COVID-19 continues to impact many Latino-majority areas of the country.

Nationwide, Latinos are suffering from a higher frequency of illness, hospitalizations, and death brought on by COVID-19. Our hospitals are overburdened, which has strained workers, supplies, and equipment, and caused substantial disruptions to health services, like preventative screenings and procedures, rehabilitation, and treatment for conditions like hypertension, diabetes, and cancer. Of all the things we’d love to leave our children, we don’t want to leave them a health care system that is facing shortages in staff, medicines, and technology and discontinuing or reducing services.

As Latinos, we are resilient. But part of our resiliency requires action.

Juntos—together—we can each do something to prevent the spread of COVID-19 in our daily lives. From avoiding public places and skipping get-togethers with la familia to wearing a mask and maintaining 6 feet physical distance, even when with friends and family, we can reduce the spread of this infectious disease that ravages our community. This especially important given that, on Aug. 26, 2020, CDC reported that 94% of people who died from COVID-19 had pre-existing conditions, like diabetes, which
disproportionately impacts Latinos. These people could still be alive today, managing their preexisting illnesses and video-chatting with *familia*.

Let’s stop the spread of COVID-19 and protect those with underlying illnesses by learning together and changing our day-to-day habits and interactions.

We are all in this together. *Juntos*, we can stop COVID-19!

**Understand we’re all in this together—*juntos*.

When a new virus strikes, like COVID-19, misinformation and fear can spread quickly.

But we know: coronavirus is killing people, particularly Latinos; the virus is straining hospitals, families and economic systems; the virus is contagious before or without symptoms; tests can identify the disease; and researchers around the world are working on a vaccine solution.

Here are some other things we DO know:

- **Contagious before and without symptoms**: People infected by COVID-19 are most contagious 1-3 days before symptoms begin, but may be contagious for even more days before they notice symptoms. Moreover, people infected may be contagious even they don’t have symptoms.

- **Infection prevention measures work**: Keeping 6 feet distance between others, wearing a mask properly, and washing hands regularly are the three key infection prevention measures we can take as individuals. When combined, they slow the spread of COVID-19. When people exhale, talk, sing, cough, and sneeze, tiny droplets leave their mouth and are thought to travel 3-6 feet. The virus that causes COVID-19 spreads through these droplets, thus the recommendation to keep 6 feet apart. Masks also help to block these droplets. Emerging evidence has demonstrated that mask-wearing is associated with fewer cases and lower death rates. However, you must properly handle your mask by only touching the ties/ear loops and avoiding the nose/mouth cover. Also, you must wash your mask daily. These three infection prevention measures don’t just apply when in public, but also when getting together with friends and family.
• **Researchers in numerous countries across the world are looking into vaccinations,** such as Argentina, Australia, Spain, Germany, UK, China, Italy, Austria, Singapore, Netherlands, Sweden, South Africa, Canada, and France. A vaccine is not yet available.

• **More dangerous than the flu:** Over the past few months, researchers have found that although COVID-19 is a respiratory disease, it can wreak havoc on the kidneys, liver, heart and brain. While some of the symptoms of flu and COVID-19 are similar, COVID is more dangerous and can spread more easily. Most people with the flu are contagious for about one day before they show symptoms and may remain contagious for up to seven days. Conversely, people with COVID can be contagious for three days before they show symptoms and remain contagious for at least 10 days. Additionally, people with COVID can be contagious for at least 10 days without having any symptoms. Symptoms are typically the trigger that influences people to modify their behavior, such as staying home, avoiding public places, and avoiding gatherings with friends and family. Behavior modifications—and vaccinations—are the key to preventing further spread. However, without symptoms, people with COVID-19 don’t modify their behavior, thus continue spreading the virus.

• **Multisystem Inflammatory Syndrome (MIS-C):** Currently, the Centers for Disease Control and Prevention (CDC) is investigating **MIS-C** in children, a rare but serious complications associated with COVID-19 where different body parts can become inflamed, including the heart, lungs, kidneys, brain, skin, eyes, or gastrointestinal organs. Children with MIS-C may have a fever and various symptoms, including abdominal pain, vomiting, diarrhea, neck pain, rash, bloodshot eyes, or feeling extra tired. The best way you can protect your child from MIS-C is by taking everyday actions to prevent your child and entire household from getting COVID-19.

• **Comorbidities:** On August 26, 2020, CDC released a report illustrating the drastic impact COVID-19 has on someone who also has a pre-existing health conditions. They found that 94% of people who died from COVID-19 had other health conditions, like respiratory diseases, hypertension, diabetes, and renal failure. These are known as comorbidities. Latinos often face higher rates of certain of these comorbidities, including diabetes. Even with the new coronavirus, the CDC and numerous public health officials anticipated that comorbidities would contribute to serious outcomes and more deaths from COVID-19 infection, so they have been recommending particular caution for those with underlying health conditions from very early in the pandemic. The results of this new report are not surprising. Now more than ever, we need to take action to slow the spread of COVID-19 and protect our *familia* with existing conditions.

We also know that infection prevention measures work. It is important for Latinos and all people to immediately change some of our habits and interactions.

Some of the proven ways to slow the spread of COVID-19 are to

• **Wear a face mask—and care for it properly;**
• **avoid public places (or at least get together safely, *familia*); and**
• **know what to do if you’re exposed, or test positive.**
While we are learning more about this new disease, it is important to continue changing some of our habits and interactions.

A life with a little inconvenience is still a life worth living.

We are all in this together. Latinos, juntos, we can stop COVID-19!
Wear a face mask—and care for it properly.

When you wear a mask, you protect your family, friends, and others from becoming sick.

Masks limit the spread of coronaviruses by catching the tiny water droplets we all make when we breathe or talk. Those droplets are too small to see, but they carry the coronavirus which then lands on someone else’s mouth, nose, or eyes. The COVID-19 particle is around 0.1 microns in size, but it is always bonded to something larger, like water droplets, which consist of water mucus protein, and other biological material and are all larger than 1 micron.

My mask protects you and your familia, from the niños to the abuelos. Your mask protects me and my familia.

It’s not just about masking up in public. It’s also about masking up if you get together with family or friends. The more community participation in wearing a mask, the greater the benefit.

Of course, it is important you wear your mask properly and wash it daily.

**Properly Wearing a Mask:** Wear your mask over BOTH your nose and mouth and secure it under your chin. Your mask is catching your droplets inside and someone else’s droplets outside. Be sure there is an obvious outside so you don’t end up putting the outside against your nose and mouth. If your mask is under your nose, you are more likely to breathe in the virus and the contaminated edge is more likely to touch your lips. Do not touch the outside of the mask or your face. When you touch it, you get germs on your hands. Remove by untying it or lifting off the ear loops. Wash your hands every time you touch it.

**Washing a Mask:** Wash your mask every time you use it. You can wash by hand with soap and hot water and/or with regular laundry. If your mask has long ties, you can put
it inside a pillowcase and knot the end to run it through the washer and dryer. Be sure your mask is completely dry before wearing it.

**Washing Your Hands:** In addition to washing your hands frequently throughout the day, you should also wash your hands for 20 seconds with soap and water every time you put your mask on, take it off, and fidget with it. Make sure to wash the tops and bottoms of your hands and scrub between each of your fingers. If you don’t have access to soap and water, use hand sanitizer that has at least 60% alcohol.

We are sure you are already on top of your hand washing, but we want to quickly remind you to wash your hands before AND after: blowing your nose, coughing, or sneezing; eating or preparing food; touching your eyes, nose, or mouth; using the restroom; caring for someone sick; going to a public place; and getting together with family and friends. Make it a habit for everyone in your household to wash their hands immediately after returning home from work, errands, and get-togethers.

**Carry Hand Sanitizer:** Ensure you have hand sanitizer with you at all times. Belt clips and purse clips help. Like a mask, these hand sanitizer clips can become part of your “uniform.”

**Challenges:** Some people, such as people who are deaf or hard of hearing and people with intellectual and developmental disabilities, mental health conditions or other sensory sensitivities, may have challenges wearing a cloth face covering. They should consider using a clear face covering and/or consult with their healthcare provider for advice about wearing cloth face coverings.

**Keep Dry:** A wet cloth face covering may make it difficult to breathe. People should not wear cloth face coverings while engaged in activities that may cause the cloth face covering to become wet, like when swimming at the beach, river, or pool. Speaking of swimming, if going to a beach, river, or pool, maintain 6 feet distance between your household and other households. If that isn’t possible, consider rescheduling for another time.
**Progress in Guidelines:** Early in the outbreak, CDC officials said that only healthcare workers and people who were sick needed to wear masks because of concerns about limited supply of surgical masks and N95 respirators. They also believed that people were contagious mainly when symptomatic. Since then, recommendations have progressed as researchers confirmed evidence that people without symptoms can infect others because the virus can spread through tiny droplets when people talk and breathe. While physical distancing is the best way to prevent spread, the CDC issued new guidance recommending masks for anyone older than 2 when they cannot maintain distance from others.

**Masks Work:** Emerging evidence has demonstrated that mask-wearing is associated with fewer cases and lower death rates. For example, researchers in Iowa examined the effects of mandates for use of face masks in public in 15 states and Washington D.C. between April 8 and May 15, 2020, and found mandates are associated with a decline in the daily COVID-19 growth rate. Estimates suggest as many as 230,000-450,000 COVID-19 cases were possibly averted. Additionally, researchers in Virginia looked at predictors of coronavirus-related mortality in 198 countries and found duration of mask-wearing by the public was negatively associated with mortality.

Stay up to date on local recommendations and requirements regarding masks. For example, some cities and/or states require mask-wearing in public. Keep in mind, these can change by the week or month, so stay updated.

**Share Why You Wear a Mask!**

- I wear a mask because I’m an essential worker and wearing a mask is a proud part of my uniform now. #JuntosStopCovid
- I wear a mask because COVID-19 is here, in my community. #JuntosStopCovid
- I wear a mask because I’m making a statement: I care about you. #JuntosStopCovid
- I wear a mask because I care about the health of my community and I look good doing it. #JuntosStopCovid
- I don’t like wearing a mask, but I don’t want to send any more people to the already overburdened ICU. So, I wear it. #JuntosStopCovid
- I wear a mask because I am an essential worker and I can’t afford to get sick. #JuntosStopCovid
- I wear a mask because I don’t want my community to get to a point where they need refrigerator trucks for dead bodies. #JuntosStopCovid
- I wear a mask because a real man takes care of his family. #JuntosStopCovid
- I wear a mask because a madre takes care of her family. #JuntosStopCovid
- Wearing my mask shows I have compassion for my community. #JuntosStopCovid
• I wear a mask because I can’t truly know if I have COVID-19 or not, and the small inconvenience outweighs the big consequences. #JuntosStopCovid
• I don’t like wearing a mask and didn’t at first, but then I saw how COVID-19 cases and hospitalizations spiked and realized we really are all in this together. #JuntosStopCovid
• I wear a mask because some people in my family are at increased risk of severe illness and I assume some people in your family are, too. I wear mine for you and you wear yours for me. #JuntosStopCovid
• My mask protects my family, from the niños to the abuelos, and your mask protects your family. Let’s protect our families together. #JuntosStopCovid
• Why wouldn’t I wear a mask? Literally, almost every public health professional across the world recommends them. Duh. #JuntosStopCovid
• Generations of members of the U.S. military have fought for our freedom. Today, they are wearing masks to fight the coronavirus. I mask up for them. #JuntosStopCovid
• Since the COVID-19 pandemic began, many people have not received the health services they need because non-coronavirus health services have been canceled, postponed, and reduced to prevent a further strain on workers, supplies, and facilities. I mask up to prevent a further strain on health services. #JuntosStopCovid
• Many people younger than 44 are hospitalized from complications related to COVID-19, and, because the virus is new, the CDC does not have information about long-term health effects of contracting the disease. I mask up to protect older AND younger adults. #JuntosStopCovid

We are all in this together. Latinos, juntos, we can stop COVID-19!
Avoid public places and gatherings (when you can’t, use infection prevention guidelines, familia).

Stay Home: Although quarantine-fatigue is real, the surest way to slow the spread of COVID-19 is to stay home. Avoid public places and indoor get-togethers as much as possible, including restaurants/bars, movie theaters, and amusement parks, as well as BBQs/cookouts/carne asadas, birthday celebrations, baby showers, and dinners with family and friends who don’t live with you.

A case study in Ohio found that on June 14, 2020, one man infected 53 people at a church service. Eighteen of those people continued to spread the virus to 30 family members, three of which spread it to five coworkers, resulting in a total of 91 people developing symptoms by July 4.

You and your household can:
- Get fresh air outside.
- Get physical activity, like doing Zumba and other workout videos at home or going for walks.
- Video-chat with friends and family on a regular basis as well as in place of celebrations.
- Set up virtual game nights with friends and family.
- Enjoy many other hobbies, like mindful meditation, crafting, cooking, online gaming, writing, painting, photography, singing, playing piano, biking, and riding a motorcycle.
- Find a new hobby.

When in Public: When going to work or essential destinations, practice the three key infection prevention measures: wear a mask, wash your hands regularly, and maintain 6
feet physical distance between others, including family and friends. As soon as anyone in your household returns home, ensure they wash their hands and mask.

When going to public places, there are ways to assess and reduce risk. However, assessing risk is not merely about the location, as [some charts have suggested](#).

Take a family gathering that brought together over 24 family members from several households, none of whom wore masks. A case study in [Catawba County, N.C.](#), found that 14 people from four households contracted COVID-19 at the gathering. But before they had symptoms, they continued with their daily lives, spreading COVID-19 to another 27 people in five different households and eight different workplaces. Through [contact tracing](#), public health workers identified and stopped this outbreak.

These folks weren’t in a public place. They were with family.

Determining risk also about considering:
- How many people you are with and if they follow infection prevention measures
- How many people are there and if they follow infection prevention measures
- How long you will be there
- If you are indoors or outdoors
- Does the place follow infection prevention measures

Check out these graphics to help assess risk:
### COVID Risk Framework:

<table>
<thead>
<tr>
<th>LOWEST RISK</th>
<th>MODERATE RISK</th>
<th>HIGHER RISK</th>
<th>HIGHEST RISK</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>HOME ALONE OR WITH HOUSEMATES</strong></td>
<td><strong>OUTDOOR ACTIVITIES</strong></td>
<td><strong>OUTDOOR GATHERINGS</strong></td>
<td><strong>INDOOR GATHERINGS</strong></td>
</tr>
<tr>
<td>• Stay home as much as possible.</td>
<td>• Wash your hands and don’t touch your face.</td>
<td>• Wash your hands and don’t touch your face.</td>
<td>• Wash your hands and don’t touch your face.</td>
</tr>
<tr>
<td>• Try to allow only people you live with into your home.</td>
<td>• Stay at least 6 feet from people you don’t live with.</td>
<td>• Stay at least 6 feet from people you don’t live with.</td>
<td>• Stay at least 6 feet from people you don’t live with.</td>
</tr>
<tr>
<td>• Wash your hands.</td>
<td>• Wear a mask.</td>
<td>• Wear a mask.</td>
<td>• Wear a mask.</td>
</tr>
<tr>
<td>• If you’re sick, stay home and isolate from housemates.</td>
<td>• Avoid shared surfaces, like swings or benches.</td>
<td>• Don’t share food, toys, and other items, and avoid shared surfaces.</td>
<td>• Don’t share food, toys, and other items, and avoid shared surfaces.</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Participate in events like these infrequently.</td>
<td>• Participate in indoor events as much as possible.</td>
</tr>
</tbody>
</table>

Adapted from Julia Marcus, Harvard, and Eleanor Murray, Boston University
Reducing Risk of Coronavirus Transmission:

Because people without symptoms can be contagious for at least 10 days and the recommendation is to stay home for 14 days after potential exposure.

The best way to reduce risk in a situation like the family gathering case study above is to:

- Stay home and avoid get-togethers for 14 days before the family gathering to avoid bringing coronavirus to the family gathering
- Even with family, wear a mask, maintain 6 feet physical distance between others, and wash your hands regularly
- Stay home and avoid get-togethers for 14 days after the family gathering to avoid spreading coronavirus after the family gathering.

When Getting Together With Family and Friends who Don’t Live in Your Household: When getting together with family and/or friends who don’t live in your household, follow the three key infection prevention measures: wear a mask, wash your hands regularly, and maintain 6 feet physical distance between others, including family and friends. As soon as anyone in your household returns home, ensure they wash their hands and mask.

Also, refer to the graphics above to help assess and reduce risk and try the following safety tips to further reduce risk.
Safety Tips for Getting Together:

- **Before you go:** Continuously monitor yourself for symptoms, such as fever (100.3 degrees or higher), chills, cough, difficulty breathing, fatigue, muscle or body aches, new loss of taste or smell, sore throat, congestion or runny nose, nausea or vomiting, and diarrhea. Don’t get together with family or friends if you or anyone in your household has symptoms.
- **Practice the three key infection prevention measures:** You and all guests should wear a mask, wash hands regularly, and maintain 6 feet distance from others.
- **No hugging:** Avoid hugging and shaking hands.
- **Outdoors:** Keep it outside for better ventilation and more space. Risk of infection increases when gathering in indoor spaces for prolonged time.
- **Seating:** Have people bring their own chairs and place more than 6 feet apart.
- **Sanitizer:** Provide hand sanitizer gel and/or wipes for guests to use regularly.
- **Food:** Have guests bring their own food and drinks and keep them separate from other families. Avoid shareable foods, like chips and salsa. Every hand that goes in that bowl, touches that serving spoon, or squeezes that mayonnaise bottle is an opportunity for viral transfer.
- **Trash:** Make garbage bins available to ensure people don’t touch used cups and utensils.
- **Games:** Avoid games that bring you into close contact or result in yelling. Set up physically distant outdoor games (i.e., badminton, cornhole, charades, Simon Says, hopscotch, and jump rope).
- **Clean and disinfect:** Clean and disinfect surfaces and objects that are touched more frequently, like doorknobs, tabletops, remotes, tablets, gaming controller, cell phones, and bathrooms. These may provide a vehicle for the virus to find its way into a new household.
- **When you return home:** Wash your hands and mask.
- **Consider keeping a list of attendees for contact tracing purposes.**

**Quarantine Group:** If you are going to get together with people outside your household, the best way to reduce risk is to establish a small “quarantine group” with family/friends from one or two other households and follow the safety tips above.

The people in your quarantine group will be the only people your household gets together with. Everyone in the quarantine group makes a mutual commitment to limit social interactions with people outside the group, to avoid public places, and to follow the above safety tips when getting together with people in the quarantine group.

Stay up to date on local recommendations and requirements regarding social gatherings. For example, some cities ban gatherings of 10 people or more. Use this number as a maximum any time your quarantine group gets together. Keep in mind, the more households you put together, the higher the risk for infection.
Quarantine Group Considerations: When considering who will be in your quarantine group, it is important to consider people at increased risk for severe illness and unique social needs. People at increased risk for severe illness include older adults and people with medical conditions, like coronary artery disease, chronic disease, obesity, and diabetes. If someone in your home is at increased risk for severe illness, you should avoid all get-togethers. If you are going to get together with others, assess risk by referring to the graphics above and follow the safety tips above. You can also politely request others do the same.

Unique social needs may be related to households with young children, teenagers or people working on the frontlines. For example, if you have young children, you probably want another family in your quarantine group to also have young children. If you have a teenager or young adult, you may need to help them establish a quarantine group of their peers separate from the quarantine group for the rest of the household. Additionally, friends or family who work on the frontlines are at increased risk for exposure, and put the quarantine group at risk. You all must decide how much risk is acceptable for your quarantine group. You may agree that if they wear their mask, wash their hands regularly, and maintain 6 feet distance from others, that it is acceptable. Keep in mind that essential workers deal with a lot of stress and probably rely on get-togethers more than usual to relax. It is important to acknowledge what they deal with and to encourage infection prevention measures outside the workplace.

Moreover, you may find that some friends or family are not willing to follow infection prevention measures any time, thus you may be in the difficult position of telling them that you are not comfortable getting together with them. See below for information about how to not offend family and friends.

Discuss Risk and Set Expectations for Gatherings: When establishing a quarantine group, it is also important to discuss risk and set expectations to reduce risk. Refer to graphics above to help assess risk. To set expectation, your quarantine group may consider:
• Other than essential destinations, everyone in your quarantine group agrees to avoid going to public places.
• Other than households within quarantine group, everyone in your quarantine group agrees to avoid going to other people’s houses.
• Everyone in your quarantine group agrees to the safety tips above.
• If anyone in your quarantine group goes to a public gathering of 10 or more, they agree to avoid get-togethers with the quarantine group for 14 days.
• Everyone in your quarantine group agrees to inform others if they test positive for COVID-19 or find out they have been exposed to someone who tested positive.
• Being prepared to modify expectations due to changing life circumstances, such a change in employment or health that introduces new risk or a change in public health guidance or local requirements.

It is perfectly reasonable to voice concerns and work toward a compromise with people in your quarantine group. It also reasonable to change quarantine groups. Be sure to take a 14-day break between groups where everyone in your household avoids all get-togethers.

**How Not to Offend Family and Friends:** Our families’ health and friends’ matters. But so do their feelings. We all know some people who are willing to engage in risky behavior and others who take multiple precautions to avoid risky behavior. Chances are, we all have someone we care about who may not believe in coronavirus or may not understand the importance of infection prevention measures when with family and friends. They may feel offended if you decline an invitation to get together at their house or if you request everyone at the get-together wear a mask, avoid hugging, and sit 6 feet apart.

Keep in mind, no one likes to be questioned and no one likes the implication that they may be the source of a major illness. Share with them your reasons for complying with infection prevention measures, such as your concern that people without symptoms can still be contagious and your trust in public health research and guidance regarding face masks. Focus on mutual goals around the health of your family, friends, and community. Share these graphics from the church and family gathering case studies above. You may not be able to change their mind about coronavirus, but it isn’t your job to. It is your job to protect yourself and your household. Remain strong in your stance to follow infection prevention measures and politely ask them to respect your decision.

**Share Why You Avoid Public Places or Only Get Together Safely!**
• Because people without symptoms can spread the disease, I think it is safer for myself and my household if we avoid public places and avoid get-togethers with people not in our household. #JuntosStopCovid
• Across the world, medical and public health researchers have agreed that masks work. That’s why, when in public or when getting together with people not in our household, we wear our masks and ask others to do the same. #JuntosStopCovid

• My family has already sacrificed a lot for me. The least I can do now is avoid hanging out with people who don’t respect our desire to wear face masks and maintain 6 feet distance. #JuntosStopCovid

• Unlike the flu, where symptoms are more obvious and precautions to avoid transmission are more widely accepted, like skipping dinner with extended family when someone is sick, COVID-19 is contagious without symptoms. Even if no one seems sick, please accept that my household is trying to avoid transmission by skipping dinners with extended family and friends for a while. #JuntosStopCovid

• COVID-19 isn’t as far away as we think. It is basically in our backyard. That’s why our household has agreed that the wisest thing to do is to follow public health guidance to stay home and to follow the three key infection prevention measures: wear a mask, wash hands regularly, and keep 6 feet distance between people who don’t live with us. #JuntosStopCovid

• Although I think it is safer for my household and I to decline your invitation right now, we are happy to set up a virtual game night for the whole family. #JuntosStopCovid

• Until face masks and keeping 6 feet apart becomes the new norm with friends and family outside our household, we think it is safer to avoid get-togethers. We miss you! And hope we can catch up through video-chat soon. #JuntosStopCovid

• We have read about outbreaks caused by family gatherings where someone without any symptoms spread the disease to many family members who then spread the disease to coworkers and friends. We couldn’t live with ourselves if that happened. #JuntosStopCovid

• It’s just too risky right now. #JuntosStopCovid

• If a contact tracer were to call to inform us we had been exposed to someone who tested positive for COVID-19 and to ask us who we have been in contact with, we want to proudly be able to say, “no one outside of our household.” #JuntosStopCovid

• Until healthcare workers are back to normal, our household won’t be back to normal. #JuntosStopCovid

• It’s easy to get overwhelmed with national news about COVID-19, so we stay focused on what our local public health leaders are saying. Right now, they are asking people to stay home because the hospitals are overburdened with COVID-19 patients. We respect the work they do and are proud to do our small part to help during this global pandemic. #JuntosStopCovid

• Flu season is coming soon. We can’t have more flu hospitalizations during COVID-19 hospitalizations. Our household is already thinking about the second wave and encouraging others to plan to get the flu vaccine. #JuntosStopCovid

• Because the virus is new, and the CDC does not have information about long-term health effects of the disease, our household is worried about young adults as well as older adults. #JuntosStopCovid
When the CDC and numerous other public health and medical organizations tell us that coronavirus can be spread by people with no symptoms, we need to take action. Thankfully, we have a plan to slow the spread of COVID-19. We can stay home and avoid public places, that helps prevent exposure to others. We can wear a mask properly and maintain 6 feet distance when we are in public places AND when getting together with friends and family. We can also wear our mask properly, wash them regularly, and wash our hands frequently. We can care for our community to care for our health.

A few inconveniences now can save lives later.

**More Than a Get-Together:** If you have a get-together or event planned with people outside your quarantine group, bookend it with 14 days before and 14 days after where you stay home. Don’t go to work. Don’t get together with family or friends. This will help reduce transmission from your household or workplace to the event as well as reduce transmission from the event to your household or workplace.

Recall the family gathering case study above where one family gathering resulted in 41 people getting COVID-19 before contact tracers intervened. It isn’t just essential workers and millennials at the beach catching coronavirus, it is family, friends, and colleagues.

**Traveling:** Airports, bus stations, train stations, and rest stops are all places travelers can be exposed to the virus in the air and on surfaces. Follow state and local travel restrictions where you are, along your route, and at your destination. For example, some state and local governments may require people who have recently traveled to stay home for 14 days. Try this Google search, “[STATE/CITY] COVID-19 current travel restrictions.” Keep in mind, new travel restrictions may be put into place while you are traveling. Additionally, new “stay home orders” may be put into place which could close, limit hours, and/or limit capacity of grocery stores and restaurants as you travel. Plan to continue checking for updates as you travel.

If you are still thinking about traveling within the U.S., find out if COVID-19 is spreading in the county where you are going. Be sure to look at cases per 100,000 population. Merely looking at number of cases in isn’t helpful without considering population size. For example, as of August 26, Wyandotte County, Kansas had 5,850 cases compared to 11,038 in Denver County, Colorado, but Wyandotte County’s case rate per 100,000 was 3538.5 per 100,000 population, compared to 1540.6 in Denver County.
Beyond looking at case rate per 100,000 population, you can also use this event risk assessment planning tool to find out the risk of attending an event in the county you live in or plan to visit. Developed by the Georgia Institute of Technology, the tool provides the estimated chance that at least one COVID-19 positive individual will be present at an event, given the size of the event, from 10 to 10,000 people. As of August 26, the risk estimate that at least one COVID-19 positive individual will be present an event with 25 people is 66% in Wyandotte County and 21% in Denver County.

Remember from the church case study, it just takes one person to spread COVID-19 at an event.

You want to avoid both bringing COVID-19 to and catching COVID-19 from another place. For example, you could consider staying home for 14 days before your trip if traveling somewhere the epi curve has declined and rate of cases per 100,000 is less than the national average. Additionally, you could consider staying home for 14 days after your trip if traveling somewhere the epi curve is rising and rate of cases per 100,000 is more than the national average. During this time, don’t go to work and don’t get together with people who didn’t travel with you.

If traveling abroad, check the travel advisories where you are visiting through the U.S. Department of State Bureau of Consular Affairs.

America has always been a yes-we-can kind of place. We led the way into space and to cell phones and the internet. Today, the next big thing is managing and recovering from this novel coronavirus. We can lead again with modifications to our day-to-day lives that slow the spread of COVID-19 to safeguard our health system and protect our families and communities.

We are all in this together. Latinos, juntos, we can stop COVID-19!
Know what to do if you’re exposed, or test positive.

You may get a call from a public health worker, family member, friend, or co-worker telling you that someone you recently came in contact with tested positive thus may have unknowingly exposed you to the virus. Exposure is often defined as contact within 6 feet of a person with COVID-19 for 15 minutes or providing care to someone who is sick with COVID-19.

If you have been exposed to someone with COVID-19, you are at potential risk for developing and spreading the infection for 14 days after the exposure.

**Stay home:** Chances are you’re already staying home most of the time. But if you find out you have been exposed to someone with COVID-19, you really need to stay home for 14 days and do the following:

- Stay home in a specific room away from other people.
- You should NOT go to work, school or public places.
- You should NOT get together with family or friends.
- Avoid sharing household items, like dishes, towels, or bedding with other people in your home.
- Clean and disinfect phones, tablets, keyboards, remote controls, counters, tables, doorknobs, and bathroom fixtures every day.
- Monitor twice daily for symptoms, such as fever (100.3 degrees or higher), chills, cough, difficulty breathing, fatigue, muscle or body aches, new loss of taste or smell, sore throat, congestion or runny nose, nausea or vomiting, and diarrhea.
- If you need to go to an essential destination, wear your mask, maintain 6 feet distance from others, wash your hands regularly, and wash your hands and mask as soon as you return home.
- If you get a negative test, you should continue staying home for 14 days, due to the high rate of false negatives.

It’s only 14 days, and a great time to catch up on hobbies, walking, and house projects! Then, you can go back to work and to small get-togethers with people in your house and your quarantine group. Even after the 14 days is over, you should continue to stay home, avoid public places, and practice the three key infection prevention measures: wash your hands regularly, wear a mask, and maintain 6 feet distance between others, even family and friends.
If being out of work while you stay home creates a hardship, some cities are providing financial assistance. Visit your local health department’s website to learn about these opportunities. Try this Google search, “[CITY/COUNTY] Health Department COVID-19 assistance resources.”

**When to Get Tested:** Anyone who develops symptoms should get tested immediately. People who have been exposed to someone with COVID-19 but don’t have any symptoms can consider testing, but should wait 8 days after the exposure, when the false negative rate is the lowest. The negative rate is 100% if tested one day after exposure and 67% if tested four days after exposure, even if you later develop the infection. This is known as false negative. The false negative rate is lowest eight days after exposure.

Find testing sites near you using this Google search, “[CITY/COUNTY] Health Department COVID-19 testing sites.” If you don’t have health insurance try this Google search, “[CITY/COUNTY] federally qualified health center COVID-19 testing.”

**If Positive:** If you receive a positive test result, you should stay at home in a specific room away from other people, and use a separate bathroom, if possible. You should not go to work. Follow your healthcare provider’s instructions.

If being out of work while you stay home creates a hardship, some cities are providing financial assistance. Visit your local health department’s website to learn about these opportunities. Try this Google search, “[CITY/COUNTY] Health Department COVID-19 assistance resources.” You can also look at FindHelp.org for social services specifically for helping in the wake of the COVID-19 pandemic. Read Ernie Gray’s story behind creating this platform.

**Contract Tracing:** Most health departments are conducting contact tracing, in which they contact people who have tested positive for COVID-19 to identify individuals that may have been exposed to the virus. Once identified, public health workers call and
advise each exposed individual to stay home and monitor symptoms. Contact tracing is 100% confidential. Your identity is protected, and personal information will never be shared with those who are contacted. Answer that call!

We can answer the call when public health workers are conducting case investigation and contact tracing. We can let our local leaders know we support public health workers and infection prevention measures.
Get the COVID-19 Vaccine (when available to you)!

A COVID-19 vaccine is finally here. Actually, it has been in the works for years!

On Dec. 11, 2020, the FDA granted an “emergency use authorization” for the Pfizer-BioNTech vaccine, a two-dose vaccine spaced several weeks apart for people ages 16 and older. The United States joined Mexico, United Kingdom, Bahrain, and Canada in authorizing this vaccine. The emergency use authorization means the FDA has determined that the benefits of the product outweigh the known risks for the intended use, although vaccine developers will continue to seek formal FDA approval.

While this authorization may seem rushed compared to when COVID-19 first landed in the U.S., scientists around the world had already been working on a coronavirus vaccine for years. Building on existing research on respiratory viruses, these scientists continued working as quickly as possible to approve a safe and effective vaccine in the U.S. for you and your familia.

Here are a few important things to keep in mind as we reach the development and distribution of a COVID-19 vaccine.

Safety is a vaccine development priority.

The CDC and other health organizations prioritize safety when it comes to a COVID-19 vaccine. There are many measurements in place to make sure the vaccine is as safe as possible, such as:

- **Years of Prior Research.** Long before COVID-19 began to spread, scientists began researching new effective ways to make vaccines. Other coronaviruses like SARS and MERS have helped scientists over the last decade learn how to engineer more safe and effective vaccines. The new Pfizer-BioNTech vaccine uses a new mRNA approach.
• **Clinical Trials.** These trials allow for scientists to study the effects of the potential vaccine in thousands of people. The potential vaccine goes through multiple phases of trials. This process has been expedited for the COVID-19 vaccine through seamless clinical trials that leave less time in between trials. The FDA must analyze results of the clinical trials and determine if they meet the safety and effectiveness standards.

• **Safety Monitoring.** Once a vaccine is authorized by the FDA, vaccine safety monitoring systems that are run by the FDA and CDC watch for possible side effects in case they weren’t seen in clinical trials. If any side effects are presented, the FDA will then reassess their recommendation of the vaccine. For example, the [Vaccine Adverse Event Reporting System (VAERS)](https://www.vaers.hhs.gov) is used to detect potential safety issues with a vaccine. Anyone who gives or receives a vaccine can submit online reports to VAERS if they discover significant health problems after vaccination. You can also sign up for [V-safe](https://www.fda.gov/vaccines/development-review-board-and-committees/v-safe), a text-messaging safety system that texts vaccine recipients and checks in on how they’re feeling. Anyone who reports significant adverse events after vaccination will receive follow up phone calls.

• **Diverse Vaccine Assessments.** When the vaccine is distributed, the CDC will assess the effectiveness of it in a variety of groups of people to ensure that it is safe for everyone. This includes older adults, people with underlying conditions, racial/ethnic minority groups like Latinos, and other groups that are particularly vulnerable. We understand if you’re still worried or hesitant about a vaccine even after these assessments, and we’ll discuss that more.

**Pfizer-BioNTech is first vaccine in the U.S. to get emergency use authorization.**

According to [clinical trial data](https://www.fda.gov) from the FDA, the Pfizer-BioNTech vaccine was:

- 94.6% effective in preventing COVID-19 overall
- 94.5% effective among Latinos
- 100% effective among black people
- 95.0% effective among obese adults ages 16-64
- 91.7% effective among at-risk adults ages 65 and older

The U.S. purchased 100 million doses of the Pfizer-BioNTech vaccine. Because it is a two-dose vaccine, given several weeks apart to achieve 95% effectiveness, it will vaccinate 50 million people. [Mexico](https://en.wikipedia.org/wiki/Mexico) purchased 34.4 million doses. [Canada](https://en.wikipedia.org/wiki/Canada) purchased 76 million doses. [UK](https://en.wikipedia.org/wiki/United_Kingdom) purchased 30 million doses. Bahrain has not disclosed its purchase numbers.

**Several additional vaccines are being developed.**
Because of the urgency of the COVID-19 pandemic, many different pharmaceutical and research companies have worked on producing a vaccine.

There are over 50 different vaccines being tested in clinical trials, and it is likely that several different vaccines will be approved and distributed. The U.S. already has preliminary agreements to buy hundreds of millions of doses of vaccines from six manufacturers.

As of early December 2020, Moderna, Pfizer, and AstraZeneca announced successful vaccine trials and are in the process of receiving authorization from the FDA to use the vaccine.

U.S. officials said on Dec. 14, 2020, they expect to ship nearly 6 million doses of Moderna’s two-dose COVID-19 vaccine once the FDA grants it emergency use authorization, as early as Dec. 18, 2020, according to CNBC. Two more vaccines could gain FDA authorization by February 2020, according to Politico.

Once a vaccine is approved by the FDA for emergency use, the companies can begin distributing vaccine doses across the country.

Mexico, for example, has preliminary agreements for over 180 million doses of four different vaccines, according to Al Jazeera:

- 34.4 million doses of the Pfizer-BioNTech vaccine
- 35 million doses of the CanSinoBio vaccine, through a Chinese-Canadian project
- 77.4 million doses of the AstraZeneca vaccine, through the United Kingdom
- 51.6 million doses through the international Covax mechanism
COVAX is one of three pillars of the Access to COVID-19 Tools (ACT) Accelerator, a ground-breaking global collaboration to accelerate the development, production, and equitable access to vaccines for the 170+ participating countries.

If there is no international plan to manage vaccine distribution fairly, there could be price spikes and possible hoarding in some places and life-threatening shortages in others, according to the World Health Organization (WHO).

There are different types of vaccines being produced.

Some use inactivated viruses, virus-like particles, or viral vectors, while others use protein subunits of the COVID-19 virus and DNA/RNA particles.

The Pfizer-BioNTech vaccine is a DNA/RNA type because it allows for human cells to produce coronavirus antigens from the genetic code of the virus, which teaches your immune system to produce antibodies that can fight it off. This is part of the reason why the vaccine requires ultra-cold refrigeration – the delicate structure of the mRNA particles.

Vaccines may differ in their dosage as well. The Pfizer-BioNTech and Moderna vaccines will require two doses for immunity. Other vaccines, like the Johnson & Johnson vaccine, are being developed to only require one dose.

No matter how the vaccines differ, once they are approved by the FDA, it means they are “proven safe and effective to the FDA’s satisfaction” and “the benefits of the product outweigh the known risks for the intended use.”

Some groups of people will receive the vaccine before others.

The first shipments of the COVID-19 vaccine left the Michigan manufacturing facility on Sunday, Dec. 13, 2020, in route to all 50 states. They will go to hospitals with ultracold storage first.

Then, “it will be up to the states to decide how to divide the doses among hospitals, clinics and, ultimately, drugstores and doctors’ offices,” according to Richard Pérez-Peña with the New York Times.

The COVID-19 vaccine is expected to go to the most vulnerable groups before being distributed to the general population.
For example, the CDC as recommended that the following groups receive the COVID-19 vaccine early if the supply is limited:

- Healthcare workers
- Essential workers
- People with underlying medical conditions
- Adults older than 65

These are groups that are either frequently exposed to the virus or likely to suffer severely if infected.

These groups were determined by the CDC based on advice from the Advisory Committee on Immunization Practices (ACIP), a panel of independent public health experts. Each state will determine the exact order of vaccine distribution among these groups. Check with your local or state health department to see how the COVID-19 vaccine will be distributed.

Keep in mind, the main reason for coronavirus-related shut-downs and staying home is to protect the vulnerable. Vaccines protecting the most vulnerable will not only save the most lives but will open the economy back up.

Other countries, like Mexico, Canada, United Kingdom, are prioritizing health care workers, too.

If you or anyone in your familia is a front-line, essential worker, or has a medical condition that puts them at a greater risk, such as diabetes, cancer, or heart disease, you may be eligible to receive the vaccine earlier than the general public.

The National Association of Chronic Disease Directors (NACDD) has recommended that federal and state officials prioritize vaccination for populations with high-risk chronic diseases, particularly among Latino, Native American, and Black people.

Distribution will vary in each state. Once the vaccine is available to the general public, people can look to primary care providers, local pharmacies, school clinics, and local health departments to get the COVID-19 vaccine.

The general public can expect to receive the vaccine in spring of 2021. If you are curious when you will receive the vaccine, use this tool by The New York Times.
The vaccine may not initially be recommended for your niñas.

Only adults have participated in clinical trials, meaning that if approved, the vaccine will only be recommended to adults. However, several drugmakers have announced they will begin to test their vaccine candidates in children.

Families can expect to have a vaccine widely available for children in the spring.

The vaccine will be free.

Individuals will be able to get COVID-19 vaccine(s) for free, due, in part, to the following changes to the laws and regulations that typically govern insurance coverage for vaccines, according to the Kaiser Family Foundation:

- **Uninsured Adults:** Providers that participate in the CDC COVID-19 Vaccination Program contractually agree to administer a COVID-19 vaccine regardless of an individual’s ability to pay and regardless of their coverage status.
- **Medicaid and CHIP:** Under the Families First Coronavirus Response Act, coverage of testing and treatment for COVID-19, including vaccines, is required with no cost sharing in order for states to access temporary enhanced federal funding for Medicaid.
- **Medicare:** Under the CARES Act and an accompanying interim final rule, Medicare beneficiaries will have coverage for COVID-19 vaccines through Medicare Part B with no cost sharing (rather than the typical 20% coinsurance).
- **Private Insurance:** The CARES Act requires that employer-sponsored and individual health plans subject to the ACA’s preventive services standards cover a coronavirus vaccine without cost sharing 15 days after it is recommended by [the CDC’s Advisory Committee on Immunization Practices (ACIP)].

However, “the enhanced federal funding and COVID-19 vaccine coverage requirements are tied to states’ receipt of enhanced federal matching funds during the COVID-19 Public Health Emergency (PHE) declaration and only last through the end of the quarter in which the PHE ends,” according to the Kaiser Family Foundation. “This means requirements to cover a coronavirus vaccine at no cost to enrollees will expire if the PHE is not renewed.”

The CDC has yet to determine if COVID-19 vaccine(s) will be included in the Vaccines for Children (VFC) program.

If there is an administrative fee from your provider when you get the vaccine, the cost will be reimbursed by public or private insurance companies.
If you are uninsured, you can be reimbursed by the Health Resources and Services Administration’s Provider Relief Fund.

Although many patients have faced access and affordability challenges for other vaccines, this should not be a problem for the COVID-19 vaccine.

**We have to keep practicing safety after vaccination.**

Before you get your full COVID-19 vaccination, and once you get it, you should still practice safety precautions like wearing a mask, keeping physical distance, and avoiding crowded public areas and gatherings.

At this time, there isn’t enough data on the vaccines to know whether people can still spread the virus after vaccination.

This means that while you will be safe from infection after you get vaccinated, doctors aren’t yet sure whether or not you could still pass the virus on to others.

That’s why we have to keep up our standard safety precautions until the majority of the population is vaccinated in 2021 and there are few people left for the virus to infect.

**Questions about the vaccine?**

You likely will have some questions about a COVID-19 vaccine when it is approved and authorized for public use in America.

1. **What is a vaccine and how does it work?**
   Vaccines help our bodies become immune to a virus without becoming ill from it. Some vaccines use harmless proteins while others may use a weakened version of a live virus similar to COVID-19. The vaccine will NOT give you COVID-19. With any vaccine, the injection causes your defensive white blood cells to fight the foreign virus. Immunity happens because your cells remember how to fight the virus in the future if exposed again.

2. **Why is it important to get the vaccine?**
   Vaccines are important because they provide us a safe way to build protection against COVID-19. Vaccination helps our bodies build immunity, preventing us from getting severe illness or death from COVID-19.
Vaccination will also be an important way we can stop the pandemic once and for all. While wearing masks and social distancing are helpful in reducing your own risk of catching and spreading COVID-19, widespread vaccination will be necessary to stop the pandemic at large. This is because once enough people are immune from catching COVID-19, the virus will not have any more bodies to infect and will die out.

Still hesitant about the vaccine?

We understand if you’re still worried, hesitant, or skeptical about a COVID-19 vaccine. We know that systemic racism causes inequities in healthcare and other parts of our society that make it harder for communities of color to have a fair chance to be their healthiest. Own our Salud America! research review took a deep dive into this issue, and pointed out these inequities and proposed some solutions.

Also, several studies have found that older Americans, especially Latino and Black adults, are skeptical of the safety and efficacy of a COVID-19 vaccine.

Here are some common concerns that you may have and how we address them:

1. *I don’t want to get the vaccine because I don’t know what’s in it.*
   Most of the vaccines being tested are made up of proteins and particles from viruses. Vaccine distributors are transparent about the ingredients and process behind making vaccines, and information is already available through the FDA. As vaccines become authorized, more information will be released about the ingredients.

   Once the vaccines have been approved by the FDA, they will be safe for the public use. The vaccines will have been tested thousands of times throughout clinical trials, making sure that none of the ingredients cause severe negative effects.

2. *I don’t want to get the vaccine because I don’t trust the government or pharmaceutical companies with my health.* We understand being skeptical in trusting your health of you and your familia in the hands of your government officials. It can be especially difficult to do if you’ve been a victim of systemic racism, or if your loved ones have been affected by COVID-19 and you’re concerned about their health and safety.
We believe in vaccine safety, as it will have gone through many months of rigorous testing and trials to try to help us end the pandemic.

We all have a common goal – get rid of this pandemic once and for all. We trust the doctors, public health officials, and research-based organizations that say the vaccine will be safe and will help us end COVID-19. Again, the FDA makes its vaccine authorizations based on the ideals that the benefits of the product outweigh the known risks for the intended use.

3. **I don’t want to get the vaccine because I think they rushed to make it and it’s not safe.** The reason why the COVID-19 vaccine has been produced much faster than previous vaccines is because of the funding and urgency placed on it, and the years of prior research into coronavirus vaccines. In the past, vaccines have taken a longer time to reach the public because of a lack of funding and resources. With the COVID-19 vaccines, companies around the world have dedicated billions of dollars to help fund the efforts to fight the virus, because everyone recognizes how important it is to get immunity.

   Even though COVID-19 vaccines have only been in development for the last year, it will be safe for the public because of the rigorous clinical trials that they have gone through.

At UT Health San Antonio, **vaccine distribution** began on Dec. 15, 2020.

A nurse was vaccinated first. Dr. Adelita G. Cantu, associate professor of nursing at UT Health San Antonio, also was among the first vaccinated.

Cantu said it is significant that a nurse was the first to receive the vaccine because of how directly nurses work and interact with patients. Nurses “get people to trust medicine,” she said, adding that vaccines are the way out of the pandemic.

“It’s wonderful to be the first of many. We all have to play our part, and I was just going for that one tiny part by getting vaccinated. Hopefully this will lead to other people getting it, inspire others to come do their part. I’m just grateful to have gotten it.”
Summary: Take Action!

Denialism about the virus is out there, and infection prevention measures, like masks, have been politicized, negatively impacting personal and public health.

We all know misinformation and fear can spread quickly. Take extra care when reading and sharing information to check dates and sources of data as well as dates and locations of photos.

While there are a lot of unknowns, we see COVID-19 occurring here, in our backyards. We can’t wait for politicians to solve our problems. Right now, in our own communities, we can reduce the spread of COVID-19 and improve health.

Don’t wait for symptoms to change your behavior. Stay home and practice the three key infection prevention measures: wear a mask, wash your hands regularly, and maintain 6 feet physical distance between others, including family and friends. Get the COVID-19 vaccine when it becomes available to you. We can still live our best life while adhering to these minor inconveniences.

A community learning and acting together is the place I want to call home.

We are all in this together. Latinos, juntos, we can stop COVID-19!

Acknowledgements
This campaign was created in September 2020 and updated with vaccine information in December 2020 by Salud America!, a national Latino health equity organization that creates culturally relevant and research-based stories, videos, and tools to inspire people to start and support healthy changes to policies, systems, and environments where Latino children and families can equitably live, learn, work, and play. Latinos are a rising U.S. powerhouse, but they face barriers to be their healthiest and suffer high rates of obesity and other health disparities. Salud America! and its award-winning multimedia communications help our social and online network—more than 300,000 moms and dads, providers, and community and school leaders—push for healthy changes in schools and communities for Latino and all kids. Salud America! is led by health disparities researcher Dr. Amelie G. Ramirez and supported by a passionate team of communicators at the Institute for Health Promotion Research at UT Health San Antonio, thanks to funding from the Robert Wood Johnson Foundation. Visit Salud America! at salud-america.org or on social @SaludAmerica.