

Research & Community Collaboration in the Time of COVID: The Bogalusa Experience

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University School of Public Health &
Tropical Medicine

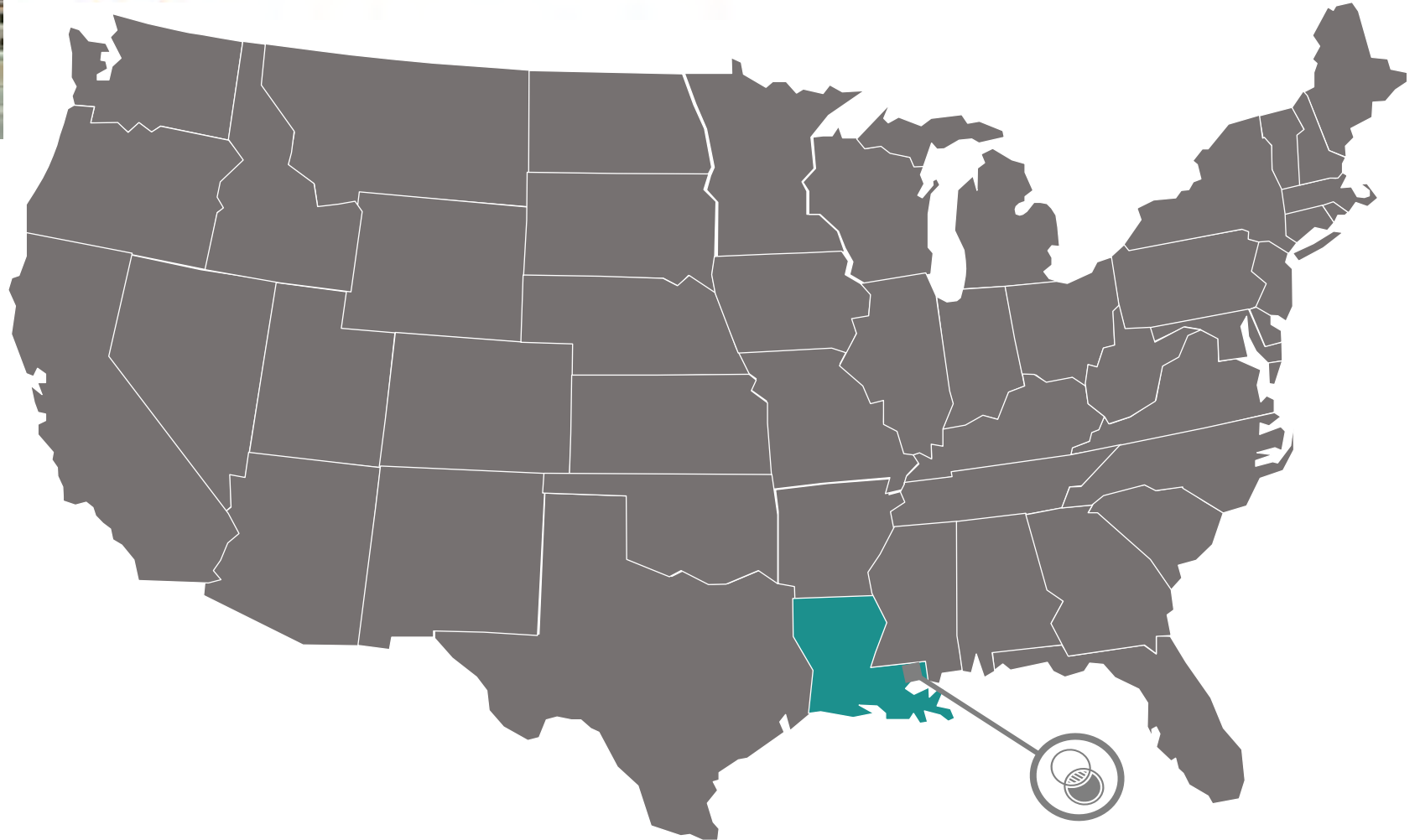
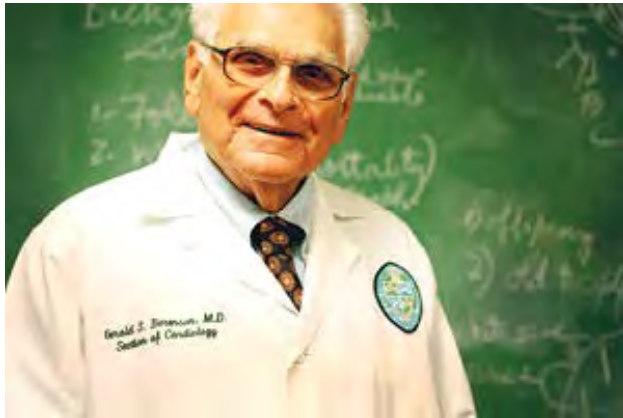
Angela Lambert, Director of
Communications, Our Lady of the
Angels Hospital

No disclosures



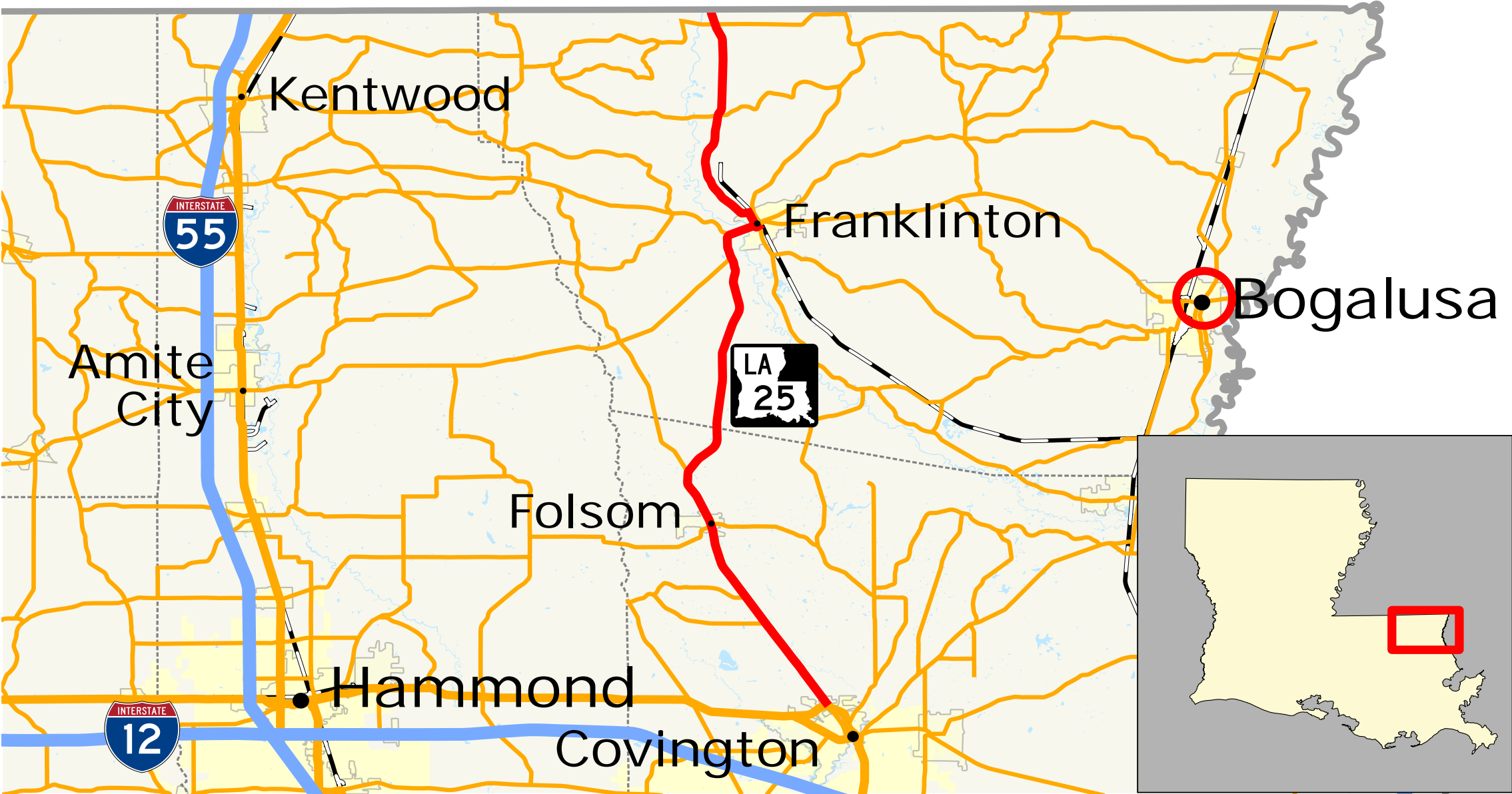


OUR LADY
OF THE ANGELS



BOGALUSA, LOUISIANA

BOGALUSA, LOUISIANA

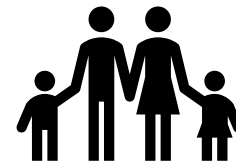


BOGALUSA



- Population 12,761
- Average life expectancy 73 years
- Major employer International Paper
- 47.4% African American
- 49.9% in civilian labor force
- 9.7% Bachelor's Degree or higher
- 18.6% living with a disability <65 years

Source: US Census Data v2017



Demographics



CORONAVIRUS

Stay-at-home orders

- First case in LA March 9th
- Began March 16th
- Ended May 15th

BOGALUSA STRONG



Collaborative partnership of community members, leaders, businesses and organizations working together to improve quality of life

- Vision: Creating a healthier community together where all people thrive
- Mission: Empowering people to create healthy environments and lead healthy lives
- Purpose: To improve the quality of life in our local community by removing barriers to good health and by promoting physical, emotional and environmental health where we live, learn, work, pray and play.

COMMUNITY ORGANIZATION UPDATES



Working Together for a Healthier Community



A green graphic for the 2018 Community Stars award. It features a large white star with a blue swoosh. The text reads: '2018 COMMUNITY STARS', 'CELEBRATING RURAL HEALTH LEADERS', 'BOGALUSA MAYOR'S WELLNESS COUNCIL', 'Bogalusa, LA', 'READ FULL STORY' (in a blue box), and '#powerofrural | powerofrural.org'.

A collage of logos and photos. Logos include: 'National Rural Health Day' (with a yellow ribbon icon), 'WELL-AHEAD' (with a blue arrow icon), 'CITY OF BOGALUSA STATE OF LOUISIANA' (seal), 'LSU AgCenter' (purple and yellow logo), and 'OUR LADY OF THE ANGELS HOSPITAL' (blue cross logo). Photos show people participating in community activities: two people in orange shirts playing a game, a group of people sitting on a bench, and a group of people sitting on the ground.

National Rural Health Day 2018 Community Stars Award



Working Together to Respond to COVID

Nutrition Facts

Serving Size 1/2 Cup
Servings Per Container 4

Amount Per Hour:

Calories 250 Calories from Fat 110

Dr. Charles T. Johnson

Total Fat 5 grams

Saturated Fat 3 grams

Training Feet 0 grams

Cholesterol	20 grams
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Sodium 480 milligrams

Total Carbohydrate 29 grams

Dextrose Flc	3 grams
--------------	---------

28. *conspicua*

Protein	3 grams
---------	---------

100

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Serving size tells you the recommended size for one serving.

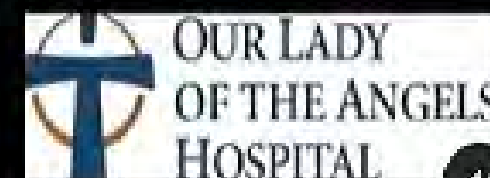


BOGALUSA STRONG

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SHOP WITH A DOC



Working Together to Stay Healthy during COVID

@BOGALUSASTRONG
@FOCUSFRANKLINTON



We want to feature you! Make a 30 second clip introducing yourself and your organization/business and send to us. We will put together the clips into a virtual open house to showcase our community.

In the clip we ask that you pass a white coffee cup from right to left. Join us as we host a virtual coffee talk.



Drive thru community health fair

Friday, November 20
11am-1pm
Bogalusa First Church
15020 Hwy 21, Bogalusa

- Drive thru flu shots
- Free health screening
- Health education
- Door prizes



MASK UP LOUISIANA



When you wear a mask, YOU PROTECT OTHERS.
When others wear a mask, THEY PROTECT YOU.



The Bogalusa Heart Study

- Founded by Dr. Gerald Berenson, a Bogalusa native and pediatric cardiologist
- Began in 1973 with examination in Bogalusa City Schools
- In 2013, celebrated 40 years



**Bogalusa
Heart
Study**



Leis Mitchell Guillermo Hernandez
John L. Harris, MD
Morgan W. Talley

P

peace good

will and

good health

S

MacAlister

SCOR

Doris

Mary S. Sibley

Heb Temple
Barbara
Gwen H. Cochran
David Hawk

Caroline L. Lary

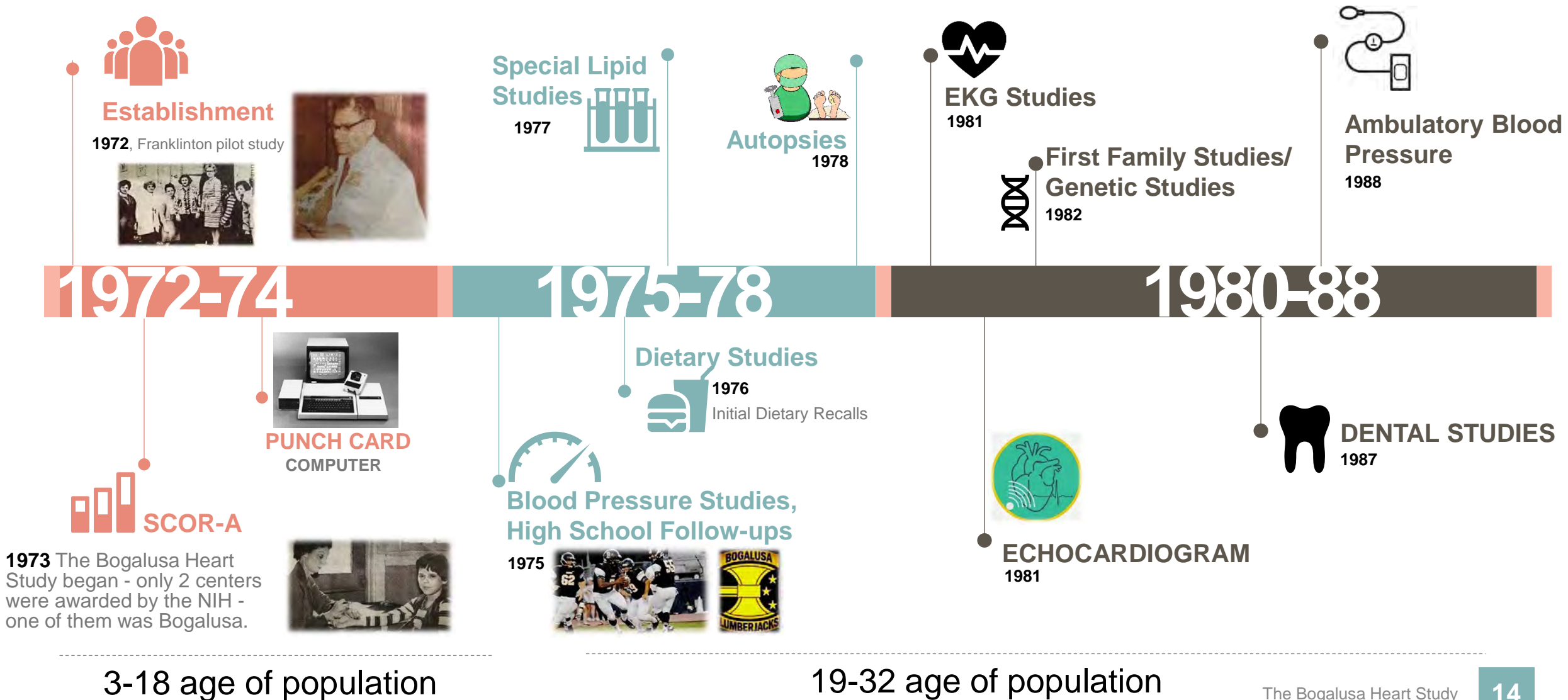
Paul Smith

Carolyn Major
Rosanne P. Lewis

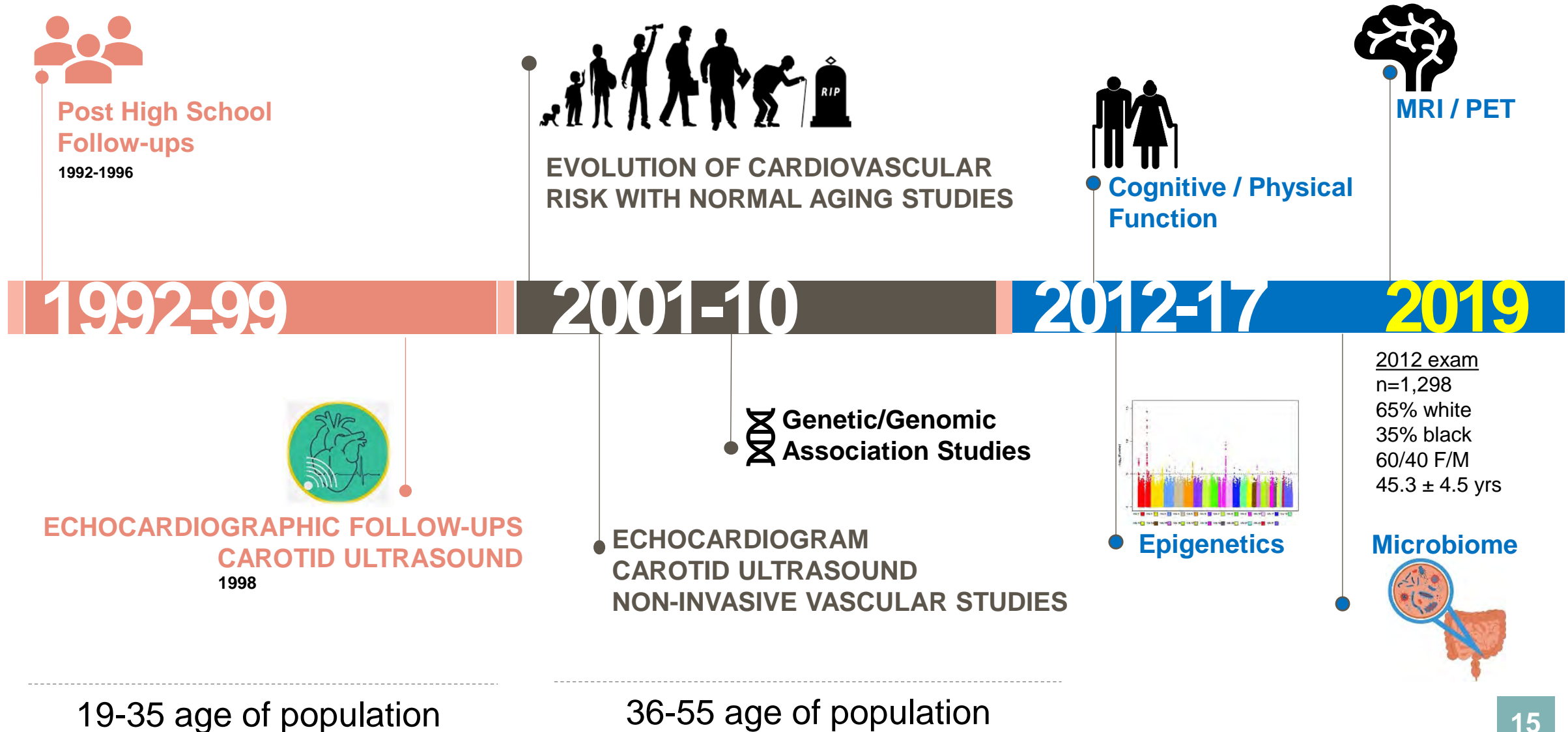


Jan. 7, 1976

The Bogalusa Heart Study | Timeline



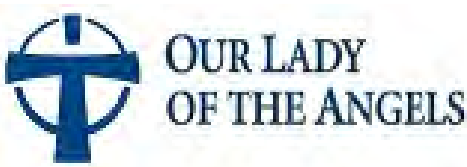
The Bogalusa Heart Study | Timeline





Community-Research Partnerships

Improving Nutrition





Barbershop Screening Program Partners

- Well-Ahead Louisiana
- Our Lady of Angels
- Bogalusa Heart Study
- Healthy Bogalusa Coalition
- American Heart Association
- Omni Health Group
- Insurance providers

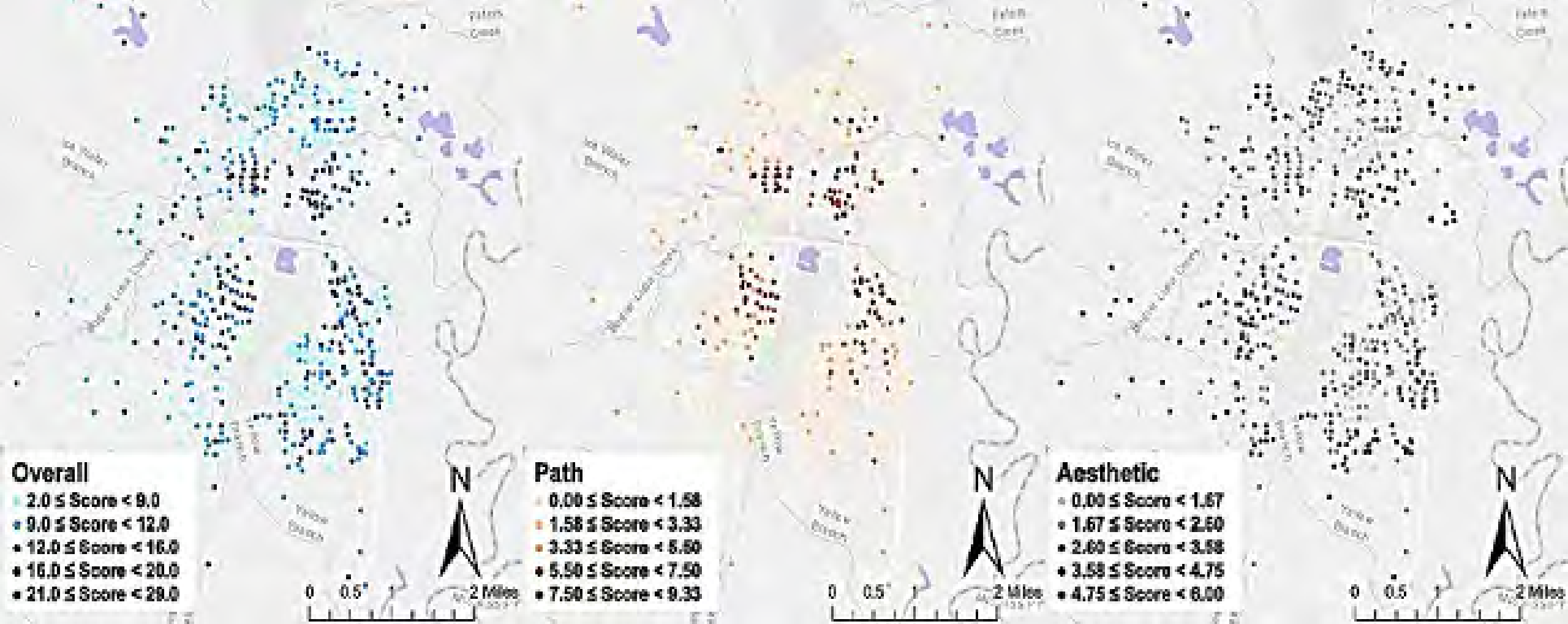


First Martin Luther King Day Health Fair

- Working with local pastors
- LSU Rural Family Medicine Residency
- Our Lady of Angels Hospital
- LSU Agricultural Center
- Tulane Student National Medical Association Chapter
- Humana population health
- Mary Bird Perkins Cancer Center



Physical Activity Signs in Parks



Built Environment & Physical Activity in Rural Areas

Each colored dot indicates mean score on the Rural Active Living Assessment tool for overall (Panel a), path features score (Panel b), and aesthetic features (Panel c) with darker colors indicating a higher score

RESEARCH ARTICLE

Open Access



Cross-sectional associations between the neighborhood built environment and physical activity in a rural setting: the Bogalusa Heart Study

Jessica Gustaf^{1*}, Christopher E. Anderson¹, Queenawan E. Chukwurah¹, Makenzie Warner¹, Stephanie T. Boykin¹ and Ivaila A. Baltag¹

Abstract

Background: Insufficient physical activity (PA) is a common (modifiable) and more prevalent rural population. Few studies have explored relationships between the built environment and PA in rural settings and community policy guidance to promote PA through built environment interventions is primarily based on evidence from urban studies.

Methods: Participants in the Bogalusa Heart Study, a longitudinal study in rural Louisiana with International Physical Activity Questionnaire data from 2012 to 2013 and a valid residential address ($N = 1945$) were included. PA was summarized as the number weekly metabolic equivalent (MET)-minutes of total transportation and leisure time PA. The Rural Active Living Assessment street segment audit tool and Google Street View were used to assess features of the built environment overall and in six categories (path features, pedestrian safety features, aesthetics, physical security, destinations and land use) that influence PA. Scores for street segment built environment overall and in categories were calculated for segments and buffers of 0.25, 0.50, 1.00 and 1.50 miles. Associations between built environment scores and PA were assessed with generalized estimating equations.

Results: Participants reported 104 weekly total leisure time and transportation PA (mean 110, 270 and 48 MET-minutes per week, respectively). A 1-point increase in the overall built environment score was associated with 0.30 additional weekly leisure time MET-minutes within a 1.50 mile buffer ($p < 0.05$), with a similar magnitude observed for a 1.00 mile buffer. A 1-point increase in the aesthetic score was associated with significantly higher leisure time PA for all geographic units (from 22.21 to 38.75 MET-minutes weekly) when adjusted for individual covariates, but was attenuated and only significant for the segment of the residence after accounting for other neighborhood characteristics.

(Continued on next page)



Notice of Special Interest (NOSI): NIA Availability of Administrative Supplements and Revision Supplements on Coronavirus Disease 2019 (COVID-19)

Notice Number: NOT-AG-20-022

Key Dates

Release Date: April 2, 2020

First Available Due Date: April 06, 2020

Expiration Date: May 01, 2021

New funding opportunities to join the fight against COVID-19

April 08, 2020



Kenneth SANTORA,
Director, DEA, NIA,
Division of Extramural Activities (DEA).

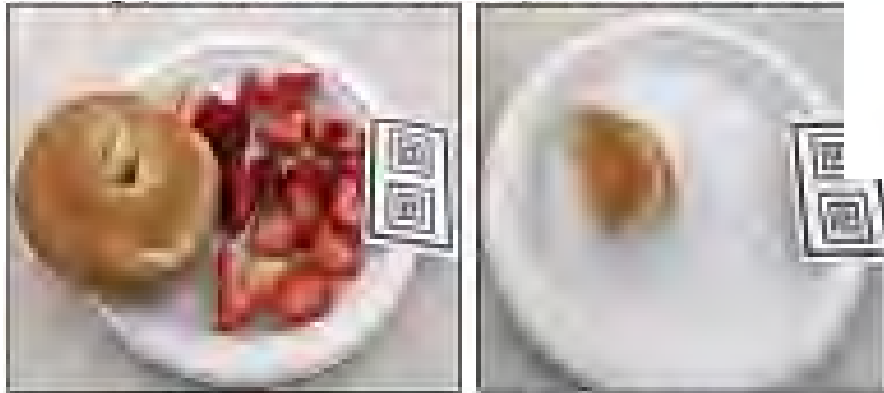
- Supplement to assess the health impact of sudden changes to diet, physical activity (PA), and CV risk factors caused by COVID restrictions.



COVID Activity Restriction & Environment Study

BHS-CARES

When using RFPM, the SmartIntake app captures images of participants' foods and beverages. A reference card is used for sealing portion size. A description is included.



Before image.

After image.

Description: "Plain bagel and strawberries"



EPIDEMIC – PANDEMIC IMPACTS INVENTORY (EPI)

INSTRUCTIONS

We would like to learn how the coronavirus disease pandemic has changed people's lives. For each statement below, please indicate whether the pandemic has impacted you or a person in your home in the way described.

Circle YES (Yes) if you were impacted.

Circle YES (Yes) or NO if another person in your home was impacted.

Circle NO if you and the people in your home were not impacted.

Circle NA if the statement does not apply to you or someone in the home.

***Circle YES (Yes) and YES (Yes) or NO if you were impacted.

Since the coronavirus disease pandemic began, what has changed for you or your family?

WORK AND EMPLOYMENT				
1	Lost all or some job or had to take new income	YES (Yes) YES (Yes) or NO	NO	NA
2	Reduced work hours or furloughed	YES (Yes) YES (Yes) or NO	NO	NA
3	Had to lay-off or furlough employees or people supported	YES (Yes) YES (Yes) or NO	NO	NA
4	Had to continue to work even though it was difficult with people who might be infected (e.g., customers, patients, coworkers)	YES (Yes) YES (Yes) or NO	NO	NA
5	Worried a lot of time departing someone due to close contact with people who might be infected work	YES (Yes) YES (Yes) or NO	NO	NA
6	Reduced or stopped or with responsibilities	YES (Yes) YES (Yes) or NO	NO	NA
7	Had time doing the usual because of needing to see some of people in the home	YES (Yes) YES (Yes) or NO	NO	NA
8	Had time making the transition working from home	YES (Yes) YES (Yes) or NO	NO	NA
9	Provided direct care to people with the disease (e.g., doctor, nurse, patient care assistant, caregiver)	YES (Yes) YES (Yes) or NO	NO	NA
10	Provided supportive care to people with the disease (e.g., medical support staff, custodian, administrator)	YES (Yes) YES (Yes) or NO	NO	NA
11	Provided care to people who died as a result of the disease	YES (Yes) YES (Yes) or NO	NO	NA
EDUCATION AND TRAINING				
12	Had a child or someone else could not go to school	YES (Yes) YES (Yes) or NO	NO	NA

Upcoming Research & Community Initiatives

- Second annual MLK day health fair planning for January 2021
- DECIPHeR: Community-engaged participatory research to reduce disparities in heart, lung, blood, and sleep disorders
- Community needs assessment to begin in partnership with the Our Lady of the Angels

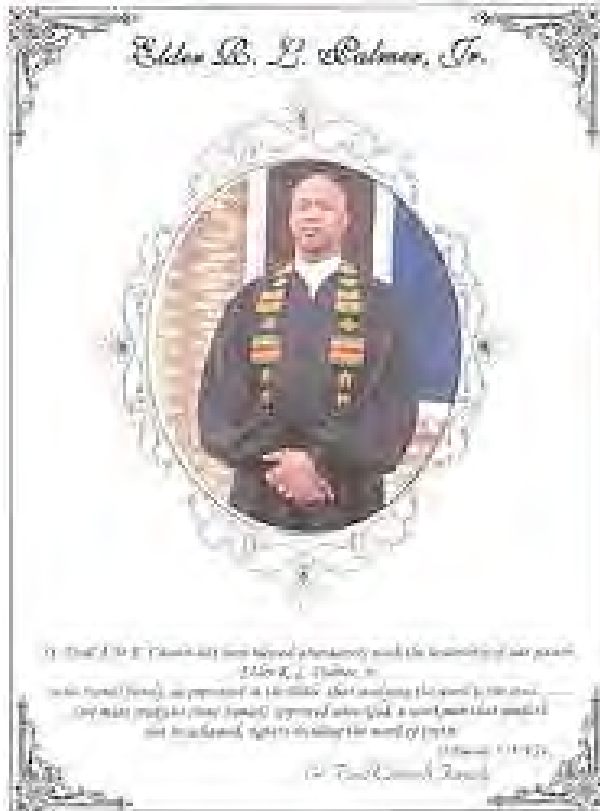
Circulation Research



Reducing Cardiovascular Disparities Through Community-Engaged Implementation Research: A National Heart, Lung, and Blood Institute Workshop Report
George A. Mensah, Richard S. Cooper, Anna Maria Siega-Riz, Lisa A. Cooper, Justin D. Smith, C. Hendricks Brown, John M. Westfall, Elizabeth O. Ofili, LeShawndra N. Price, Susan Arteaga, Melissa C. Green Parker, Cheryl R. Nelson, Bradley J. Newsome, Nicole Redmond, Rebecca A. Eger, Bettina M. Beech, Jada L. Brooks, Debra Furr-Holden, Samson Y. Gebreyes, Wayne H. Giles, Regina Smith James, Tené T. Lewis, Ali H. Mokdad, Kari D. Moore, Joseph E. Ravenell, Al Richmond, Nancy E. Schenck, Mario Sims, Gopal K. Singh, Anne E. Sumner, Roberto P. Treviño, Karim S. Watson, M. Larissa Avila-Santa, Jared P. Reis, Charlotte A. Pratt, Michael M. Engelgau, David C. Goff, Jr and Eliseo J. Perez-Stable



Health Disparities Intervention



Church-based Health Intervention to Eliminate
Racial Inequalities in Cardiovascular Health

- Christian Way Ministries
- Kingdom of God Church
- Mt. Moriah M.B.C. of Bogalusa, Inc.
- St. Paul A.M.E. Church
- Fully Committed Ministry
- Greater Salter Chapel AME Church
- Love Outreach Family Worship
- Bethlehem Baptist Church
- True Gospel Missionary Baptist Church
- Apostolic Faith, U.P.C
- MT. Carmel Baptist Church
- New Triumph M.B. Church

