adolescents ages 12 through 17. This recommendation follows FDA's authorization to authorize the vaccine for this age group under emergency use. Novavax's COVID-19 vaccine, which is available now, is an important tool in the pandemic and provides a more familiar type of COVID-19 vaccine technology for adolescents. Having multiple types of vaccines offers more options and flexibility for the public, jurisdictions, and vaccine providers.

[Recording: Engaging Parents Around Newly Approved Pediatric COVID-19 Vaccines and Building Vaccine Confidence](#)

On August 18, the HHS Children's Bureau Learning and Coordination Center hosted a dialogue with CDC to discuss engaging parents and guardians in conversations about COVID vaccines for children. CDC also provided new tools and resources for keeping children safe from COVID that listeners can share with parents and guardians.

Resource: [Guide to Hosting COVID-19 Vaccination Clinics at School](#)

HHS Suspends Orders of Free, At-Home COVID-19 Tests

The U.S. Department of Health and Human Resources suspended ordering of free at-home COVID-19 tests after Friday, September 2, due to a lack of additional funding to replenish the nation's stockpile of tests.

CDC's weekly [Vaccine Confidence Report](#), [Morbidity and Mortality Report](#), and [COVID-19 Science Update](#)

[Events](#)

- Friday, September 23 at 9 am PT / 12 pm ET

Together at the Table: Bringing Diverse Groups Together in Partnership for Public Health

The webinar will tell the story of five networks representing diverse groups without clear commonalities, who joined together to share resources and funding to educate and vaccinate their communities. Join the webinar and hear directly from partners on how they built relationships across communities and a workplan around their shared goals, what challenges they faced, and how they navigated divergent and shared needs. [Zoom link](#) [\(no registration necessary\)](#)

- Friday, September 23 at 10 am PT / 1 pm ET

COVID-19 Pandemic Response for Individuals with Disabilities: Lessons Learned

The COVID-19 pandemic has disproportionately impacted the lives of individuals with disabilities, deepening and widening existing inequalities. The purpose of the presentation is to briefly discuss the COVID-19 pandemic response for individuals with disabilities and highlight lessons learned focusing on new disability-inclusive initiatives, guidance, and policies. This webinar is part of the Nurse-led Forum on Vaccine Confidence. Register [here](#).

- Wednesday, September 28 at 4 am PT / 7 pm ET

Lessons Learned During the COVID-19 Pandemic and Key Takeaways for Future Infectious Disease Outbreaks

Learning Objectives:

1. Recognize strategies learned from COVID-19 pandemic to address alternate public health emergencies.
2. Understand how to talk about the differences between Monkeypox and COVID-19 to patients and clinical staff.
3. Identify resources to support clinical response to Monkeypox outbreaks.

Register [here](#).

Funding Opportunities

- [Surgo Ventures](#), [Uber](#), and [LISC](#) have partnered through the [Vaccine Access Fund](#) to provide funded support for organizations looking to increase vaccination rates. Your organization can apply to receive grant funds and free technical assistance to implement the following:
 - A Vaccine Ambassador Program that equips health center staff and incentivizes vaccinated patients to become trusted messengers, encouraging others in their network to get the COVID-19 vaccine.
 - The coordination of free rides with Uber (via the Uber Health platform) to appointments where COVID-19 vaccines are available.
 - To apply, click [here](#).
- AAMC - [Funding Opportunities for Health Equity and Research Interventions](#)
- RADx-UP Community Collaboration Mini Grant Program
 - The RADx-UP CDCC Community Collaboration Mini-Grant Program provides \$50,000 for direct costs to support community partners to help advance capacity, training, support, and community experience with COVID-19 testing initiatives. It is open to community serving organizations, faith-based organizations, and tribal nations and organizations. Awardees use funding to remove

barriers to COVID-19 communication and outreach, COVID-19 testing and diagnosis, and COVID-19 data collection and dissemination testing. They may provide training and education for community members around COVID-19 testing topics of interest or generate communication materials related to COVID-19 testing.

- For more information and to apply click [here](#).
- **Robert Wood Johnson Foundation’s Evidence for Action: Innovative Research to Advance Racial Equity (Rolling)**

Evidence for Action prioritizes research to evaluate specific interventions (e.g., policies, programs, practices) that have the potential to counteract the harms of structural and systemic racism and improve health, well-being, and equity outcomes. We are concerned both with the direct impacts of structural racism on the health and well-being of people and communities of color (e.g., Black, Latina/o/x, Indigenous, Asian, Pacific Islander people, and other races and ethnicities)—as well as the ways in which racism intersects with other forms of marginalization, such as having low income, being an immigrant, having a disability, or identifying as LGBTQ+ or a gender minority.

This funding is focused on studies about upstream causes of health inequities, such as the systems, structures, laws, policies, norms, and practices that determine the distribution of resources and opportunities, which in turn influence individuals’ options and behaviors. Research should center on the needs and experiences of communities exhibiting the greatest health burdens and be motivated by real-world priorities. It should be able to inform a specific course of action and/or establish beneficial practices, not stop at characterizing or documenting the extent of a problem.

E4A seeks grantees who are deeply committed to conducting rigorous and equitable research and ensuring that their findings are actionable in the real world. In addition to research funding, RWJF also supports grantees with stakeholder engagement, dissemination of findings, and other activities that can enhance their projects’ potential to “move the needle” on health and racial equity. Only through intentional and collaborative efforts to disrupt racism and translate research to action can we hope to build a more just and equitable society and a Culture of Health.

Applications are accepted on a rolling basis. Applicants will generally receive notice within six to nine weeks of applying as to whether they are invited to submit a full proposal. Full proposals will be due two months from the date of notification. Funding recommendations will generally be made within eight weeks of receipt of the full proposal. In circumstances when a research opportunity is time sensitive, reviews may be expedited. An explanation of the time-sensitive nature of the research should be included in the LOI application.

Click [here](#) for more information.

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