

# Enhancing Your Immune Health

## Facilitator's Guide

## Module 2



**UIC Center on Mental  
Health Services  
Research and Policy**



**Collaborative  
Support Programs of  
New Jersey**

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**University of Illinois at Chicago Center on Mental Health Services Research and Policy and Collaborative Support Programs of New Jersey, Inc.**

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# INTRODUCTION

Due to the COVID-19 pandemic, many people are seeking information and tips for enhancing their immune systems. Nobody likes being sick, whatever the cause, so it's natural to look for ways to avoid infection and illness. We want our bodies to be as strong as possible!

It's important to understand that our immune system is not a single organ in our bodies. Instead, it is a complex system that works on many different levels to fight infection. This means that our immune systems cannot technically be boosted, even though many people on TV, the internet, and social media say otherwise. However, we can improve our immune health to feel better and be healthier. Also, we can take precautions to avoid infections and illnesses.

This manual has 5 modules. You can use each one separately to educate about enhancing immune health. Or, you can use all of the modules together to teach a 5-week class on improving immunity. We've designed this material specifically to educate people with lived experience of mental illness, but it can be used by anyone who wishes to understand and enhance their immune health.

The modules are:

Module 1: What is Immune Health?

Module 2: Vaccination & Health Screening for Immunity

Module 3: Adequate Sleep for Immune Health

Module 4: Managing Stress for Stronger Immunity

Module 5: Functional Foods, Immunity Aids, & Credible Health Information

Each module uses an “**Explain, Evaluate, and Engage**” framework. We **explain** the key information to know in each area. Using exploration and activities, we then **evaluate** what participants already know about immune health. This is followed by further information. Each module also includes **engaging activities** to work on improving immunity and health.



# Module 2: Vaccination & Health Screening for Immunity

## Part 1: Understanding Vaccination & Immunity

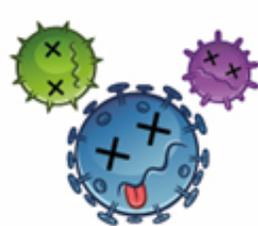
### *Explain*

Guide participants to understand that vaccines prevent diseases that can be dangerous or even deadly. They do this by greatly reducing the risk of infection. Vaccines work with the body's natural defenses to develop immunity to disease. People of different ages and circumstances need different vaccines to stay healthy. Some examples are a measles vaccine for children and a pneumonia vaccine for older people.

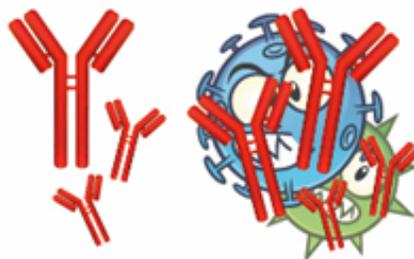
If you live with chronic conditions like diabetes or heart disease, even if they are well-controlled, you are vulnerable to infection. Your immune system needs the protection that vaccines provide. Certain jobs, like those in health care or that require traveling, put you at risk for diseases that vaccinations can help prevent or reduce.

All vaccines help develop immunity by imitating an infection. This almost never causes actual illness, but it does trigger an immune response in your body. That's why after getting some vaccines, you might feel tired or get a fever, chills, or headache. Your arm also might hurt where the shot was given. These symptoms are normal and last only a day or two. They are signs that your body is building immunity. The good news is that, once these side effects go away, your immune system will remember how to fight that disease in the future. This can save you from serious illness, going to the hospital, developing a disability, or even from dying.

### HOW VACCINES WORK



A weak or dead form of the germ is introduced



This sparks your immune response to develop antibodies that remember the germ



The antibodies fight off the germ if it invades again

# Evaluate

Invite participants to share what they know or have heard about vaccination in general. Emphasize that you're interested in what they know about how vaccines help fight disease and death. Today, you will not be discussing politics or what commentators have to say, especially about COVID-19 vaccines. Rather, you'll explore facts to help them decide whether to take various vaccines for their immune health.

Don't worry about correcting misinformation or misunderstandings right now. Just take note of what they know and do not know about vaccines. Here are some questions to choose from.

**What have you learned about how vaccines work in the body?**

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**Did you get vaccines when you were a child? Why or why not? How do you think this helped you?**

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After vaccination, it often takes a few weeks for the body to produce infection-fighting cells. This means it's possible to become ill with the disease shortly after vaccination because the vaccine hasn't had enough time to start working. So, you should keep doing things that prevent illness, like wearing a mask or avoiding others who are coughing or sneezing, for 2-3 weeks after vaccination.

Some vaccines are given in more than one dose such as the shingles and COVID vaccines. In these cases, it's important to remember that the first dose does not provide full immunity. For other vaccines, immunity wears off over time. At that point, a "booster" dose is needed. Boosters to supplement the original vaccine are also needed for viruses that change or mutate. Further, in the case of flu vaccines, doses are needed every year because flu viruses change each season.

# Explain

# Explain

Some people believe that it's better to build immunity by allowing oneself to get the disease instead of getting vaccinated for it. The problem with this approach is that many diseases for which vaccines are available can cause severe complications and even death. This is true even for common diseases like chickenpox or flu. It is impossible to predict who will get serious infections that may lead to hospitalization or worse.

You may have heard the term "herd immunity" in the news. Herd immunity occurs when a large portion of a community becomes immune to a disease, which stops it from spreading. As a result, the whole community becomes protected.

The percentage of immunized people needed in order to achieve herd immunity varies by disease. The more contagious a disease, the greater the number of people who must be immune to stop its spread. There are two main paths to herd immunity: getting vaccines or getting infected.

There are major problems with relying on getting infected to create herd immunity. First, it's not clear how long someone is protected from getting sick again after recovering from certain diseases like flu or COVID-19. Even if you develop some immunity, it's still possible that you could get it again. Additionally, the high number of infections needed to achieve herd immunity could lead to tens of thousands of deaths before herd immunity develops, especially among older people, children, and those with existing health conditions. Also, even if you don't die from the disease, you could develop chronic health problems from it, which can quickly overwhelm the health care system. Finally, the longer the virus lingers in a community, the more likely it will mutate and become even harder to wipe out.



# Evaluate

Explore what it's been like for participants to receive vaccines in the past. Some possible questions to choose from include the following.

**When's the last time you received a vaccine?  
What was that like for you?**

**What have you heard about why people avoid getting vaccinated?**

# Explain

Two vaccines in particular can be controversial or confusing for some people: flu vaccine and COVID-19 vaccine. Again, without engaging in a political discussion, share with participants that you want to cover some facts about these 2 vaccines. You aren't trying to pressure them or make them feel stressed. Instead, you want to share information that they can use to decide what works for them.

First is the flu vaccine. Flu, also called influenza, is a potentially serious disease that can lead to hospitalization and sometimes death. Every flu season is different, and the flu affects people in different ways. Millions of people get it every year, hundreds of thousands of them are hospitalized, and thousands to tens of thousands die from flu-related causes every year. The best way to avoid these risks is to get an annual flu shot. Let's look at some myths and facts about the flu. [Review the Flu Facts & Myths handout](#) (also at the end of this Module).

## FLU MYTHS VS. FLU FACTS

### MOST COMMON MYTHS SURROUNDING THE ANNUAL FLU VACCINE

MYTH: Vaccines are not proven to prevent the flu



FACT: You are at least 60% less likely to become infected with the influenza virus

MYTH: The flu vaccine can give me the flu



FACT: Flu viruses in flu shots are inactivated, so they cannot cause infection

MYTH: I should wait to get vaccinated so I'm covered until the end of the season



FACT: Get the vaccine as soon as possible. It takes 2 weeks for antibodies to develop

MYTH: The flu shot will protect me from every type of flu virus



FACT: The flu shot is designed yearly to protect against the highest risk/actively circulating strains of influenza

MYTH: I never get the flu. I do not need the flu shot



FACT: By getting the flu vaccine, you protect yourself and others because you are less likely to spread the flu

# Explain

The second vaccine that can be confusing is the one for COVID-19. Just like the flu, COVID is a potentially serious disease that can lead to hospitalization, disability, and death. Hundreds of thousands of people have died from COVID since it first appeared in the U.S. in early 2020. Thousands of people, including children, experience disabling symptoms for months after having COVID.

One of the best ways to avoid getting or spreading COVID is to get the vaccine. There is a lot of confusing and misleading information about the vaccine, especially on the Internet and social media. Let's review some simple facts about the vaccine and its effectiveness. Review the [COVID-19 Vaccine Facts & Myths handout](#) (also at the end of this Module).

**6 MYTHS**  
about the COVID-19 Vaccine

- MYTH** COVID-19 vaccine alters DNA  
**FACT** mRNA doesn't enter a cell's nucleus and cannot change DNA
- MYTH** It isn't safe because of quick rollout  
**FACT** Thorough safety standards and trials were met
- MYTH** Food allergy, immunocompromised, breastfeeding or pregnant people can't get the vaccine  
**FACT** These people can get the vaccine
- MYTH** I'll get COVID-19 from vaccine  
**FACT** The vaccine cannot give you the virus - it protects you
- MYTH** I've had COVID-19 so I don't need the vaccine  
**FACT** Natural immunity length is unknown - vaccine fights reinfection
- MYTH** No need for mask or social distancing after vaccine  
**FACT** You must still take precautions to help end the pandemic

In summary, like any medication, vaccines can cause some side effects. The most common are mild to moderate and only last a day or two. Even with access to good health care, the diseases that vaccines prevent can be very serious, and vaccination is the best way to avoid them. Also, keeping up with vaccines is the best way to stop spreading illnesses to other people, so we're not only protecting ourselves but others too.

## Part 2: Health Screening to Promote Immune Health

### Explain

Many of us avoid going to the doctor, especially when we're feeling well. People often dread hearing bad news from a doctor, so they put off going for as long as possible. But, the sooner we can identify problems, the better chance we have to develop an action plan. There are many risk factors that people can control, once they understand their overall health, such as quitting smoking, maintaining a healthy weight, cutting down on alcohol or drugs, and being physically active.

Guide participants to understand that one of the best ways to support overall immune health is to have an annual physical exam done by a medical provider. An annual physical helps providers know whether and how you're dealing with any medical conditions that make you more vulnerable to viruses like colds and flu. Lab tests will establish whether you need vitamins or minerals to help with your immune health. Foods and supplements that support immunity are reviewed in another module.

#### Health Screening: Recommended Screening by Age



### Evaluate

Invite participants to share their experiences with preventive care. Some questions to choose from include the following.

Have you had an annual check-up recently?

How do you feel about your current health habits, such as healthy eating or exercise?

Are you comfortable with your current medical provider? Why or why not?

# Engage

Help participants complete the [Module 2 Review](#) worksheet to reinforce important information.

Review the handouts at the end of this Module on [recommended vaccinations and preventive health screenings](#). This will alert participants as to whether they are due for any shots or screenings. Remember you're providing information that can help participants work with their medical providers to make the best decisions for themselves.

Also help participants to complete the handout recording [questions for their medical providers](#). Writing questions down helps people remember what to ask, so they get the most out of their health care visits.

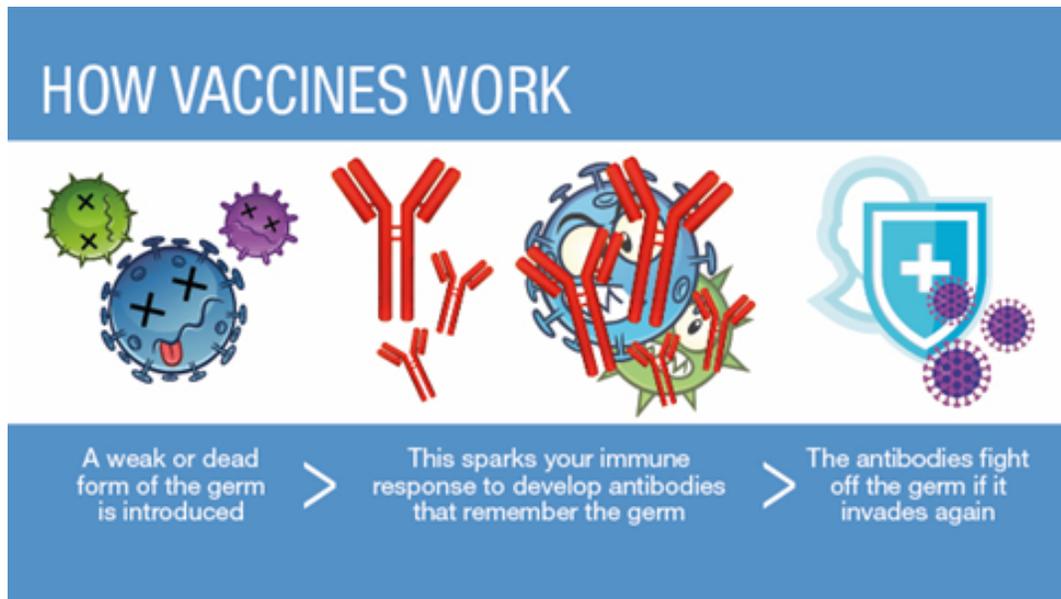
Vaccine	19–26 years	27–49 years	50–64 years	≥65 years
Influenza inactivated (IIV) or Influenza recombinant (RIV4) <b>or</b> Influenza live, attenuated (LAIV4)	1 dose annually			
Tetanus, diphtheria, pertussis (Tdap or Td)	1 dose Tdap each pregnancy; 1 dose Td/Tdap for wound management (see notes)			
Measles, mumps, rubella (MMR)	1 dose Tdap, then Td or Tdap booster every 10 years			
Varicella (VAR)	1 or 2 doses depending on indication (if born in 1957 or later)			
Zoster recombinant (RZV)	2 doses (if born in 1980 or later)		2 doses	
Human papillomavirus (HPV)	2 or 3 doses depending on age at initial vaccination or condition	27 through 45 years		
Pneumococcal conjugate (PCV13)	1 dose			1 dose
Pneumococcal polysaccharide (PPSV23)	1 or 2 doses depending on indication			1 dose
Hepatitis A (HepA)	2 or 3 doses depending on vaccine			
Hepatitis B (HepB)	2 or 3 doses depending on vaccine			
Meningococcal A, C, W, Y (MenACWY)	1 or 2 doses depending on indication, see notes for booster recommendations			
Meningococcal B (MenB)	2 or 3 doses depending on vaccine and indication, see notes for booster recommendations			
<i>Haemophilus influenzae</i> type b (Hib)	19 through 23 years	1 or 3 doses depending on indication		

# MODULE 2 HANDOUTS & WORKSHEETS



# How Vaccines Work

This is an overview of how most vaccines work.



This is how vaccines help to keep people safe.



# Understanding the flu vaccine.

## FLU MYTHS VS. FLU FACTS

### MOST COMMON MYTHS SURROUNDING THE ANNUAL FLU VACCINE

<p>MYTH: Vaccines are not proven to prevent the flu</p>		<p>FACT: You are at least 60% less likely to become infected with the influenza virus</p>
<p>MYTH: The flu vaccine can give me the flu</p>		<p>FACT: Flu viruses in flu shots are inactivated, so they cannot cause infection</p>
<p>MYTH: I should wait to get vaccinated so I'm covered until the end of the season</p>		<p>FACT: Get the vaccine as soon as possible. It takes 2 weeks for antibodies to develop</p>
<p>MYTH: The flu shot will protect me from every type of flu virus</p>		<p>FACT: The flu shot is designed yearly to protect against the highest risk/actively circulating strains of influenza</p>
<p>MYTH: I never get the flu. I do not need the flu shot</p>		<p>FACT: By getting the flu vaccine, you protect yourself and others because you are less likely to spread the flu</p>

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# Understanding the COVID-19 vaccine.

## 6 MYTHS about the COVID-19 Vaccine

 <p><b>MYTH</b> COVID-19 vaccine alters DNA</p> <p><b>FACT</b> mRNA doesn't enter a cell's nucleus and cannot change DNA</p>	 <p><b>MYTH</b> It isn't safe because of quick rollout</p> <p><b>FACT</b> Thorough safety standards and trials were met</p>	 <p><b>MYTH</b> Food allergy, immunocompromised, breastfeeding or pregnant people can't get the vaccine</p> <p><b>FACT</b> These people can get the vaccine</p>
 <p><b>MYTH</b> I'll get COVID-19 from vaccine</p> <p><b>FACT</b> The vaccine cannot give you the virus - it protects you</p>	 <p><b>MYTH</b> I've had COVID-19 so I don't need the vaccine</p> <p><b>FACT</b> Natural immunity length is unknown - vaccine fights reinfection</p>	 <p><b>MYTH</b> No need for mask or social distancing after vaccine</p> <p><b>FACT</b> You must still take precautions to help end the pandemic</p>

# Module 2 Review

Vaccines work by:

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Some benefits of vaccination are:

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Annual health screenings are important for immune health because:

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**My questions or notes**

# Recommended immunizations by age.



**Table 1** Recommended Adult Immunization Schedule by Age Group, United States, 2021

Vaccine	19–26 years	27–49 years	50–64 years	≥65 years
Influenza inactivated (IIV) or Influenza recombinant (RIV4) <b>or</b> Influenza live, attenuated (LAIV4)		1 dose annually <b>or</b> 1 dose annually		
Tetanus, diphtheria, pertussis (Tdap or Td)		1 dose Tdap each pregnancy; 1 dose Td/Tdap for wound management (see notes)		
Measles, mumps, rubella (MMR)		1 dose Tdap, then Td or Tdap booster every 10 years		
Varicella (VAR)		1 or 2 doses depending on indication (if born in 1957 or later)		
Zoster recombinant (RZV)		2 doses (if born in 1980 or later)	2 doses	
Human papillomavirus (HPV)		2 or 3 doses depending on age at initial vaccination or condition		
Pneumococcal conjugate (PCV13)		27 through 45 years		
Pneumococcal polysaccharide (PPSV23)			1 dose	1 dose
Hepatitis A (HepA)		1 or 2 doses depending on indication		
Hepatitis B (HepB)		2 or 3 doses depending on vaccine		
Meningococcal A, C, W, Y (MenACWY)		2 or 3 doses depending on vaccine		
Meningococcal B (MenB)		1 or 2 doses depending on indication, see notes for booster recommendations		
<i>Haemophilus influenzae</i> type b (Hib)		2 or 3 doses depending on vaccine and indication, see notes for booster recommendations		
		19 through 23 years		
			1 or 3 doses depending on indication	

Recommended vaccination for adults who meet age requirement, lack documentation of vaccination, or lack evidence of past infection
  Recommended vaccination for adults with an additional risk factor or another indication
  Recommended vaccination based on shared clinical decision-making
  No recommendation/Not applicable

# Health Maintenance Guidelines for Adults

## Please Note

The following guidelines apply to healthy adults in the general population. The right plan for your care may differ based on your medical history, family history, personal preferences and lifestyle, as well as your physician's experience.

You and your physician should work together to develop a specific preventive health screening plan for you.

Some tests and vaccinations may not be covered by Medicare or by your health insurance plan, so it's important to check on your specific coverage before obtaining them.

## Adult Screening Guidelines

### Breast Cancer Screening

#### Mammography

For women ages 40 and over

*Frequency – Annually*

#### Physician Breast Exam

For women ages 40 and over

*Frequency – Annually*

#### Breast Self-Exams (after instruction)

For women ages 20 and over

*Frequency – Monthly*

### Cervical Cancer Screening

#### Pap Smear/Human Papilloma Virus (HPV) Testing

For women ages 21 to 65, or starting 3 years after the onset of sexual activity

*Frequency – Annual Pap test without HPV test up to age 30; Pap test with HPV test every 3 years after age 30*

(Screening Paps are not required after hysterectomy unless surgery was performed for cancer or precancerous disease)

### Cholesterol Screening

#### Lipid Panel, including LDL

For all men and women starting at age 20, or earlier if Cardiac Risk Profile reveals high risk

*Frequency – Every 5 years, or more frequently based on results and risk profile*

### Colorectal Cancer Screening

For men and women ages 50 to 75 (in certain situations, it also may be advisable from ages 75 to 85)

#### Screening Colonoscopy

*Frequency – Every 10 years (preferred), OR*

#### High Sensitivity Stool Occult Blood Testing

*Frequency – Annual Screening, OR*

#### Flexible Sigmoidoscopy

*Frequency – Every 5 years, with high sensitivity stool occult blood testing every 3 years*

### Diabetes Screening

#### Fasting Plasma Glucose (preferred) or Random Plasma Glucose

For men and women ages 45 and over

*Frequency – Every 3 years*

CONTINUED

## Education and Counseling

### For all adults

- Smoking Cessation
- Alcohol and Drug Abuse Prevention
- Seat Belt Safety
- Safe Sex Practices
- Nutrition and Exercise
- Firearm Safety

### For women entering, during and after menopause

- Hormone Replacement Counseling
- Osteoporosis Prevention

## Adult Screening Guidelines CONTINUED

### Hypertension Screening

#### Blood Pressure Measurement

For all men and women, regardless of age

*Frequency – Every 1-2 years*

### Osteoporosis Screening

#### DXA (bone-density testing)

For women ages 65 and over, or starting at menopause if additional risk factors exist

*Frequency – Baseline testing, with follow-up interval based on test results*

### Prostate Cancer Screening

#### Digital rectal exam (DRE) and prostate specific antigen (PSA) test/discussion with physician

For men 50 and over (starting at age 40 for African-Americans)

*Frequency – Annually*

### Sexually Transmitted Disease Screening

#### Chlamydia testing

For sexually active females under age 25 or for those at risk (your physician can advise you on your risk)

*Frequency – Annually, with Pap test*

## Adult Immunization Guidelines

### Human Papilloma Virus (HPV) Vaccine (Gardasil—for Cervical Cancer)

For all females between ages 11 and 26

*Frequency – One series of 3 vaccines*

### Diphtheria/Tetanus/Pertussis Vaccine

For men and women ages 19 to 64

*Frequency – One time in place of the Diphtheria/Tetanus Booster*

### Influenza (Flu) Vaccine

For high-risk adults of any age with diabetes or heart, lung, kidney or immune disease

*Frequency – Annually*

For all adults ages 50 and over

*Frequency – Annually*

For any adult desiring immunization, regardless of age

*Frequency – Annually*

### Diphtheria/Tetanus Vaccine

For men and women up to age 65

*Frequency – Every 10 years*

For men and women 65 or over

*Frequency – Single vaccination only*

### Varicella Zoster Vaccine (for Shingles)

For adults ages 60 and older

*Frequency – Single vaccination; no revaccination required*

### Pneumococcal Vaccine (for Pneumonia)

For adults ages 65 and over who are at average risk

*Frequency – Initial vaccination; no revaccination required*

For high-risk adults of any age with diabetes, cancer, or heart, lung, or immune disease

*Frequency – Initial vaccination, with single revaccination 5 years later*

### Other vaccines that you may need:

**Hepatitis A**

**Hepatitis B**

**Meningococcal (Meningitis)**

**Handout:**  
**Getting Ready to See Your Doctor**

Preparing for a visit with your doctor or health provider can help make the most of it.

<p>Bring with you to the doctor:</p>	<p>This form Your medical history (past surgeries, diagnoses, allergies) A list of your current medications (or bring the meds with you) Any X-rays or recent test results Your insurance card/information A pencil and paper to take notes An audio recorder or supportive person to take notes</p>
<p>Example questions to open the dialogue:</p> <p>You don't have to ask all (or any) of these questions! They are examples of questions that doctors say they'd like their patients to ask when discussing a medical condition, surgery, or treatment. You may have additional or completely different questions.</p>	<p>Do I have any medical conditions? How long will they last? Do I need any other tests? What is the treatment you're recommending? Why? Are there other or alternative therapies? What over-the-counter medications would be helpful? What prescription medications would be helpful? What are the side effects? Will my present medications interfere with new medications?</p> <p>Should my diet change? Are there certain foods that I should eat or avoid? What lifestyle changes should I make?</p> <p>Should I schedule a follow-up visit? How long should I wait before seeing you again? Where can I get more information?</p>
<p>My top 3 questions for the doctor:</p> <p>Write what the doctor says on the back of this sheet. If you have lots of questions or instructions, ask your doctor if you can record your conversation.</p>	<p>1.</p> <p>2.</p> <p>3.</p>

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