

Dr. Walter Faggett

## Mobilizing Youth as Community Health Workers

*Dr. Faggett spoke to the Schiller Institute's international conference, "The World at a Crossroad: Two Months into the New Administration," during the fourth panel, on March 21, "The Challenge of Famine and Pandemics: The Coincidence of Opposites, or Mass Extinction?"*

Good morning, I'm Walt Faggett, here in Washington, D.C., the nation's capital. I'm a pediatrician, and I'm Assistant Professor of Community and Family Medicine at the Howard University College of Medicine. I'm also co-chair of the Ward 8 Health Council, and most recently have been appointed as the chair of the Ward 8 Pandemic Emergency Taskforce. I continue to be energized by being with Dr. Joycelyn Elders, outstanding former Surgeon General, now that we're meeting on this panel, talking about how we are going to prevent mass extinction, as the Schiller [Institute's] Committee for the Coincidence of Opposites has really brought us together. I'm privileged to be here.

As Dr. Elders has said, we two are really excited about the concept of mobilizing a youth brigade, to identify youth who can be trained as community health workers to assist in this whole COVID pandemic vaccination effort. We do know that this kind of concept has worked pretty well in Buffalo, in Erie County. We have a good chance of having a good model developed right here in the nation's capital; a model which can be replicated around the world, we hope.

I think the problem here in Ward 8 is not that we have a really good baseline of documentation and on this slide, you will see that here in Ward 8 we have 80,000 residents, of which 4% are fully vaccinated. That's the lowest in the city; the highest is Ward 3, which is 11%. But then we also have the highest number of deaths; we have 196 deaths to date as of March 16th in Ward 8, which is a 7.5% rate. As opposed to the lowest death rate, in Ward 2—51. So again, this disparity is very representative of the social determinants in



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health that are a real gap in terms of increased homelessness, and comorbidities as well.

### A Community Health Taskforce

But here in Ward 8, Councilman Trayon White has mobilized a taskforce which will be using Dr. Elders' model of youth brigades who will be trained as community health workers. They can be very useful in terms of educating; vaccine education, vaccination, as well as advocacy and transportation.

The real purpose of our taskforce is to ensure that the community residents get the most credible evidence-based data, so that they can make informed decisions about taking the shots. We are very clear that we can fight fear with facts, and improve our outcomes. But as Dr. Elders' vision implies, once we identify the youth here in D.C.—we have some youth who are already working in violence prevention and intervention initiatives. Also, we have other students—a group of 60 from Ballou High School—who will be recruited. We have good support from the Ward 8 Health Council.

What the youth brigade and community health workers would be working in, would be a collaborative environment, where we have a collaboration of our MCOs [managed care organizations]. There are four MCOs here in D.C. who would be helping to provide some of the advertisements as well as access to clients. The Mayor and health department director have already supported some faith-based efforts with "Faith in the Vaccine" as an initial start. We also have some "Vaccine Sunday" efforts throughout the city. We already have had two of those events here in Ward 8.

### A Collaborative Environment

We've identified several agencies here in Ward 8 who will be available, too, at which we could place community health workers. We have a special needs population, we are concerned [about] the LGBTQ community here in D.C. The [COVID-19—ed.] positivity

rate is about 15% [among] black residents in that community, and 7% [among] white or non-black. We are concerned that there might be some access issues; and community health workers can be very useful in providing positive peer pressure to decrease apprehension and fear, and improve access for the youth. Especially the group from 18-44 [years old]; we call that Group 2 here in D.C., and we think that would be a very critical group for the project to address.

So, this is kind of a quick and dirty [view] of what we're trying to do here in Washington. We really have been impressed with what you can do with collaboration among D.C. Med-Chi [the oldest African-American medical society in the world], MSDC [Medical Services D.C.], the Ward 8 Health Council, and the Health Department with Councilman Trayon White and the

Mayor.

We've reached the point now that we probably are going to have more slots than arms to put shots in, which is a good thing. We're targeting for the next 60 days, a full-court press. We'd like to get things pretty well in place, and we're told we'll have the vaccine available by May 31st, so we want to make sure we have the arms available to put them in. We think that what we do here in D.C. can be replicated around the world. We had a doctor from Lebanon speak with us yesterday, and compare the experience in Lebanon with what we have here in Ward 8.

So, thank you very much. My slides are available, and we'll put them up and try to enlarge them so you can see them. But thank you so much for your attention. I look forward to your questions. Thanks again.

Nicole Pfrang

## To Help Solve World Hunger, Break Up the Meatpacker Cartel

*Nicole Pfrang provided these remarks to Panel 4, "The Challenge of Famine and Pandemics: The Coincidence of Opposites, or Mass Extinction?" of the Schiller Institute's March 20-21 international conference, "The World at a Crossroad: Two Months into the New Administration."*

Hi! My name is Nicole Pfrang. I am a 5th generation cattle rancher in a little town called Goff, Kansas. I just got done tagging calves; we're in the middle of calving season.

Before that, we sorted off some replacement heifers we're going to sell. We also have bulls we're ready to turn out for springtime. I am a college graduate from Kansas State University; I got my degree in Animal Science—the Production Management option. I'm also the Secretary of the Kansas Cattlemen's Association.

Along with this whole food shortage and world hunger issue, the big part that I see is how the meatpacker cartel completely controls everything: who gets the food, who buys it, and pretty much makes us producers jump through hoops. They say, if you don't do



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Nicole Pfrang

this, we won't buy your beef. My dad remembers back in the day when there were about five or six packing plants. They would flip a coin to see who would bid first. Now, the meatpacker says, "Can you get it to us? I'll give you a price in two weeks." So, they pretty much control the price. It's just ridiculous.

They also control—with regulations, they can slip money into lobbying organizations and government so that they can get what they want. USDA [United States Department of Agriculture] listens to the meatpackers. There's a lot of legislation going through to try to get small packing plants to be able to sell across state lines, because these are inspected plants, that are as strict as the federal, but that are state-inspected. The big packers do not allow the small packing plants to sell across state lines.

There's a local packing plant that's close to us that is not far from the Nebraska border. They cannot sell into Nebraska. This [legislation] giving the smaller packing plants more wiggle room, more rein, it'll help the consumers' ability to choose what meat products they get.