
Underserved Pathway Annual Report

August 14, 2009

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The Underserved Pathway (UP) is entering its fourth year of student participants. The UP provides a curricular focus and support for students who are interested in health care for underserved populations and individuals. Students can enroll in the pathway and participate to completion or simply take advantage of the offerings without earning the certificate of completion. The UP team recognizes that students' interests vary; we seek to provide a broad range of offerings coupled with individual mentoring and UP staff and faculty support to assist each student's design and completion of a pathway tailored to his or her interests and career goals.

In June, 2009, the Underserved Pathway graduated its first class of 13 students who completed the Pathway. Created with HRSA Title VII funds to the Department of Family Medicine (D54HP05261, Academic Administrative Unit in Primary Care, PI Drs Berg/Losh, 09/01/05 - 08/31/08), the program faculty currently receive funding from the Dean of the School of Medicine and staff support is provided by the Department of Family Medicine. The 2008-2009 academic year was a time for the Pathway to reflect and evaluate, paying particular attention to both the student participants' and graduates' insights, and to the emerging needs of the Targeted Rural and Underserved Student Track (TRUST). This report summarizes the current content of the Pathway, the demographics of our students, evaluations by our students, the particular achievements of the past year, and plans for the coming year.

A. Requirements

The Underserved Pathway supports medical students interested in working with underserved populations through mentorship, academic and experiential activities, service learning, and advising. Underserved Pathway students must complete the following:

Mentorship

- Students are matched with a mentor with shared interests who is a healthcare provider working in an underserved setting.
- They establish a long-term mentoring relationship with this mentor and meet a minimum of once per quarter for duration of time in the Pathway.
- They obtain career and educational counseling, support, and advice and are introduced to work in an underserved setting.

Web-based learning modules

- Students must complete eight brief online discussions and presentations of various aspects of underserved medicine.
- Modules focus on specific issues affecting underserved populations.
- Students take online quizzes and participate in online discussion forums with other students and UP faculty.
- Activity is tracked by UP faculty.

Preclinical Activities:

- Students complete R/UOP and/or a preclinical preceptorship with a physician working in a medically underserved community.
- They earn 2 credits of non-clinical selectives that focus on topics affecting underserved populations.

Clinical Activities:

Students complete least 12 credits of approved clinical courses (required or elective clerkships, advanced preceptorships, or sub-internships) at a site serving a large proportion of underserved patients.

Students complete their Independent Investigative Inquiry (III) with a focus on care for the underserved and/or underserved populations. It can be in any of these categories:

- Literature review
- Research project
- Community-based project (completed via RUOP or IHOP)

Community Service

Students are required to complete average of two hours of community service per quarter. They may work with any number of organizations, directly related to health or not. CHAP, SPARX, Al-Shifa, and SITC are several UW organizations where volunteer students are vital.

B. Participants

- During the 08-09 school year, an average of 90 students were enrolled in the UP.
- 13 students graduated in June, 2009, earning UP certificates. Another five from the graduating class were enrolled but did not complete the requirements.
- 75 students are currently enrolled in the UP.
 - 20 are male, 55 female.
- 30% of students are WWAMI.
- Anticipated new enrollment during 2009-10 is approximately 15-20 students.
- 70 physicians have volunteered to be mentors for students in the UP.
 - Approximately 80% are located in Western Washington (rural and urban) and the other 20% are throughout the WWAMI region (primarily rural).

- Appendix A has a list of students, their first year site, their primary interest, and the name of their mentor.
- Appendix B has information on the graduates, including their residency match.

C. Evaluation

Evaluation efforts include process and outcome measures. Process measures this past year included focus groups that were held with participating students in fall 2008 and winter 2009, and exit interviews with the graduating students. Exit interviews were conducted with seven of the 13 graduating students. Phone interviews of the remaining six will be added to the analyses below.

The major outcome measures of career selection and practice placement will be obtained in the future through tracking graduates' career selections after residency. We are working with the Office of Medical Education to develop the tracking instruments and will submit an IRB request.

The results of the focus groups and exit interviews are presented below by theme. Overall, students were generally pleased with the experience. They appreciated participation in the Underserved Pathway as a way to expand their knowledge and to provide a framework for customizing their medical education.

1. Community Building

While the students often could not commit to social events or other gatherings, a dominant theme was a desire to connect with their like-minded peers. They asked for opportunities to gather with other pathway students and for information about workshops, lectures, and other relevant events in the community. Students asked for potluck or brown-bag gatherings with speakers during times of transition, such as WWAMI students arriving in Seattle and the transition to the clinical years.

Consistent with focus group findings, many graduating students desired non-mandatory gatherings (quarterly for instance) to build the UP community. They also suggested developing an alumni network for grads and to connect with current UP students.

2. Mentorship: Value and Challenges

Focus group participants expressed variable benefit from the connection with their UP mentor. The most satisfying mentoring relationships were notable for geographic proximity with the ability to meet in person. Long distance mentorship is difficult for many students to maintain. Second, the ability to build on an existing mentoring relationship, such as one with a preceptor or college mentor was associated with satisfaction. Students valued mentors who are easy to reach, have time to meet with students, and who are engaged in the student's process.

Several graduating students would have liked more structure in the mentor relationship; they suggested that students and mentors be given topics to discuss. There was wide variety in student sophistication in working with a

mentor and in mentor-student engagement in the mentor relationship. Overall, students appreciated having a community physician to provide advice, guidance, and a way for them to envision their own role in underserved medicine.

3. Web Based Curriculum

Focus group and graduating students found value in the web based curriculum and liked the idea of enhancing this with web conferencing, web-casts, and podcasts to accommodate busy schedules, away rotations, and to maintain a connection with the Pathway. Several students mentioned that the curriculum modules would be most beneficial if they continue to focus on issues not covered in classes.

4. Underserved Pathway Requirements

Graduating students thought that the number and complexity of requirements was reasonable to complete for a certificate. Several thought monthly or quarterly check-ins from UP staff or faculty would be helpful to give students the opportunity to ask for assistance and to remind them to work on requirements. Communication preferences varied: some preferred personal emails and some felt that Catalyst surveys were fine.

5. WWAMI-Specific Issues

WWAMI regional students noted fewer choices than the Seattle-based students for the required two credits of non-clinical selectives. Students express the need for the UP to continue the work with the other pathways and the clerkship directors to facilitate their opportunities to complete clerkships in an underserved setting.

6. Community Service

UP Students often bring personal histories rich in community service. They are able to easily complete the requirement of an average of two hours per quarter (or 32 hours in four years), but would appreciate more information about service opportunities. Additional connections to WWAMI region service opportunities would be helpful for first year WWAMI students and clinical students on WWAMI rotations.

7. Residency Selection and Career Planning

Graduating students suggested that the UP have a place on its website to post career guidance information, resources, and residency program information and reviews.

This group suggested the UP provide more information about residency programs with a social justice focus and with reputations for providing opportunities to work with underserved populations. They also thought that exposure to clinical cases and provider experiences would allow students to learn about the varying circumstances, priorities, and considerations relevant to different practice settings: rural, urban, etc.

Exit interview respondents suggested developing an alumni network so UP graduates might maintain contact and network, and so that current students could seek advice from graduates.

8. Recognition

Graduating students identified recognition of students' activities and accomplishments as important; they request that pathway completion be noted in the MSPE/Dean's letter.

D. Initiatives 2008-2009 and Looking Forward

The Underserved Pathway-TRUST Interface

The enrollment of TRUST students in Montana and now Eastern Washington brings special responsibilities to the UP team. During this first year of the TRUST grant from HRSA, the UP team has been integral to the TRUST working group and is continuing to work with regional and local partners to ensure that the work of TRUST advances even before faculty are appointed.

The UP is responsible for ensuring several parts of the medical school curriculum for TRUST students. While the students are enrolled in TRUST (year one until graduation), they will also be enrolled in the UP.

As a select community of students within the UP, their curriculum will be enriched further with enhanced mentoring, web-based modules, and learning sessions. In addition, the UP will work to support them as a community with a goal to sustain their desires to choose careers with the underserved.

We are planning the following:

- a. The UP is currently working with the MSU campus and Peter House on the development of a second tier rural class to bring TRUST students together during the second year, when they are all in Seattle.
- b. The TRUST mentor assigned to a student in the pre-matriculation experience will become the UP mentor for each given student. The UP team will solicit this agreement and work with these regional mentors and their students to encourage a meaningful longitudinal relationship, with return visits if possible.
- c. TRUST students will be hosted by the UP team with a welcome dinner when they arrive in Seattle.
- d. The UP will work with regional faculty to ascertain which non-clinical selectives could be made available to first year students on those campuses via webinar or podcast etc.
- e. The UP will work with regional faculty to assist in identifying or creating service learning opportunities for first year students.
- f. TRUST students of all years will have a quarterly session (in person or live/virtual) that will be a journal club, a career-relevant presentation, or a group session to complete a web-based module.

The Underserved Pathway

Collaboration with other Pathways

1. Working with the Indian Health Pathway, the Global Health Pathway and the Hispanic Health Pathway, the UP team shares leadership of the All Pathways Working Group.

This collaboration among the pathways has demonstrated how a shared purpose can result in an effective partnership that benefits all of the participating students, facilitating their experience to be the most meaningful and individually targeted to student interest.

2. There was shared leadership in the Pathways Kickoff for all campuses again in fall 2008 and is planned for fall 2009.
3. The UP team participates with the TRUST working group to ensure relevant and appropriate curricular offerings, peer group development, and support for TRUST students; we want to be certain that efforts are coordinated and presented in a uniform way to TRUST students.

Dissemination

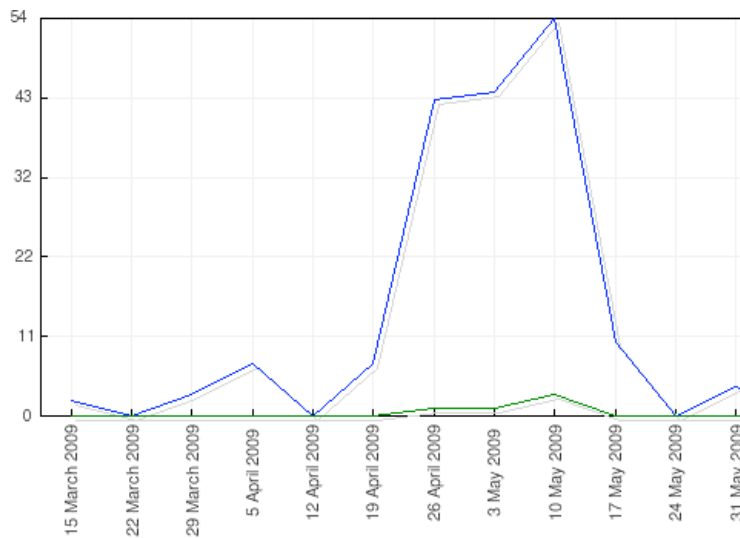
1. The UP team has presented to various student and faculty groups, including the Pre-Mat program of OMCA, AWARE retreat participants, and the College Faculty.
2. They have presented at STFM on coordinating multiple Pathway programs within a single medical school (Denver, CO, 5/09; Chen and Acosta)

Curricular Development

Major changes were made to the web based learning management system. Early in the academic year, the UP modules were integrated into Catalyst Go-Post. Since then we have transitioned to Moodle, which allows us to track student progress towards completion in an accurate way while easing the student's record keeping. In addition, through Moodle, UP students are able to complete learning assessments and post reflections about modules, while faculty and staff can respond to this student participation. (Appendix C)

The table and graph below show the number of views and posts by students during the months of April and May 2009.

Week Ending	Views	Posts
30 May 2009	4	0
23 May 2009	0	0
16 May 2009	10	0
9 May 2009	54	3
2 May 2009	44	1
25 April 2009	43	1
18 April 2009	7	1
11 April 2009	5	0



Views = Blue Line

Posts = Green Line

We evaluated all the modules and the student reflections to them. Each module was revised, data and references were updated, and quizzes or interactive exercises created or updated. Two new modules have been developed and uploaded. Four more are in development and should be ready by early fall.

A pilot in-person session was held; participants worked with a faculty member to complete an interactive module. It was well received and if done as a web-cast, it can be used in the future as a way to bring students together, particularly TRUST students. It can involve multiple sites and can result in the creation of a podcast. Web conferencing can be used to share course work, develop new materials, and to evaluate the program.

New Modules currently being developed are:

- a. Medicaid
- b. Rural Health
- c. Environmental and occupational health risks among rural communities (mining, logging, agriculture, fishing, accidents, zoonoses)
- d. Immigrants and Refugees
- e. Substance Abuse
- f. Homelessness
- g. Self-Paying Patients
- h. Health Care Policy
- i. Women's Health
- j. Comparative Health Systems–International
- k. Incarcerated populations
- l. Health care among American Indian and Alaska Native (AI/AN) populations

Mentor Relations

The quarterly Mentor Memo, initiated three years ago, will be revamped and be accompanied by calls to the mentors to help facilitate conversations with the students. We will consider also giving students prompts of useful topics at various times in medical training.

Web Development

Development of our website will continue. Further links to the Community Service Site for the School of Medicine, other service sites, and to the TRUST site will be developed. Moodle will facilitate tracking of module use, mentor relations, and completion of course work.

Web Modules can be accessed at

<https://depts.washington.edu/fammed/online/anytime/course/view.php?id=124>

Site Visitors need UWNNetID credentials for authentication.

Appendix A: Underserved Pathway Student List

**Appendix A: Underserved Pathway Students
(Graduates and currently enrolled)**

	Last Name	First Name	Entry Year	Graduation Year	Areas of Focus	Year 1 Campus	Other UW Pathways	UP Mentor	Mentor Practice
1	Angel	Joseph	E-07	2011	GLBT, Latino populations	Seattle		Chris Gaynor	Seattle Healing Arts
2	Arredondo	Christina	E-06	2011	Border health, public health, epidemiology	Seattle	GHP, HHP	Franco Monteza	Sea Mar Mt. Vernon
3	Ashenbrenner	Erica	E-06	2010	Youth, EM, FM, general underserved	WSU		Nina Greenblatt	GHC Urgent Care
4	Balinger	Adam	E-05	2010	Urban underserved, homelessness	Seattle		Janelle Walhout	Neighborcare RainierPark Clinic
5	Bateman	Allyson	E-06	2010	Rural underserved	UI		Mary Barinaga	Benewah Medical Clinic, Plummer, ID
6	Beck	Stacie	E-05	2009	Family Medicine	Seattle		Genevive Pagluilian	UW Roosevelt IM
7	Benefield	Andrew	E-05	2009	Native health, Emergency medicine	Seattle	IHP	Lise Alexander	Tulalip Health Clinic
8	Birch	Brian	E-06	2010	Youth, HIV/AIDS	WSU		Mary Fairchok	Mary Bridge Children's Hospital
9	Boggess	Kylie	E-08	2012	Urban, prison, refugee pops.	UI		Susan Powell	Tacoma Commhealth
10	Boulton	Cortney	E-07	2011	Rural Pacific NW	WSU		Anthony Giefer	Eastsound Family Medicine
11	Bovee	Laura	E-07	2011	Urban or rural, immigrant/latino pops.	Seattle	HHP	Gabrielle O'Sullivan	Providence St. Peter Family Medicine
12	Brown	Elizabeth	E-06	2010	OB/GYN, Rural underserved	UWY	IHP	Howard Willson	Rural Wyoming
13	Budak	Jehan	E-08	2012	Latino populations	Seattle	GHP, HHP	Ruth Michaelis	Kent Community Health Center
14	Byrne	Brian	E-06	2010	Rural, FM, EM	UI		Mary Barinaga	Benewah Medical Clinic, Plummer, ID
15	Carrasco	Alicia	E-07	2011	Latino populations	Seattle	GHP, HHP	David Acosta	UW Fam Med, OMCA
16	Celio	Maria	E-07	2011	Youth, obesity prevention	Seattle		Lenna Liu	Odessa Brown Children's Clinic
17	Cross	Karen	E-06	2010	Urban, Communities of color, elderly populations	Seattle		Carla Ainsworth	Swedish Cherry Hill
18	Deisher	Tania	E-07	2011	Alaska, general uninsured	UAA	IHP	Deb Pohlman	Alaska WWAMI
19	Dickens	Lindsey	E-07	2011	Urban, immigrants	Seattle		Jane Huntington	Harborview FM
20	Do	Thuy	E-06	2010	Diverse, urban underserved	Seattle		Ai-khue Nguyen	ICHS Holly Park
21	Dodge	Meagan	E-07	2011	Urban underserved, youth	Seattle		Michael Lippman	Seattle King County Public Health North
22	Fitzmaurice	Maureen (Mo)	E-07	2011	Rural Idaho, FM	UI		Mary Barinaga	Benewah Medical Clinic, Plummer, ID
23	Fox	Nicole	E-07	2011	Urban underserved	Seattle	GHP	NOT YET MATCHED	SEATTLE
24	Gardner	KayCee	E-08	2012	Rural underserved	MSU	MT TRUST	Laura Bennett	Lewistown, Montana
25	Garrity	Jessica	E-08	2012	Rural WA, Latino pops., mentally ill	Seattle	HHP	Misbah Keen	UW Fam Med
26	Gerrish	Sarah	E-04	2009	Family Medicine, global health	UI	GHP	Bradlee Gerrish	Snohomish
27	Geyer	Leah	E-07	2011	Academic Medicine, research, OB, IM	Seattle		Mark Doescher	UW Fam Med
28	Gionet	Elisha	E-05	2009	Women's health	UAA		Diana Villanueva	Sea Mar CHC
29	Gloe	Paul	E-08	2012	Rural Alaska	UAA		Julie Sicilia	Alaska WWAMI FM Residency
30	Hammons	Lee	E-07	2011	Native health, general underserved	Seattle	IHP	Michael Erickson	Seattle Indian Health Board
31	Harris	Christine	E-07	2011	International, U.S immigrants	Seattle	GHP	Raye Maestas	Harborview FM
32	Heer	Tajinder	E-07	2011	Rural underserved	Seattle		Misbah Keen	UW Fam Med

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33	Henne	Heather	E-07	2011	Urban underserved youth	Seattle		Jim Stout	Odessa Brown Children's Clinic
34	Hikida	Abigail	E-08	2012	Homelessness	Seattle		Nancy Sugg	Pioneer Square Clinic
35	Hoffman	Lindsay	E-07	2011	Urban underserved	Seattle	GHP	Megan Debell	Country Doctor CHC
36	Huck	Michael	E-08	2012	Urban underserved, homelessness	MSU		John McCarthy	Spokane WWAMI Asst. Dean
37	Jardine	Brooke	E-08	2012	Urban, rural, Peds, FM	UI		NOT YET MATCHED	SEATTLE
38	Kah	John	E-08	2012	Urban, immigrants	Seattle	GHP	Jeff Lee	Rainier Beach Medical Clinic
39	Karlin	Peter	E-05	2009	Native Health, FM	Seattle	IHP	Wil James	Swinomish Indian Health Clinic
40	Kelly	Karla	E-08	2012	Primary care, urban underserved	Seattle	GHP, HHP	Joe Merrill	UW Harborview IM
41	Khan	Adeena	E-05	2009	Internal Medicine, advocacy/leadership	Seattle		Jane Huntington	UW Fam Med
42	Khan	Tipu	E-04	2008	General underserved, advocacy/leadership	Seattle		David Acosta	UW Fam Med, OMCA
43	Kopa	Justin	E-08	2012	Primary care, urban underserved	Seattle		Mary Curiel	Country Doctor CHC
44	Label	Brianna	E-05	2009	Underserved youth	Seattle		Amy Yosha	UW Fam Med (formerly)
45	Lares	Melissa	E-06	2010	OB/Gyn, Latino pops.	Seattle		Eva Galvez	Sea Mar Seattle
46	Lee	Teresa	E-08	2012	Urban underserved	Seattle	GHP	Jeff Huebner	Renton Community Health Center
47	Lewis	Brenna	E-08	2012	Substance abuse, Alaska Native populations	UAA	GHP	Shannon Wiegand	Alaska FM Residency
48	Lilagan	Flordeliza	E-06	2010	Rural, Family Medicine, immigrants/migrants	WSU		Jose Saavedra	FM, WSU
49	Lim	Grace	E-08	2012	Hospital setting, global health	Seattle		Jeff Lee	Rainier Beach Clinic
50	Lin	Michelle	E-06	2010	Asian americans populations, biostats/epidemiology	Seattle		Alan Chun	ICHS ID
51	Lukoff	Margaret	E-06	2010	Urban underserved	Seattle		Genevive Pagluilian	UW Roosevelt IM
52	Luu	Phuong	E-06	2010	Internal Medicine, health policy	Seattle		Freddy Chen	UW Harborview FM
53	Lynch	Caroline	E-05	2009	Women's health	Seattle		Ruth Michaelis	Kent Community Health Center
54	Mackay	Katherine	E-08	2012	Women and children	WSU-Spokane		Deb Harper	Spokane Asst. WWAMI Dean
55	Marchion	Christina	E-05	2010	Rural, Latino populations	MSU		Laura Bennett	Lewistown, Montana
56	McElwain	Kate	E-08	2012	Urban, prison, immigrants, general underserved	Seattle		Jane Huntington	UW Harborview FM
57	McPoland	Paula	E-05	2009	Children's health	Seattle		Ben Danielson	Odessa Brown Children's Clinic
58	Miller	Maria	E-09	2013	Urban underserved	MSU		NOT YET MATCHED	Entering Aut 09
59	Mitchell	Mike	E-07	2011	Emergency Medicine, urban or rural underserved, public health	UI		Po Huang	Idaho Hospital locums
60	Mullin	Meg	E-05	2009	Family Medicine, advocacy/leadership	Seattle		Jeff Huebner	Renton Community Health Center
61	Norfleet	Daniel	E-07	2011	Alaska primary care; survivors of sexual violence; HIV/AIDS, youth	UAA	GHP	Michael Lippman	Seattle King County Public Health North
62	O'Connell	Meghan	E-05	2010	Family Medicine, Native health	Seattle	IHP	Terry Maresca	Tulalip Health Clinic
63	Olsgaard	Jens	E-08	2012	Urban underserved	MSU	MT TRUST	Diane Timberlake	UW-Harborview FM
64	Ostmann	Heather	E-05	2009	Family Medicine	Seattle		John van Buskirk	Tacoma Family Medicine
65	Peacock-Villada	Elizabeth	E-06	2010	Latino, rural, youth	Seattle	GHP, HHP	Tanny Davenport	Yakima-Central WA Family Medicine

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66	Pennell-Walklin	Ian	E-08	2012	Alaska and international	UAA	GHP	Barb Doty	AK Family Medicine Residency– Wasilla
67	Pereda	Carissa	E-05	2010	Migrant workers, rural	UWY	GHP	Kyle Yasuda	UW-Peds
68	Perry	D.J. (Donald)	E-07	2011	Rural or small city underserved	UI		Dr. McCluskey	Rural Idaho
69	Pletnikoff	Elise	E-06	2010	Native health, primary care	UAA	IHP	Freida Eng	Seattle
70	Pugel	Anne	E-07	2011	General underserved	Seattle		Sarah Lesko	Carolyn Downs Family Medical Ctr.
71	Roberts	Melissa	E-05	2009	Underserved youth	MSU		Quynh Bui	UW Fam Med (formerly)
72	Ruffatto	Ben	E-08	2012	Rural Underserved	MSU	MT TRUST	Burke Hanson	Dillon, MT
73	Safran	Rachel	E-08	2012	Primary care, urban, Latinos, homelessness, prison pops.	WSU-Spokane		Jennifer Edgoose	Tacoma Commhealth
74	Samuelson	Rachel	E-08	2012	Urban or rural, Alaska	UAA		NOT YET MATCHED	ALASKA
75	Sayson	Kirsten	E-04	2009	Family Medicine	Seattle		Rich Kovar	Country Doctor CHC
76	Sheikhizadeh	Javod	E-06	2011	Latinos, youth	Seattle		Ruth Michaelis	Healthpoint Kent
77	Smith	Hana	E-06	2010	Urban underserved, youth	Seattle		Polly Fabian	ICHS Holly Park
78	Sunshine	Jacob	E-07	2011	Urban Underserved, research, health policy	Seattle		Carl Morris	Group Health
79	Swoboda	Sara	E-06	2010	Youth, Native health	UI		Barb Doty	Alaska FM Residency– Wasilla
80	Tea	Julie	E-07	2011	Cross-cultural medicine, immigrant populations	Seattle		Chinda Roach	ICHS Holly Park
81	Torvie	Ana	E-07	2011	Youth, Latinos, immigrants	Seattle	HHP	Sarah Hufbauer	Country Doctor CHC
82	Ulrich	Timothy	E-07	2012	Rural Idaho, Latino populatoins	UI		Steve Newman	Idaho/Utah EM
83	Uno	Beth	E-07	2011	Rural and urban Latino populations	Seattle	GHP, HHP	Ocean Williams	Sea Mar CHC
84	Valentine	Jessica	E-06	2010	Family Medicine, CAM, Native Health	Seattle	IHP	Terry Maresca	Tulalip Health Center
85	Vasquez	Veronica	E-06	2011	Health Policy and Advocacy	Seattle		Grace Wang	International Community Health
86	Wallace	Gabe	E-08	2012	Rural, hospital work, Emergency Medicine	Seattle		Jamie Shandro	UW Harborview EM
87	Wertin	Kate	E-08	2012	Homelessness, gender identity, women's health	Seattle		Nancy Sugg	Pioneer Square Clinic
88	Whitaker	Tara	E-07	2011	Elders, Latino pops., cross-cultural medicine	Seattle		Carrie Rubenstein	Country Doctor CHC
89	Zohner	Julie	E-06	2011	Rural Idaho	UI		Kim Stutzman	Idaho FM Residency
90	Zuger	Sarah	E-08	2012	Primary care, Native health, rural	Seattle	GHP	Amanda Kost	Seattle Indian Health Board

Appendix B: 2009 Underserved Pathway Graduates

Stacie Beck

UP Mentor: Genevieve Pagalilauan

First Year Site: UW Seattle

Residency: Tacoma Family Medicine

Interests/Activities:

- Community Health Advancement Program (CHAP) Foot Care Coordinator 2006-7
- CHAP Sports Clinic Coordinator 2007
- CHAP Derm Clinic Participant 2007

Andrew Benefield

UP Mentor: Lise Alexander

First Year Site: UW Seattle

Residency: University of Florida College of Medicine, Jacksonville–Emergency Medicine

Interests/Activities:

- Indian Health Pathway
- Medicine Wheel Society Officer
- Mentoring Native students via Office of Multicultural Affairs programs

Sarah Gerrish

UP Mentor: Bradlee Gerrish

First Year Site: University of Idaho WWAMI program

Residency: Family Medicine Residency of Idaho

Interests/Activities

- Global Health Pathway
- Al Shifa
- Students in the Community (SITC)

Elisha Gionet

UP Mentor: Diana Villanueva

First Year Campus: University of Alaska Anchorage WWAMI program

Residency: Boston University, Boston Medical Center–Preliminary Surgery then OB/GYN

Interests/Activities:

- CHAP Foot Care Coordinator 2007-7
- Latina Health Fair 2007

Peter Karlin

UP Mentor: Wil James

First Year Campus: UW Seattle

Residency: Tacoma Family Medicine

Interests/Activities:

- Indian Health Pathway
- Students in the Community (SITC)
- Advocates for the Underserved; served as its chair during 2007

Adeena Khan

UP Mentor: Jane Huntington

First Year Campus: UW Seattle

Residency: UW Internal Medicine

Interests/Activities:

- Al-Shifa Health Resource Center Leader
- CHAP Foot Care, Sports Clinic, Derm Clinic, Health Fairs

Brianna Label

UP Mentor: Amy Yosha

First Year Campus: UW Seattle

Residency: UW/Seattle Childrens–Pediatrics

Interests/Activities:

- CHAP Hamilton Health Education and Mentoring
- CHAP Interagency High School Tutoring

Caroline Lynch

UP Mentor: Ruth Michaelis

First Year Campus: Washington State University WWAMI program

Residency: Indiana University School of Medicine–OB/GYN

Interests/Activities:

- CHAP Derm Clinic and Foot Care at Mary's Place
- Al-Shifa Health Resource Center

Paula McPoland

UP Mentor: Ben Danielson

First Year Campus: UW Seattle

Residency: UW Affiliated–Pediatrics

Interests/Activities:

- Odessa Brown Children's Clinic Saturday Clinic
- Group Health Teen Pregnancy Clinic

Meg Mullin

UP Mentor: Jeff Heubner

First Year Campus: UW Seattle

Residency: UW Family Medicine, Harborview

Interests/Activities:

- Students in the Community (SITC)
- Former board director of Al-Shifa Health Resource Center

Heather Ostmann

UP Mentor: John VanBuskirk

First Year Site: Seattle

Residency: Naval hospital, Jacksonville, Florida–Family Medicine

Interests/Activities:

- CHAP Derm Clinic coordinator, 2006-7
- Ellensburg Free Clinic and Oral Health Coalition of Kittitas County
- Washington Academy of Family Physicians (WAFP) Student Delegate

Melissa Roberts

UP Mentor: Quynh Bui

First Year Campus: Montana State University WWAMI program

Residency: University of Michigan Hospitals, Ann Arbor–Internal Medicine/Pediatrics

Interests/Activities:

- CHAP Derm Clinic coordinator
- Mentoring, tutoring and other work with elementary and middle school kids

Kirsten Sayson

UP Mentor: Rich Kovar

First Year Campus: Seattle

Residency: Providence Portland Medical Center, Oregon–Internal Medicine


Interests/Activities:

- SITC president, 2006-7
- CHAP Hamilton Health Education and Mentoring




**Appendix C: Curricular Modules on Moodle with usage data since
January 2009**

Underserved Pathway Student Web Modules

Computed from logs since Tuesday, 20 November 2007, 04:50 PM.

Activity	Views	Last access
 News forum	14	Friday, 17 July 2009, 01:08 PM (8 days 19 hours)



Topic 1

 Introduction	59	Monday, 13 July 2009, 12:52 PM (12 days 20 hours)
 Who Are the Underserved?	47	Tuesday, 14 July 2009, 10:06 AM (11 days 22 hours)
 Assignment for "Who Are the Underserved?"	172	Wednesday, 22 July 2009, 12:44 PM (3 days 20 hours)

Topic 2

 Introduction	30	Wednesday, 22 July 2009, 03:48 PM (3 days 17 hours)
 Caring for Patients with HIV/AIDS	33	Wednesday, 22 July 2009, 12:48 PM (3 days 20 hours)
 Assignment for Patients with HIV / AIDS	66	Wednesday, 22 July 2009, 12:49 PM (3 days 20 hours)



Topic 3

 Medicare 101	33	Monday, 20 July 2009, 03:05 PM (5 days 17 hours)
 Assignment for Medicare 101	61	Wednesday, 22 July 2009, 02:47 PM (3 days 18 hours)


Topic 4

 Race, Ethnicity and Health Care	55	Friday, 24 July 2009, 11:49 AM (1 day 21 hours)
 Assignment for Race, Ethnicity and Health Care	68	Friday, 24 July 2009, 12:11 PM (1 day 20 hours)

Topic 5

 Access to Care for People with Disabilities	22	Monday, 20 July 2009, 03:54 PM (5 days 16 hours)
 Assignment for Access to Care for People with Disabilities	38	Monday, 20 July 2009, 04:22 PM (5 days 16 hours)



Topic 6

 Introduction and Resources	40	Friday, 24 July 2009, 10:35 AM (1 day 22 hours)
 Urban Underserved and Chronic Poverty	39	Friday, 24 July 2009, 11:29 AM (1 day 21 hours)
 Assignment for Urban Underserved and Chronic Poverty	65	Friday, 24 July 2009, 11:44 AM (1 day 21 hours)

Topic 7

 Introduction	17	Thursday, 23 July 2009, 04:15 PM (2 days 16 hours)
 Intimate Partner and Domestic Violence	31	Thursday, 23 July 2009, 04:17 PM (2 days 16 hours)
 Assignment for Intimate Partner or Domestic Violence	51	Thursday, 23 July 2009, 04:15 PM (2 days 16 hours)

Topic 8

 Public Health Epidemiology	42	Monday, 13 July 2009, 08:25 PM (12 days 12 hours)
 Assignment for "Public Health Epidemiology"	130	Monday, 13 July 2009, 08:26 PM (12 days 12 hours)

Topic 9

 Focus Group Web Meeting	-	
 Archived Discussions	1	Sunday, 29 March 2009, 07:09 AM (119 days 1 hour)
 UP Meeting	-	

Topic 10

 Empty Page	10	Friday, 19 June 2009, 12:10 PM (36 days 20 hours)
 Quiz for Intimate Partner Violence Module	2	Thursday, 23 July 2009, 04:16 PM (2 days 16 hours)
 fgxdxz	-	
 cfgc	10	Friday, 5 June 2009, 11:03 AM (50 days 21 hours)
 test_db	-	
 Medicare Case Study	29	Wednesday, 22 July 2009, 03:40 PM (3 days 17 hours)
 HIV Quiz	6	Wednesday, 22 July 2009, 02:48 PM (3 days 18 hours)
 Caring for Patients with HIV/AIDS	8	Thursday, 9 July 2009, 03:14 PM (16 days 17 hours)

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