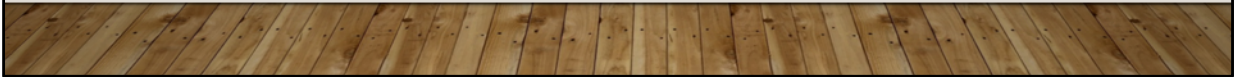


# 09.16.21 TOWN HALL

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PROVOST DALTON AND DR. FRIEND

FACILITATED BY CHAPMAN GREER



## FORMAT

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Dr. Greer will pose questions to the panel.

All participants can send chat questions or comments to the panelists. These will not be answered in real time, but will be captured for follow-up.

The PowerPoint can be found on the Faculty Senate website. All the questions used to derive the questions discussed here can be found in the notes section of the respective question slide.

The session is being recorded and the recording and PowerPoint will be posted to the Faculty Senate website by Monday 9.20.21

**IMMUNITY CONFERRED BY HAVING HAD COVID:**

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**Can you please address documented prior infection with Covid-19 and natural immunity as protection from disease?**

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## **BOOSTERS**

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**Will UA offer the booster shots when they become available?**

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## VACCINES

**Given similar policies around the country, could you address the possibility of a vaccine mandate or mandatory weekly COVID tests at UA?**

1) If vaccination is key to defeating this pandemic, now that the Pfizer vaccine has received full FDA approval, does the university plan to require its community (students, faculty and staff) to get vaccinated?  
If not, why?

I understand that politicians have exploited divisions among people based on vaccine misinformation. But should the university not take leadership on the issue and do what is right from a health standpoint, at least within the university?

2) 1000 colleges and universities across the nation are requesting mandatory vaccinations to be on campus or weekly covid tests.

Could we approach something like that?

3) Will there be any mandatory COVID-19 testing for unvaccinated persons? For example, **weekly** testing for students and/or faculty who are unvaccinated?

## GOING FORWARD

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**Under what (if any) circumstances will UA consider more stringent COVID mitigation efforts (e.g., vaccine mandates on campus, sentinel testing, masking at football games, switch to virtual, etc.)?**

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## MASKS

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**There are advocates for removing the mask mandate, advocates for extending the mask mandate, and advocates for expanding the mask mandate. Would you address the University's thoughts on the mask mandate and its future?**

- 1) "My own sense is that it makes sense to have masking while cases are high but once Delta subsides to a certain point (and I don't know exactly where that point is), it would make sense to lift the mandate. I have two thoughts regarding this. One is that, if Covid becomes endemic, we will be dealing with it on an ongoing basis. Thus, it seems like a good idea to return to normal when conditions allow. If conditions worsen again (perhaps due to a late fall surge), then masking can be re-imposed. If we wait for Covid to be totally gone, then masking will effectively be with us forever, which does not seem tenable. The second thought is that if we do not have a relaxation when conditions improve, then compliance may deteriorate. But if everyone sees that the rules are responsive to the situation (masks when cases high, no masks when cases low), I think there is a better chance to maintain compliance when it is really needed. My view is informed by the belief that the vaccine is very good at preventing serious illness, and a desire to take advantage of that. I realize that opinions on this issue will differ quite a bit."
- 2) "What is the specific objective of the current campus mask rule and how will campus leaders determine if the objective is being/has been met?"

- 3) "My own sense is that it makes sense to have masking while cases are high but once Delta subsides to a certain point (and I don't know exactly where that point is), it would make sense to lift the mandate. I have two thoughts regarding this. One is that, if Covid becomes endemic, we will be dealing with it on an ongoing basis. Thus, it seems like a good idea to return to normal when conditions allow. If conditions worsen again (perhaps due to a late fall surge), then masking can be re-imposed. If we wait for Covid to be totally gone, then masking will effectively be with us forever, which does not seem tenable. The second thought is that if we do not have a relaxation when conditions improve, then compliance may deteriorate. But if everyone sees that the rules are responsive to the situation (masks when cases high, no masks when cases low), there is a better chance to maintain compliance when it is really needed. My view is informed by the belief that the vaccine is very good at preventing serious illness, and a desire to take advantage of that. I realize that opinions on this issue will differ quite a bit."
- 4) "What is the specific objective of the current campus mask rule and how will campus leaders determine if the objective is being/has been met?"
- 5) "Please, can UA require masks indoors *everywhere*, including the gym, *and even while people are actively exercising*? I really enjoyed working out at the rec in the summer, as I know many other faculty and staff members did, as well (when it was less crowded). The current situation at the gym is particularly unsafe and affects us all, even if we stay away from the actual facility, given the potential for spread."
- 6) "Will the University extend the mask mandate for the rest of the semester to give the faculty confidence in the continuation of this level of protection."
- 7) "I teach a large-enrollment sophomore level class; my wife, who is faculty at UA as well, also teaches three large enrollment classes at the freshman level; together we are exposed to hundreds of students every week. Although we are vaccinated of course, I wonder if you could convey to Dr. Dalton our strong desire to see the **mask mandate extended through the end of the semester**. In addition to peace of mind for me, my family, and my colleagues, some of whom are at risk themselves or have family at risk, this would ensure that UA does its part to protect our community and keep the rate of spread as low as possible at a time when health care resources are stretched beyond their limit in our state and throughout the South."
- 8) As our faculty representative, I would like you to push Dalton and Friend to continue the mask mandate on campus. Also, please ask them under what, if any circumstances, will UA consider more stringent COVID mitigation efforts (e.g. vaccine mandates on campus, sentinel testing, masking at football games, switch to virtual, etc.)



- 9) “We have a mask mandate, which is great and I think we all appreciate the University taking that step (thank you!). But, 18 months of data have shown us that masks vary widely in efficacy. Some - like mesh masks and gators - don't really do much at all. Especially in the absence of any other preventative measures such as vaccine mandates, it would be great if we could include in the mask mandate a requirement that the masks be reasonably efficacious (e.g., surgical masks or similar). They're easy to find these days as well as cheap so it would seem a reasonable specification given that we recognize masking is an important preventative measure.”

## MASK COMPLIANCE

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**Could you address UA Policy on Mask Compliance?**

- 1) A general comment (not necessarily an ask of the University more broadly): I would ask that we all be more respectful of our colleagues (many of whom are immunocompromised, have immunocompromised family members, and/or have young children under 12 who cannot be vaccinated, etc.) in being cognizant of our (proper) masking. I not infrequently see faculty/staff/etc. without masks when talking closely with others, or improperly wearing masks in faculty meetings etc. In one case I even saw a faculty member unmasked while talking to a masked student in their office. There are inherent power dynamics in these cases (student-to-faculty, junior faculty-to-senior faculty, etc.) that make it difficult for the lower-status person to feel comfortable asking someone in a higher status position to mask up, especially when that someone has a specific position of power over them (e.g., their professor, future P&T committee member, etc.). I don't know that there is anything that the University broadly can do regarding this (bar the prior note about mandating efficacious masks), but if we could all be cognizant of masking appropriately - particularly in non-optional meetings and those with power distance issues - I think it would be appreciated.

- 2) "While I have not had anyone who openly rejects wearing a mask, I do have some students that I have to warn several times throughout every class to pull up their masks (which they do after being warned). Is there a university policy for noncompliance in this form?"
- 3) "What more can administration do to encourage (enforce) mask-wearing in the halls? The students waiting for classes routinely aren't wearing masks. Also, I see students streaming out of the building after class without masks."

## **INDIVIDUAL CLASSROOM POLICY IN THE EVENT THE MASK MANDATE IS LIFTED**

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**In the event the mask mandate is lifted, will faculty still be allowed to require masks in their own classes?**

1) "My own sense is that it makes sense to have masking while cases are high but once Delta subsides to a certain point (and I don't know exactly where that point is), it would make sense to lift the mandate. I have two thoughts regarding this. One is that, if Covid becomes endemic, we will be dealing with it on an ongoing basis. Thus, it seems like a good idea to return to normal when conditions allow. If conditions worsen again (perhaps due to a late fall surge), then masking can be re-imposed. If we wait for Covid to be totally gone, then masking will effectively be with us forever, which does not seem tenable. The second thought is that if we do not have a relaxation when conditions improve, then compliance may deteriorate. But if everyone sees that the rules are responsive to the situation (masks when cases high, no masks when cases low), I think there is a better chance to maintain compliance when it is really needed. My view is informed by the belief that the vaccine is very good at preventing serious illness, and a desire to take advantage of that. I realize that opinions on this issue will differ quite a bit."

2) "What is the specific objective of the current campus mask rule and how will campus leaders determine if the objective is being/has been met?"

## UNIVERSITY MEETINGS

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**What policies exist around non-classroom meetings?**

1) Have you issued an expectation/requirement that all faculty meetings within Colleges and across campus be held face-to-face this year? If so, please share the rationale for this expectation.

## **DCH NUMBERS**

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**What are the numbers for UA Faculty / Staff /  
and students who've been hospitalized at DCH?**

1) How many a) students b) faculty c) staff have been hospitalized (at DCH or elsewhere) since the start of the semester? I believe UAPD should have at least some of these figures as they have been involved in arranging transportation for students.

## THE DASHBOARD

# How are Dashboard numbers collected, calculated, and reported?

- 1) What could be done to increase faculty trust in covid reporting?
- 2) What could be explaining the low number of cases at the university?
- 3) Since students outnumber UA employees by 5:1, the number of student vs faculty / staff infections reported by the UA System dashboard each week suggests a dramatic under-reporting on the part of students (e.g., they're going off-campus for testing, not calling the COVID hotline, perhaps not following protocols, etc.). So how does UA interpret what seems to be a pretty dramatic discrepancy in infection rates among these two populations and if it's an under-reporting problem among students then how will UA address this?
- 4) Given that so many students are testing off campus and not reporting to UA their COVID positive status (I have a half dozen in my large survey who have done this in the last 7 days despite me telling them they are supposed to report) what is the point in the dashboard?

## GAME DAYS AND COMMUNITY SPREAD

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**What measures is UA taking to address the potential for community spread, particularly given the Game Day increase in population?**

1) I was wondering if you could address the expected effects of tailgating, partying, and the presence of spectators in the stadium during the football games in the near term in-class teaching. The population of Tuscaloosa increases substantially during the football weekends with in-and-out-of-state visitors.

2) [Did] the university administration and/or mayor ever actually make any sort of pregame/pre-gameday-weekend announcement? I didn't see any such announcements noted or archived in the news center on the university's web site (although I will note that the university's homepage, to its credit, puts COVID safety front and center) or on the city's City News website. Taking such a step seemed such a no-brainer to me--costless but timely, with thousands of people descending on the city, and with plenty of time to do so without stepping on the announcement of the capital campaign--that I assume I just missed it and wasn't looking in the right place when I checked up on it today. About all I know for certain is that if the Gallette's and Innisfree Twitter feeds are any indicator, our city's bars were the scene of extremely crowded high-octane maskless indoor fun:

<https://twitter.com/UGallettes>.



3) During a time of significant community spread and lack of hospital capacity, why has the University not required **proof of vaccine, proof of negative test, or masking at large in-person events** (aka football games) evidenced to be super spreader events?

## UA SUPPORT FOR FACULTY WITH YOUNG CHILDREN RE: COMMUNITY SPREAD

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**What is UA's policy for support of Faculty and Staff with young children, particularly those with children too young to be vaccinated?**

- 1) For many of us with unvaccinated children and rising covid cases, these past few weeks have been the most worrisome and difficult of the pandemic thus far. How is the University **supporting faculty parents of children who are not yet able to be vaccinated** during this time of high community spread?
- 2) What is the University doing **to advocate to local school districts to adopt and enforce universal masking in schools?** Tuscaloosa County School System has no mask mandate and is one of only 10% of school systems in the state to not have a mask mandate. Tuscaloosa City Schools has a mask mandate, but is not consistent in its enforcement of covid safety measures such as quarantining and lunch protocols. As a result, outbreaks of COVID-19 have happened in *both* school districts, affecting UA faculty and staff.
- 3) Clearly, the University believes that universal masking indoors is an effective layer of protection to mitigate the spread of COVID-19. I appreciate the requirement for masking indoors in University buildings. What is the UA administration doing to advocate to local and state government to require (or at least improve understanding and support for voluntary) universal indoor masking?

- 4) What steps is central administration taking to encourage our local schools (particularly the Tuscaloosa City Schools, Tuscaloosa County School System, and the Child Development Resource Center) to take precautions such as universal masking regarding the pandemic? I worry that inadequate mitigation measures will impair faculty retention and recruitment efforts. And as a member of my department's faculty appointments committee this year, I am hoping that you can give me something positive to share with any candidates about UA's efforts if they ask about COVID precautions in our local schools.
- 5) Public health experts recommend that individuals with unvaccinated children take more precautions when there is high community spread. Many of us would not be in a room (even masked) with hundreds of people without knowing their vaccination status, especially for an extended period. What are your recommendations for faculty with unvaccinated children?
- 6) Speaking for the collective (which comes with a caveat that I can't be sure it's accurate, though I think it is) – we'd like to see more pressure on, and support for, the city outside this campus, to include the county and the schools. What happens in the broader city affects the UA's community with rippling effects on things like student recruitment and faculty retention. Everybody wants to feel safe, and a lot of us do not at this time in this community. We think that UA pulls weight, and can be supportive of declarations of emergency and mandates (and enforcing) of universal masking.
- 7) How does the university factor in community spread and hospital resources when it comes to in-person activities, classrooms, etc.?

- 8) The Children's Program at the CDRC remains mask optional in spite of CDC guidance recommending, "indoor masking for all individuals age 2 years and older," in school settings. Dr. Friend recently echoed the CDC guidance and issued his own recommendation for universal masking for all children in the Children's Program ages two and up. The school cites concerns about social, emotional, and language development as the reason for not requiring masks. The overwhelming consensus among experts in childhood development is that the risk of long-term developmental issues caused by masking in children over 2 is minimal and outweighed by the risks of Covid-19 infection. Parents have asked leadership at the school to circulate data or research guiding policy on masking and child development but haven't received anything. Why isn't UA conducting an independent review of this dangerous policy and following data, prevailing expert guidance, and sound science? This question is particularly urgent given that the latest CDC data shows that children 0-4 are being hospitalized with Covid-19 at higher rates than any other pediatric group. There is also a risk to adult caretakers, who are more likely to contract Covid-19 given the close contact required in caregiving.
- 9) **Why is the CDRC not enforcing mandatory masking for all persons over the age of 2**, as is the guidance by the ADPH and the CDC, and is being done in childcare centers all over the country?

## CLASSROOM SPREAD

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**Given concerns that students are under-reporting and the lack of required testing, could you discuss how classroom spread is being measured / ascertained?**

- 1) Is it possible to do an anonymous voluntary survey among my students regarding their vaccination status in order to have an idea how protected we are in my classroom?
- 2) I agree that classroom transmissions have likely been very low—especially in prior semesters when classroom attendance was sparse and remote learning was common. How would we know if there are classroom transmissions this semester? My understanding is that masked interactions do not count as an exposure.
- 3) We have heard consistent claims of no classroom transmission - but with no contact tracing and no way to find out about exposure situations (even in cases where a faculty member is proactively & desperately trying to track down that information) how can we claim to know that there is no classroom transmission happening? It doesn't sound like we have the necessary data to draw that conclusion.

- 4) 1) After a situation I encountered a couple of weeks ago, I have serious concerns about how faculty are able (or, as it turns out, unable) to find out if there has been an exposure situation in their classroom. I had a student who came to my class during a period when he was \*medically prohibited\* from attending class. I spent over a week repeatedly emailing and calling around to a total of 4 different offices on campus (Athletics, Office of Student Conduct, COVID support hotline, COVID medical team) trying to get to the bottom of whether my classroom had had a COVID exposure situation - all offices refused to tell me whether or not there had been a COVID exposure situation in my classroom. Eventually I also learned that apparently the only way a professor would learn of a COVID situation in their classroom is that the COVID-exposed student is provided with a notification that they are suggested to provide to faculty - that's it. That is, it seems faculty are never notified by UA (in other words, despite in some cases UA knowing that a faculty member was exposed, they don't tell them) - this in particular seems so glaringly problematic that I'm hoping I was given bad information about it and there's a better a) exposure identification, and b) exposure notification plan than this?
- 5) 1) We're hearing that student COVID numbers are low, but anecdotally in classrooms, students are saying that COVID is rampant among the student body, but that they're not getting tested because they don't want to end up in quarantine. If that's the case, it's very concerning. It's hard to determine a good way to get around this problem, of course, but, especially in the absence of a vaccine mandate, periodic Sentinel testing would be a good start to get a clearer picture of what numbers actually look like (and to help inform subsequent decision-making).

## **FACULTY SENTIMENT RE: IN-PERSON TEACHING**

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**Does UA have a sense of Faculty  
Sentiment regarding In-Person teaching?**

1) We keep hearing the messaging that faculty are happy/relieved/etc. to be back teaching in person again, but do we actually have data to support this? Almost every faculty member I've heard speak about this in some capacity (some our faculty, some from other colleges) is back in the classroom with extreme trepidation and would feel much safer online (especially in the absence of both classroom distancing and vaccine mandates). Of course that feeling may not generalize to all faculty, but I would be surprised if the majority felt so drastically different from the cross-section of faculty I've heard from. Similarly, to that end, I wonder if it would be worth pushing out a neutral survey to faculty so we were able to get a clear idea of how faculty actually felt about this?

## FACULTY RECRUITMENT

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**Would you discuss Faculty Recruitment in the Age of  
COVID-19?**

1) What is the University doing to **avoid losing faculty or having difficulty recruiting new faculty**, due to the low vaccination rates in the state, high community spread, and failure of local or state government to re-enact COVID-19 mitigation measures (such as masking indoors in public places)?



**THANK YOU!**

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**Questions sent to the moderators in today's session will be reviewed and posted with today's recorded session.**

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