

News & Updates

from the Texas Research-to-Policy Collaboration Project



July 2021

Resource Reminders

COVID-19 Rapid Response Requests

We are now over a year into the pandemic, and the Texas Research-to-Policy Collaboration (TX RPC) Project continues to develop accessible and accurate resources from experts in the field. If you would like to request information on a public health topic, please complete the following form.

[ACCESS FORM HERE](#)

The Texas RPC Project resources are available on our website. We hope these resources are valuable to your respective offices.

- [TX RPC Health Policy Resources](#) (resources available to policymakers to provide facts and evidence on health-related topics)
- [Michael & Susan Dell Center for Healthy Living Webinars](#) (includes COVID-19 specific webinars)
- [TX RPC Newsletters Archive](#)
- [Texas Legislative Bill Tracker](#)
- [Texas Child Health Status Reports and Toolkits](#)

General COVID-19 Resources

The TX RPC Project is committed to promoting optimal health for all Texans. For further information and updates on the coronavirus disease (COVID-19) pandemic, the [Texas Department of State Health Services](#), [Centers for Disease Control and Prevention](#), and [World Health Organization](#) provide masking and social distancing guidelines, as well as recommended best practices to limit transmission of the coronavirus.

Resources from TX RPC Members and Organizations

[Navigating Kid-Related Activities by COVID-19 Risk Tolerance Level](#)
Katelyn Jetelina, PhD - UTHealth School of Public Health in Dallas

Dr. Katelyn Jetelina created a resource to guide parents and family activities during the COVID-19 pandemic. Specifically, this resource examines activities for unvaccinated children, such as summer camps, extracurricular activities, sports,

and travel. Unvaccinated children are at lower risk of contracting COVID-19 if traveling on flights where masks are worn, and eating at least three feet away from other occupied tables in airport terminals. However, unvaccinated children are at higher risk of contracting COVID-19 while traveling if they are waiting in highly crowded airport areas like baggage claims or are on flights longer than five hours where meals are being served and masks must be removed to eat.

Key Takeaways:

- Unvaccinated children can stay safe this summer by participating in low risk transmission activities.
- Low risk transmission activities include riding bikes; playing outdoor sports like baseball, golf and frisbee; and playing on the playground at summer camp.
- High risk transmission activities include eating on long flights, high contact activities (even when outdoors), and attending indoor programs where less than 60% of students are masked and/or vaccinated.

Interpreting this guide and navigating risk...

In general, activities in **green** are "low risk" and should be acceptable for people who have a low risk tolerance.

Risk levels in **yellow** ("moderate risk") or **red** ("high risk") may not be appropriate for people with a low risk tolerance or for high-risk populations.

Parents should consider the impact of community-level vaccination rates, as well as current levels of transmission when assessing these relative risks. Risk is reduced across all activities if:

- 1) Community vaccination rate is above 60%;
- 2) Community transmission is low (<10 daily cases per 100,000 people)

Navigating kid-related activities by COVID-19 risk tolerance level

June 11, 2021

Everyone's risk tolerance is different. This tool provides general guidance for families of unvaccinated children.

	Transportation	Airports & Flying <small>Assuming masks are worn by everyone 2+ years, which is federally mandated in airports until Sept 13</small>	Summer Camp	Extracurricular Activities <small>Assuming NO masks</small>	Participating in Sports <small>Assuming NO masks</small>
Risk of Transmission / Risk Tolerance	<p>Low Bike riding, walking, jogging, hiking </p> <p>Low Uber/Lyft/Taxi with masked driver </p> <p>Low Carpooling with another consistent household (windows down, with masks or vaccinated)</p> <p>Med Flying </p> <p>Med Carpooling with multiple households (windows down and/or with masks)</p> <p>Med Uncrowded mass transit (allowing for some physical distance) and inconsistent mask use by others</p> <p>High Crowded mass transit with inconsistent mask use by others </p>	<p>Low Eating at least 3 feet away from other occupied tables in the terminal </p> <p>Low Touching surfaces (omite transmission is rare!)</p> <p>Low Flights where mask use is enforced</p> <p>Med Children (<2 years old) traveling without masks</p> <p>High Waiting in highly crowded areas, like baggage claim and the gate </p> <p>High Long flight (> 5 hours) in which full meals needed (and masks removed)</p>	<p>Low Playground and/or outside playtime and recreation </p> <p>Low Vast majority of staff and counselors vaccinated </p> <p>Med Outdoor activities in crowded spaces (communal pool time, relay races)</p> <p>High Attending indoor program with less than 60% of students masked and/or vaccinated</p> <p>High Indoor activities (crafts, lunchtime, reading circles) without masks</p> <p>High High-contact activities (even outdoors)</p>	<p>Low Farmer's market, pool, beach, playground, or playdate (outdoor with space to move around freely)</p> <p>Med Outdoor sporting events, concerts (stationary with minimal distance between groups)</p> <p>Med Small sleepover, playdate (indoor, private with one other household)</p> <p>High Sleepovers with multiple households, indoor birthday parties</p> <p>High Movie theaters (stationary, indoors)</p> <p>High Indoor, high activity areas (trampoline parks, dance recital spectator, and celebrations and religious observances)</p>	<p>Low Outdoor, low contact sports (baseball, running, swimming, golf, frisbee)</p> <p>Med Indoor, low contact sports (volleyball, dance recitals, cheerleading/gymnastics) </p> <p>Med Outdoor, close contact sports (football, soccer, water polo, lacrosse, field hockey)</p> <p>High Indoor, close contact sports (wrestling, basketball, judo, MMA, karate) </p> <p>High Pre- or post-game locker room huddles</p>

We put our scientist and mom brains together to create these data-driven, evidence-based risk tolerance categories. This guide was created by **Katelyn Jonelina, MPH PhD** (epidemiologist, mom, and founder of Your Local Epidemiologist), **Jess Steier, DrPH** (public health scientist, mom, and co-founder of UnGated Post-22), **Andrea Love, PhD** (immunologist and co-founder of UnGated Post-22). With the assistance of **Alison Bernstein, PhD** (neuroscientist, mom, and co-founder of SciMoms), **Rebecca J. Weick, PhD** (epidemiologist, mom, and author of Your Friendly Neighborhood Epidemiologist), **Malia Jones, MPH PhD** (epidemiologist, mom, and co-founder of Bear Pandemic), **Eve Blongogarden, MD** (oncologist, mom, and co-founder of IAmPACT), **Liz Marris, PhD** (immunologist, mom, and founder of ScienceWhut!), **Marla Clayman, MPH PhD** (communication scientist)

VIEW THE REPORT

Highlights from TX RPC Members Conducting COVID-19 Research

COVID: What do California, Texas, New York and Florida have in common? Stunningly low infection rates

Catherine Troisi, PhD, MS - UTHealth School of Public Health in Houston

The approach to combating COVID-19 has varied between the four big states of Texas, California, New York, and Florida. New York and California had solid public health stances toward fighting COVID-19, while Texas and Florida's approaches have been more focused toward reopening the state. However, all four states have

one thing in common...decreasing COVID-19 case rates. Dr. Troisi said, “certainly it shows that vaccinating people helps cut down on transmission, and that’s great, but we haven’t fully vaccinated everybody, we haven’t gotten to herd immunity. It’s probably not the whole answer.” After some states like Texas lifted their mask mandates, experts expected to see cases increase. According to Dr. Troisi, the increase probably did not happen because communities continue to wear masks out in public and transmission of infection may be lower since more people are spending time outside, according to geolocation data.

Key Takeaways:

- Declining case rates among the population may be due to multiple factors such as vaccination rates, increasing resistance to infection within the community, voluntary use of masks, time spent outside, and how the disease variants are circulating within the community.
- At this point in time, current adult and adolescent vaccination rates are not enough to stop virus transmission and children 12 years of age and younger still cannot receive the COVID-19 vaccine.

**READ THE
ARTICLE**

KHOU - Traveling Safely with Unvaccinated Children

Catherine Troisi, PhD, MS - UTHealth School of Public Health in Houston

As families prepare to travel this summer, how can they plan on keeping their children safe? Dr. Troisi says there are a few things to consider when planning your trip: the test positivity rate and the vaccination rates at the destination of choice. She says it is also important to consider including activities that are mostly outside and not crowded, including beaches. Furthermore, driving is still the safest option when traveling, but planes pose minimal risk for infection because air within the plane is being refreshed every three minutes and most planes have upgraded to hospital grade air filters. If you must fly, sit at the back of the plane, avoid the bathrooms, and open the air vents above your seat. Private rental homes are recommended, but clean hotels and motels can be safe as well; however avoiding lobbies, elevators, and indoor dining areas can help prevent infection. Finally, Dr. Troisi also notes that it is important that anyone who is eligible to be vaccinated receive the COVID-19 vaccine to protect the community.

Key Takeaways:

- As summer approaches, many are preparing to travel for the first time since the pandemic began, and there are factors to consider when planning your trip, including looking at positivity rates and vaccination rates at the destination of choice.
- Continue planning and attending outside events, especially those that are less crowded, since the risk of spread is lower outside.
- Try staying in private rental homes or review sanitation guidelines at hotels. Hotels can be safe for travel, but try not to spend extended time in lobbies, elevators, or at indoor dining areas.

LISTEN TO THE

TX RPC Partner Events

WEBINAR: Unspoken - Debunking Myths and Delivering Strategies to Foster Relationships in Vulnerable Communities: A Texas School Health Advisory Council (SHAC) webinar **Action for Healthy Kids**

Texas School Health Advisory Council (SHAC) is hosting a webinar on Thursday, August 26 from 11-12:30pm CT. Families of all demographics and communities are necessary for SHACs to understand the needs, impact policy, and advocate for change. Unspoken thoughts and practices, at the core of our culture and climate, often determine whether family engagement relationships in our underserved and marginalized communities fail or flourish.

In this webinar, participants will:

- Gain further insight on health disparities and inequities in our schools
- Discuss misconceptions towards family engagement in underserved communities
- Share key strategies on how to build long-term trusting relationships

[REGISTER FOR THE WEBINAR](#)

'Texas CDC' Will Aim to Improve Statewide Response to Pandemics **UTHealth School of Public Health**

A new state agency, "Texas CDC," aims to prepare Texas for the next pandemic as well as help Texas to recover from the current pandemic that has claimed over 50,000 lives and infected over 2.5 million people in Texas. Dr. Boerwinkle, dean of UTHealth School of Public Health in Houston, said UTHealth will help lead the Texas Epidemic Public Health Institute (TEPHI) because UTHealth - which has several regional campuses across the state - has the statewide potential to respond to public health emergencies. Dr. Boerwinkle also discussed the need for the new agency due to the growing population in Texas and the necessity to protect residents and the Texas economy, saying "we've basically talked about good public health and good business as being on the opposite side of the fence; they're not mutually exclusive...the role of TEPHI really is to help save lives in Texas and keep businesses strong, keep schools open, and just help Texas be prepared better for the next pandemic."

[VIEW THE RECORDING](#)

Recent Publications by TX RPC Researchers

Kurland, J., **Piquero, A. R.**, Piquero, N. L., & Talpins, S. K. (2021). A COVID-19 Public Health Silver Lining? Reductions in Driving Under the Influence Events and Crashes In Miami-Dade County. *CrimRxiv*. <https://doi.org/10.21428/cb6ab371.128b29bc>

Weerakoon, S. M., **Jetelina, K. K.**, **Knell, G.**, & **Messiah, S. E.** (2021). COVID-19 related employment change is associated with increased alcohol consumption during the pandemic. *The American Journal of Drug and Alcohol Abuse*, 1–7. Advance online publication. <https://doi.org/10.1080/00952990.2021.1912063>

Non-COVID-19

Aguillard, K., **Gemeinhardt, G.**, McCurdy, S., **Schick, V.**, & Hughes, R. (2021). "Helping Somebody Else Has Helped Me Too": Resilience in Rural Women With Disabilities With Experiences of Interpersonal Violence. *Journal of Interpersonal Violence*, 8862605211016356. Advance online publication. <https://doi.org/10.1177/08862605211016356>

D'Agostino, E. M., Patel, H. H., Hansen, E., Mathew, M. S., & **Messiah, S. E.** (2021). Longitudinal Effects of Transportation Vulnerability on the Association Between Racial/Ethnic Segregation and Youth Cardiovascular Health. *Journal of Racial and Ethnic Health Disparities*, 8(3), 618–629. <https://doi.org/10.1007/s40615-020-00821-8>

Edwards, S. T., Marino, M., Solberg, L. I., Damschroder, L., Stange, K. C., Kottke, T. E., **Balasubramanian, B. A.**, Springer, R., Perry, C. K., & Cohen, D. J. (2021). Cultural And Structural Features Of Zero-Burnout Primary Care Practices. *Health Affairs (Project Hope)*, 40(6), 928–936. <https://doi.org/10.1377/hlthaff.2020.02391>

Landry, S. H., Zucker, T. A., Montroy, J. J., Hsu, H. Y., Assel, M. A., Varghese, C., Crawford, A., & Feil, E. G. (2021). Replication of combined school readiness interventions for teachers and parents of head start pre-kindergarteners using remote delivery. *Early Childhood Research Quarterly*, 56, 149-166. <https://doi.org/10.1016/j.ecresq.2021.03.007>

Loria, H., **McLeigh, J.**, Craker, K., & Bird, S. (2021). Trauma-Informed, Integrated Primary Care: A Medical Home Model for Children with Prenatal Drug Exposure Who Enter Foster Care. *Children and Youth Services Review*, 127, <https://doi.org/10.1016/j.childyouth.2021.106089>

Pérez, A., Kuk, A. E., Bluestein, M. A., **Harrell, M. B.**, Perry, C. L., & Chen, B. (2021). Prospective estimation of the age of initiation of hookah use among youth: Findings from the Population Assessment of Tobacco and Health (PATH) study waves 1-4 (2013-2017). *Addictive Behaviors*, 117. <https://doi.org/10.1016/j.addbeh.2021.106838>

Rieger, E., Lee, Y. F., Monaghan, C., Zwickert, K., & **Murray, K.** (2021). Measuring social processes regarding eating, physical activity, and weight in higher-weight people: the weight-related interactions scale (WRIS). *Eating and Weight Disorders-Studies on Anorexia, Bulimia and Obesity*, 1-13. Advance online publication. <https://doi.org/10.1007/s40519-021-01208-2>

Saha, S., Okafor, H., **Biediger-Friedman, L.**, & Behnke, A. (2021). Association between diet and symptoms of anxiety and depression in college students: A systematic review. *Journal of American College Health*, 1-11. Advance online publication. <https://doi.org/10.1080/07448481.2021.1926267>

Sypher, I., **Gershoff, E. T.**, & Hyde, L. W. (2021). Intimate Partner Violence and Parenting: Examining the Roles of Parenting Stress, Timing, and Maternal Abuse History. *Journal of Family Violence*, 1-13. <https://doi.org/10.1007/s10896-021-00265-6>

Welsh, S., Salazar-Collier, C., Blakeslee, B., Kellar, L., Maxwell, R. A., **Whigham, L. D.**, Lee, M., & Lindheim, S. R. (2021). Comparison of obstetrician-gynecologists and family physicians regarding weight-related attitudes, communication, and bias. *Obesity Research & Clinical Practice*, S1871-403X(21)00067-3. Advance online publication. <https://doi.org/10.1016/j.orcp.2021.04.010>

Wijayatunga, N. N., & **Dhurandhar, E. J.** (2021). Normal weight obesity and unaddressed cardiometabolic health risk-a narrative review. *International Journal of Obesity*, 10.1038/s41366-021-00858-7. Advance online publication. <https://doi.org/10.1038/s41366-021-00858-7>

General:

Clendennen, S. L., Mantey, D. S., **Wilkinson, A. V.**, Perry, C. L., **Harrell, M. B.**, & Loukas, A. (2021). Digital marketing of smokeless tobacco: A longitudinal analysis of exposure and initiation among young adults. *Addictive Behaviors*, 117. <https://doi.org/10.1016/j.addbeh.2021.106850>

Mantey, D. S., **Harrell, M. B.**, Chen, B., **Kelder, S. H.**, Perry, C. L., & Loukas, A. (2021). A Longitudinal Examination of Behavioral Transitions among Young Adult Menthol and Non-Menthol Cigarette Smokers Using a Three-State Markov Model. *Nicotine & tobacco research. Journal of the Society for Research on Nicotine and Tobacco*, 23(6), 1047–1054. <https://doi.org/10.1093/ntr/ntaa240>

Central Texas:

Harrell, M. B., Chen, B., Clendennen, S. L., Sumbe, A., Case, K. R., **Wilkinson, A. V.**, Loukas, A., & Perry, C. L. (2021). Longitudinal trajectories of E-cigarette use among adolescents: A 5-year, multiple cohort study of vaping with and without marijuana. *Preventive Medicine*, 150, 106670. Advance online publication. <https://doi.org/10.1016/j.ypmed.2021.106670>

Kellstedt, D. K., **Spengler, J. O.**, & **Maddock, J. E.** (2021). Comparing Perceived and Objective Measures of Bikeability on a University Campus: A Case Study. *SAGE Open*, 11(2), <https://doi.org/10.1177/21582440211018685>

Young, C., Wang, H., Martinez, D., Chen, W. J., **Page, R.**, Robbins-Furman, P., **Montalvo-Liendo, N.**, Williamson, B., & Chen, L. S. (2021). Rural, Low-Income, Pregnant Latina Women's Perspectives on Carrier Screening. *Obstetrics & Gynecology*, 1-2. 10-1097. <https://doi.org/doi:10.1097/AOG.00000000000004412>

South Texas:

Polletta, V. L., LeBrón, A., Sifuentes, M. R., Mitchell-Bennett, L. A., Ayala, C., & **Reininger, B. M.** (2021). Facilitators and Barriers of a Chronic Care Management Intervention Addressing Diabetes Among Mexican-Origin Adults. *Health Education & Behavior : the Official Publication of the Society for Public Health Education*, 10901981211014431. Advance online publication. <https://doi.org/10.1177/10901981211014431>

Tortolero, G. A., Brown, M. R., **Sharma, S. V.**, de Oliveira Otto, M. C., Yamal, J. M., Aguilar, D., Gunther, M. D., Mofleh, D. I., Harris, R. D., John, J. C., de Vries, P. S., Ramphul, R., Serbo, D. M., Kiger, J., Banerjee, D., Bonvino, N., Merchant, A., Clifford, W., Mikhail, J., Xu, H., Murphy, R. E., Wei, Q., Vahidy, F. S., Morrison, A. C., & Boerwinkle, E. (2021). Leveraging a health information exchange for analyses of COVID-19 outcomes including an example application using smoking history and mortality. *PLoS One*, 16(6), e0247235. <https://doi.org/10.1371/journal.pone.0247235>

KUDOS

SAMHSA Report Lists CATCH My Breath as only school-level vaping prevention program

CATCH My Breath

CATCH My Breath has been recognized by Community Anti-Drug Coalitions of America (CADCA) and by the Substance Abuse and Mental Health Services Administration (SAMHSA). Schools often turn to CADCA and SAMHSA for guidance on program selection and CATCH My Breath was recognized as the go-to vaping prevention program for school-aged youth. The CATCH My Breath program was developed by experts at the Michael and Susan Dell Center for Healthy Living at the UTHealth School of Public Health, and was designed for students grades 5-12. The program is also available to schools within the United States at no cost. Since 2017, the program has reached more than 4,000 schools and over 1.4 million students. For more information about the program, visit

READ MORE ABOUT CADCA

READ MORE ABOUT SAMHSA

Your Local Epidemiologist Receives U.S. Health and Human Services Honor

Katelyn Jetelina, PhD - UTHealth School of Public Health in Dallas

Dr. Katelyn Jetelina received an honor from the Assistant Secretary for Preparedness and Response at the U.S. Department of Health and Human Services (HHS) for her blog, *Your Local Epidemiologist*. The information communicated in *Your Local Epidemiologist* has supported briefings to stakeholders at the highest level of government and this award reflects the national-level expertise at UTHealth and the UT System.

SUBSCRIBE TO "YOUR LOCAL EPIDEMIOLOGIST" BLOG

About the TX RPC Project

The Texas Research-to-Policy Collaboration (Texas RPC) Project is a non-partisan network that aims to bridge research and policy by supporting partnerships between child health researchers and policymakers.

[Learn more online.](#)

The Texas Research-to-Policy Collaboration Project team and overall network are available to support Texas policymakers with informational requests or resources related to health topics, during the interim and throughout the 2021 Legislative Session.

Contact Us

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