

Philadelphia residents wait in line to be tested by the Black Doctors COVID-19 Consortium.



ALUM ALA STANFORD TAKES COVID-19 TESTING TO THE PEOPLE | BY RACHEL MENNIES
PHOTOGRAPHY | BLACK DOCTORS COVID-19 CONSORTIUM

MOVING MOUNTAINS

"Hello, beautiful! How are you this morning? I see you've put my little office in the corner." I hear Ala Stanford (Res '04) say this to someone I can't see while I have her on a cell call.



Stanford

Stanford has just arrived at the Mt. Zion United Methodist Church in Darby, Pennsylvania—roughly five miles southwest of downtown Philadelphia. This morning, the staff of the Black Doctors COVID-19 Consortium has already begun to set up their mobile testing site in the church's parking lot. Stanford has fit in this remote interview with me while the team prepares for the day's first patients, some of whom are already present and waiting.

"When we show up," Stanford says, "we build a triage unit. We've got all our supplies and PPE, we've got our computers, our printers, our surge protectors, our shredder, everything… We'll go anywhere where folks ask us to come out and where there's a need."

Since March, Stanford has run pop-up COVID-19 testing sites like this one as the consortium's founder and lead physician. Stanford—probably the first Black woman graduate of UPMC's general surgery residency—established the consortium in March in response to the already disproportionate rate that Black Philadelphians had fallen ill and died from COVID-19. According to the city's public health department, Black residents are more likely to die or become infected or hospitalized for COVID-19 than any other racial group in the city. In Philadelphia in May 2020, Black patients were dying of coronavirus at a rate of 4.1 for every 10,000 people—more than 30% higher than the death rate among white patients.

After the first reports came out revealing the discrepancy, Stanford says, "I reached out to the city health department and my state senators and others… only to learn that there was no concerted effort to reduce the spread, [not] at the state, federal or city level."

Stanford—born and raised in Philadelphia—was getting call after call from local Black residents unable to receive needed testing. The kinds of reasons hospitals turned them away: "Because they didn't have a prescription," she notes. "Or because they took a bus, and they weren't in a car for drive-up testing." This served as Stanford's call to action, and the consortium was born. From March to November, consortium providers tested 14,000 people for COVID-19, more than 90% of whom are Black and most of whom are located in the Philadelphia area.

The consortium chooses testing sites that are familiar and easy for residents to access—most commonly church parking lots, but also those near public transit hubs and local schools. Stanford's team relies on social media, particularly Instagram and TikTok (dancing breaks out often), to spread the word about its testing locations. Stanford stresses the importance of meeting her patients "where they are."

By September, the health department reported that rates of infection, hospitalization and deaths had diminished dramatically for Black Philadelphians. Yet a November surge brought a rise in hospitalizations, again at disproportionate rates for Black residents.

This is Stanford's step toward countering the racist legacy that's embedded in the American health care system. She draws a straight line from "the 1800s, when surgical procedures were being performed on Black women without their consent and without anesthesia… to the 1900s, when you have Tuskegee, and you have Holmesburg Prison" to "the present-day coronavirus" and its outsized effect on Black patients.

"I think the sooner as health care professionals we acknowledge that [history] and take ownership of the fact that this is what we're dealing with, the better health care outcomes will be."

By deliberately naming her organization the Black Doctors COVID-19 Consortium, by centering the name in their logo and on shirts they often wear to testing sites, Stanford hopes to address any possible reticence to seek testing. "I wanted people," she says, "to feel some level of comfort [seeking care], just based on who was there, who was testing them and who was going to talk to them about their medical history." The consortium now numbers roughly 50 providers.

The consortium's website and Instagram account both regularly feature photos of people being tested, helping to demystify the process. Stanford's team now offers both adult and pediatric flu immunizations as well. Stanford received hers live on camera; she and Philadelphia's health commissioner, Thomas Farley, administered each other's shots.

Stanford, a pediatric surgeon, owns and operates Stanford Pediatric Surgery in Jenkintown, Pennsylvania, a Philadelphia suburb; she's also the founder of R.E.A.L. Concierge Medicine, which provides a boutique array of offerings for higher-profile patients. For now, though, Stanford is testing, testing, testing. Because of COVID-19-related elective surgery restrictions, she's on temporary hiatus from the pediatric OR. She's navigating 2020's "new normal" alongside her three sons, who've all begun the school year virtually.

"My testing times will often start at 10 a.m. during the week—and that's on purpose," Stanford says. That way, she notes, "I can make sure my kids are settled, that we've worked out any glitches with the computer system, that they've had breakfast, that they've seen me. And then I have the babysitter come in and be with them. I usually finish up [on site] around 3 or 4 p.m., and I come home, I decontaminate, and we talk about our day." In this truly unprecedented year, she says, "I try to get us as normal as I can."

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Timothy Billiar, chair of Pitt's department of surgery, says Stanford is a "trailblazer."

Stanford credits her time at Pitt as key to her growth and success. "The resources I had to really do my best were right there," she recalls.

Still, there were difficulties breaking a path at a storied institution. "[People] were used to Black women cleaning rooms," she says, "emptying trash cans, maybe being your nurse—but not being your surgeon. And that was tough." Billiar recalls Stanford as a driven, committed resident even as she contended with these obstacles: "She taught many of us to think differently about what it means to be a surgeon."

Stanford sees a future for American medicine that addresses medical racism head on: one that must carry with it the hard lessons learned from COVID-19's unequal spread. "Folks need access," she says, "they need empathy, and they need action; and once you see something needs to be changed, you need to change it; and you have to acknowledge that we all have implicit biases. Every single one of us. Know what yours is, and then make a conscious effort, every single day, to change it—and first do no harm." ■









Stanford's team chooses sites that are easy for locals to access.

After getting their consent, the consortium takes photos of people getting tested and posts them on its website, so people know what to expect.







LEFT: Stanford's team at a church testing site. ABOVE: Consortium volunteers have tested more than 14,000 people. They've also administered flu shots.