



**HEALTH UPDATES FROM THE  
DOCTOR'S MINISTRY OF  
GRACE**

**Pastor's Moment  
4/23/2023**

# APRIL HEALTH OBSERVANCES



This Photo by Unknown Author is licensed under [CC BY-SA](#)



This Photo by Unknown Author is licensed under [CC BY](#)



This Photo by Unknown Author is licensed under [CC BY](#)

World Immunization Week  
Alcohol Awareness Month  
National Cancer Control Month  
National Donate Life Month  
Parkinson's Awareness Month  
National Child Abuse Prevention Month

A poster for Black Maternal Health Week 2023. The background is yellow with a pattern of small white flowers. The text "BLACK MATERNAL HEALTH WEEK 2023" is in large white and yellow letters. A circular logo on the right says "BLACK MATERNAL HEALTH WEEK APRIL 11 - 17, 2023" and features a white flower. At the bottom, there is a photo of two Black women hugging, with the BMMA logo (Black Mamas Matter Alliance) and the text "Join us April 11-17 for a week of activism and community building for Black Mamas! In solidarity with National Minority Health Month and the International Day for Maternal Health and Rights, Black Mamas Matter Alliance founded BMHW to raise awareness, inspire activism, and strengthen organizing for Black maternal health." Below the photo are the hashtags "#BMHW23" and "#BlackMaternalHealthWeek". At the bottom right is the website "WWW.BLACKMAMASMATTER.ORG/BMHW".



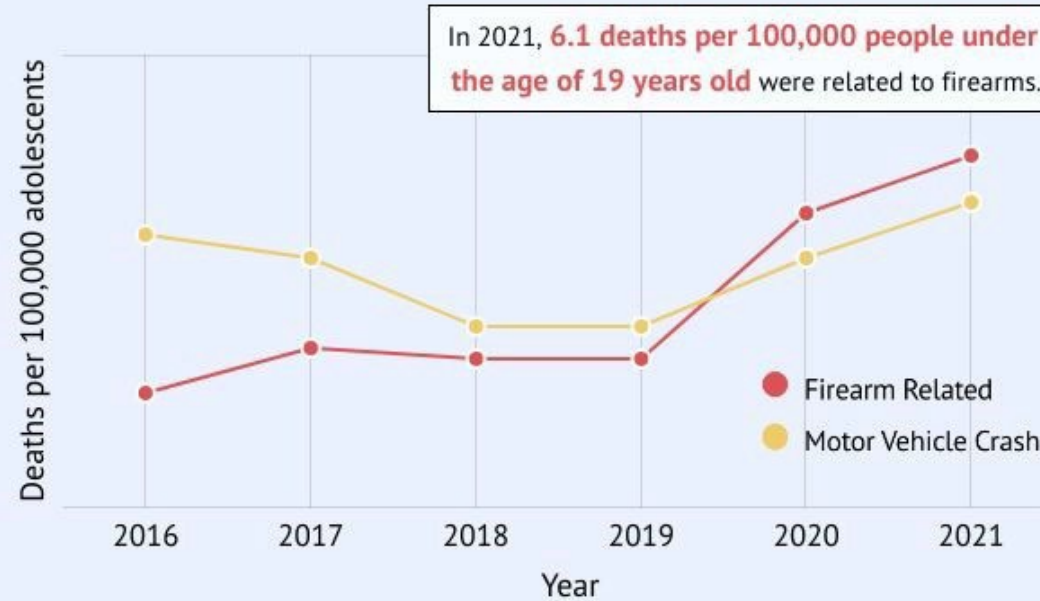




## Guns have become the leading cause of death for children and adolescents in America.



For the first time, gun-related deaths surpassed motor vehicle accidents as the top cause of death for those under 19 years old.

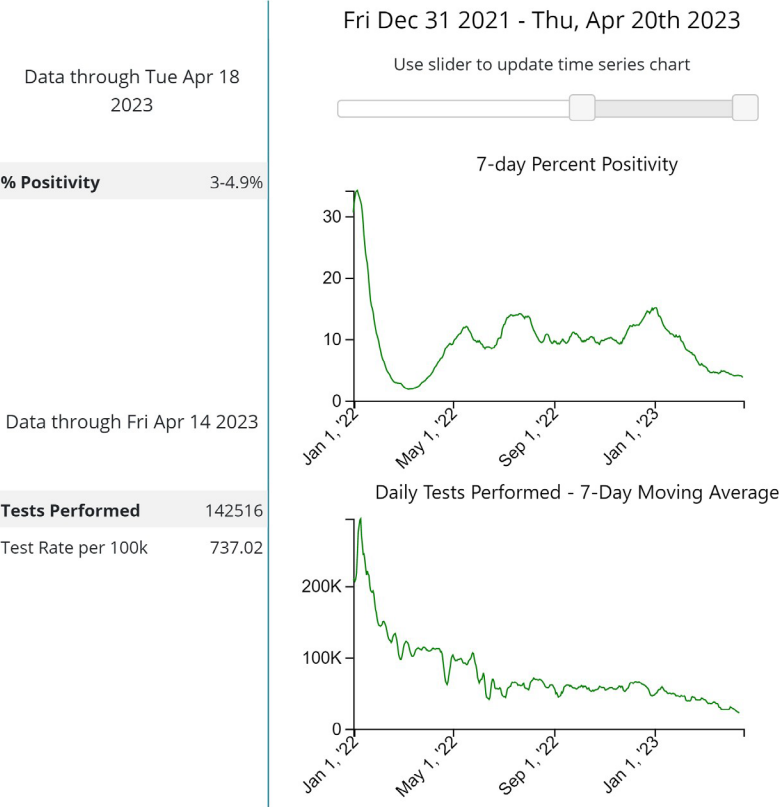


In 2019, one child or teen was killed with a firearm **every 2 hours and 36 minutes**.

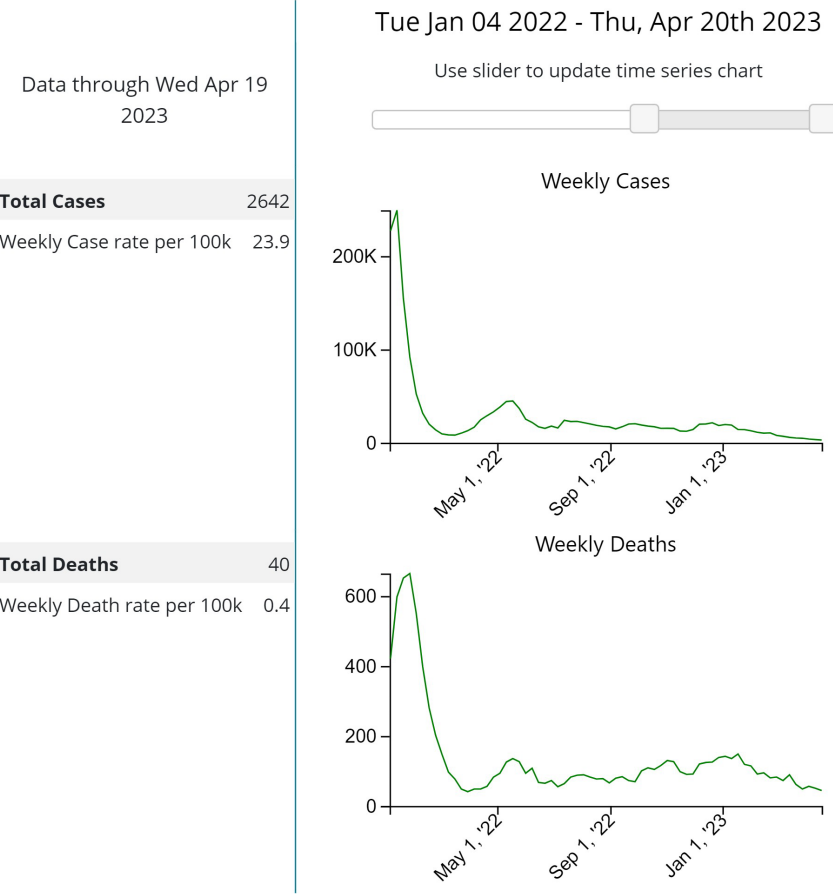
In 2020, black males between the ages of 10 and 24 **died by gun homicide 21.6 times** as high as white males of the same age group, a one percentage point **increase from 2019**.

# COVID-19 CASES AND DEATHS IN NEW YORK STATE THRU APRIL 20, 2023

## Testing in New York

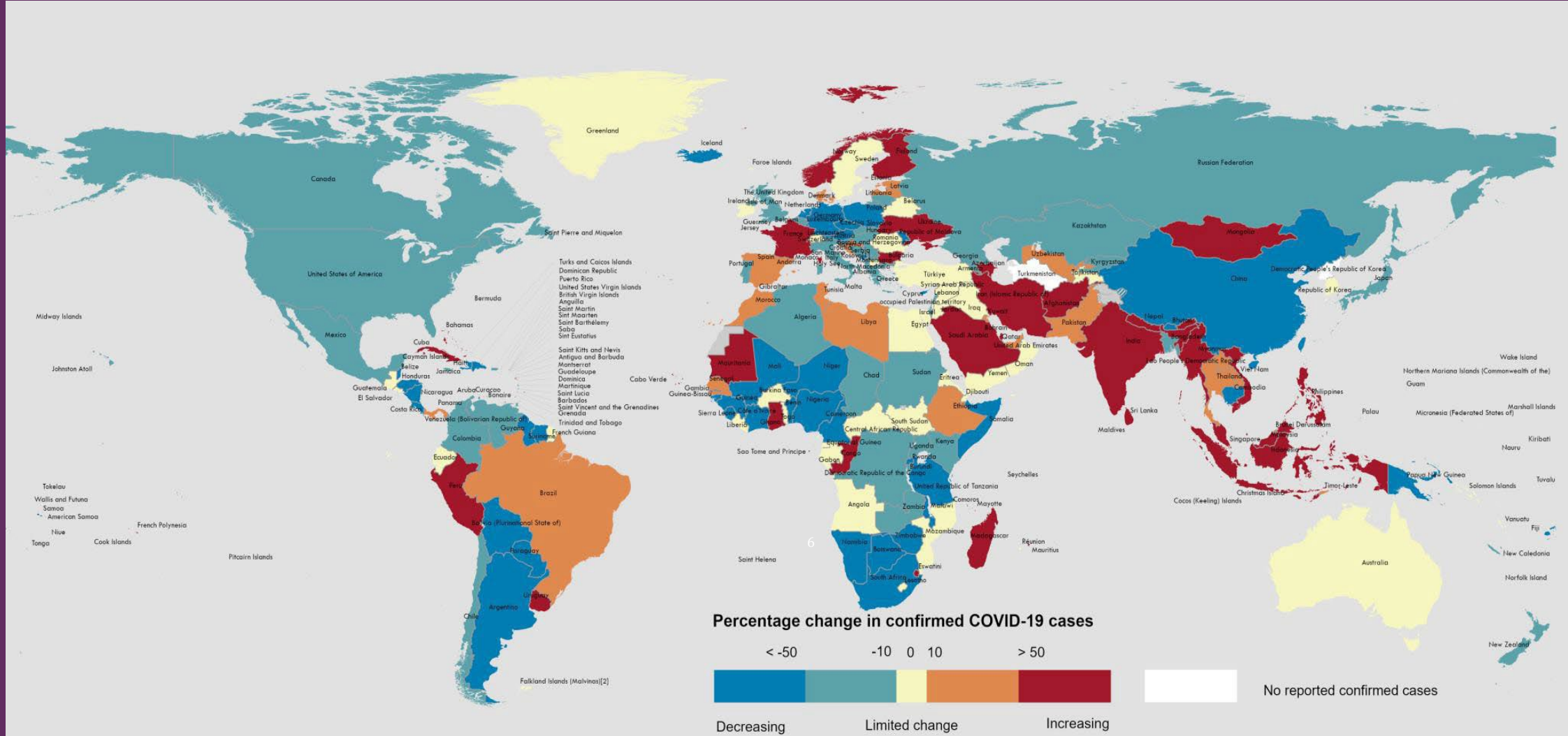


## Cases & Deaths in New York



Source: CDC COVID Data Tracker, County View

# Percentage change in confirmed COVID-19 cases over the last 28 days relative to the previous 28 days, as of April 16, 2023



*Source: Weekly epidemiological update on COVID-19 - 20 April 2023 (who.int)*

Data Source: World Health Organization

Map Production: WHO Health Emergencies Programme

Not applicable

0 2,500 5,000 km

© World Health Organization 2023. All rights reserved.

The designations employed and the presentation of the material in this publication do not imply the expression of any opinion whatsoever on the part of WHO concerning the legal status of any country, territory, city or area or of its authorities, or concerning the delimitation of its frontiers or boundaries. Dotted and dashed lines on maps represent approximate border lines for which there may not yet be full agreement. [1] All references to Kosovo in this document should be understood to be in the context of the United Nations Security Council resolution 1244 (1999). Number of cases of Serbia and Kosovo (UNSCR 1244, 1999) have been aggregated for visualization purposes. [2] A dispute exists between the Governments of Great Britain and Northern Ireland concerning sovereignty over the Falkland Islands (Malvinas). Data for Bonaire, Sint Eustatius and Saba have been disaggregated and displayed at the subnational level.

# New Omicron subvariant XBB.1.16

- Also being referred to as Arcturus variant
- First detected in India, now in 23 countries including US
  - *Accounts for about 9.6% of cases in the US*
- Has potential for high rates of transmission/cases but no current evidence of increase in disease severity resulting in hospitalizations and deaths
- Children presenting with conjunctivitis (red, itchy eyes), high fever and cough
- Older children and adults: presenting with fever, body pain, headache, sore throat, runny nose, fatigue, cough, congestion

# **Updates to Interim Clinical Considerations for Use of COVID-19 Vaccines**

Evelyn Twentyman, MD MPH

National Center for Immunization and Respiratory

Diseases Centers for Disease Control and Prevention

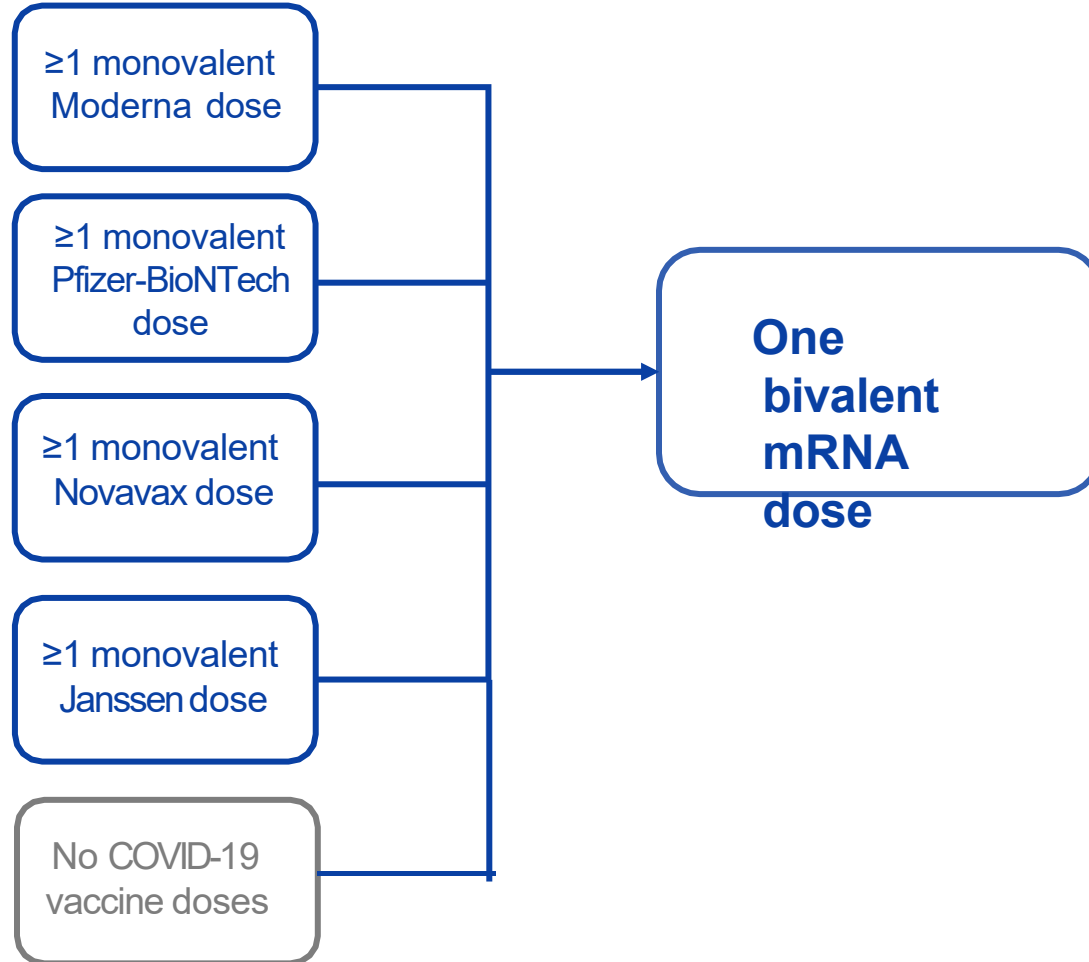
Photographs and images included in this presentation are licensed solely for CDC/NCIRD online and presentation use. No rights are implied or extended for use in printing or any use by other CDC CIOs or any external audiences.



# Implications of the new recommendations

- **Simple and singular for most**
- **Flexible for people at higher risk**
- **Customized recommendations for young children**

**New recommendations for people aged  $\geq 6$  years without immunocompromise who have not yet received a bivalent mRNA dose, regardless of COVID-19 vaccination history**

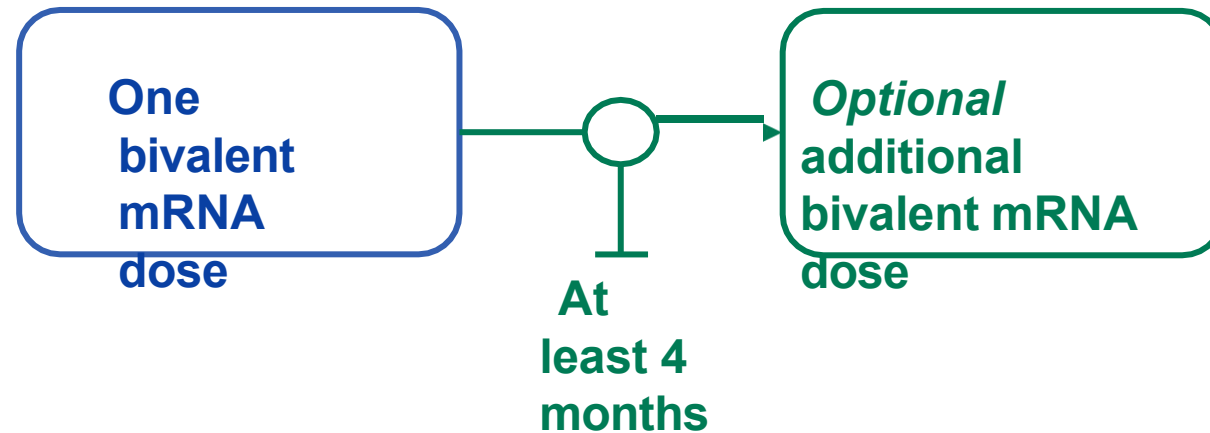


# New recommendations for aged $\geq 6$ years without immunocompromise who have already received a bivalent mRNA dose



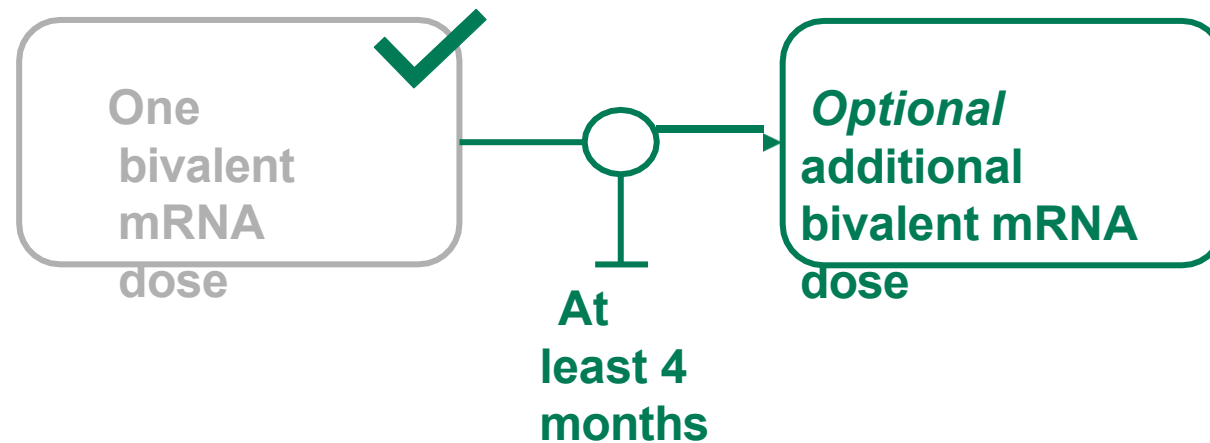
Vaccination is complete.  
No doses are indicated at this time.

# Flexible for people at higher risk of severe COVID-19: People aged $\geq 65$ years who have not yet received a bivalent mRNA dose

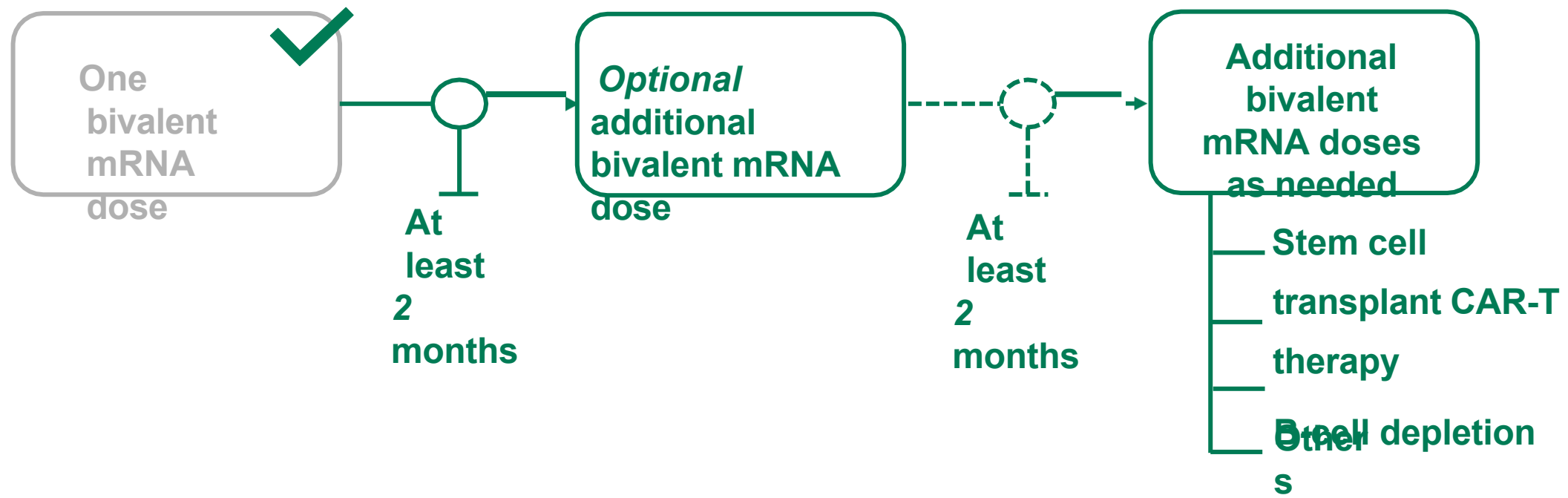




# Flexible for people at higher risk of severe COVID-19: People aged $\geq 65$ years who have already received a bivalent mRNA dose



# New flexibility for people at higher risk of severe COVID-19: People aged $\geq 6$ years *with immunocompromise\** who have already received a bivalent mRNA dose



\*Including those with imminent immunocompromise (e.g., prior to organ transplant; other causes.)

# Transitioning from the **monovalent** to the **bivalent** era for children without immunocompromise aged 6 months – 4 years

Doses previously recommended: Doses now recommended:

## Moderna:

- **2 monovalent** primary series doses +
- **1 bivalent** booster dose

## Pfizer:

- **2** or **3 monovalent** primary series doses +
- **1 bivalent** primary series dose

**Customized** by COVID-19 vaccination history such that all children receive:

- At least 2 vaccine doses in total  
*including*
- At least **1 bivalent** dose

# Transitioning from the **monovalent** to the **bivalent** era for children without immunocompromise aged 5 years

Doses previously recommended: Doses now recommended:

**Moderna:**

- **2 monovalent** primary series doses +
- **1 bivalent** booster dose

**Pfizer:**

- **2** or **3 monovalent** primary series doses +
- **1 bivalent** primary series dose

**Customized** so that **Moderna** recipients receive:

- At least 2 vaccine doses in total  
*including*

- At least **1 bivalent** dose

And **Pfizer** recipients receive:

- At least **1 bivalent** dose



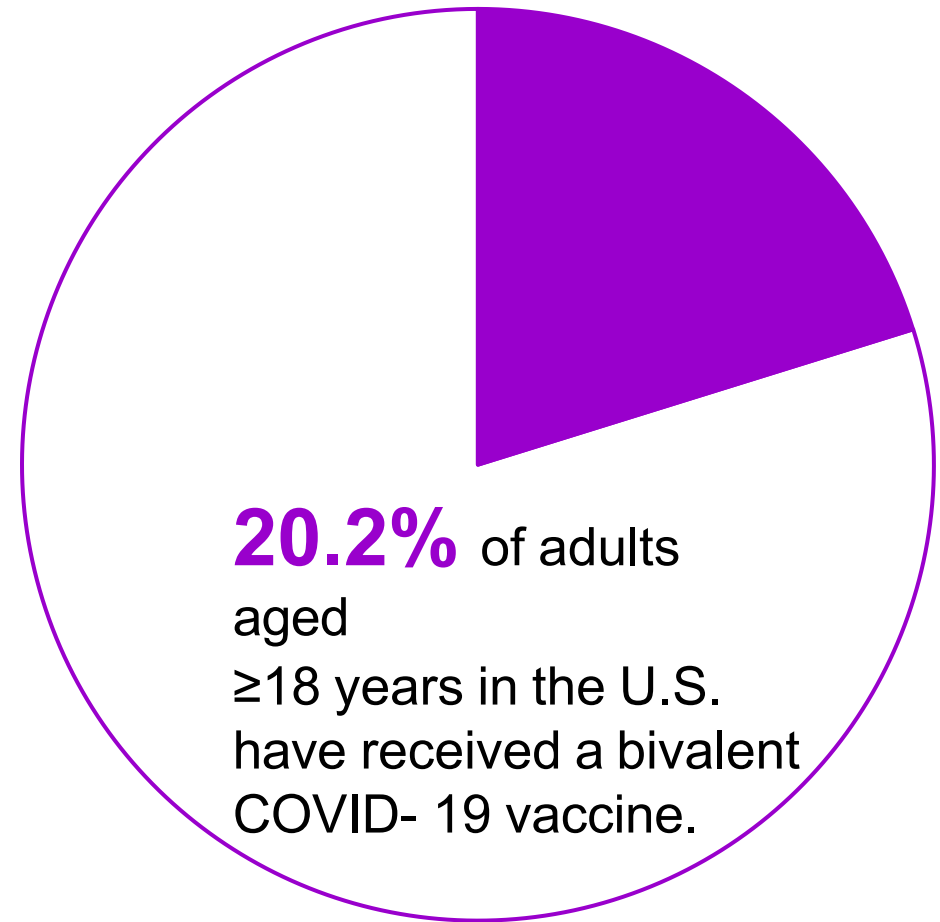
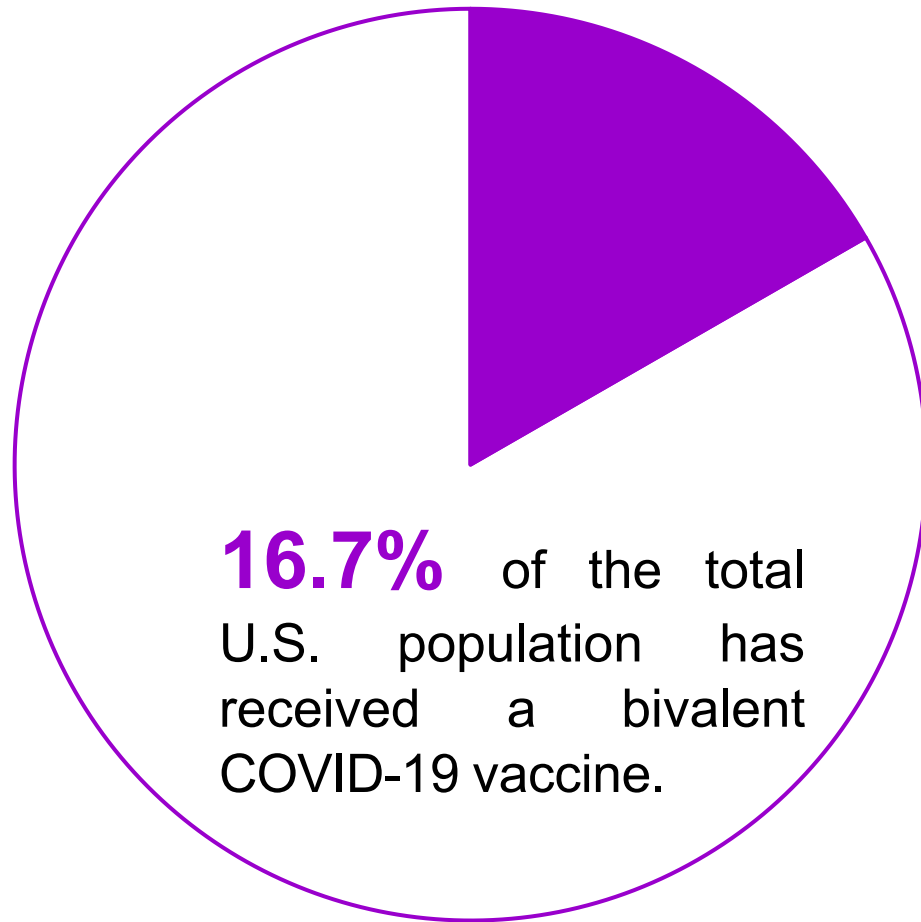
# Stay Up to Date with COVID-19 Vaccines

- Adults and children aged 6 years and older are up to date with COVID-19 vaccines if they got a bivalent (updated) COVID-19 vaccine.
- Children 6 months through 5 years of age who received the Pfizer-BioNTech COVID-19 vaccine are up to date if:
  - They are 6 months to 4 years of age and got at least 3 COVID-19 vaccine doses, including at least one bivalent (updated) COVID-19 vaccine dose.
  - They are 5 years of age and got at least 1 bivalent (updated) COVID-19 vaccine dose.
- Children 6 months through 5 years of age who got the Moderna COVID-19 vaccine are up to date if they got at least two Moderna COVID-19 vaccine doses, including at least one bivalent (updated) COVID-19 vaccine dose.
- You may be eligible for additional COVID-19 vaccine doses if:
  - You are 65 years of age and older and got your first bivalent (updated) COVID-19 vaccine booster 4 or more months ago.
  - You are moderately or severely immunocompromised and received a bivalent (updated) COVID-19 vaccine booster 2 or more months ago.
- If you are unable or choose not to get a recommended bivalent mRNA vaccine, you will be up to date if you got the Novavax COVID-19 vaccine doses approved for your age group.

**Implications for public health**

A decorative horizontal bar at the bottom of the slide, composed of several colored rectangular segments: dark blue, light blue, green, red, grey, and dark blue.

# Bivalent COVID-19 vaccine coverage is low.



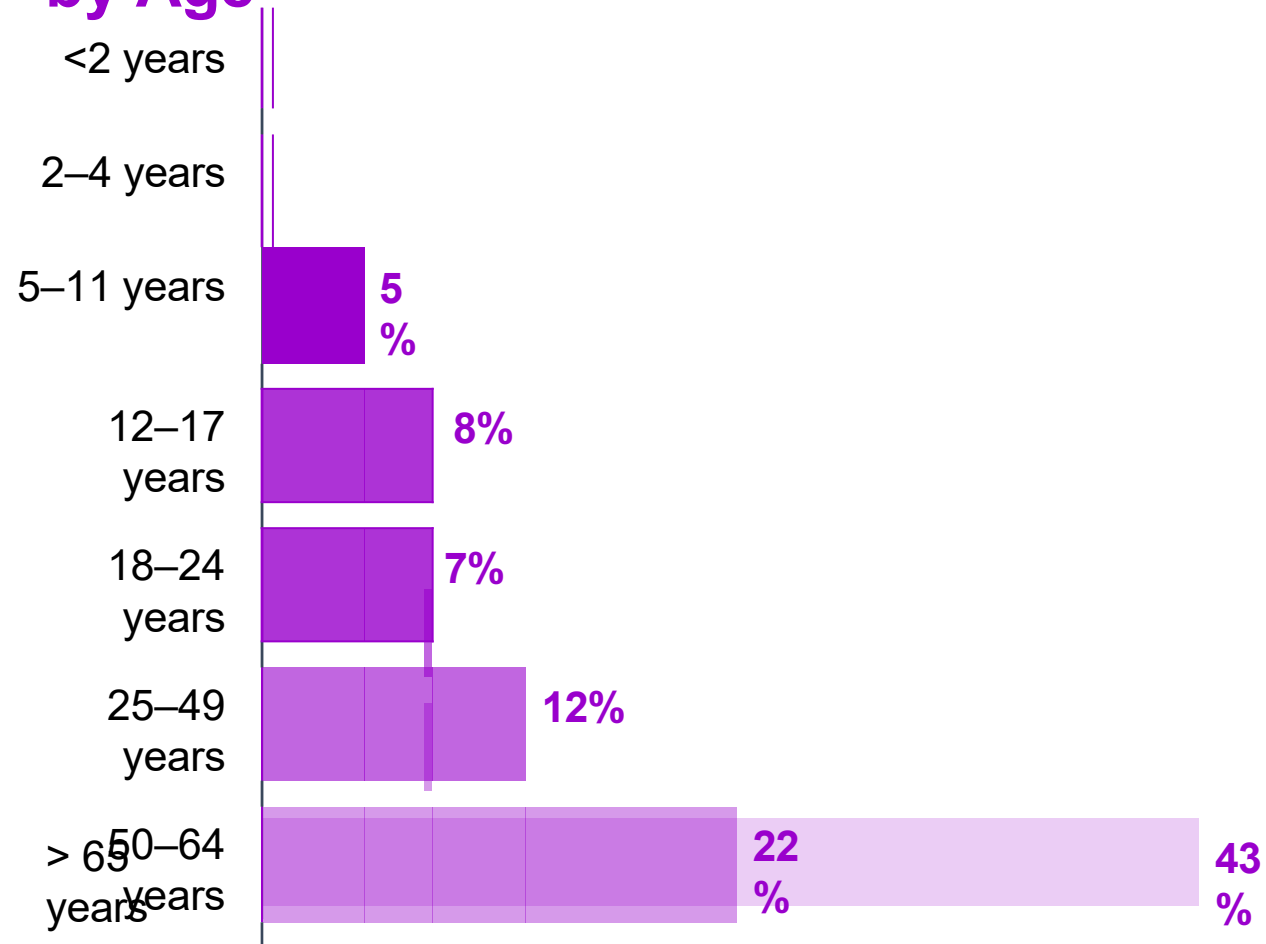
# Vaccinations in New York

<b>People Vaccinated</b>	At Least One Dose	Completed Primary Series	Updated (Bivalent) Booster Dose
Total	18,414,992	15,753,574	3,379,741
% of Total Population	94.7%	81%	17.4%
Population ≥ 5 Years of Age	18,285,557	15,677,943	3,375,608
% of Population ≥ 5 Years of Age	95%	85.5%	18.4%
Population ≥ 12 Years of Age	17,539,509	15,034,284	3,304,155
% of Population ≥ 12 Years of Age	95%	89.6%	19.7%
Population ≥ 18 Years of Age	16,367,338	14,007,212	3,201,295
% of Population ≥ 18 Years of Age	95%	90.8%	20.8%
Population ≥ 65 Years of Age	3,628,107	3,193,977	1,372,735
% of Population ≥ 65 Years of Age	95%	95%	41.6%



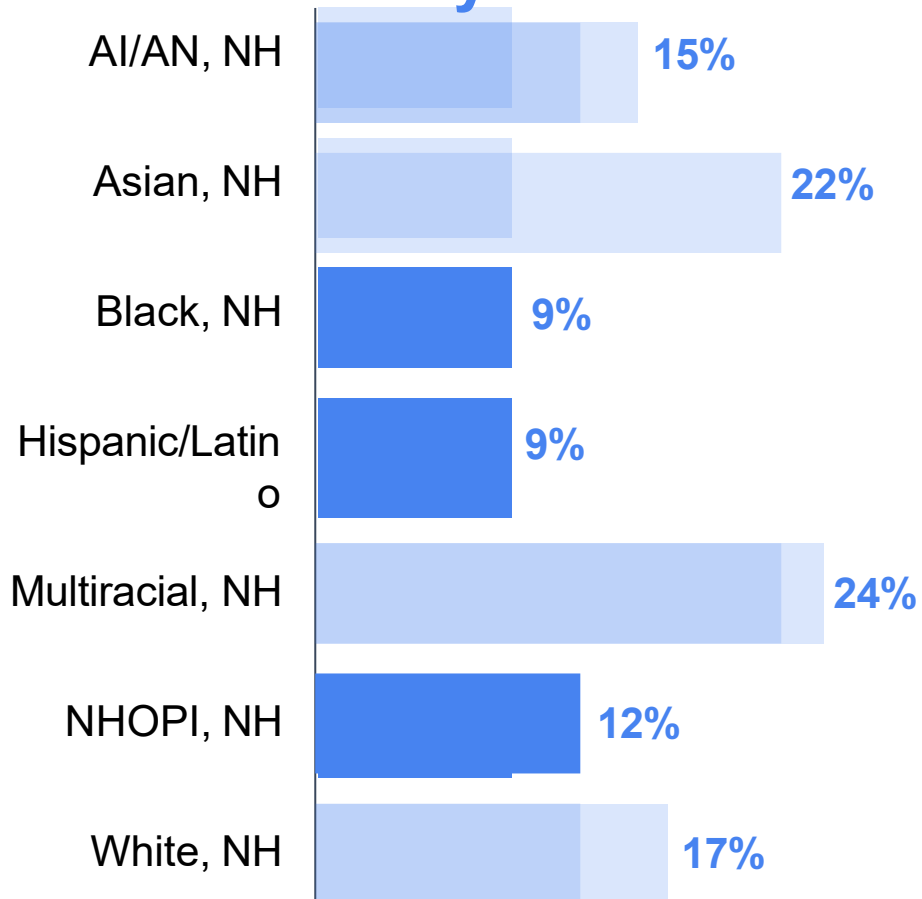
# Bivalent COVID-19 vaccine coverage generally decreases with decreasing age.

## Bivalent COVID-19 Vaccination Coverage by Age



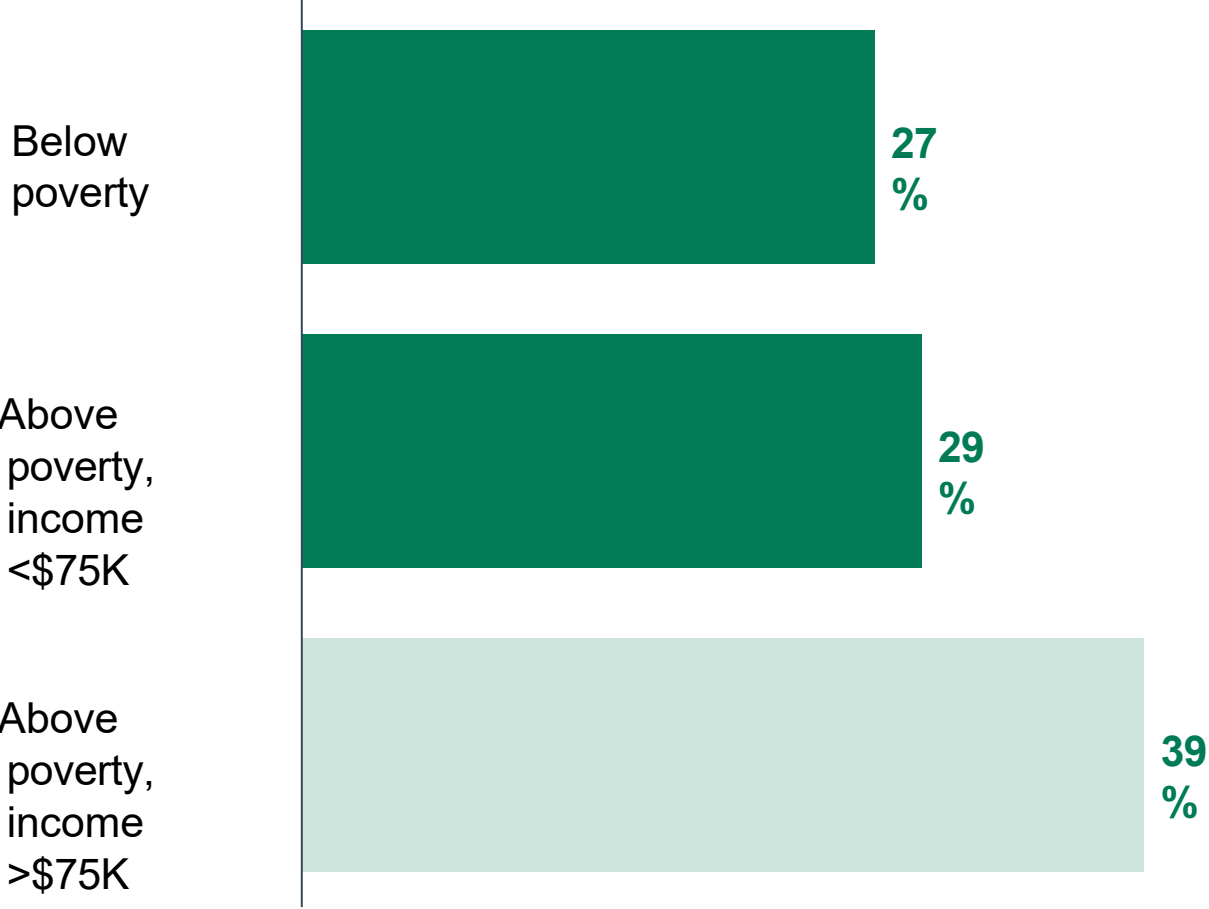
# Bivalent COVID-19 vaccine coverage is lower among Black, non-Hispanic, Hispanic/Latino, and Native Hawaiian or Other Pacific Islander.

## Bivalent COVID-19 Vaccination Coverage by Race/Ethnicity



# Bivalent COVID-19 vaccine coverage is lower among those with lower income.

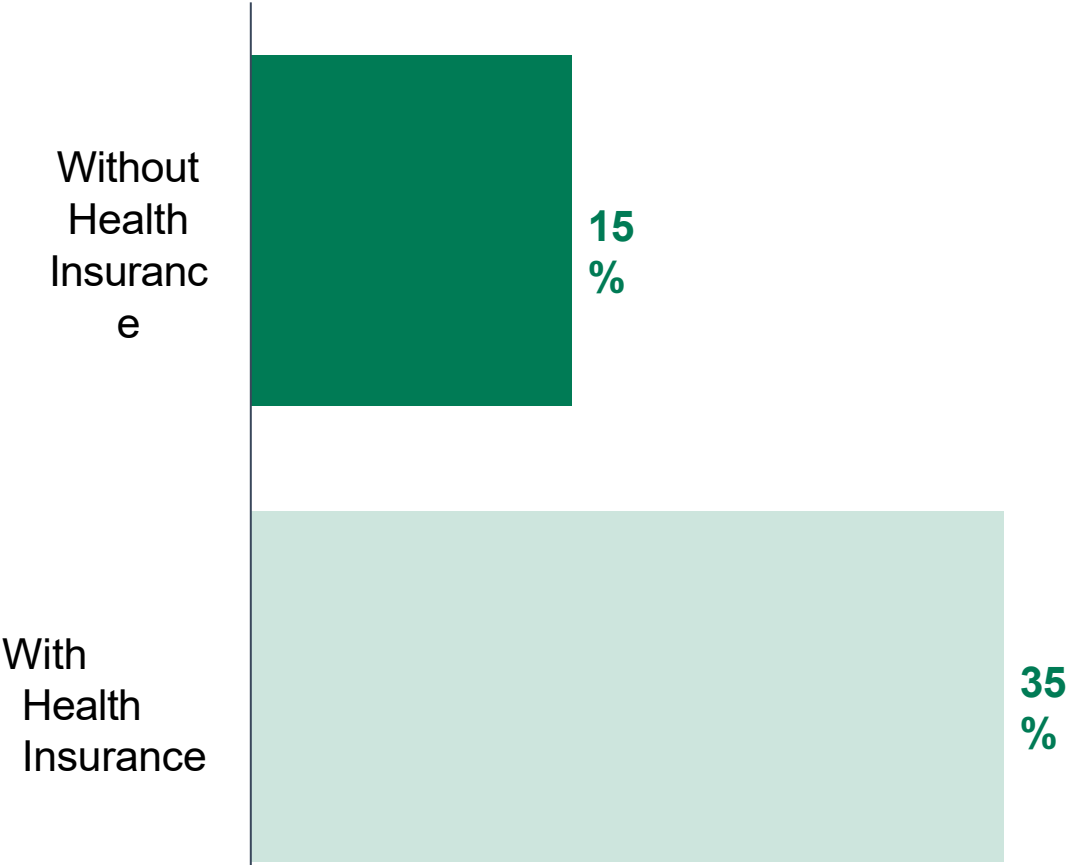
## Bivalent COVID-19 vaccine coverage by income among adults aged $\geq 18$ years



COVID-19 Data Tracker, last updated April 14, 2023, <https://covid.cdc.gov/covid-data-tracker/#vaccination-demographics-trends>

# Bivalent COVID-19 vaccine coverage is lower among those without health insurance.

Bivalent COVID-19 vaccine coverage among adults aged  $\geq 18$  years by insurance status



COVID-19 Data Tracker, last updated April 14, 2023, <https://covid.cdc.gov/covid-data-tracker/#vaccination-demographics-trends>



# Reflections and Next Steps

- COVID-19 vaccines continue to be the **most effective tool** we have to prevent serious illness, hospitalization and death from COVID-19
  - Uptake of the updated (bivalent) COVID-19 vaccines is not yet equitable, and remains generally low
- **Simple recommendations** are easier to communicate, which may improve vaccine uptake
- CDC is continuing to work toward **additional materials** for vaccine providers, clinicians and the general public to make it easy for everyone to get up to date and **stay up to date** with COVID-19 vaccines

# DISCLAIMER

The contents of the Grace Baptist Church Web site, such as text, graphics, images, etc. are for informational/educational purposes only. The Content is not intended to be a substitute for professional medical advice, diagnosis, or treatment. Always seek the advice of your physician or other qualified health providers with any questions you may have regarding a medical condition. Never disregard professional medical advice or delay in seeking it because of something you have read on the Grace Baptist Church Web site!

If you think you may have a medical emergency, call your doctor or 911 immediately.

Grace Baptist Church does not recommend or endorse any specific tests, physicians, products, procedures, opinions or other information that may be mentioned on the Site. Reliance on any information provided by Grace Baptist Church, Grace Baptist Church employees, others appearing on the site at the invitation of Grace Baptist Church **is solely at your own risk.**

**Please do not post on social media**