ACHA COVID-19 Update: February 24, 2021

These updates have been provided by ACHA’s COVID-19 Task Force. Please forward this message to others on campus who may benefit. Non-members can subscribe to receive these and other messages here. We will continue to update the COVID-19 webpage with important alerts and resources.

ACHA Updates

Last Chance to Register! Addressing COVID-19 Mitigation at Rural, Small, and Medium Sized Institutions: Solutions from the Field

Friday, February 26 at 3:00 pm ET

CME and CHES/MCHES credit is available for this webinar! Join our presenters as they discuss the unique challenges to implementing campus mitigation efforts at rural, small, and medium sized colleges and universities. Each presenter will discuss the obstacles the pandemic has posed on their campuses and the innovative ways they overcame these challenges.

Register here.

New Webinar! Let’s Talk Campus Vaccines: Routine, COVID-19, and Everything in Between

Friday, March 5 at 3:00 pm-4:00 pm ET

The American College Health Foundation, with support from GlaxoSmithKline, is pleased to present a webinar discussing the state of vaccines on college and university campuses. This event will include expert perspectives on the anticipated rollout of the COVID-19 vaccines on college campuses, how the pandemic has affected routine vaccination and opportunities for catch up, and lessons learned from past infectious disease outbreaks that are applicable to the current moment.

Register here.

CDC Updates

CDC Chief Lays Out Attack Plan for COVID Variants

This Medscape article provides highlights from Dr. Howard Bauchner’s interview of CDC Director Dr. Rochelle Walensky on his JAMA Q&A series. Dr. Walensky references the article she co-authored with Dr. Henry Walke and Dr. Tony Fauci in which they share that HHS has established the SARS-CoV-2 Interagency Group (SIG) to improve coordination among the various federal agencies (CDC, NIH, FDA, BARDA, UDS, and DoD). Dr. Walensky is focusing on reinforcing public health mitigation strategies, strongly urging against nonessential travel, investing in surveillance systems to understand variant strains, and ramping up genome sequencing, and advocating for more rapid vaccination. She also discussed the J&J vaccine, noting that despite its lower (72%) efficacy than the Moderna and Pfizer vaccines, it requires only one dose, has less stringent storage requirements, and protects against hospitalization and death.
Data, Numbers, and Epidemiology

The Coronavirus Is Here to Stay—Here's What That Means

This article in Scientific American covers scientists’ expectations that SARS-CoV-2 will likely become endemic—meaning that it will continue to circulate. In a survey of 100 immunologists and researchers working on SARS-COV-2, almost 90% agreed. According to Michael Osterholm, “Eradicating this virus right now from the world is a lot like trying to plan the construction of a stepping-stone pathway to the Moon. It’s unrealistic.” The article also discusses herd immunity through vaccination and the factors that cause scientists to believe SARS-CoV-2 will continue circulating.

Creating a Blueprint for the Future: Lessons Learned from Public Health Laboratories in the COVID-19 Response

As described in this article from the Journal of Public Health Management and Practice, researchers looked at the role of the public health lab during the pandemic and examined the response to date. The researchers also evaluated lessons learned from four main categories—testing surges, supplies, staffing, and regulations and policy—and provide recommendations not only to improve the current pandemic response but also to strengthen planning for future outbreaks.

How Herd Immunity Works—And What Stands in Its Way

This NPR article shows simulations of a mock disease named SIMVID-19. The simulations include different scenarios—a more infectious variant, high initial immunity, and low levels of initial immunity— with different levels of vaccination (5%, 30%, and 75%) within the population. The 75% vaccination level was able to “kick the imaginary disease” in all but the more infectious variant scenario. Bottom line: the faster the population is vaccinated, the better.

FDA Issues Policies to Guide Medical Product Developers Addressing Virus Variants

The FDA updated its guidances addressing vaccines, diagnostics (COVID-19 tests) and therapeutics (monoclonal antibody products and other drugs and biological products) considering the emergence and potential future emergence of variant strains. The updated vaccine guidance will allow pharmaceutical companies to expedite the creation of booster shots and new shots to address variant strains. According to Acting FDA Commissioner, Janet Woodcock, "By issuing these guidances, we want the American public to know that we are using every tool in our toolbox to fight this pandemic, including pivoting as the virus adapts."

Prevention and Treatment

Scientists Call on CDC to Set Air Standards for Workplaces

This New York Times article reports on a letter from Dr. Linsey Marr, an expert on aerosols, and signed by 12 other scientists to Jeffrey Zients (coordinator of the White House COVID-19 response), Dr. Rochelle Walensky (CDC Director) and Dr. Tony Fauci. The letter urges CDC to recommend the use of high-quality masks such as N95s to protect workers at high risk of infection, mandate a combination of masks and environmental measures such as better ventilation, and provide detailed evidence in support of airborne transmission to the virus. "It has become even more urgent for the administration to take action now, the experts said, because of the slow vaccine rollout, the threat of more contagious variants of the virus already circulating in the United States, and the high rate of infections and deaths, despite a recent drop in cases. It’s time to stop pussyfooting around the fact that the virus is transmitted mostly through the air."

See also these FAQs focusing on aerosol transmission of SARS-CoV-2, written by Dr. Marr.
Coronavirus Regulations: A State-by-State Week in Review

Law360 provides this breakdown of some of the COVID-19-related state measures from the past week.

Vaccines

Should Second Doses Be Delayed?

The Prevent Epidemics COVID-19 Science Review for January 30-February 17 provides background data from vaccine clinical trials and discusses the emergence of the variant strains, the inadequate vaccine supply, and the unknowns including the efficacy of single doses of Moderna and Pfizer. The question of whether to maximize the number of people with a single dose to confer some level of immunity before variant strains create another wave of infection resistant to current vaccines is gaining renewed consideration.

Fauci: Data 'Favorable' That Vaccines Limit Transmission

This Medscape article features Dr. Tony Fauci discussing studies from Spain and Israel showing the viral load in patients who got infected with SARS-CoV-2 after vaccination was significantly lower compared with people who were infected but not vaccinated, leading him to say, "Some studies are pointing in a very favorable direction." The lower the viral load, the lower the transmissibility. He notes that more studies are needed to prove these findings.

First Month of COVID-19 Vaccine Safety Monitoring

This CDC MMWR reviewed data from the Vaccine Adverse Event Reporting System (VAERS) and v-safe, the online self-reporting surveillance system, during the first month of vaccination in the U.S. During that time, 13,794,904 vaccine doses were administered and VAERS received 6,994 reports of associated adverse events. Almost 91% (6,354) were deemed nonserious and 9.2% (640) serious, including 113 deaths (1.6%). Of those 113 deaths, two-thirds occurred among long term care facility residents. Sixty-two reports of anaphylaxis have been confirmed, 46 (74.2%) after Pfizer-BioNTech and 16 (25.8%) after Moderna. Implications for public health: providers and recipients should be reassured about the safety of the two vaccines. Most frequently reported symptoms to VAERS were headache, fatigue, and dizziness. Most frequently reported symptoms to v-safe were injection site pain, fatigue, headache, myalgia, and chills. For the Pfizer vaccine, reactions were more frequent after the second dose than the first. Counseling recipients to expect transient local and systemic reactions may ease concerns and encourage completion of the two-dose series.

Vaccines: Catch Up Quick

This Axios-sponsored vaccine syllabus is a series of five short videos providing an overview of vaccines including testing, distribution, misinformation, and the next generation vaccines. The videos last a total of 23 minutes and are appropriate for the lay public.

How mRNA Vaccines Work

This 90-second video on Harvard’s YouTube Channel describes in non-clinical terms how mRNA vaccines work.

Assessment of the Inclusion of Racial/Ethnic Minority, Female, and Older Individuals in Vaccine Clinical Trials

This JAMA Network Open article evaluated 230 U.S.-based clinical interventional vaccine trials over the past decade, with almost 220,000 participants. Every trial (100%) reported age and sex, 134 (58.3%) reported race, and 79 (34.3%) reported ethnicity. Overall, female adults were overrepresented in all trials regardless of phase, seniors (older than 65) were underrepresented across all trial phases, Black or African American, American
Indian, Alaska Native, Hispanic, or Latino adults were also underrepresented. The MMWR states that "one of the most important findings was that despite FDA recommendations, many studies were not complying with reporting guidance regarding demographic characteristics of the study population." Other implications of broader inclusion in trials are associated with vaccination rates in underserved/minority groups. Early community engagement and culturally appropriate education may help address vaccine hesitancy and counter misinformation.

**Beyond Politics — Promoting Covid-19 Vaccination in the United States**

This NEJM article discusses strategies for promoting vaccine uptake and “the tremendous undertaking facing vaccine communication teams, who must persuade many of these [vaccine-hesitant] people to be vaccinated if we’re to achieve the vaccination rate—as high as 80%— needed to return to normalcy.”

**College Campuses**

**How Five Universities Managed COVID on Campus in Fall 2020**

This Science News article looks at how five campuses used testing, safety measures, and student leadership and engagement to combat the spread of SARS-CoV-2 and respond to outbreaks during the fall 2020 semester. As the article points out, “universities that opened their campuses in August and September faced an uncharted, months-long experiment in infection control. They had no manual, no surefire way to keep students and staff from getting sick.”

**Two Studies Look at SARS-CoV-2 Transmission and Immunity Among Students and Staff on University Campuses**

This report from Canada’s COVID-19 Immunity Task Force describes studies being conducted at the University of Waterloo and Queen’s University. The University of Waterloo study is recruiting 1,000 students, faculty, and staff to quantify the number of people with SARS-CoV-2 on local campuses, document symptoms (if any), and test for antibody and memory T cell responses to determine what demographic groups “are more prone to catching SARS-CoV-2 and which are more likely to have symptoms.” “We hope to better understand the risk of contracting the virus on a campus and inform measures to prevent it.” The study at Queens University in Kingston, Ontario, will recruit 500 students from the Faculty of Health Sciences without symptoms of COVID-19. These students are at greater risk of exposure to SAR-CoV-2 due to their exposure to each other, the general public, and ambulatory and in-patient populations at the Kingston Health Sciences Centre. Two objectives: identify asymptomatic carriers and evaluate antibody levels over an 8-month period to see whether levels can be linked to immunity. Follow up questionnaires will also be collected to determine students’ degree of anxiety and their coping mechanisms.

**Completing the Mission III: Assessing the Impact of the COVID Pandemic on Student Veterans and Campus Support Services**

This report is a result of a partnership between Operation College Promise (OCP) and the Texas A&M University System to better understand how COVID-19 has affected student veterans and campus support over the past year. The report is the result of two surveys released September 15 and which remained active for four weeks through November 13, with 230 student veterans and 75 colleges and universities represented. Key findings include:

- Respondents identified more significant needs for support as they navigate pandemic impacts on employment, finances, mental health, and access to education benefits.
- The movement to wholly online or hybrid created an environment that some found difficult to navigate. Most state their "education experience" has diminished as a result.
• Nearly 40% noted a decrease in communication with institutional staff. This was noted as "troubling" as these relationships are "critical in linking students to ancillary services that can enhance academic progress."

**Cases Rise, Restrictions Begin**

This Inside Higher Ed article reports that while many large public universities are seeing lower case counts than the previous semester, some schools are setting records for weekly cases or already exceeding their fall term cases. Many of these schools have implemented new restrictions on student gatherings, in-person activities including classes, and outdoor exercise. The rise in cases is tied to student behavior related to distancing and mask use. Though many are testing more, many IHEs have brought more students back to campus and are holding more in-person classes. Increased testing may be related to the rise, as students have a false sense of security with a negative test. The UK variant has reached at least nine campuses. In a message to the campus from Virginia Polytechnic Institute and State University President Tim Sands, "we are seeing evidence among our student population that the prevalence of moderate symptoms is increasing" and students should assume the UK variant is already spreading in their community."

**Mental Health**

**Impact of COVID-19 on Students Served at College Counseling Centers**

Penn State’s Center for Collegiate Mental Health (CCMH) published a five-part blog series using longitudinal clinical data from students seeking mental health services at college counseling centers nationally. In Part 4 of the series, CCMH examined how COVID-19 impacted student help-seeking and the services provided by college counseling centers, specifically whether the number of unique students served, number of appointments attended, and amount of treatment received changed after the onset of COVID-19. Key takeaways from Fall 2020 compared to Fall 2019:

- There was a 32% average decrease in the number of unique students served compared to the previous fall.
- There was a 19% average decrease in the number of appointments attended.
- Students seeking mental health services received an average 20% more services (appointments).

The declines in utilization were explained by the reductions in residential students on campus, student preference for in-person services, variable access to technology, limited availability of private spaces, and licensing laws which may limit provider ability to treat students living in different states. The increase in treatment for the average student was called the "unique silver lining."
