Board of Health Update - Health Officer Report

11.17.23

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THE CITY OF Fargo FAR MORE

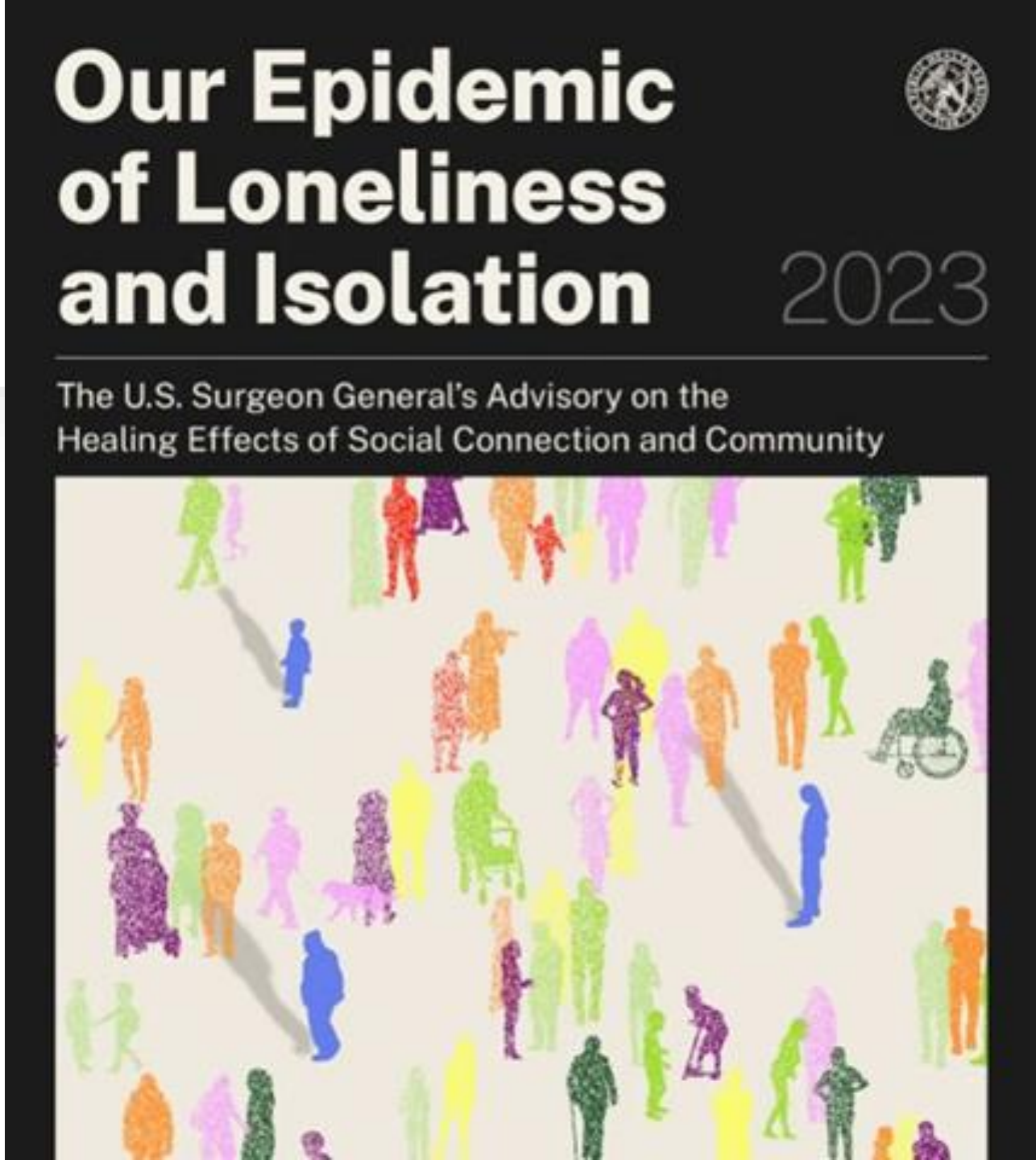
Fargo Cass Public Health
Prevent. Promote. Protect.

New Surgeon General Report on the Epidemic of Loneliness

The Epidemic of Loneliness

- New and pressing public health crisis of *loneliness*

- National strategy to advance social connection
  - Individuals
  - Governments
  - Workplaces
  - Health systems
  - Community organizations



Physical Health Consequences of Poor Social Connection

29% increased risk of heart disease

32% increased risk of stroke

50% increased risk of developing dementia for older adults

Increases risk of premature death by > 60%

Mental Health Effects of Loneliness and Isolation

- Doubles an adult's risk of developing depression
  - > 1:5 U.S. adults are living with a mental illness
- In childhood, increases risk of anxiety and depression both immediately and in the future
  - > 1:3 young adults are living with a mental illness

** Addressing loneliness is a critical part of fully addressing the mental health crisis in America*

Social Connection Benefits Individual Health and Communities

- Evidence shows increased connection:
  - Helps reduce individual risk of serious health conditions:
    - Heart disease
    - Stroke
    - Dementia
    - Depression
  - Connected communities fare better on several measures:
    - Population health
    - Community safety
    - Community resilience responding to natural disasters
    - Prosperity
    - Civic engagement

Framework to Advance Social Connection

Strengthen Social Infrastructure

Enhance community physical elements (parks, libraries, playgrounds)

Strengthen programs and policies in place

Strengthen social infrastructure - design environments that promote connection and invest in institutions that bring people together

Enact Pro-Connection Public Policies

National, state, local, and tribal governments all play a role

Establish policies to support accessible public transportation or paid family leave

Mobilize the Health Sector

Loneliness is a risk factor for several major health conditions

Health care providers well-positioned to assess patients for risk of loneliness and intervene

Framework to Advance Social Connection

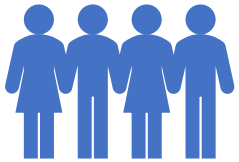
Reform Digital Environments

Evaluate relationship with technology

Ensure digital interaction does not detract from meaningful and healing connection with others

Deepen Our Knowledge

Establish a more robust research agenda to further understanding of causes / consequences of social disconnection, populations at risk, and effectiveness of efforts to increase connection



Cultivate a Culture of Connection

Informal practices / cultural norms of everyday life significantly influence relationships

Foster a culture of connection

SOCIAL CONNECTION
FACT CARD

Poor social relationships, social isolation, and loneliness can increase your risk of heart disease by 29% and risk of stroke by 32%.[1]

1. Valtorta et al., 2016.

SOCIAL CONNECTION
FACT CARD

Among older adults, chronic loneliness and social isolation can increase the risk of developing dementia by approximately 50%.[1]

1. Lazzari & Rabottini, 2021.

SOCIAL CONNECTION
FACT CARD

Living in isolation reduces our chances of survival and social isolation increases the risk for premature mortality by 29%.[1,2]

1. Holt-Lunstad et al., 2015.

SOCIAL CONNECTION
FACT CARD

Smaller social network size is associated with an increased risk of type 2 diabetes and of other diabetic complications including heart attacks and kidney disease.[1,2]

1. Brinkhues et al., 2017.
2. Brinkhues et al., 2018.

SOCIAL CONNECTION
FACT CARD

Social isolation, or even the perception of isolation, can increase inflammation in the body to the same degree as physical inactivity.[1]

1. Yang et al., 2016.

SOCIAL CONNECTION
FACT CARD

People with strong perceptions of community belongingness are 2.6 times more likely to report good or excellent health than people with a low sense of belongingness.[1]

1. My Health My Community, 2018.

SOCIAL CONNECTION
FACT CARD

Children and adolescents who enjoy positive relationships with their peers, parents, and teachers experience improved academic outcomes.[1]

1. DuBoid et al., 2011.

SOCIAL CONNECTION
FACT CARD

Being more socially connected can improve stress responses and minimize the negative health effects of stress.[1,2]

1. Cohen & Willis, 1985.
2. Southwick, et al., 2016.

SOCIAL CONNECTION
FACT CARD

Loneliness and poor social support have been found to significantly contribute to the development and severity of illnesses after exposure to viruses.[1,2]

1. Cohen, 2020.
2. LeRoy et al., 2017.

SOCIAL CONNECTION
FACT CARD

Immersion in local community-based activities such as volunteering significantly increases the likelihood of unemployed individuals becoming employed.[1,2,3]

1. Wilson, 2000.
2. Jastrzab et al., 2004.
3. Spera et al., 2015.

SOCIAL CONNECTION
FACT CARD

Social support from friends and family is associated with improved hypertension and diabetes management.[1,2,3,4]

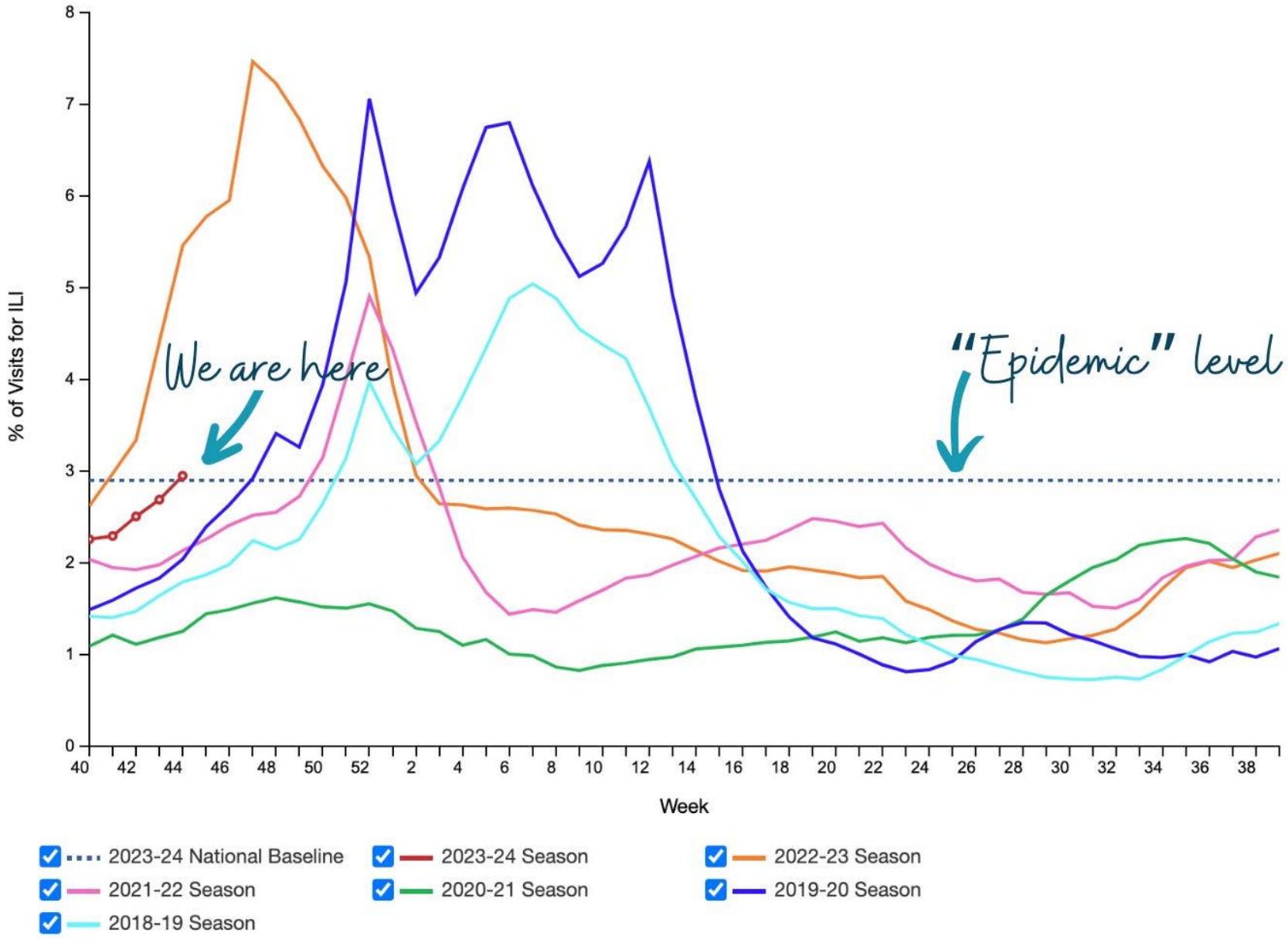
1. Magrin et al., 2017.
2. Shahin et al., 2021.
3. Pan et al., 2021.
4. Song et al., 2017.

SOCIAL CONNECTION
FACT CARD

Adults who report feeling lonely often are more than twice as likely to develop depression as adults who report rarely or never feeling lonely.[1]

1. Mann et al., 2022.

Influenza-like illnesses over time



Source: CDC; Annotations KKJ

Vaccine coverage, adults

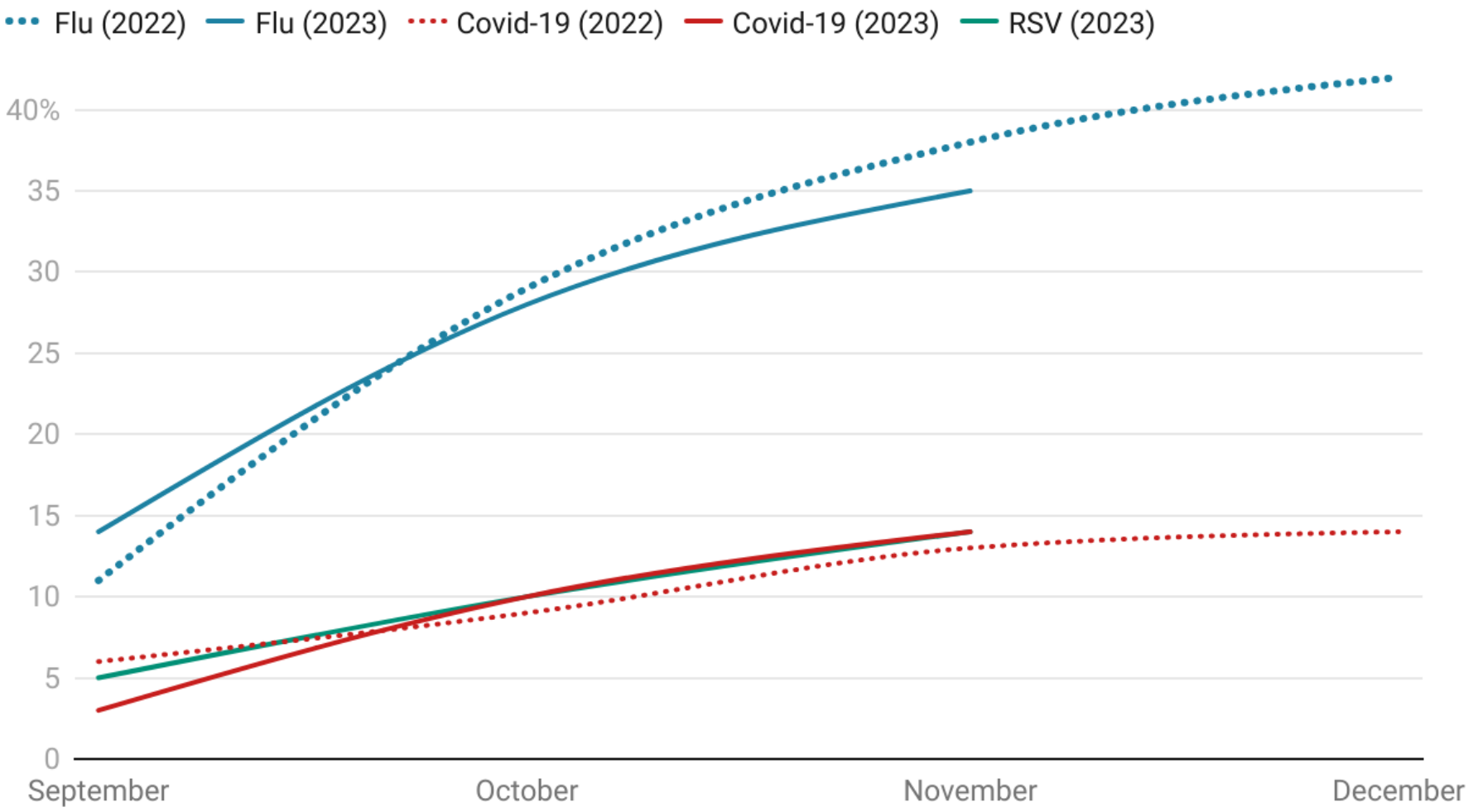


Chart: YLE/Katelyn Jetelina • Source: CDC • Created with Datawrapper

NORTH Dakota | Health & Human Services
Be Legendary.

2023-2024 Influenza Weekly Report

North Dakota Department of Health and Human Services

Week 45

Ending Saturday, November 11, 2023

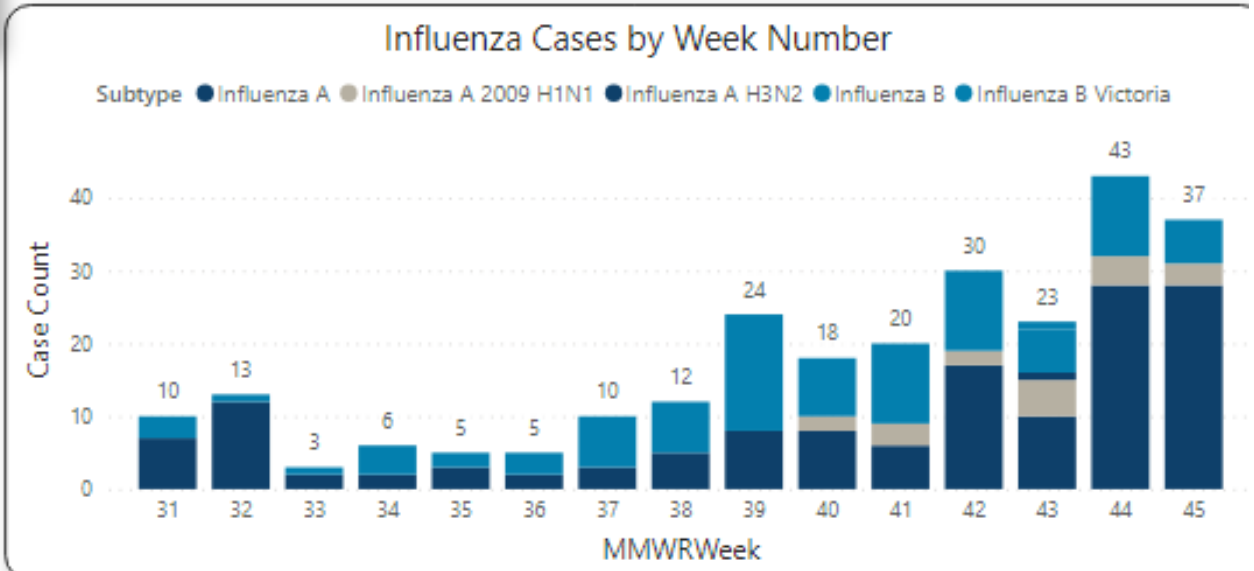
Last updated 11/16/2023

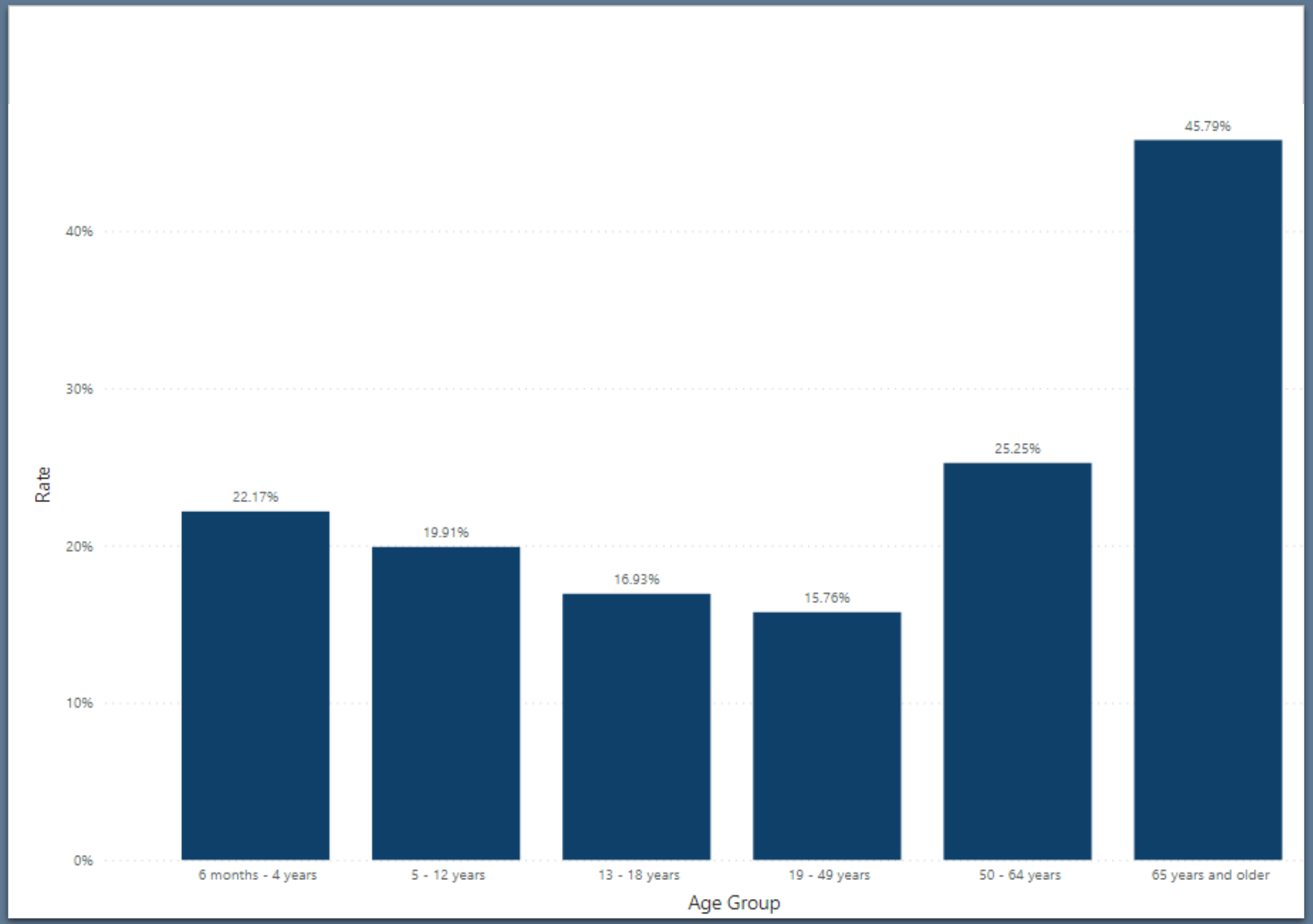
Several markers of influenza activity have trended upwards from the previous week, and three new hospitalizations due to influenza were reported. Now is the perfect time to receive the influenza seasonal vaccine- contact your healthcare provider or visit our website for additional information!

The North Dakota Department of Health and Human Services encourages everyone to take everyday preventative steps to reduce the spread of influenza and other respiratory diseases this fall. Additional information regarding influenza or influenza vaccine can be found at ndflu.com.

	Last Week	Season Total
New Influenza Cases:	37	259
Outpatient Visits for Influenza-like Illness:	4.46%	2.41%
Laboratory Specimens Positive for Influenza:	1.76%	0.86%
Percentage of Students Absent from School:	11.20%	4.43%
New Hospitalizations due to Influenza:	3	7
New Deaths due to Influenza:	0	0

Subtype	Cases in Previous Week	Total for Season
Influenza A	28	141
Influenza A 2009 H1N1	3	19
Influenza A H3N2	0	1
Influenza B	6	97
Influenza B Victoria	0	1
Total	37	259





N.D. Statewide Flu Coverage 2022-23 Season

COVID-19 Cases Overview

Last Updated: 11/10/2023

POPULATION
762,062

COUNTY
All

Hover over a value and click the icon for more information

THIS WEEK

11/3/2023 - 11/9/2023

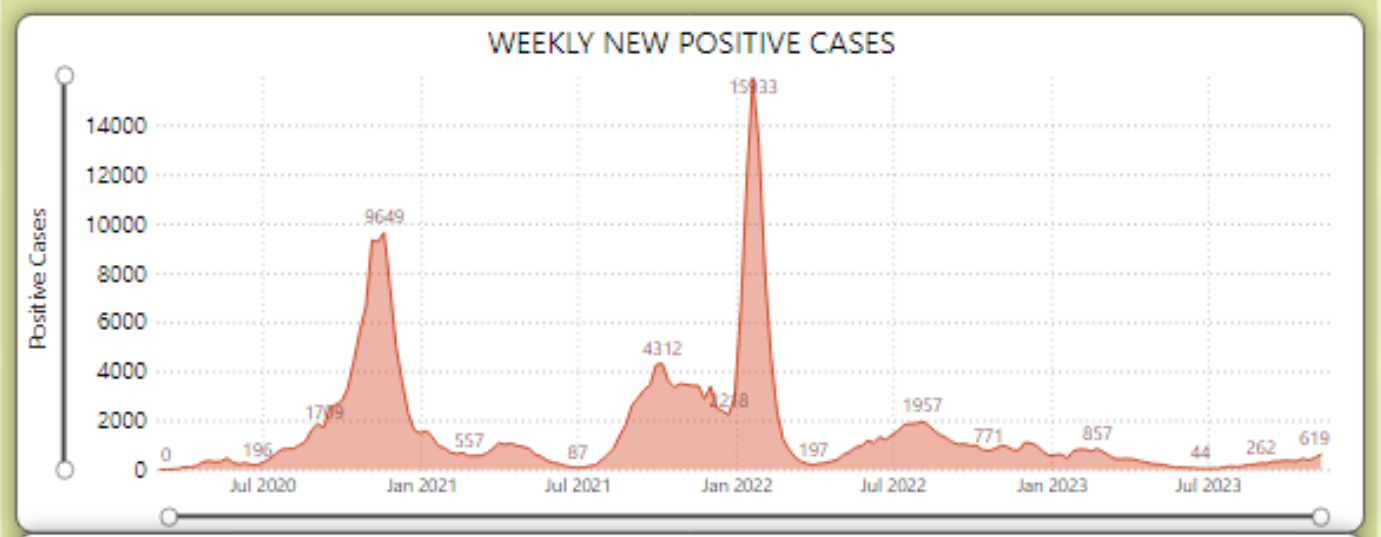
WEEKLY NEW POSITIVE CASES
619

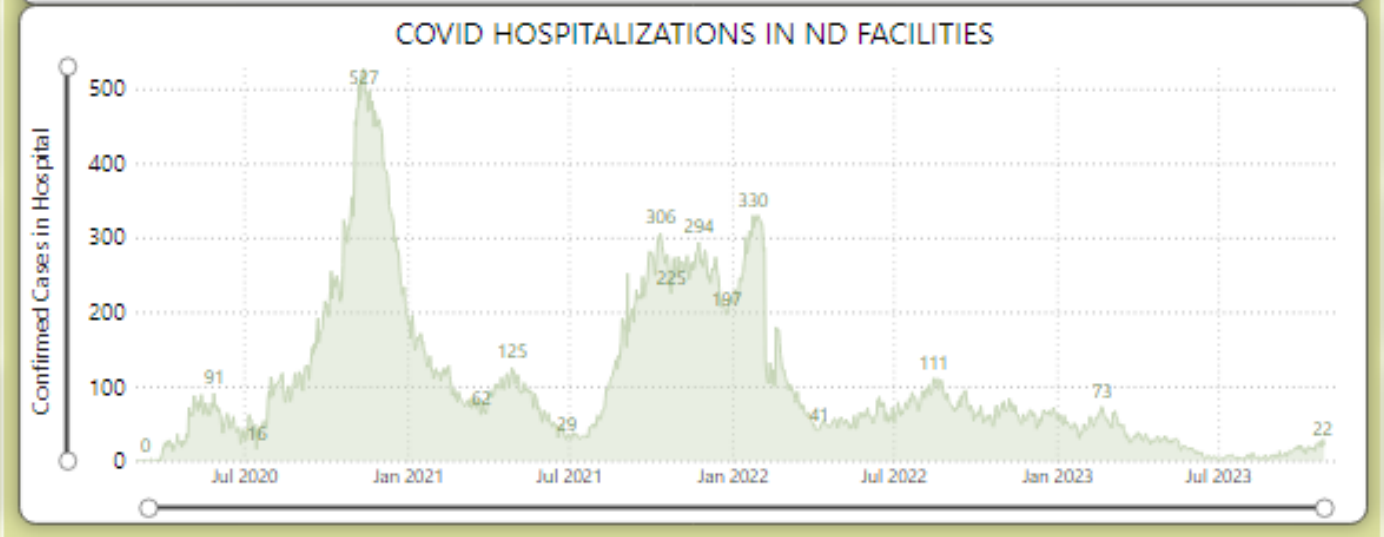
7 DAY CASE RATE PER 100,000 INDIVIDUALS
81

CUMULATIVE

TOTAL POSITIVE CASES
297,296

DEATHS
CLICK TO VIEW AT VITAL...





STATEWIDE HOSPITAL CAPACITY AS OF 10/28/2023

PERCENT INPATIENT BEDS OCCUPIED
68%

PERCENT ICU BEDS OCCUPIED
46%

INPATIENT BEDS OCCUPIED WITH COVID
19

ICU BEDS OCCUPIED WITH COVID
3

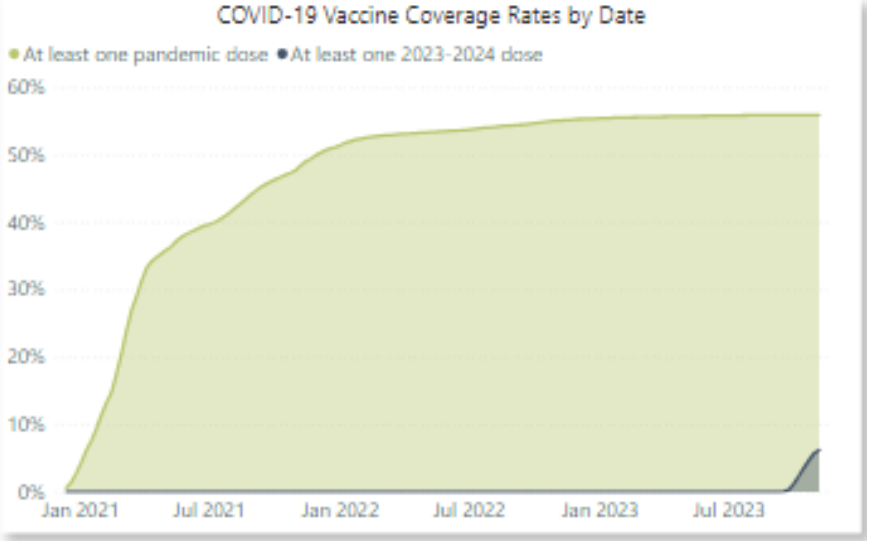
WEEKLY COVID ADMISSIONS
38

COVID-19 Vaccine Coverage Rates

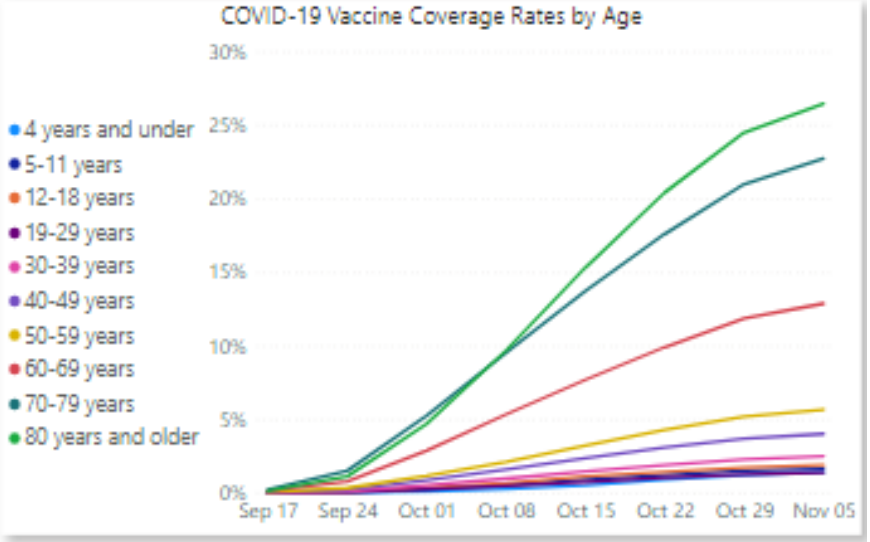
Select filters to view time, age group, or county specific data.

	At least one pandemic dose*	At least one 2023-2024 dose**
6 months and older	55.9% 445,426 residents	6.2% 49,423 residents
5 years and older	59.3% 440,073 residents	6.6% 48,720 residents
12 years and older	63.4% 419,826 residents	7.2% 47,390 residents
18 years and older	65.3% 392,294 residents	7.7% 46,192 residents
65 years and older	79.0% 105,543 residents	21.5% 28,711 residents

Month/Year: All | Age: All | County: All



Select View: at least one pandemic dose | at least one 2023-2024 dose



*At least one pandemic dose: one or more doses of any monovalent or bivalent COVID-19 vaccine between 12/14/2020-9/11/2023

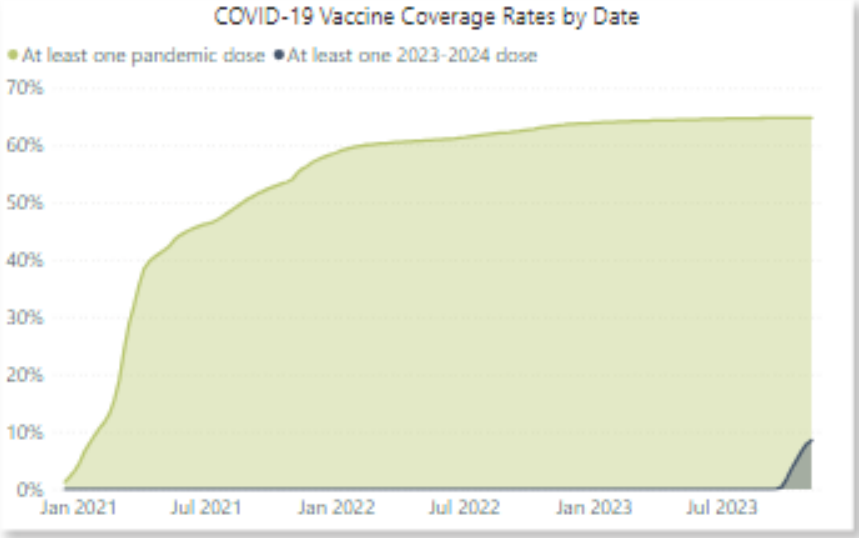
**At least one 2023-2024 seasonal dose: one or more doses of any 2023-2024 seasonal COVID-19 vaccine.

COVID-19 Vaccine Coverage Rates

Select filters to view time, age group, or county specific data.

	At least one pandemic dose*	At least one 2023-2024 dose**
6 months and older	64.7% 131,716 residents	8.5% 17,370 residents
5 years and older	68.1% 128,988 residents	8.9% 16,937 residents
12 years and older	71.4% 121,232 residents	9.5% 16,151 residents
18 years and older	72.5% 112,316 residents	10.0% 15,566 residents
65 years and older	82.3% 22,134 residents	31.2% 8,393 residents

Month/Year: All | Age: All | County: CASS



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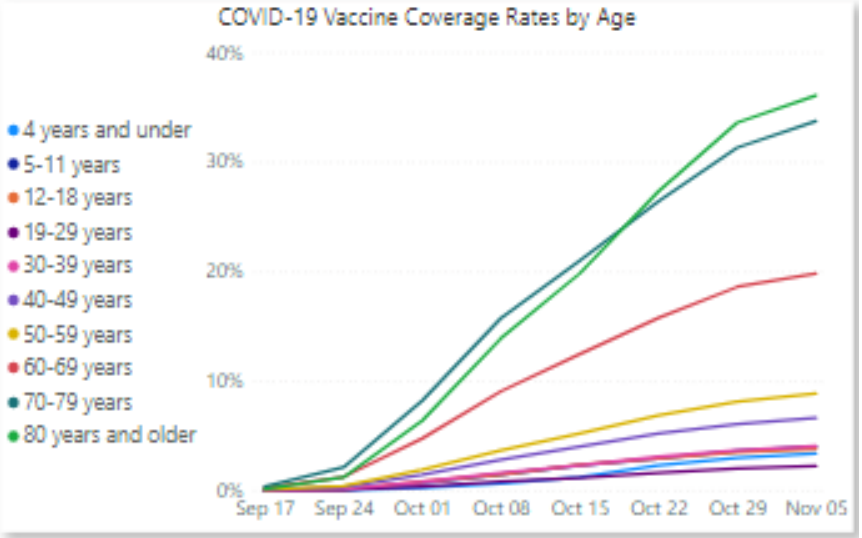

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FALL 2023 VACCINES

Version: Oct 2023

	What are the options?	Who is eligible?	How well do they work?	When should I get it?
INFLUENZA	A shot that targets 4 strains of seasonal flu	6 months and older	Reduces the risk of going to the doctor by 53%	October is ideal, as vaccine protection wanes over a season
COVID-19	Updated vaccine formula targeting XBB – an Omicron subvariant Options: Moderna and Pfizer (mRNA) or Novavax (protein)	6 months and older	Last year, the fall COVID-19 vaccine provided 40-60% additional effectiveness against severe disease	Protection against **severe disease**: Get now Protection against **infection**: Best to get it right before a wave, which can be challenging to time **Recently infected?** Wait at least 3-4 months
RSV (OLDER ADULTS)	2 options: GSK and Pfizer. They are slightly different in design, but only at a microscopic level	60 years and older	82-86% efficacy against severe disease	Now; no need to juggle timing as protection is durable
RSV (PREGNANCY)	Pfizer's vaccine called ABRYSVO	Pregnant people (then protection will pass to baby for protection in first 6 months of life)	82% efficacy in preventing hospitalization in first 3 months of life. 69% efficacy after 6 months	32 to 36 weeks of pregnancy and only during Sept-January
RSV MONOCLONAL ANTIBODY	This is not a vaccine (doesn't teach the body to make antibodies) but rather a proactive medication (provides antibodies)	**All** infants <8 months. High-risk infants 8-19 months	Reduces risk of hospitalization and healthcare visits by ~80%	Now. Protection lasts 4-6 months

By: Katelyn Jetelina, MPH PHD and Caitlin Rivers, MPH PHD. For more information go to Your Local Epidemiologist

Resources

- Social Connection — Current Priorities of the U.S. Surgeon General (hhs.gov)
- Influenza | Health and Human Services North Dakota
- Coronavirus Cases | Health and Human Services North Dakota
- COVID-19 Vaccine Dashboard | Health and Human Services North Dakota