

Immunizations: Primary Prevention in Camp Hill, Alabama

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Abstract

Health People 2020 is a government funded organization by the U.S. Department of Health and Human Services that sets national health care goals. These goals are ambitious, science-based, and aimed at improving the health of the nation. The Health People 2020 goal with most regard to the topic of meningitis is the goal to, “increase immunization rates and reduce preventable infectious disease” (U.S Department of Health and Human Services [HHS], 2012). When considering a rural community such as Camp Hill, Alabama, this goal may be more difficult to attain. Rural communities unfortunately tend to face more health care disparities than urban communities. This is due to a geographic isolation, which leads to a lack of accessible health care resources. With consideration to the lack of convenient and accessible health care resources, it is of the greatest importance to implement primary prevention strategies in the community to educate the population on the importance of receiving their scheduled vaccinations. Upon the completion of data gathering activities it became evident that the large, stable church community of Camp Hill could be utilized as a platform to educate the community members of Camp Hill, Alabama on the importance of receiving vaccinations in order to ultimately prevent infectious and possibly fatal diseases. The intervention proved to be effective in expressing the need for vaccinations, however more community publicity and organizational programs may prove helpful in further educating the population on this important topic and making future interventions more effective.

Keywords: immunizations, primary prevention, and health promotion

Introduction

Healthy People 2020 is a federally funded organization of the U.S. Department of Health and Human Services that sets science-based, ambitious, yet attainable health care goals in order to improve the overall health of the nation. These goals act as guidelines for the nation and its communities to make clear the standards of health care across all walks of life. An important goal of Healthy People 2020 is to “increase immunization rates and reduce preventable infectious disease” (U.S Department of Health and Human Services [HHS], 2012). Receiving scheduled immunizations protects people from 17 vaccine-preventable diseases. These immunizations are especially important for children under the age of 2 because they are at the highest risk for infectious diseases like pneumonia, sepsis, and meningitis. This goal is a point of paramount significance due to the fact that people continue to acquire vaccine-preventable diseases. For this reason, infectious diseases remain a leading cause of illness and death in the United States. Vaccinations save 33,000 lives and prevent 14 million cases of diseases each year (HHS, 2012). With this goal, Healthy People 2020 hopes to increase the number of lives saved from the simple act of receiving vaccinations and greatly decreasing the incidence of these vaccine-preventable diseases in the United States.

Background

Camp Hill, Alabama is a small town located in Tallapoosa County consisting of 1,014 people according to the 2010 census demographic profile (U.S. Census Bureau, 2010). Tallapoosa County was created by the Alabama Legislature on December 18, 1832 and received its current dimensions in 1866. It is named for the Tallapoosa River, which means, “pulverized rock” in the Choctaw language, and the county lies almost entirely in the Piedmont plateau. The town of Camp Hill has been included in Tallapoosa County since its founding in 1832 (Alabama

Department of Archive and History, 2009). The demographic profile of Camp Hill is 43.8% males, 56.2% females, 88% African American, 10.2% Caucasian, and a small percentage of other races with a population median age of 41.8 years (“Camp Hill, Alabama,” 2012).

The main industries in Camp Hill are manufacturing, construction, and educational services. However, despite these industries there is a 9% unemployment rate with 43.4% of residents living in poverty (“Camp Hill, Alabama,” 2012). The town of Camp Hill lacks employment opportunities, which forces the majority of residents to commute at least 30 minutes to surrounding communities such as Auburn, Dadeville, and Alexander City. This lengthy commute contributes to the unemployment rate because many residents lack a reliable form of transportation and cannot afford to drive that far to work on a daily basis. There are two schools located in Camp Hill. Edward Bell High School, grades K-12, is the public school that consists of 252 students. Lyman Ward Military Academy for Boys, grades 6-12, is a private military school that consists of only 59 students. Most community members attend Edward Bell High School because it is conveniently located within town parameters. The majority of residents are only educated up to the high school diploma level, which also contributes to the 9% unemployment rate (“Camp Hill, Alabama,” 2012).

There are three main hospitals in the surrounding areas of Camp Hill, Alabama that offer emergency services. These include Lake Martin Community Hospital approximately six miles away in Dadeville, Alabama; Russell Medical Center approximately 18 miles away in Alexander City, Alabama; and East Alabama Medical Center approximately 18 miles away in Opelika, Alabama (“Camp Hill, Alabama,” 2012). This lack of convenient health care is alarming and poses a great trial for the community members of the Camp Hill community. Just as a lack of reliable transportation affects the unemployment rate, it also influences the rate at which

residents seek necessary health care services. Overall, seeking health care is possible, but the geographic isolation of the community makes it less likely that residents will go to the doctor and keep appointments as recommended.

Primary prevention is imperative in Camp Hill, Alabama. Decreasing the incidence of infectious disease can in turn decrease the need for community members to seek emergency medical attention. Receiving vaccinations are important in achieving this particular goal because of the close proximity community members' share in church, schools and the workplace settings. Another reason receiving vaccinations, especially childhood-scheduled vaccinations, are an important source of primary prevention is because 5% of the community population is under the age of 5 years old (U.S. Census Bureau, 2010). These factors could contribute to rapid disease spread to susceptible populations of those in close proximity to others and those under the age of five. It is also important in regards to the Lyman Ward Military Academy where middle school and high school age boys live together in close quarters year-round. Living in close proximities can condone unwanted spread of disease. However, vaccinations are of greatest importance due to the fact that influenza and pneumonia is the ninth leading cause of death in Tallapoosa County ranking above essential hypertension and chronic liver disease (Alabama Department of Public Health, 2010). These two diseases are extremely preventable with the simple act of receiving a vaccination. For this reason, it is crucial to educate on the importance of routine and up-to-date immunizations in order to promote health in the Camp Hill community and to prevent the possible spread of infectious diseases. The purpose of this paper is to use the Healthy People 2020 goal of increasing immunization rates and reducing preventable infectious diseases to address the health disparities present in Camp Hill and to develop recommendations for future nursing practice.

Community Assessment

Exiting off of Highway 280 and following a sign that simply reads “Camp Hill,” leads to the small town of Camp Hill, Alabama. As the highway turns into a narrow two-lane road the traveler sees a large junkyard on the right side of the road that mainly contains old cars and motorcycles. The remainder of the drive into town consists of lush, green forests with a few houses scattered throughout. Despite a few well-kept homes seen here and there, the homes in Camp Hill are mostly one story and run down. This town lacks a feel of community as a result of the absence of distinctive neighborhoods. Several homes had signs that read “Keep Out” or “Beware of Dog” in their front yard. The community has a downtown area that consists of a town hall and a few small shops. There is a police station and a library located downtown as well, but they are no longer functioning. Overall the downtown area is dilapidated with several abandoned buildings and buildings that have been torn down but never rebuilt. Rusted signs mark what seems like a once lively town center.

Despite the lack of businesses and retail in Camp Hill, the Lyman Ward Military Academy is located on the outskirts of town. The academy is a large, beautiful building stooped atop a hill and contains an auditorium as well as a gymnasium. There are many churches dispersed throughout Camp Hill with the majority of them being Baptist. The churches in the community serve as a place for worship, fellowship, and community gatherings among various groups of residents of different ages, educational backgrounds, and family lives. There are no grocery stores, restaurants, retail stores, or recreational facilities in the community, so residents mainly travel to Dadeville for food and clothing needs. There is only one operating convenience store and gas station in Camp Hill that also serves as a major hang out among the African

American men of the community. Much of the Camp Hill community is made up of pastures and green space without any demarcation of boundaries.

The absence of accessible health care facilities in Camp Hill is of major concern. Due to the distance required to travel to the nearest health care facility, community members become discouraged from making routine doctors visits and performing proper follow-up care. This indicates the need for health care providers to make information on the importance of receiving scheduled vaccinations readily available. Primary prevention measures within the actual community are key to achieving optimal health in rural communities, specifically Camp Hill. After assessment of the community, it became evident that the best place to perform primary prevention education was in a church. A church provides an appropriate setting for immunization education because of the wide range of age groups. It is a place held in high esteem filled with respected members of the community, and great amounts of people gather there on a weekly basis. Immunizations are a relevant topic to every age group, so it is important to perform educational teaching in a place that does not discriminate admittance based on age. By focusing on educating the community as a whole, its members can become aware of Healthy People 2020 goals, most specifically the goal focused on the importance of receiving vaccinations at their scheduled times.

Interpretation

The gaps in Camp Hill's health care system must be addressed so that the members of the community become aware of the positive effects of scheduled immunizations on their overall health status. The town of Camp Hill exhibits many strengths and weaknesses relative to addressing the Healthy People 2020 objective of increasing immunization rates and reducing preventable infectious disease in the population. A marked weakness of the community, as

previously stated, is the geographic isolation of Camp Hill and the long distance residents must travel to visit a health care provider. This issue is further heightened by the fact that many of the Camp Hill residents do not own vehicles and must rely on neighbors or family members to meet their transportation needs. The lack of transportation means contributes to the low number of people who are up-to-date on their immunizations therefore placing them at a higher risk of contracting an infectious disease. On the other hand, a great strength of Camp Hill in addressing this objective is the strong bond between the community members. The people of the community are always willing to extend a helping hand to a friend or neighbor in need, which includes providing them with transportation when necessary. Although utilizing the strong relationships in the community and the willingness of its members to help others is important, there is still a great need for a more reliable and consistent form of transportation to get community members to the nearest health care facilities. Through education and primary prevention, empowerment of community leaders toward health promotion may become a growing trend. Therefore, in an effort to promote an increase in scheduled immunizations and a decrease in infectious disease, educators and health care providers should focus on Camp Hill's population as a whole rather than individually in order to create a more health conscious community.

Community-oriented Nursing Diagnoses

After extensive assessment of the town of Camp Hill, Alabama three important community-oriented nursing diagnoses were identified. These community-oriented nursing diagnoses are pertinent to nursing practice in this community and key to improving the overall health status of the community members of Camp Hill. The first recognized nursing diagnosis is the heightened risk for infectious disease among Camp Hill community members related to the lack of scheduled, routine vaccinations due to a knowledge deficit about the importance of

immunizations. This is an issue that must be addressed in order to maintain and protect the health of this small community and its members. The community members of Camp Hill must have access to informational resources that can educate them on the serious health consequences that may arise from not receiving vaccinations.

The second nursing diagnosis acknowledged is the risk for isolation among the community members of Camp Hill related to the lack of recreational community resources, an insufficient governmental structure, and inadequate and unreliable forms of transportation in the community. While this diagnosis is mainly a social issue, it also has major implications related to accessing health care on a regular basis and maintaining the overall health of the Camp Hill community members.

The final identified community-oriented nursing diagnosis is the risk for inadequate nutritional intake among Camp Hill community members related to the absence of food stores and restaurants that provide healthy food options. Inadequate nutrition has severe consequences to the community members of Camp Hill. Most importantly vitamin and mineral deficits contribute to a compromised immune system, which greatly facilitate infectious disease spread. Other health implications that arise from inadequate nutrition are obesity or being under weight. It was noted during the community assessment that many of the citizens encountered were overweight or obese. This finding is related to the lack of convenient and affordable healthy food options within the community. It is crucial that all three of these community-oriented nursing diagnoses are addressed in order to protect the community members of Camp Hill from vaccine-preventable diseases and to improve their waning health status.

Intervention

Program Development

As previously stated, influenza and pneumonia is the ninth leading cause of death in Tallapoosa County. In light of this fact, interventions focused on primary prevention education about the importance of receiving scheduled vaccinations are crucial. Educating the Camp Hill population about vaccinations can increase the rate of people who choose to vaccinate themselves and consequently decrease rates of preventable infectious diseases and ultimately death. Current literature states that faith and community based hands-on approaches show incredible promise for engaging racial minorities to positively alter health outcomes (Yeary et al., 2011). For this reason, an immunization education intervention program was developed for a popular church community in Camp Hill. The intervention was held at the New Canaan Missionary Baptist Church, which is a predominantly African America church. This church was chosen because of the many social, organizational, and religious functions that are held there that provide opportunities to perform education to promote the health of the community.

The New Canaan Missionary Baptist Church was chosen based on research suggesting, “churches and other faith-based organizations are increasingly popular settings in which to conduct health promotion programs” (Baruth, Wilcox, Laken, Bopp, & Saunders, 2008). This research is especially pertinent to African American churches that include the health of its members as part of their mission statements. Interventions of this nature also have the potential to reduce prominent health disparities among minorities and people who live in rural communities (Baruth et al., 2008). Another reason that churches are superior choices to perform primary prevention education is because of the effectiveness that can come from a partnership with church pastors. Cowart et al. (2010) states that “winning support from pastors is key: they can inspire trust in a health program and serve as role models for healthier habits.” Pastors are trusted role models throughout communities so it is important to obtain their full support in any

health promotion programs being implemented in the community setting in order to ensure their success (Coward et al., 2010).

There were several program learner objectives for the immunization education program held at the New Canaan Missionary Baptist Church. The learner objectives concentrated on information from the Healthy People 2020 website sponsored by the U.S. Department of Health and Human Services. Although life expectancy has increased in the 20th century due to vaccinations, infectious disease is still one of the leading causes of illness and death in the United States (HHS, 2012). These infectious diseases greatly affect the citizens of Tallapoosa County as evidenced by the fact the influenza and pneumonia are among the leading causes of death. There are 17 diseases that can be prevented by scheduled vaccinations across the lifespan. This makes vaccinations one of the most cost-effective clinical preventive services that reduce direct health care costs by \$9.9 billion (HHS, 2012). Communities that contain sectors of unvaccinated or under-vaccinated populations are at an increased risk for outbreaks and spread of infectious diseases, which can lead to vast amounts of sick individuals and avoidable hospital visits. It is also important to emphasize that vaccinating adults and children is a safe practice and that the benefits of receiving immunizations for the health of individuals and the community greatly outweigh any risks (HHS, 2012).

Implementation

Although Camp Hill, Alabama is small community consisting of 1,014 residents, there is an abundance of churches, which illustrates the importance placed on religion amongst community members. According to key informants, a popular place of worship in Camp Hill is the New Canaan Missionary Baptist Church. The church is located somewhat on the outskirts of town, however it attracts a large congregation filled with people of all ages, occupations, and

family backgrounds. This population was important to the intervention because immunizations are relevant to people of all age groups. It is just as crucial for an elderly woman to get vaccinated as it is for a young child to get vaccinated. This church provided the perfect platform to present important educational points to further the community's knowledge of the importance of receiving vaccinations as scheduled.

The immunization education intervention was delivered during a time that conveniently accommodated the church members' schedules. Our key community informant and the church pastor agreed that during the church service would be the most effective time to execute our presentation. This provided an environment extremely conducive to learning because the church members were already engaged in the service and it did not require the members going out of their way to hear the presentation. Also, the church service was chosen because it is a time of fellowship that includes all members of the church. For this reason, the church is considered the accessible population in comparison to the target population of Camp Hill community members.

It was decided that visual aids and informational handouts would be the most effective method to deliver information in an interesting, engaging, and creative fashion. The handouts provided the church members with fast facts regarding immunizations from the Centers for Disease Control and Prevention and provided them with a schedule for when they should receive specific immunizations. The poster served as an outline to the presentation and highlighted the learner objects that were crucial to convey to the Camp Hill community members. Following the intervention presentation, the poster was hung up and the excess handouts were left for church members to pick up at their convenience. The handouts were of utmost importance due to the fact that the church members could take them home and use them as reminders to receive scheduled immunizations. The handouts also acted as a source to condone the spread of

information to other members of the Camp Hill community who do not attend New Canaan Missionary Baptist Church. After the service, one-on-one counseling and education was offered to church members who had further questions regarding the information presented during the church service. Church members were also encouraged to follow up with either the Tallapoosa County Health Department or their primary physicians to assess personalized immunization schedule and receive appropriate vaccinations.

Evaluation

The intervention process was evaluated by the recipients understanding of the information presented. The church members' learning was assessed using a pre-test/post-test evaluation method. The tests consisted of four questions that were the same on the pre-test as on the post-test. The pre-test was distributed and collected before the beginning of the presentation to evaluate the congregation's current knowledge of immunizations. The post-test was distributed and collected directly following the completion of the presentation in order to assess the congregation's knowledge following the educational presentation. The results revealed a major improvement in knowledge regarding immunizations following the presentation, with almost 100% of church members answering all of the post-test questions correctly. These results illustrated the church members' willingness to actively engage in the presentation and the effectiveness of the presentation's structure. Positive feedback was received from the church members demonstrated by their enhanced interest in the intervention topic. Several members showed great appreciation for the information provided and even sought additional education from the nursing students to clarify the handout information and provide referrals.

As the intervention was developed, knowledge about the health disparities of small, rural communities was greatly expanded. It was quickly realized that some towns lack the privileges

of having hospitals or clinics within an easily accessible distance. Most towns, in fact, do not have the convenience of a local hospital. This highlighted the importance of primary prevention interventions within these smaller, more rural towns. Greater educator confidence was attained as a result of the knowledge gained throughout the intervention development. This led to a firm grasp on the best methods to delivering an effective presentation that would successfully educate the Camp Hill community members.

Although the intervention proved to be effective in informing the church community members on the importance of immunizations, there are definitely suggestions for improvement in future programs. First, the evaluation of the church members knowledge may have better been assessed if the questions in the pre-test and post-test had covered a wider variety of questions at different educational levels. This would have revealed a more accurate account of the specific information the church members learned during the intervention. Something else that could improve future programs is developing a relationship with the members of the church community before performing the intervention. Fostering a relationship would encourage trust and confidence with the church members. This would make them more apt to respect professional opinion and consider modifying their lifestyle choices to improve community health.

Conclusion

Primary prevention educational interventions are crucial to provide accurate health information and promote wellness throughout the community of Camp Hill, Alabama. However, follow-up interventions are important to creating permanent health status improvements. Along with further education on the importance of immunizations, these interventions could include educational programs on methods to prevent the spread of disease. Disease spread interventions

could focus on things like hand washing and covering mouths when sneezing or coughing. Other essential interventions would be teaching programs on proper nutrition and facilitating more areas that provide opportunities for physical activity. Good nutrition and physical health can promote healthier immune systems, which would ultimately further decrease rates of disease spread. All of these primary prevention interventions focus on increasing immunization rates and decreasing infectious disease. By receiving scheduled immunizations, many incidences of infectious diseases are eliminated before they have the chance to develop. Therefore, primary prevention activities in areas of difficult accessibility to health care is the initial step in promoting overall health in the United States.

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Appendix A: Data Gathering Community Statistics

| Category | Describe community characteristics | Website or other resource |
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| Overview of community | <ul style="list-style-type: none"> • History, type (urban, suburban, rural) <ul style="list-style-type: none"> ○ Rural • Description (location, topography, size) <ul style="list-style-type: none"> ○ Tallapoosa County ○ Part of Alex City micropolitan statistical area • Leading industries, occupations <ul style="list-style-type: none"> ○ Male leading occupations are production occupations and textile, apparel, and furnishing workers ○ Female leading occupations are textile, apparel, and furnishing workers. | http://www.city-data.com/city/Camp-Hill-Alabama.html#ixzz1veQezco8 |
| Population profile | <ul style="list-style-type: none"> • Total population <ul style="list-style-type: none"> • 1,014 • Age distribution, median age <ul style="list-style-type: none"> • 41.8 years • Sex distribution <ul style="list-style-type: none"> • 43.8% males • 56.2% female • Race/Ethnic composition <ul style="list-style-type: none"> • 10.2% white • 88.4% black • 0.1% American Indian • 0.1% Asian • Income; Educational level <ul style="list-style-type: none"> • \$17,332 | http://factfinder2.census.gov/faces/tableservices/jsf/pages/productview.xhtml?pid=DEC_10_DP_DPD P1&prodType=table http://www.city-data.com/city/Camp-Hill-Alabama.html#ixzz1veMHmnL3 http://www.city-data.com/city/Camp-Hill-Alabama.html#ixzz1veMHmnL3 |
| Health indicators | <ul style="list-style-type: none"> • Leading cause of death (<i>overall and in your target population</i>) | http://healthypeople.gov/2020/LHI/micHealth.aspx?tab=determinants |

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| | <ul style="list-style-type: none"> ○ Cancer ○ 300/1600 deaths were due to cancer • Leading causes of morbidity (incidence & prevalence rates) • Healthy People 2020 objective– <i>is there information to compare your community to the goal?</i> <ul style="list-style-type: none"> ○ Scheduled immunizations can protect infants and children from 14 vaccine-preventable diseases, including chickenpox, measles, and mumps. Scheduled immunizations are especially important for children age 2 and younger, who are at the highest risk for infectious diseases like pneumonia, sepsis, and meningitis. | <p>http://www.epodunk.com/cgi-bin/genInfo.php?locIndex=261752</p> |
| <p>Community Health Facilities & Resources</p> | <ul style="list-style-type: none"> • Health systems-acute care and emergency services <ul style="list-style-type: none"> ○ Lake Martin Community Hospital is the closest hospital. ○ Russell Hospital and EAMC are next closest • Home health, long-term, rehabilitation, hospice, mental health, etc. <ul style="list-style-type: none"> ○ Some branches service this town but none are based in Camp Hill. • Ambulatory, outpatient | <p>http://www.city-data.com/city/Camp-Hill-Alabama.html#ixzz1veMHmnL3</p> <p>http://www.city-data.com/city/Camp-Hill-Alabama.html#ixzz1veMHmnL3</p> |

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| | <p>services</p> <ul style="list-style-type: none"> ○ None • Public health and social services <ul style="list-style-type: none"> ○ None • Special health or volunteer services related to your target population or HP 2020 objective. <ul style="list-style-type: none"> ○ None | |
| <p>Other information related to your target population and HP 2020 objective?</p> | | |

Appendix B—Data Gathering: Windshield Survey

| Element | Description | Summary of findings |
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| Housing | Age of homes? General condition? Signs of despair? Air conditioning evident? | The homes looked to be fairly new, built within the last 50 to 75 years. There appeared to be two types of homes: two-story well kept homes with a front porch, hanging plants, and rocking chairs and one-story homes that were run down with broken down cars parked out front. All yards seemed to be green, well kept & well groomed. The newer homes we assumed had air conditioning units inside the house or outback while few of the more run down homes had window units. |
| Open space/Boundaries | Green space? Parks? Public or private open space? Are the boundaries natural or physical? Neighborhood identity? | Lots of green grass, trees, and plants were seen. One larger green area/park with big trees and small hills was located on the outskirts of town. The boundaries were natural with tree lines and bushes or just left wide open. There were a few fences used to block places off, but it was hard to identify specific neighborhoods. The houses seemed to be dispersed throughout the area with few nicer homes mixed in with several run down homes and vice versa. |
| “Commons” | Where do people “hang out”? Welcoming to visitors or territorial? | At two different gas stations there were several African American men hanging out, smoking, and talking while sitting in old chairs just watching the traffic pass by. One man waved as we drove by, but we didn’t see too many friendly people out. The area was quiet and for us being visitors we weren’t quite sure where we were located most of the drive. There were few signs |

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| | | and if there were signs they were old and rusted, run down and hanging by a thread. |
| Transportation | How do people get around? Walk or car or public transportation? Is there a major highway | We noticed several folks walking on the side of the road and several others driving through town in cars that were beat up pick up trucks and a few nicer 4-door sedans. The school bus takes children to school. Highway 50 is the main road we came in on after we got off 280, but other than that there were no big highways into town. It was just small roads and streets. |
| Service Centers | Do you see social agencies, recreation centers, or signs of activity around schools? | We drove by an outdoor amphitheater, an old auditorium, and saw a "Sweet Snack Bar" on a corner that was closed. The school had a gym attached to it |
| Stores | Where do people shop? Shopping centers? Neighborhood stores? How do they get there? | We noticed one shop with clothes hanging outside the front door and front window. We drove by Sam's Quick Shop market attached to a gas station, but it seemed to have basic store needs available. Most people drive to these locations while some walk if living close to the center of town. A one-room public library was located in the middle of town. |
| Street people | Who do you see on the street? Do you see anyone you wouldn't expect? Along with people, are there any animals? Are dogs on leashes? Any stray cats or other animals? | African Americans mostly were seen walking around/hanging out talking with friends. We drove by a Caucasian family outside their home in the yard. No one seemed suspicious. We saw one lady sitting on her front porch enjoying a beer. Most people seen were out in their front yard or at a gas station hanging out. There were no domestic animals seen, trained or stray. |
| Race/ethnicity | Which races are represented? Is the | African Americans mostly were |

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| | area integrated? Are there evidences of ethnicity – food stores, churches, private schools? | seen on our drive through town. A few Caucasians, but they were integrated. The Caucasian family was outside their home, while an African American woman was just next door sweeping her porch. The all boy Lyman Ward Military Academy is the only private school located here. |
| Religion | Is there evidence of heterogeneity or homogeneity based on the churches? | Multiple churches were seen in all different denominations. Several Baptist churches, one universalist church, and an old run down Methodist church were among these churches. It appeared that Baptist churches were the most attended churches in this area. Many signs were seen around town and at town hall for revivals and church gatherings going on in the area. |
| Health & morbidity | Any evidence of acute or chronic illness? How far to nearest hospital or clinic? | No evidence of acute or chronic illnesses was seen from our windshield survey. The nearest hospital is Lake Martin Community Hospital about 6 miles away and then Russell Medical Center and EAMC are both 18 miles away. |
| Politics | Any political campaign posters/signs? Any evidence of predominant party affiliation? | No political signs were seen on the drive through and no party specificity was noticed. |
| Media | Any outdoor television antennas or satellite dishes? Is there a local newspaper? | There didn't appear to be any satellite dishes seen at any of the homes and no local newspaper was found. |

Appendix C—Data Gathering: Interview

Key Informant: Camp Hill Town Hall Clerk (1), Alacare Home Health Nurse (2)

| Potential Questions | Summary of answers |
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| What is your role in the community? | <ol style="list-style-type: none"> 1. Clerk at the Town Hall 2. Alacare Home Health Nurse who cares for and manages the care of patients in Camp Hill |
| What do you believe are some strengths of the community? | <ol style="list-style-type: none"> 1. Community involvement is a strength because it's a small community where everyone pitches in to help one another. 2. The physicians that serve this community are from Dadeville. They are very hands-on and always available to answer calls and provide assistance. |
| Are there areas of improvements in the community? | <ol style="list-style-type: none"> 1. Improving the towns cleanliness & the need to spend money to clean up town is the town goal of the year. 2. The community needs more resources like meals-on-wheels and transportation for patients to doctor's appointments. |
| What are the major concerns of community members? | <ol style="list-style-type: none"> 1. Health wise, she stated that a lot of people don't have insurance. There are a lot of people who have strokes and diseases like cancer, and there is not enough health care. 2. Overall compliance is a huge issue with these patients. They don't know the importance of doing what's |

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| | ordered. |
| Do you believe there is adequate access to health care? | <ol style="list-style-type: none"> 1. Yes, there is adequate access but there is not enough cars. People must depend on others to take them around. 2. Yes. |
| Specific to... <i>(your target population)</i> ...are there any special concerns related to health? | <ol style="list-style-type: none"> 1. Immunizations in the population seem to be “under control.” 2. Most of her patients in Camp Hill get flu and pneumonia vaccines; few get meningitis vaccinations. |
| We are focusing on the HP 2020 goal of... <i>(identify your specific HP 2020 goal of interest)</i> . What are some community barriers and facilitators to reaching this goal in this community? | <ol style="list-style-type: none"> 1. A lot of communication has to be done via word of mouth. 2. Not really any in the department of vaccinations. Most doctors and pharmacies are good on ensuring this. |
| Is there anything else you would like to add related to the community and health? | <ol style="list-style-type: none"> 1. The nearest hospital is in Dadeville, and this is the closest place for emergencies. Opelika and Birmingham are the next closest hospitals utilized for more serious conditions. 2. It’s a great community, but they need help in realizing available resources, the importance of taking their medications, and attending follow-up appointments. They don’t realize the importance of maintaining their health. |