

## POSTER SESSIONS SUNDAY & MONDAY April 27 & 28

*"Imagination is more important than knowledge."*

*Albert Einstein*

**Please Note:** Those posters marked with a \* represent those presenters who are CCPH Fellows. To learn more about the CCPH fellowship program, please stop by these posters and the CCPH exhibit at the conference or visit us on the web at [www.ccpf.info](http://www.ccpf.info).

### **ACCESS TO CARE FOR THE UNINSURED AND WORKING POOR IN LEON COUNTY**

*Zandra M. Glenn, Florida A & M University, College of Pharmacy and Pharmaceutical Sciences; Bakari Burns, Bond Community Health Center; Robin McDougall, We Care Organization*

Leon County Florida has initiated efforts to respond to the plight of its uninsured residents. Through the efforts of community leaders, a local educational institution, and volunteers, a public-private partnership has been established to create CareNet, a coordinated primary health care system for low income and uninsured residents of Leon County. This poster addresses the struggles, failures, and successes of Leon County's CareNet system, and the seven (7) community partners' efforts to increase access to care.

### **ASESP: AN AFTER SCHOOL EDUCATIONAL SUPPORT PROGRAM DEVELOPED THROUGH A CAMPUS-COMMUNITY PARTNERSHIP**

*Russell C. Sexton, Amber Garcia, LECOM Mentoring Club, Lake Erie College of Osteopathic Medicine; Drew Rhodes, LECOM Mentoring Club*

This poster will show how an after school educational support program was designed to improve the academic performance, primarily in the area of reading, of elementary school youths living in the Erie Heights Community Housing Development adjacent to the Lake Erie College of Osteopathic Medicine. The goal of this program is to improve reading scores of students taking the Pennsylvania System of School Assessment test. Due to low reading scores of a significant number of students for the past several years, the management of Grover Cleveland Elementary School could be taken over by the State if significant improvement in test scores is not achieved over the next year. In order to achieve this goal several methods were used. A six-week pilot of ASESP indicated a high degree of satisfaction occurred among the dozen students enrolled in the pilot, thus their participation level was high. In addition, the pilot data showed significant progress was made towards reaching elevated reading proficiencies.

### **THE BRAZOS VALLEY HEALTH PARTNERSHIP: SUCCESSES AND CHALLENGES**

*Monica Wendel, Sanu Somachandran, Community Health Development Program, School of Rural Public Health; Tom Wilkinson, Brazos Valley Council of Governments; Reed Edmundson, Burlison & Madison St. Joseph Health Center*

This poster will show the story of a young partnership that began in December 2000, utilizing a community health development approach that has grown to include over 30 active community-based organizations and three institutions of higher education. The Brazos Valley Health Partnership includes representatives from the urban center of the community, as well as the six rural counties surrounding it. The ongoing goal of the partnership is to identify the needs—specifically related to health—and resources that exist in the community, and to develop strategies for leveraging the resources to meet the needs. The partnership has completed a community health status assessment, organized task groups to develop recommendations on how to address the issues identified in the assessment, and created teams to implement the

recommendations in two pilot counties with plans to expand into the other four rural counties in the near future. The partners believe that theirs is a model that could help other communities address their needs.

### **BRIDGING THE DENTAL GAP: THE SOUTH CENTRAL CARE AND LENNOX DISTRICT PARTNERSHIP**

*Cathy Ai, Jennifer Wu, Peter Pham, Edward Maggiore, UCLA School of Dentistry*

Tooth decay, or dental caries, is the single most common disease of U.S. children, and basic dental services are a crucial component for the overall health and well being of all children. While previous studies have documented a dramatic trend towards the reduction in the occurrence of caries, it remains one of the most prevalent diseases affecting our children. Organized at the UCLA School of Dentistry, South Central Care is a student operated, faculty-supervised children's program. The Venice satellite clinic is transformed twelve times a year into a fully student-staffed pediatric clinic. During their visit, children receive dental care ranging anywhere from prophylaxis, fluoride, and preventative sealants to amalgams and the placement of stainless steel crowns. SCC also hosts two dental-health fairs where children are given a dental care package, consisting of a toothbrush, toothpaste, and floss, and taught how to floss and brush utilizing the Bass Technique. The goals of the partnership between SCC and the Lennox Unified School District are five fold: 1) Educate and promote the importance of oral health to disadvantaged children of low socioeconomic background in Los Angeles, 2) Increase access to dental care for children of low-income families, 3) Provide high quality, low-cost, comprehensive dental care to children of low socioeconomic status, 4) Establish and maintain long term relationship with the patient and the Lennox community, and 5) Provide UCLA student dentist with experience in pediatric dentistry and care of patients in underserved communities.

### **BUILDING A PARTNERSHIP FOR CERVICAL CANCER AWARENESS AND PREVENTION IN A LOCAL INDIGENOUS COMMUNITY IN CAMEROON**

*Anna A. Eno: University of Yaounde 1, Akarem Association Cameroon, Ejagham Njemaya Women's Association*

Cervical cancer « *the other silent killer* » ranks second after breast cancer, in Cameroonian women. Unfortunately, since its inception in 1990, the National Committee for the Fight against Cancer has limited its routine cervical screenings in the big cities. Consequently, we decided to carry out a long term program in a local indigenous community with limited access to health care, and where the predisposing factors to cervical cancer are very common. In the course of this study, we are going to build the first community-campus partnership in this area, create an awareness of cervical cancer, and help prevent cervical cancer in the area by developing an agenda which can be continued by the community subjects. Hopefully, our example will be copied by other organizations, and the prevention efforts carried out by the state in big cities will be assessed. Our study is also intended to encourage the national program to reach out to the grass roots.

### **BUILDING A POSITIVE AND HEALTHY "ME"**

*Carmen Russoniello, Dashayna Armstrong, Jenelle A. Mallette, Elizabeth Ellis, Anna Harrelson, Mark Janka, Kelly Kennedy, Shannon Rogers, Ruth Ann Christian, Psychophysiology and Biofeedback Lab, East Carolina University*

The purpose of this ongoing project is to provide recreational therapy students with an opportunity to develop their skills in program design, implementation and evaluation in an applied setting. Moreover, the project creates an atmosphere to practice empathy skills (listening, therapeutic bonding) while experiencing the benefits of altruism. Building a Positive and Healthy "ME" is an eight-week recreational therapy program that teaches fifth and eighth grade "at-risk" students

techniques to increase their self-esteem and decrease dysfunctional behaviors, such as anger outbursts. Recreational Therapy students will present how they developed, implemented and evaluated the effectiveness of their program. They will also summarize their own personal experiences. This project is the result of collaboration between 3 agencies: East Carolina University, Lenoir County 4H, and Lenoir County LEARN Project.

**\*BUILDING COMMUNITY-CAMPUS PARTNERSHIPS IN UNDERSERVED COMMUNITIES: AN ESSENTIAL STEP TOWARD EFFECTIVE SERVICES**

*Anne Reiniger, The New York Society for the Prevention of Cruelty to Children, (CCPH Fellow); Milagros Batsista, Alianza Dominicana, Inc.*

This poster is intended to educate medical, social service and community based-providers on strategies utilized to create, develop and sustain a Community Campus Partnership Model. The partnership was created in 1994 to provide quality services to children and their families in the New York City Washington Heights community, a high need community of recently arrived Hispanics. The partners included Columbia University College of Physicians and Surgeons, School of Public Health and School of Social Work, The New York Society for the Prevention of Cruelty to Children and Alianza Dominicana. The goal of the service was to provide a service, which included a research component to reduce child abuse and disparities in health outcomes. This poster will include focus on this successful program, Best Beginnings and provide a basic and sustainability toolbox and is built on the Nine Principles of Partnership articulated by CCPH. An ability to develop and sustain a partnership depends on developing true partnerships among various constituencies in the community and addressing key issues: autonomy, self-interest and culture differences. This poster will include tools used and reflections from the various partners including key ingredients, lessons learned and how this model can be replicated.

**BUILDING COMMUNITY-UNIVERSITY PARTNERSHIPS FOR SUSTAINABLE COMMUNITY HEALTH PROGRAMS**

*Jean M. King, Patricia A. Nelson, Karin Zuehls, The University of Iowa, College of Nursing, RN-BSN Progression Program*

The goal of this project was to develop collaborative partnerships with students, faculty, and preceptors in agencies and institutions bridging the gap between practice and education for a mutually beneficial relationship. In order to achieve this goal we utilized curricular innovations based on service-learning strategies to provide the foundation for sustainable community programs/services increasing access to care and enhancing health promotion. Additionally, we implemented individually arranged and student designed practicum experiences based on course objectives and assessed community needs. We tailored the practicum experience to meet the needs of the RN-BSN student who may be new to nursing or already possess extensive experience. The outcome of this experience has been the development and implementation of community projects in the practice setting. Examples of projects that were developed, implemented, and sustained included: Synagis clinic for respiratory syncytial virus (RSV) in previously underserved population, homecare program for the mentally ill, education materials on terminal dehydration for hospice patients and families, disease prevention and health promotion programs for Hispanic families, and sexually transmitted disease clinics for an underserved community.

**BUILDING UP A PARTNERSHIP AMONGST UNIVERSITIES AND HEALTH SERVICES: THE BUTANTÃ'S HEALTH DISTRICT PROJECT- SÃO PAULO CITY, BRAZIL**

*Alexandre Nemes, School Health District of Butantã, São Paulo*

The permanent difficulty faced by a number of countries in making their health care systems capable of offering better quality and more equitable for their communities and the

acknowledgement that Health Professional Education might influence positively in this direction, has heated the debates over projects and experiences aimed at renovating college's curriculum and building up institutional partnerships amongst universities and health services. This poster reports an experience of partnership, whose name is Butantã's Health District Project, currently developed between the Health Department of São Paulo City and colleges of São Paulo University (USP). A health district is an administrative form of regional action of the health care system in São Paulo, which integrates primary care services, ambulatory with medical specialties and a hospital, the majority of whom are public, attending about 250 to 300 thousand people. As São Paulo city has a population of 10.000.000 inhabitants, it has been divided in 41 health districts. In one of them, named Butantã, the cited partnership includes the Medicine, Nursing and Public Health Colleges of São Paulo University. Through a partnership protocol, a technical and administrative council has been founded with delegates from both institutions, and so beginning on the district teaching activities, groundbreaking projects on health assistance and research facilities on public health have been carried on in these services.

### **CAREGIVER'S COMMUNITY NETWORK, YEAR 2: WAYS TO GROW!**

*Merle Mast, James Madison University; Karen Rose, Central and Western Virginia Alzheimer's Association*

Caregiver's Community Network, "CNN", is a program between James Madison University (JMU) and the Alzheimer's Association (AA) in Virginia, providing a wide array of supportive services for caregivers of persons with Alzheimer's disease and the frail elderly in a four-county rural area in Western Virginia. This poster will show ways we have grown our program that we believe will benefit others: building creative connections with other community organizations, finding complementary funding sources, capitalizing on the mutual benefits of student service-learning, and working with the faith community and funding sources to provide sustainability.

### **\*CHANGEMAKING: UNPACKING THE MYSTERIES OF POLICY ADVOCACY FOR CBPR PRACTITIONERS**

*Cassandra Ritas, Hunter College, Center on AIDS, Drugs, and Community Health*

This poster will describe the various components of "Speaking Truth, Creating Power: A health policy tool kit for community-based participatory researchers." These components include: an introduction to the application of CBPR principles in the policy arena, a guide for assessing group resources available to leverage for policy change, a guide to identifying the important dimensions of a particular policy issue, a discussion of the importance of diversity in the CBPR collaboration, how to identify and recruit collaborators, and how to most effectively use diverse members to affect policy change, an outline of policy change strategies highlighting the role of various CBPR collaborators, a discussion of CBPR group process around policy advocacy including specific suggestions for overcoming challenges. The goal of the poster will be to interest people in the use of the tool-kit and to let them know where to find it.

### **\*A COMMUNITY-BASED PARTICIPATORY RESEARCH CURRICULUM FOR PEDIATRIC FELLOWS**

*Darius Tandon, School of Medicine, Johns Hopkins University*

Community pediatrics moves from a medical model that views pediatricians as detached "experts" to a community-based model that views pediatricians and community members as partners working to improve children's health. Community-based participatory research (CBPR), by definition, requires the equitable involvement of community partners throughout research and/or intervention. When CBPR is translated into community pediatrics, pediatricians will then collaborate with communities during each phase of a research study. This poster illustrates the

development of a CBPR curriculum for fellows in general pediatrics. A description will be provided of CBPR's principles, rationale, and challenges. The framework for the general pediatrics CBPR curriculum will also be shown. This framework discusses how each phase of community-based health research—problem definition, data collection, data analysis/interpretation, and community action/intervention—would be done in accordance with CBPR's principles.

### **CREATING A CHILD HEALTH DISPARITIES UNIT: JOINING RESEARCH AND COMMUNITY PARTNERS**

*Barbara Rose, Child Policy Research Center, Cincinnati Children's Hospital*

The mission of Child Policy Research Center (CPRC) is to foster evidence-based child policy by providing data and analysis to community leaders and policy makers interested in child well-being. Most health disparities in adults have their origins in childhood, although most of the work in health disparities is on racial/ethnic minority adults. Health disparities include differences in health status and well being associated with race, ethnicity, geography and/or socioeconomic status. If health disparities were addressed, the health status in the US would be advanced to one of the best in the world.

### **CUP FAMILY CLINIC: SERVING THE COMPLEX NEEDS OF REFUGEES**

*Carol Q. Galper, Tracy Carroll, University of Arizona College of Medicine; Amy Shubitz, Hopi Foundation Center for the Prevention and Resolution of Violence, Southside Presbyterian Church*

The Family clinic is part of the Commitment to Underserved People (CUP) program, a service-learning program at the University of Arizona College of Medicine. The Family Clinic began in 1992 as the only medical clinic serving refugees from Central America, partnered with the Hopi Foundation for the Prevention and Resolution of Violence, from Southside Presbyterian Church. Today the clinic serves refugees from all over the world including Togo, Mauritania, Sudan, Central America, Bosnia, Iraq, former Soviet bloc countries and Nepal. Medical students run and staff the clinic, working with volunteer attending physicians, psychologists, social workers and physical therapists. In addition to general medical care, physical therapists provide care that is sometimes combined with psychological therapy, to help the patients adjust to physical touch and to assist in the therapy. Law students and their professors have also participated in providing legal advice on some clinic nights. Children in the population participate in a creative writing project called the Owl and Panther group, which allows for expression of thoughts and feelings that they experience in response to their or their parents' experiences as refugees. Many of the patients served are victims of torture, and experience chronic pain, post-traumatic stress disorder, anxiety, depression, back and joint pain and other somatic disorders.

### **DEEP SOUTH NETWORK FOR CANCER CONTROL**

*Francine Huckaby, Claudia M. Hardy, University of Alabama at Birmingham Comprehensive Cancer Center*

The Deep South Network for Cancer Control is a five-year National Cancer Institute funded program. The overall goal of the project is to eliminate the disparity in cancer death rates between blacks and whites in the Deep South. It will accomplish this goal by establishing a sustainable community infrastructure in order to promote cancer awareness, increase cancer screenings, enhance minority participation in cancer clinical trials, promote the development of minority cancer researchers and develop innovative community-based cancer control measures. The Deep South Network will build upon existing partnerships and creating new ones. Community Health Advisors partnering with academic institutions and other community-based organizations are achieving outcomes and sustaining change. Together, the disparity in cancer death rates will be reduced, and eventually eliminated.

### **\*DENTAL PUBLIC HEALTH ADVOCACY AND ACCESS THROUGH EDUCATION**

*Sheranita Hemphill, Sinclair Community College & Center for Healthy Communities*

Quantitative research results collected and analyzed through the Center for Healthy Communities in Dayton, Ohio have demonstrated that health professions' teaching methods should change. Data suggests a difference in the attitudes and expectations of cohorts of health professional students' service-learning pre and post-test results. Their attitudes and expectations were assessed before and after their service-learning experience. The differences noted suggest that service-learning has the potential to affect change in the attitude of students toward working in underserved areas and toward community service. The use of service-learning as an instructional method could be standardized for ease in comparison of findings.

### **FACTORS RELATED TO SUCCESSFUL COLLABORATION IN COMMUNITY-CAMPUS PARTNERSHIPS**

*Kelly Hubbell, University of Wyoming Division of Medical Education and Public Health*

This project explores the factors related to the successful community-campus partnership between the University of Wyoming (UW) and the Downtown Clinic (DTC), a free clinic that uses volunteer health care professionals to provide primary care to uninsured persons in Laramie, Wyoming. The clinic was developed by a broad-based community coalition representing local service agencies, the hospital, the public health agency, physicians and faculty from UW. The clinic has been open 3 years and its volunteers have provided care to over 1000 uninsured persons. The partnership has resulted in positive clinical outcomes. Moreover, it has been vital to the university's educational mission. Faculty and students from nursing, pharmacy, social work, medicine, health sciences, psychology and business have been an integral part of the clinic in clinical, management, and research roles since the initial stages of the partnership. This academic work is leading to national and international presentations on the DTC.

### **\*FAITH-BASED COMMUNITY-CAMPUS PARTNERSHIPS FOR MENTAL HEALTH: BENEFITS, BARRIERS & OPPORTUNITIES**

*Sally Schwer Canning, Tory Murray, Wheaton College; Josette M. Bines, Christian Community Health Fellowship (CCHF); Alex Galloway, Christian Community Outreach Services*

The poster will present the following results from our national surveys of faith-based community healthcare organizations and institutions of higher education: description of the two samples of respondents (CCHF affiliated members and Coalition of Christian Colleges and Universities (CCCU) schools), documentation on the nature and extent of existing mental health collaborations in poor communities and summaries of identified benefits and barriers related to collaborations. The implications of our findings for individuals in both community and campus settings who are interested in improving mental healthcare provision in poor communities will be outlined. Implications will be drawn directly from the results of the surveys and are anticipated to focus on ways to enhance benefits and reduce barriers related to collaboration.

### **FOSTERING COMMUNITY PARTNERSHIPS FOR ORAL HEALTH THROUGH HEAD START SCREENINGS**

*Lynnette M. Engeswick, Minnesota State University; Keith Juliar, Head Start*

Children from low-income families experience more dental caries and are less likely to receive dental treatment than children from middle and high income families. Head Start Programs operate according to Performance Standard set forth by the federal government. These standards assure achieving specific child and family outcomes. The goal is to provide oral dental screening to 570 Head Start children at each Head Start Site in the nine county region of Southern Minnesota during the 2002-2003 academic year through a community-based

collaborative effort of Minnesota State University, Mankato Department of Dental Hygiene and Minnesota Valley Action Council – Head Start.

### **\*GROWING OLD, STAYING WELL: INTERGENERATIONAL PARTNERSHIPS FOR HEALTHY AGING**

*Debra Sheets, California State University, Northridge*

As the size of the older population doubles over the next two decades it is important to foster understanding, compassion and communication between older and younger age groups. Intergenerational community-campus partnerships can play a significant role in promoting age-integrated communities in which caring and concern characterize interactions between young and old. In a recent article, Firman (2001, p.2) notes that "In the United States, intergenerational experiences do not occur naturally for most people...most young and old people don't spend a lot of time with people from the opposite end of the age spectrum". Community outcomes achieved include enhanced intergenerational relationships, maintenance of independence among elders and increased organizational capacity. Implications of findings for development of new partnerships as well as strengthening current partnerships are considered.

### **HEALTH EDUCATION COUNCIL AND GRANT JOINT UNION HIGH SCHOOL DISTRICT PARTNERSHIP TO CREATE NUTRITION POLICY**

*Melissa Guajardo, Health Education Council; Scott Lay, Grant Joint Union High School District*

The Health Education Council staff, Grant High School Students and Grant Joint High School District Food Service Director are working together to develop and implement a comprehensive nutrition policy for the district that will support healthful eating. Students have taken this issue on as a serious policy issue and have worked well with the administration and Food Service Department to identify areas for policy. Students conducted the assessment, worked with staff from the Health Education Council and the District to develop policy recommendations that have been approved by the Board of Trustees. Adoption of the policy will be recommended by the Board of Trustees after the work group can demonstrate buy-in from principals in the district. Adoption is anticipated in January 2003.

### **HEALTHY KIDS LEARN**

*Chris Reid, Judith Conedera, Purdue University; Arcy Ramariz, Hammond Head Start Program*

Healthy Kids Learn is a community partnership between a university-based School of Nursing and the regional Head Start program. This partnership is beneficial to the School of Nursing because as a Land Grant University, the primary mission is to provide service and learning for both students and members of the community. The primary goal of this partnership is to provide health promotion and health maintenance for children enrolled in Head Start. The current health care delivery system fails to meet the health care needs of the children and young families residing in this community. Research findings indicate that children enrolled in the Head Start program frequently fail to obtain all the necessary prerequisite health requirements. In addition, once enrolled in the Head Start program the children are frequently absent or unable to achieve academic success due to health related problems such as vision, hearing, dental caries, or recurring illness. Early detection and intervention are necessary to assist children achieve academic success.

## **HOW COMMUNITY DWELLING SENIORS OBTAIN AND UTILIZE ASSISTIVE DEVICES FOR AMBULATION: A COMMUNITY-BASED PARTICIPATORY RESEARCH PROJECT**

*Erin Belczyk, Lisa Dulaney, Brian Mock, Student Physical Therapists, Gannon University;  
Pamela Reynolds, Physical Therapy Department, Gannon University*

The purpose of this community-based participatory research (CBPR) project was to determine how elderly persons obtain assistive ambulatory devices, if they are adjusted and used correctly, and who they received their training from, a physical therapist, other health care provider, or friend. We worked with several community partners on this project including the Housing Authority of the City of Erie and the Director of the GECAC HomePlus Program, Kathy Marinock, RN. Kathy oversees health services in two city senior high rises. She shared her concern with us that residents could easily obtain ambulatory aids from friends or by physician prescriptions, but seldom had any professional oversight for the selection, adjustment, or use of these devices. She was concerned for the safety of the residents who were using ambulation aids that were not adjusted properly and for the potential injuries they could cause through misuse. Research participants were senior citizens who were residents in one of two high rises operated by the Housing Authority of the City of Erie. The results demonstrated that there was a stronger relationship between having the ambulation aids adjusted properly by a physical therapist than having the adjustment made by another health care provider, or friend.

## **INCREASING ON-CAMPUS EATING DISORDER AWARENESS AND ACCESS TO CARE**

*Jillian Croll, Laura Bisek, Sue Babcock, Eating Disorders Institute*

Eating disorders have a significant impact on the campus community, with up to 20% of college-age women and an increasing number of college-age men suffering from an eating disorder. Our poster is about establishing successful partnerships with numerous campus communities in the Midwest to increase awareness of eating disorders on campus and to facilitate improved access to eating disorder treatment for students. The poster will emphasize challenges we experienced in the process of establishing a treatment partnership with one campus community, in contrast to the successes experienced with empowerment and education partnerships with many campus communities focused on identifying on-campus and local community resources in order to develop individualized prevention, recognition and intervention eating disorder services for students.

## **INTEGRATION OF THE SERVICE LEARNING MODEL IN AN URBAN SCHOOL OF NURSING**

*Kathleen Nokes, Donna Nickitas, Susan Neville, Robin Keida, Hunter College, CUNY, Hunter-Bellevue School of Nursing*

This poster will show how external funding from the Helene Fuld Health Trust facilitated the integration of the service-learning model into the nursing curriculum of a publicly supported urban university located in Manhattan, NY. Nursing student related activities have included: curricula change and participation in pilot research exploring the impact of an 15 hour intervention on critical thinking, civic engagement, and cultural competence using seminars and on-line technology; nursing faculty activities have included: ongoing consultation with CCPH staff, two day workshop for all nursing faculty and others during the first year of the grant, and participation by 4 nursing faculty in the CCPH Advanced Leadership workshop; community partner activities have included: establishment of a Partner Advisory Committee, participation in partner sponsored activities, and meetings with key legislators serving the targeted community of the Lower East Side of Manhattan.

## **JOINING HANDS FOR COMMUNITY – THE TIES THAT BIND**

*Neil Gokal, Trojan Health Volunteers, University of Southern California; Scott Martindale, University of Southern California*

The goal of this presentation is to display the dual positive results of service-learning on university students and community members. A central focus will be placed on the Joint Educational Project (JEP)- a service-learning organization at the University of Southern California aimed towards the mastery of course work through an in depth relay of information to students in local elementary, middle, and high schools. Although the focus lies in producing stronger academics for USC students, the inspiration and encouragement conveyed to the younger students is a direct result of the program. In addition, the Trojan Health Volunteers (THV), a division of JEP is an outreach specifically designed for students seeking exposure in clinical and medical environments that also has a positive impact on community and volunteer. The community in and around the University is not, at first sight, one of privilege and glamour; however, it is one composed of much diversity, incredible potential, and amazing individuals of which many are unaware. As a result, programs such as JEP and THV are vital to the promotion of well being in life and education that ties this unique community together. While focusing on course work, individuals offer the inspiration and motivation necessary to support positive growth and enrichment for their peers, mentors, protégés, and friends. This creates an embodying sense of community that proves to be a new level as it incorporates people with a rich background of diversity. A mélange of pictures, opinions from volunteers and professionals, and personal reflection as a former JEP Program Assistant and current Director of THV will display the substantial significance of JEP and THV as it promotes university academics while also contributing to building a stronger and healthier community. The bridges between students and professionals of all ages are two-way streets that bring the community to a level that is culturally enriching, intellectually stimulating, and educationally inspiring to all involved.

## **LEARNED FROM THE FIGHTING BACK INITIATIVE**

*Ronda Zakocs, Boston University School of Public Health*

In 1990, the Robert Wood Johnson Foundation (RWJF) initiated a program, Fighting Back: Community Initiatives to Reduce Demand for Illegal Drugs and Alcohol, which funded medium-sized communities across the country to initiate coalitions to develop community-wide strategies for reducing the demand for alcohol and illegal drugs. The intent was for communities to create a single, comprehensive, coordinated system of prevention, early identification, treatment, and aftercare interventions. The purpose of this poster session is to describe the findings from the Fighting Back Lessons Learned Project, a collaborative endeavor among the RWJF, Boston University School of Public Health, and 13 of the Fighting Back communities. Via consensus from the project's partners, the project examined how Fighting Back communities attempted to improve their community capacity for addressing the substance abuse problem. Specifically, the project sought to identify what contextual and coalition factors either hindered or fostered communities' efforts to improve three aspects of community capacity: community leadership; local organizations' abilities to alter or create new programs and policies; and local organizations' willingness to network with each other.

## **THE LIVED EXPERIENCE OF SERVICE LEARNING IN A SENIOR SETTING**

*Leslie Oleck, Frederick E. May, School of Nursing, University of Indianapolis; Doris York, Southeast Community Center*

In a community surrounding the University of Indianapolis, a need to identify quality of life and health care issues in the senior population was expressed. Community partners, seniors in the community, students, and faculty came together in a focus group format to develop a survey. The purpose of the service-learning experience was to identify the priority needs of a community-based group of seniors. Students, faculty, seniors and community leaders were involved in all

phases of the project from the initial design, including focus groups, to administration of the survey and analysis of the data. The more the students worked with the seniors the more they became committed to the project. Following reflection, students were able to describe their excitement and the richness of their experiences with community leaders and seniors. The students in this project realized that the scope of what they had accomplished with the community would not be seen in one semester. Community leaders and seniors expressed satisfaction with the results and the process of the project.

**\*MATCHING THE SERVICE LEARNING POTENTIAL: ALIGNING THE NEEDS OF THE HEALTH PARTNER AGENCY WITH MHA STUDENT COMPETENCIES**

*Anne M. Hewitt, Seton Hall University*

This poster will show how we optimize service-learning collaborations by clearly identifying the scale, type and skill level of the managerial need requested by the collaborating community agency and matching it with the MHA student volunteer who indicated the corresponding administrative competencies. The results of this study suggest that encouraging community partners to clearly identify their service needs will aid in matching agencies with MHA students' who demonstrate the appropriate competencies and that collaboration efforts can be better aligned for success.

**\*A MEETING OF MINDS: ACHIEVING CHANGE THROUGH DEVELOPMENT OF SUSTAINABLE PARTNERSHIPS**

*Nola L. Freeman, Pike Market Senior Center*

During summer and fall of 2002, a group of service-learning practitioners in Western Washington, having previously formed themselves into the Western Washington Service-Learning Roundtable, took several steps forward. They mobilized toward a new initiative- the organization of an event to be held on March 10, 2002 that would bring together community and campus partners to engage in a curriculum that would increase understanding between the partners. The poster will illustrate the progress of this group in creating a regional, permanent network of community and campus partners.

**THE MORTON HAVE-A-HEART PROJECT: PRELIMINARY EVALUATION OF CARDIOVASCULAR RISK FACTORS IN A RURAL MISSISSIPPI COMMUNITY**

*T. Kristopher Harrell, Deborah S. King, University of Mississippi, School of Pharmacy*

The Morton Have-A-Heart Project (MHHP), a community-campus partnership between the University of Mississippi Medical Center and the city of Morton, was launched in February 2001 as a participatory research project, designed to reduce CVD risk factors and increase health awareness. Initially, community committees were formed to include local elected officials, school officials and teachers, business leaders, civic organization leaders, and pastors. These committees have been utilized to determine the best approaches to reach every resident in the community. From these contacts and committees, risk assessment screenings have now been conducted at local schools, local businesses, the community center, and numerous churches.

**NAVIGATING THE HUMAN SUBJECTS REVIEW PROCESS FOR COMMUNITY-CAMPUS PARTNERS**

*Nancy Shore, University of Washington*

This poster is considered an essential component of the partnership basics toolbox as human subjects approval is required for partnership projects that meet the definition of research specified by the federal regulations. This poster will show the skills required to obtain human subjects

approval coupled with an understanding of the ethical importance of the process. It will review the intent of the human subjects review process and overview the current regulations, including what is required for human subjects approval discussion of experiences and perceptions of the review process.

### **OVERCOMING THE CHALLENGES TO IMPROVING HEALTH CARE ACCESS FOR LATINOS IN LANE COUNTY, OREGON**

*Simon Holowatz, Nedine Karakaplan, Liz Giménez, Salud Primero Medical Access Project, Centro LatinoAmericano*

Salud Primero Medical Access Project is meeting the challenges of improving access to health care for the Latino LEP (limited English proficiency) population in Lane County, Oregon. Our goal is to increase both accessibility and utilization of health care and expand the linguistic and cultural competence/capacity of providers. Our work addresses the health disparities for the Latino population for diabetes infection and HIV/AIDS transmission by focusing on preventive education in the community for these two illnesses. We are working in cooperation with the University of Oregon. We train and work with interns attending the University. In addition, we have worked with an Oregon State University nutrition program. This program teaches our health promoters about better nutrition practices, food safety, using food stamps, preparing nutritious low-cost meals, shopping tips, how to add variety to their diet, getting children to enjoy eating well and other food-related topics. The health promoters teach these skills and share this knowledge with the clients we serve. This is one way Salud Primero has trained members of the Latino community to reach the Latino LEP community with culturally and linguistically appropriate diabetes and HIV/AIDS information and prevention materials; providing free testing for diabetes and HIV through collaborative relationships; and working in collaboration to create a stronger treatment referral system for Latino diabetes and HIV/AIDS patients. Salud Primero's work will decrease hospital emergency room utilization among the Latino population for diabetes and HIV; increase the number of providers with Spanish-Speaking and cultural competence capability; increase access to health information for LEP Latinos, and improve Latino patient satisfaction with medical care in Lane County.

### **PARTNERING FOR VISION HEATH IN RURAL INDIANA**

*Edwin C. Marshall, School of Optometry, Indiana University*

Diabetes is the fastest growing disease in Indiana and the leading cause of preventable blindness in the adult population with an incidence of 550 new cases in Indiana each year. Intervention could prevent up to 90% of diabetes-related blindness, but only 60% of people with diabetes receive proper care. Indiana is 65% rural and realizing that the risk for diabetic eye disease and related blindness is particularly high in rural areas where geographic and financial access to eye care providers may be limited, the Indiana University School of Optometry initiated a partnership with the Indiana State Department of Health, the Indiana Optometric Association, and nurse-managed health clinics in five rural Indiana counties. The goal of the partnership is to address the unmet eye care needs of the underserved, uninsured, low-income residents of the targeted counties by expanding the availability of and accessibility to eye care services through an established network of rural health clinics. Using the Healthy People 2010 initiative, the partnership identified Objective 28-1 (Increase the proportion of persons who have a dilated eye examination at appropriate intervals) and Objective 28-5 (Reduce visual impairment due to diabetic retinopathy) as its primary objectives. A Preventive Health Services Block Grant from the Indiana State Department of Health supports the purchase of ophthalmic equipment for the clinics, and members of the Indiana Optometric Association volunteer time to serve as preceptors for rotating fourth-year optometry students who provide optometric services at the clinics.

## **PARTNERING HEALTHY COMMUNITIES: INTERDISCIPLINARY SERVICE-LEARNING MODEL**

*Kenneth D. Davis, Eldonna Sylvia, University of Kansas Medical Center*

This poster session describes the design, implementation and results of an interdisciplinary service-learning project in Kansas. The purpose of this two-year community-based project was to create a bridge between the community and the academic environment, through the creation of "Community Health Teams." The goals achieved through this project were, improving linkages between the community and health providers and improving the health of the community through better access to health information and health care.

## **PROGRAM ENERGY: A COMMUNITY PARTNERSHIP TO REDUCE CHILDHOOD OBESITY**

*L. Arthur Campfield, Françoise J. Smith, Food Science and Human Nutrition, College of Applied Human Sciences, Colorado State University*

The goal of this integrated enrichment program (Program ENERGY) is to reduce the rate of childhood and adolescent obesity and Type 2 diabetes. The program provides inquiry-based educational enrichment in science and math using examples and exercises from food, nutrition, physical activity and the biology of body weight and blood sugar and seeks to teach and reinforce healthy behavioral choices. This program is the result of an active partnership between educators, university scientists and students, science museums, local hospital system, markets, and other local business. We conclude that Program ENERGY, the result of an active, dynamic community-university partnership, is increasing health and science knowledge, changing attitudes and changing health behaviors of elementary school students.

## **PROJECT JUMP START: A PROMOTORA POSTSECONDARY INITIATIVE**

*Donald E. Proulx, Arizona AHEC Program, Arizona Health Sciences Center, University of Arizona*

Growth in the use of "community health workers" in health and human services has been extensive in the United States in the past decade (1990s) as documented by "The National Community Health Advisor Study" (A policy research project of the University of Arizona, June 1998). Community Health Workers are known by many titles, including: community health advisors, community health representatives (particularly in American Indian tribal communities), outreach workers, health promoters, and *promotores* (particularly in U.S./ Mexico border communities). Nationally, there has not been a systematic, competency-based, and college credit recognition approach to the preparation of these workers that validates their competence and that acknowledges the unique characteristics of these nontraditional students. "Project Jump Start" created a partnership among four community colleges, serving urban and rural students, three rural Area Health Education Centers, and multiple community health and human service agencies to establish a competency-based and college credit-bearing core curriculum for community health workers.

## **\*PROJECT S.C.O.P.E.**

*Lisa A. Margulis, The Edward W. Smith, Jr. Family Nutrition Center*

Project S.C.O.P.E. aimed to create and disseminate innovative resources for students and community partners to enable each to reach their potential for excellence. The revision and broadening of service-learning materials for community partners was an evolutionary process. The materials were evaluated, modified, and developed to effectively meet the needs of community partners. The students themselves developed the tool kit for social service agencies that illustrated the different roles of the students according to their academic year. To promote service-learning, outreach and educational seminars were solicited through various agencies and organizations. In addition, a community partner and a university pharmacy faculty member co-

authored and submitted an article on service-learning to the American Journal of Pharmacy Educators. A healthy relationship between students and community partners depends upon the commitment to mutually agreed upon goals. The necessity for community partners to invest time and energy into formulation of these goals enables both them and their students to reach their potential for excellence.

### **RELIABILITY ASSESSMENT OF A QUESTIONNAIRE FOR MEASURING EDUCATIONAL OUTCOMES IN A SERVICE-LEARNING CURRICULUM FOR MEDICAL STUDENTS**

*Young J. Juhn, Bruce J. Morgenstern, Community Pediatric and Adolescent Medicine, Mayo Clinic*

Service-learning is a prominent theme in current medical education curricula, and proper outcome evaluation helps the sustainability of the program. However, few questionnaires are available for measuring educational outcomes and even fewer have been validated for use. Recently, third-year Mayo medical students were required to take a service-learning curriculum called Pediatric Education in the Community. The new curriculum consists of community program site visits for a half day at the local school district and a school, the health department, Head Start, and Child Protection Agency. In addition, students have one week to complete a community project.

### **SCHOLARS IN HEALTH DISPARITIES**

*Barbara K. Krimgold, Tiffany L. Hinton, Center for the Advancement of Health*

The Scholars in Health Disparities program is preparing minority scientists for careers and leadership roles in health disparities research, health policy and practice. The Scholars undertake research on the causes of and policy solutions to health disparities. They also receive training in the policy process, media, and advocacy. Scholars are housed at the University of Michigan, Harvard University, and Morgan State University. They receive training in advocacy and "knowledge exchange" from the Center for the Advancement of Health in Washington, DC. The poster will highlight scholars' research activities and findings. Current research topics taken on by the 2001-2003 Scholars include: perceived racism, ethnic identity and stress; stress and obesity; youth development and violence prevention; social movements and political thought; racial and socioeconomic health disparities in chronic disease in older adults; socioeconomic status, immigration and health outcomes; and the role of African-American churches in health promotion.

### **SCHOLARSHIP AND PARTNERSHIP: EQUAL PLAYERS IN THE STANFORD COMMUNITY PARTNERSHIP MEDICAL SCHOLARS PROGRAM**

*Timothy K. Stanton, Ann W. Banchoff, Michaela Kiernan, Public Service Medical Scholars, Stanford University School of Medicine; Kristine I. McCoy, Stanford University Medical Student*

Community Partnership Medical Scholars (CPMS), is the research branch of the Public Service Medical Scholars (PriSMS) program at Stanford University School of Medicine. PriSMS was established in 2000 in response to medical student demand for curricula and research opportunities that address health issues at the community level. The first CPMS grants were made in 2001. CPMS is the new "community service" branch of a long-standing Medical Scholars program, which has traditionally funded students to pursue scholarly research in partnership with community-based organizations. Program staff works closely with students to develop proposals that meet high standards for both scholarship and community partnership.

### **\*THE SCHOLARSHIP OF COMMUNITY ENGAGEMENT**

*Diane C. Calleson, Department of Family Medicine, School of Medicine; and Public Health Leadership Program, School of Public Health, University of North Carolina at Chapel Hill*

This poster will highlight how faculty have integrated their community-based work into their academic scholarship, and will provide best practices and strategies for developing a portfolio for promotion and tenure that highlights innovative community-based research, teaching, clinical care and service. The poster will be based on findings from a series of in-depth interviews and focus groups with faculty who have successfully been promoted based on their community scholarship.

### **\*A SERVICE LEARNING HONORS PROGRAM IN A HEALTH PROFESSIONS COLLEGE**

*Paula Reams, Kay Vorholt, Kettering College of Medical Arts*

This poster will show the assessment, plan, implementation and evaluation of a new service-learning honors program at a health professions college. The poster will show the creation, financial, interdisciplinary teamwork and psychosocial aspects of starting a new program that includes service-learning as the key ingredient to an honors program. The new honors program allows students and faculty to develop more partnerships in the community in a new and innovative way—through leadership in service-learning. The program motivates both students and faculty to participate in service-learning and will stimulate new partnerships in the community for the college and leadership in life long service for the students. With this Service-learning Honors Program, the college immerses service into the academic culture and curriculum.

### **A SERVICE LEARNING PROJECT TO DESCRIBE OLDER ADULTS' PERCEPTIONS OF HEALTH AND QUALITY OF LIFE ISSUES**

*Frederick E. May, Leslie Oleck, School of Nursing, University of Indianapolis; Doris York, Southeast Community Center*

The purpose of the service-learning experience was to identify the priority needs of a community-based group of seniors. Student learning objectives included collaboration with community members to complete a Nursing Leadership Project and development of communication and assessment skills with older adults. Objectives for service to seniors in the community included giving seniors in the community a forum to address their health and quality of life desires and helping health care providers describe the priorities of this population. Service-learning objectives included, bringing students, faculty, and community leaders together to develop a needs assessment survey and identifying priority needs of seniors through the results of the survey. Faculty and students shared information gathered with seniors in the community, community leaders, and with the university center on aging.

### **\*SOWING THE SEEDS: CULTIVATING DREAMS OF COLLEGE**

*Maricela Ureño, Public Health Solutions*

Sowing the Seeds is a pilot aimed at initiating the conversation about the importance of a college education among immigrant parents and their pre- and elementary school aged children. Focus groups and group interviews were conducted to identify which topics would be most helpful to parents wanting to promote the value of a higher education among their children. The information collected from the parents and other research, provided the foundation for the curriculum development. The curriculum was then implemented with the same parent groups that participated in the qualitative assessments. This poster will focus on presenting a description of the projects' process and development. The qualitative and other research findings that led to the development of the curriculum as well as the objectives and sample activities of the curriculum will be presented. In addition, the poster will outline other existing programs and strategies

promoting a higher education and a listing of private and governmental agencies disseminating information and/or providing direct services to enhance opportunities for higher education.

**ST. LOUIS MEDICAL WASTE INCINERATOR GROUP (MWIG): A MULTI-DISCIPLINARY COMMUNITY—UNIVERSITY PARTNERSHIP FOR CLEAN AIR**

*Edy Yong Kim, Medical Scientist Training Program (Immunology), Division of Pulmonary and Critical Care Medicine, Washington University School of Medicine in Saint Louis*

By burning plastic in medical waste, incinerators create dioxin and release mercury into the air. Human exposure to dioxin correlates with birth defects, diabetes, heart disease, endometriosis, and cancer. In contrast, autoclaving (high-pressure steam sterilization) neither creates dioxin nor releases mercury. In St. Louis, the medical waste incinerator is in a low-income and high-minority neighborhood. In an environmental injustice, this disadvantaged community bears the medical waste burden for several states (5000 tons/year). In 1999, a Washington University medical student initiated a coalition of community members, non-profits, and Washington Univ. schools. A multi-disciplinary approach joins the Schools of Medicine, Law, Engineering, and Arts and Sciences. Our coalition includes over 15 community, faith-based, environmental, and academic groups; our database has over 400 concerned citizens. Our public awareness campaign (e.g. with community meetings, media exposure) increased membership, garnered legislative support and raised funds. After completing environmental health and advocacy training, a core group of community representatives met with hospitals, legislators, and media. We initiated round-table discussions involving community members, government regulators, business and hospital administration, and schools of medicine, law, engineering, and arts and sciences. These stakeholders continue to discuss reduction of medical waste and incineration. The St. Louis University medical waste incinerator closed and Washington University School of Medicine stopped incinerating and switched to autoclaving. This project trains the community as leaders, rather than passive recipients of medical service. This project builds infrastructure for environmental health campaigns besides medical waste incineration. In the future, this trained core of community leaders and the round-table network of stakeholders can address other environmental health issues in St. Louis. This community partnership relies on multi-disciplinary cooperation because environmental health combines complex medical, legal, engineering, and community challenges.

**\*STATUS OF SERVICE-LEARNING IN DENTAL EDUCATION**

*Michelle M. Henshaw, Division of Community Health Programs, Boston University School of Dental Medicine*

It has been shown that service-learning can enhance the education of health professionals. Although dental education has a long tradition of community-based experiences, there is scant information pertaining to the extent that service-learning has been incorporated into these educational activities. The goal of this research is to assess the status of service-learning in dental and dental hygiene schools in the United States.

**\*STUDENT REFLECTIONS ON SERVICE LEARNING EXPERIENCES IN A NURSE-MANAGED CLINIC**

*Joyce Splann Krothe, Indiana University School of Nursing*

This poster will describe nursing students' reflections on a service-learning project at a rural nurse managed clinic over a six year period. Service-learning enables students to make the link between theory and practice and to enhance their sense of social responsibility. The community has become a partner in the students' educational process, assisting in defining potential learning experiences. The service-learning involved student participation in the establishment and ongoing operation of the clinic. Students have been involved in every phase of program development

including participation with the Community Advisory Board for the project. Examples of students' reflective writing, both during and after the experience, will be included.

**\*TOOLKIT: SERVICE-LEARNING AND COMMUNITY ORIENTED PRIMARY CARE: PREDOCTORAL-RESIDENCY TRAINING**

*Jan Gottlieb, Department of Family Medicine, UMDNJ-Robert Wood Johnson Medical School*

The goal of this poster is to provide a helpful resource for medical schools that are planning to, or are currently, training students and residents in community oriented primary care (COPC) and cultural competency, through service-learning. The objectives are to develop and disseminate a user-friendly toolkit for integrating service-learning within the overcrowded pre-doctoral and residency curriculum and to develop a system to track how students' service-learning activities addressed Healthy People 2010 objectives. The toolkit was based on the curricular programs developed over the last seven years by our Family Medicine Department in collaboration with community partners. Through this project, tools have been refined and created with the help of an advisory committee comprised of community partners, students and residents, internal and external faculty and staff, and CCPH fellows.

**UNDERSTANDING DETERMINATES OF AND BARRIERS TO FRUITS AND VEGETABLES CONSUMPTION IN MULTI-ETHNIC ADULTS POPULATIONS**

*Ming-Chin Yeh, Karen E. Schultz, David L Katz, Yale Prevention Research Center*

Although increasing fruits and vegetables (F&V) consumption has been a national public health priority for some time, and interventions dedicated to altering dietary habits have been implemented, limited advances have been made toward achieving more F&V consumption by Americans. Process evaluation of the prior interventions reveals three domains in need of further exploration: 1) knowledge and attitudes, 2) determinants, and 3) barriers related to fruits and vegetables intake. A thorough understanding of the factors related to fruits and vegetables intake through the community members' input is a requisite foundation for designing effective interventions. In the early phase of the project, we conducted focus groups to elicit in-depth information regarding these 3 domains related to fruits and vegetables intake in African Americans, Caucasians, and Hispanics. Partnerships were developed with various community organizations and establishments, including, but not limited to, health centers, area supermarkets, local restaurants, churches, hospitals and the Hartford Urban League. These sites were used for recruitment of multi-ethnic adults to participate in on site focus group discussions. A semi-structured questioning format was used in the focus groups to encourage consistency of the questions asked across groups. This format also allows for flexibility in accordance with topics raised and level of participation within the groups.

**WIND SHIFTS AND SEA CHANGES: RESEARCHERS NAVIGATING THE POLICY WORLD**

*Patricia M. Conrad, H J Murphy, Ingrid Sketris, Dalhousie University*

A Drug Use Management and Policy Residency Program was established between Dalhousie University and the Nova Scotia government's Department of Health to provide an opportunity for graduate students with pharmacy degrees to work government decision-makers in areas of policy concerning drug use and management. This Residency Program partnered graduate pharmacy students (and their faculty advisors) with government policy makers in the exploration of issues that would enable the academics to better understand the processes by which research findings are applied in government policy making. This poster will present the results of a formative evaluation of the first year of the Residency Program.