# Texas **CEAL**



#### PRINCIPAL INVESTIGATORS

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#### **FOCUS COMMUNITIES**

Consortium activities occur in highpriority and high-need counties in Texas, which includes subpopulations of Hispanics/ Latinxs, African Americans, Vietnamese Americans, and rural communities



#### **PARTNERSHIPS**

Advisory group: Community Advisory Boards (CABs) for some focus areas

Resource sharing w/ community: 17%<sup>1</sup>

Partner Type	Number
Community-based organization	29
Academic	11
Health care	8
Government	4
Individual community member	4
Other/unknown	4
Total	60



## **Summary of Activities**

#### **COMMUNICATION & EDUCATION**

#### **Education**

In addition to individual-level COVID-19 prevention and information interventions, symposiums, and town halls, education was disseminated through media campaigns, newsletters, and community health workers (CHWs)

#### **Community Outreach**

Nearly 250 live/virtual events from the beginning of Texas CEAL with a reach of over 100,000 people.

#### Media

Media interviews

#### Virtual/social media

Digital outreach campaigns; high schoolers trained to write social media posts; website

#### Language

Spanish, Vietnamese



#### **VACCINATIONS**

- 2,100 vaccinations provided
- CHWs call people in partners' databases to schedule vaccine appointments, follow up on appointments, and provide referrals to wraparound services
- Vaccination events in priority communities organized by partners
- COVID-19 Vaccine 101 Communication Training for meaningful conversations to decrease vaccine hesitancy in diverse populations



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#### **COMMUNITY EDUCATORS**

- Community Outreach Team includes 50
  CHWs housed at primary community partner
- Additional CHWs housed at other partners also do training and outreach
- CHWs trained to collect surveys

#### **CLINICAL TRIALS RECRUITMENT**

>800 CHWs took Clinical Trial Community
 Navigation training with continuing education
 unit credits

#### **RESEARCH & EVALUATION**

COMMON SURVEY (CS)	CS1	CS2
Sites submitting data	3	1
Data collection waves	1 wave (2 sites), 4 waves (1 site)	1
Sampling strategy	Nonprobability	Nonprobability
Sample size	1,900	308

## **Community assessment**

- ~45 focus groups with community members, individuals recovering from COVID-19, and CAB members
- ~80 interviews
- Deliberative methods with community opinion leaders

#### Intervention research

 Small-scale randomized controlled trial of educational intervention

#### **Evaluation**

- Pre/postevaluation of Clinical Trials Community
  Navigation training
- RE-AIM evaluation

### Population health outcomes

■ State-level COVID-19 vaccination data

# SOCIAL DETERMINANTS OF HEALTH (SDOH)

- Assess structural and systems-level factors contributing to COVID-19-related behaviors
- Referrals to wrap-around services by CHWs for people who schedule vaccine appointments or take surveys

#### DISSEMINATION

#### **Peer-reviewed**

- 11 total peer-reviewed publications<sup>2</sup>
- 4 peer-reviewed publications with nonacademic co-author

## Community

■ Community forums with partners

#### **AUGUST 2023**

# Texas **CEAL**

<sup>1</sup> From Year 2 application budget narrative, actual allocation may be different. Defined as the percent of the project budget allocated to nonacademic organizations (excluding state government), community-based positions, community members, incentives for engagement (not data collection), or community-based resources such as office space, equipment, etc.

<sup>2</sup>Badr H, Oluyomi A, Adel Fahmideh M, et al. Psychosocial and health behavioural impacts of COVID-19 pandemic on adults in the USA: protocol for a longitudinal cohort study. BMJ Open. 2020;10(12):e044642. doi:10.1136/bmjopen-2020-044642

Badr H, Oluyomi A, Woodard L, et al. Sociodemographic and health belief model factors associated with nonadherence to COVID-19 mitigation strategies in the United States. Ann Behav Med. 2021;55(7):677-685. doi:10.1093/abm/kaab038

Bikaki A, Machiorlatti M, Clark LC, Robledo CA, Kakadiaris IA. Factors contributing to SARS-CoV-2 vaccine hesitancy of Hispanic population in Rio Grande Valley. Vaccines (Basel). 2022;10(8):1282. doi:10.3390/vaccines10081282

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Kaholokula JK, AuYoung M, Chau M, et al. Unified in our diversity to address health disparities among Asian Americans, Native Hawaiians, and Pacific Islanders. *Health Equity*. 2022;6(1):540-545. doi:10.1089/heq.2022.0034

Luningham JM, Akpan IN, Taskin T, et al. Demographic and psychosocial correlates of COVID-19 vaccination status among a statewide sample in Texas. Vaccines (Basel). 2023;11(4):848. doi:10.3390/vaccines11040848

Nguyen C, Gilbert L, Diep J, Nguyen BM. Identifying facilitators and barriers to increasing COVID-19 vaccination and trial participation in vaccinated Vietnamese Americans. Health Equity. 2022;6(1):485-493. doi:10.1089/heq.2022.0032

Raza SA, Zhang X, Oluyomi A, et al. Predictors of COVID-19 perceived susceptibility: insights from population-based self- reported survey during lockdown in the United States. J Infect Public Health. 2022;15(5):508-514. doi:10.1016/j.jiph.2022.03.012

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Thompson EL, Beech BM, Ferrer RL, et al. Implementation of the Texas community-engaged statewide consortium for the prevention of COVID-19. Int J Environ Res Public Health. 2022;19(21):14046. doi:10.3390/ijerph192114046

 $Zhang \ X, Oluyomi \ A, Woodard \ L, et al. \ Individual-level \ determinants \ of \ lifestyle \ behavioral \ changes \ during \ COVID-19 \ lockdown in the \ United \ States: \ results \ of \ an \ online \ survey. \ Int \ J \ Environ \ Res \ Public \ Health. \ 2021;18(8):4364. \ doi:10.3390/ijerph18084364$