

#### ALABAMA AHEC NETWORK COVID-19 TESTING RESPONSE PROGRESS TO-DATE | December 2020

During this unprecedented time in our shared history, many unanswered questions remain about COVID-19 related illnesses, testing procedures, and vaccines. In Alabama, there are large numbers of citizens—living in rural and underserved communities—who have limited access to health care, are limited in health literacy, and who may be at increased risk for serious complications related to COVID-19.

Beginning in April 2020, the Alabama AHEC Network was formed to create a coalition of community partners from across the state by providing community-based training to teams involved with COVID-19 testing in the rural and underserved communities of Alabama. In July 2020, the Alabama Statewide AHEC Program received \$757,000 in CARES Act funding to support the testing efforts of the Network.

As of December 16, 2020, 61 coordinated testing events, the Network has administered 3,651 tests with additional events planned in the coming weeks. This success should translate toward the effective implementation of vaccinations efforts within those same communities. The work completed through the Network's testing initiative, thus far, has fostered invaluable relationships and trust, and it has provided a platform for the effective implementation efforts within those same communities.

#### ABOUT THE ALABAMA AHEC NETWORK

The Alabama AHEC Network was formed to initiate an active, dynamic response to the state's ongoing COVID-19 health crisis. The Network is composed of the Alabama Statewide AHEC Program Office, its five regional AHEC Centers, the Alabama Civil Air Patrol, the UAB Infectious Disease Laboratory, Alabama Emergency Management Agency (EMA), the Alabama Department of Public Health, and instrumental community partners identified by region.

The Network works together as an intrastate coalition to identify and train community health workers, staff and organize testing events in current and potential hot spot regions, and provide education resources in medically-underserved and rural communities. With these efforts, the Network fosters connections and offers leadership as we learn about, and fight, this deadly illness.

While the statewide infection rate has declined, there are still many areas — particularly in the Black Belt region, and in the Hispanic and African American populations — where the infection numbers remain high when compared to national standards. The focus of the Alabama AHEC Network has been to concentrate new testing within these areas and populations.

## COMMUNITY HEALTH WORKER MODEL

In order to best facilitate its testing initiative in the rural and underserved communities of Alabama, the Alabama AHEC Network has utilized the Community Health Worker Model to great effect. Community Health Workers (CHWs) are trusted, knowledgeable, frontline health personnel who typically come from the communities they serve. CHWs bridge cultural and linguistic barriers, expand access to coverage and care, and improve health outcomes. As critical links between their communities and the health care system, CHWs reduce health disparities; boost health care quality, cultural competence and affordability; and empower individuals and communities for better health.

# **DEFINITION OF NEED**

The COVID-19 pandemic has proven to be a massive burden on rural Alabama. The morbidity and mortality rates associated with the disease are the most obvious manifestation, but, in addition, municipalities have lost sales tax proceeds, government services have been curtailed, a huge segment of children have lost nearly a year of education, suicides have increased, community mental health has been impacted, and unemployment has caused housing and food insecurity.

Rural and underserved communities of Alabama are at increased risk because of lack of health care access and adverse social determinants of health. Misinformation and cultural barriers have proven to be significant for testing within these populations, and become more important upon realization that Alabama is comprised of a population that is 60% rural—more than half of our population may have limited access to care.

# **TEST SITE ACTIVITIES**

The COVID-19 tests that the Network offers are self-administered, making them simple and painless. The goal is to make testing as easy and accessible as possible, to best combat testing fatigue and infection rate increase. Individuals who are tested are not required to present insurance, a driver's license, or social security information—all are welcome and testing is free, with or without symptoms. A physician referral is not required.

The Alabama AHEC Network ensures that both positive and negative results are reported to patients within 48 hours. It provides face masks, hand sanitizer, education resources the day of testing to all patients, along with medical contacts and other information needed by those identified as positive for COVID-19 upon notification.

The initiative would not be possible without UAB, which provides and evaluates the samples, and CAP, which secures and delivers the tests to and from the site for testing. Equally integral to the initiative are AHEC's local health professions partners and CHWs, who administer and ensure the viability of the tests at each site.

# **PROGRESS TOWARD COVID-19 VACCINATION PLAN**

Currently seeking funding to initiate a vaccination plan for its rural communities, the Alabama AHEC leadership team has reviewed the current Alabama Interim COVID-19 Vaccination Plan and will follow the proposed outline of engagement. The remarkable process taking place that will make those vaccines available, more quickly than any previous vaccine has been produced, presents an opportunity to not only mitigate the pandemic, but to end it. The plans to date seem effective in reaching Alabama's urban populations. However, to realize the delivery and acceptance of the vaccine within the state's rural population requires additional planning for implementation. For the 58 of 67 counties in Alabama that are considered rural (greater than 50% population), access to the vaccine will likely be limited and present increased challenges. The Network will adjust and adapt within its prescribed parameters to best address those challenges and better serve those communities where access to care is not readily available. The work completed through the Network's testing initiative thus far has fostered invaluable relationships and trust, and it has provided a platform for the effective implementation of vaccination efforts within those same communities.

Our best and only chance to overcome these unforeseen burdens is to implement a successful broad, dynamic, and uniform plan for vaccination for no less than 70% of our population, including the 2,918,034 individuals residing in Alabama's rural communities.

### COVID-19 TEST SITES Advertised on Social Media & Local/Regional Media Outlets

Pre-AHEC CARES ACT Funding*					
Date	County	City	Location	Total Tests	
May 12	Sumter	Panola	Town of Panola	25	
May 12	Sumter	Livingston	Jaycee Park	28	
May 14	Sumter	Coatopa	Bethel Pine Baptist Church	55	
May 14	Sumter	Epes	Epes City Hall	39	
May 19	Sumter	Emelle/Geiger	M&M Grocery	63	

May 19	Sumter	Gainesville	Gainesville City Hall	44
May 21	Pickens	Cuba	Kinterbish Junior High School	66
May 26	Sumter	Gainesville	Gainesville City Hall	50
May 26	Sumter	Emelle	Emelle City Hall	30
May 28	Hale	Greensboro	Hale County Health Center	135
June 3	Sumter	Cuba	Townsend Mission Community Center	51
June 9	Sumter	Cuba	Morning Star Baptist Church	47
June 10	Sumter	York	Hill Hospital	40
June 16	Sumter	Coatopa	Bethel Pine Church	60
June 18	Sumter	Whitfield	Whitfield Community Center	30
June 19	Sumter	Livingston	Sumter County Census Drive	0
June 20	Greene	Mt. Hebron	Low Road Fire Department	25
June 24	Hale	Aliceville	National Guard	110
June 26	Sumter	Gainesville	Gainesville City Hall	43
June 30	Greene	Eutaw	Eutaw Activity Center	12
	*As reported by Wes	t Central Alabama Al	HEC in partnership with the Health & Wellness Ed	ducation Center.
Post-AHEC CAR	RES ACT Funding			
June 24	Hale	Akron	Akron Fire Station	67
July 28	Shelby	Pelham	Supermarket	149
August 8	Choctaw	Pennington	Pennington Town Hall	70
August 11	Choctaw	Lisman	Lisman Town Hall	54

August 11	Shelby	Pelham	Supermarket	143
August 15	Sumter	Emelle	Emelle City Hall	43
August 17	Pickens	Pickens	Pickens County Medical Center	50
August 20	Etowah	Gadsden	Gadsden High School	129
August 26	Bullock	Union Springs	Eastside Baptist Church	44
August 27	Lowndes	Hayneville	Lowndes Co. Sheriff Office	24
September 7	Conecuh	Evergreen	Evergreen Medical Center	37
September 9	Shelby	Calera	Concord Baptist Church	15
September 21	Escambia	Brewton	1150 South BLVD	51
October 2	Butler	Georgiana	Hank William Park	25
October 5	Covington	Andalusia	Kiwanis Community Center	8
October 18	Marshall	Albertville	St. Williams Catholic Church,	35
October 27	Blount	Oneonta	St. Vincent's Blount	66
October 27	Shelby	Pelham	Community of Hope Health Clinic	18
November 2	Elmore	Eclectic	Good Hope Baptist Church	14
November 4	Calhoun	Jacksonville	Jacksonville Community Center	116
November 5	Morgan Limestone	Decatur	St. James CPCA	100
November 17	Blount	Oneonta	St. Vincent's Blount	120
November 20	Butler	Georgiana	Hank Williams Museum	60
November 21	Mobile	Bayou La Batre	St. Margaret Parish	58

November 30	Elmore	Wetumpka	Wetumpka Civic Center	51
December 5	Mobile	Mount Vernon	Belshaw Mount Vernon School	45
December 5	Sumter	Livingston	Health & Wellness Education Center	69
December 8	Walker	Cordova	Cordova First Baptist Church	65
December 9	Calhoun	Anniston	Intersection, W 11th and Grove Street	199
December 9	Shelby	Pelham	Mi Pueblo Supermarket	74
December 10	Jefferson	Birmingham	Firehouse Shelter	88
December 11	Pickens	Carrollton	Pickens Serv Center Parking Lot	48
December 12	Choctaw	Pennington	Pennington Fire Station,	
December 12	Sumter	Livingston	Health & Wellness Education Center	
December 15	Lawrence	Town Creek	Town Creek Senior Center	
December 16	Montgomery	Montgomery	Frazer United Methodist Church	