**LESSONS FROM INITIATIVES AND COLLABORATION: DIABETES PREVENTION IN NEW HAVEN CHURCHES**  
**Story Session (Beginner/Intermediate) ~ Sharing Power and Resources in Community-Campus Partnerships**  
*Lindsey Greene and Maurice Williams, Yale-Griffin Prevention Research Center; Sharon Bradford, New Haven Family Alliance; Lillian Richardson, Bethel African Methodist Episcopal Church*  
**Room: TBA**

The Yale-Griffin Prevention Research Center (PRC) developed a community partnership team (CPT) to address diabetes in the African-American community in New Haven. The CPT was instrumental in finalizing the design of the eventual intervention. Key elements of the intervention included: a 10 week training session, outreach activities, additional educational and networking opportunities for community health advisors (CHAs) and participation in community events. The curriculum was informed by the Diabetes Prevention Program (DPP). The development of the partnership structure in this project is of particular interest. It began with the CPT members and evolved to include local churches and expanded further to include individual community members in the form of CHAs. Thus, partnerships were formed at both organizational and individual levels. Examination of the role and contribution of each partnership is also of interest. A CHA council was formed to ensure sustainability and survey evaluations were conducted at the beginning and end of CHA sharing/teaching.

**OWNERSHIP OF INTELLECTUAL PROPERTY WORK INVOLVING IMMIGRANT & ABORIGINAL COMMUNITIES**  
**Story Session (Intermediate) ~ Ethical Issues Raised by Community-Campus Partnerships**  
*Hélène Grégoire, Access Alliance Multicultural Community Health Centre; June Ying Yee, School of Social Work, Ryerson University*  
**Room: TBA**

Access Alliance engages in community-university partnerships aimed at reducing health disparities affecting racialised groups and, through this work, has become aware of the challenges associated with knowledge ownership, authorship and intellectual property rights. These sometimes arise from the distinct pressures faced by academics and community agencies. As our research advances, we know that issues of representation will also come to the fore: what will happen, for instance, if different partners disagree on what findings mean and how they should be represented? While we believe that the community should retain ownership and control of knowledge generated through CBPR, we are struggling to figure out what this looks like in practice. We know that Aboriginal peoples have made considerable advances in thinking about these ethical issues. In the Winter 2006, we will hold a roundtable to bring our partners together with researchers from Toronto’s aboriginal communities so that we may learn from their experience.
BUILDING COMMUNITY CAMPUS PARTNERSHIPS TO REDUCE ORAL HEALTH DISPARITIES
Workshop (Intermediate) ~ Community-Campus Partnerships that Address the Major Determinants of Health and Social Justice
Joan Gluch, School of Dental Medicine, University of Pennsylvania; Peter Berthold, School of Dentistry, University of Minnesota; Karl Self, Community-University Health Care Center
Room: TBA

Oral health is an essential part of general health, and greater disparities in oral health status exist among racial and ethnic minorities, the poor, the elderly and the disabled. Clearly, more creative and substantive measures are needed to increase access to oral health care and reduce oral health disparities. This session focuses on increasing participants' knowledge in oral health, and skills in cultivating community campus partnerships around oral health issues. This session focuses on developing creative and authentic partnerships that address major determinants of health and social injustice, specifically disparities in oral health status and access to dental care.

RESOURCE DEVELOPMENT STRATEGIES FOR SUSTAINING COMMUNITY PARTNERSHIPS
Workshop (Beginner/Intermediate/Advanced) ~ Sustaining Community-Campus Partnerships
Joseph Swaba, Community College National Center for Community Engagement
Room: TBA

This session will be framed within the context of a skill-building workshop on writing federal and non-federal grant proposals. The partnerships developed during the process of collaboration in the effort is a critical component of the grantwriting process; often the collaboration involved in the process is as valuable of an outcome as the completed proposal. Building upon successful campus-community collaborations to a variety of federal agencies (the US Department of Housing and Urban Development (HUD), the US Department of Education, Health Resources and Services Administration (HRSA), the US Department of Labor, the National Science Foundation), the best practices provide a basic formula for successfully expanding the impact and effectiveness of campus-community partnerships.

NARRATING THE JOURNEY: IMMERSION EDUCATION AND COMMUNITY PARTNERSHIP Story Session (Intermediate) ~ Student Leadership and Activism in Community-Campus Partnerships
Michael Bassman and Kendra Harris, The University Honors Program, East Carolina University
Room: TBA

This partnership demonstrates the value of campus-community partnerships, both for the university community and students as well as for the elementary school students and their community. The partnership provided a chronically underserved public school with English language tutors and mentors for primarily Spanish-speaking K - 2nd-grade students. Through academic service-learning, it provided critical professional preparation for emerging health care professionals by developing understanding of the cultural, social and occupational and other health issues in a rural Latino population. The University students involved are better prepared to serve the health care needs of Latino migrant farm workers and other clients in rural Eastern North Carolina and the elementary school students have developed English language and reading skills, an increased awareness of health and safety issues and have garnered the benefits of mentoring through positive partnerships with ECU students.

COLLABORATION FOR HEALTH: A PARTNERSHIP FOR PHYSICAL ACTIVITY
Workshop (Intermediate) ~ Community Strategies for Campus Engagement
Suzanne B. Cashman, University of Massachusetts Medical School; Patricia Planagan, YWCA of Central Massachusetts; Lucy Candib, Family Health Center
Room: TBA

An urban community health center with links to a university through a residency training program developed a project in partnership with the local YWCA to offer open access to physical activity to low-
income multi-ethnic patients and health center employees. Clinicians often recommend physical activity to patients with diabetes and metabolic syndrome, but financial barriers and concerns for safety and comfort frequently impede patient follow-through, thus preventing improved health. In this project, the YWCA's commitment to eliminating racism and the lead institutions' partnering to underwrite the cost of several institutional memberships to the YWCA have resulted in over 730 patients logging 8000 exercise events in 16 months; patients with diabetes have been among the most frequent users of the facility. Medical students assisted non-English speaking patients in getting to the YWCA for the first time; the Y provided bilingual orientation to the facility and strength training room.

**ASSESSING, DOCUMENTING, AND REALIZING THE BENEFITS OF COMMUNITY-CAMPUS PARTNERSHIPS TO ALL PARTNERS**

Thematic Poster Session (Beginner/Intermediate/Advanced)
Facilitator: Richard Redman, CCPH Board of Directors
Room: TBA

- **Authentic Academic Service Partnerships: A Many Splendored Thing**
  *Emma Kientz, College of Nursing, University of Oklahoma-Tulsa; Betty Kupperschmidt, University of Oklahoma-Tulsa*

  The University of Oklahoma College of Nursing -Tulsa (OUCN) has developed rich partnerships within the University and with large number of community-based agencies encompassing principles of service learning. The goal of these partnerships is to address racial and ethnic health disparities; increase access to healthcare; and prepare students from wide range of disciplines for practice. Overall lessons learned included 1. Imperative upfront collaboration, including identifying and using strengths of all concerned. 2. Maintain documentation to assure cost-effective, value added evidence-based services. 3. Emersion of self into clients' environment to facilitate effectiveness (learn about and work with extant cultural mores). 4. Necessity of flexibility, adaptability, and non-judgmental attitude (of all concerned)

- **Fun 2B Fit: Creating a Sustainable Partnership to Prevent Child Obesity**
  *Barbara J. Kruger, School of Nursing, University of North Florida; Karen Bush, Northeast Florida Area Health Education Center, Marti Hicks, community resident*

  We describe methods used to sustain a community-campus partnership among multiple partners to address obesity prevention among school-aged children and families. The Fun 2B Fit program was initiated in 2002 by a rural health department and school health advisory committee with assistance from three nursing students, faculty, and the Northeast Florida Area Health Education Center. Four years later, 130 nursing, community health, and nutrition students have reached 1500 elementary school children in four schools across three counties and prompted spin-offs and expansion. Some nursing faculty and students are residents of these communities. Students learn and serve through their academic program providing continuity. A Blackboard course website provides a forum for communication, implementation, quality monitoring and allows partners to respond to student reflections. We discuss the impact on the partners, particularly significant institutional changes to build partner capacity.

- **Health Promotion in Rural Alaska: Building Partnerships Across Distances and Cultures**
  *Elaine Drew, Center for Alaska Native Health Research, University of Alaska Fairbanks; Cécile Lardon, Department of Psychology, University of Alaska Fairbanks; Douglas Kernak, Piciryaratgun Calritllerkaq*
This presentation addresses the process and importance of developing mutual understanding and respect among collaborative partners prior to jumping into health promotion. In our current partnership to reduce health disparities among Yup’ik Eskimos, we realize that university researchers and staff must first work to understand Yup’ik conceptions of health and wellness, local knowledge of particular disease entities, and the structural context of daily life in remote Yup’ik villages. Likewise, our Yup’ik partners need to understand the university culture and structure as well as the demands/limitations set by funding agencies. By mutually engaging this process of learning from the start, both partners develop a shared understanding of the projects and goals, the process of decision making and resource sharing, and the building of capacities and infrastructure.

- **The Experience of Hmong Women Living with Diabetes**  
  *Avonne A. Yang and Eslee Vang, College of St. Catherine*

  Type II diabetes is rapidly increasing in the Hmong community. A paucity of research exists on Hmong women with diabetes. Theoretical Framework: Community-based collaborative action research using Margaret Newman's theory of health as expanding consciousness was the framework for engaging Hmong women with diabetes in a dialogue to understand life patterns and envision potential actions for health. Methodology: Five Hmong women with type II diabetes and HgbA1c levels over 7.0 were recruited from a community health clinic. Female Hmong nursing researchers interviewed participants in their homes. Interviews were conducted until no new patterns were identified. Researchers worked with a female Hmong playwright to weave common patterns into a play. Female Hmong nursing students performed the play for Hmong women invited via Hmong radio and community advertisements to a dinner, performance, and dialogue. The dialogue focused on whether the play reflected women's experiences and on how to live a happy, healthy life in the US.

- **"ITrWe" Student Technology Assistance for Neighborhood Development Center Urban Businesses**  
  *Carole Bagley, Mari Heltne, Michael Morgen, John Schriver and Rachel Paul, University of St Thomas; Dave Bonko, Neighborhood Development Corporation*

  The use of service learning as a methodology affords the opportunity to greatly broaden students' understanding of people whose experiences and life stories are far different than theirs. We are currently working with the Neighborhood Development Center (NDC) for whom our "IT r We" technology consultants (students of the Quantitative Methods and Computer Science 110 course) provide Hispanic, Somali and Hmong business owners with technology assistance. We have found a great deal of admiration and respect develops among clients and students who learn as much or more than they teach. A major goal is for students to become engaged citizens who recognize the intersections and responsibilities of community life. This evolving authentic partnership provides the NDC businesses with greatly needed technology assistance. We are growing and will be assisting 22-25 businesses in the Lake Street community. Positive comments are showing us that both University of St Thomas students and the NDC business clients benefit from the experience.

- **Building food security: The role of the community-academic partnership**  
  *Doug West and Connie Nelson, Lakehead University; Marg Stadey, Northwestern Ontario Regional Food Distribution Association*

  Our experiences suggest that a community-academic research partnership helps the community build confidence to act on food security issues. This confidence for action arises because in the process of building a partnership we strengthen trusting relationships, increase the density of social networks, and shared community norms and sanctions.
This builds collective efficacy (Morenoff et al., 2001; Sampson, et al., 1999; & Sampson, et al., 1977) whereby a community understands and engages in actions that demonstrate the shared belief that food insecurity is a drag on the well-being of both individuals and the community as a whole.

This community-academic research partnership is a long-term commitment that in less than two years has already achieved many successes, and in doing so has built new networks, solidified others and developed a trusting commitment among many to achieve both a greater awareness of food insecurity issues and to enhance the level of food security in the community.

**CAMPUS STRATEGIES FOR COMMUNITY ENGAGEMENT**

**Thematic Poster Session (Beginner/Intermediate/Advanced)**

*Facilitator: Cynthia Barnes-Boyd, CCPH Board of Directors*

*Room: TBA*

- **Building Sustained Community Partnerships as a Foundation for Scholarship**
  
  *Ann Banchoff, Office of Community Health; Michaela Kiernan and Lisa Chamberlain, Scholarly Concentration in Community Health, Stanford University School of Medicine*

  This session will tell the story of Stanford's experiences in community-campus partnership over the last five years - both the successes and the challenges. The 2003 introduction of the very popular Scholarly Concentration in Community Health aligned with the School of Medicine's desire to work more closely and effectively with our Community Partners. The opening of the Office of Community Health in the Fall of 2005 marks a new commitment on the part of the School of Medicine to building and maintaining authentic partnerships - and to integrating the needs of the community with our academic programs. We will outline the steps we have taken to achieve our goals (partnership-building steps, fundraising strategies, etc.) and work with session participants to develop innovative strategies for confronting some of the challenges we all face in building authentic community-campus partnerships.

- **Read, Set Stop! Is the Structure in Place for a Successful Experience?**
  
  *Margo Marko, School of Nursing, University of Minnesota*

  The goal is to provide a safe clinical experience for the student and provide for the community and/or organization the confidence, that legal, liability and safety issues have been addressed. As concerns over privacy, patient confidentiality, safety and liability costs appeared on the radar screen of Health Organizations, it became clear that our students would be affected. The School of Nursing (SON) along with several other colleges within the Academic Health Center (AHC) at the University of Minnesota began our efforts to be proactive and establish systems and processes to a deal with these new requirements. Collaboratively with the legal counsel, a standard Affiliation Agreement was created. It addresses legal and liability issues concerning the students relationship with the organization and our education responsibilities. To support this agreement, the SON established a data base system that could house essential information from the first conversation, through the 5 year cycle to triggering the timeframe for review. With over 250 current agreements, maintenance of records is essential. Another example regarding HIPAA (Health Insurance Portability and Accountability Act) and student immunizations. A policy and process was established across the AHC that required all AHC students upon admission to complete HIPAA Education and all required immunizations. Failure to do so would put a hold on their record. Beyond a hold being place, if the student does not address their ongoing immunization requirements before expiration dates, they will be pulled from their clinical experience. This has potential to impact their ability to progress. The SON has achieved 100% compliance for HIPAA. Immunizations run on average 92% compliance which is up
from 75% 2 years ago. Another AHC initiative was around Blood Borne Pathogens. Community partners worked closely with the AHC to address access to treatment for students should an exposure occur. The outcome was the establishment of standard education, policy and procedure and pocket cards for our students. Finally, the most important part of establishing and maintaining community partnerships is in the relationships.

- **The Science of How People Learn: Foundation for Effective Community-based Educational Outreach**  
  *Donna H. Harward and Caroline Jennette, Kidney Center, University of North Carolina at Chapel Hill*

  Too often, community-based educational outreach comprises short-term interventions that are administered by campus-based enterprises and result in information flow back to the campus community with little attention to strategies that ensure opportunities for constituents’ active learning and subsequent measures of whether citizens, in fact, learned information or, more importantly, changed a specified health behavior. Kidney disease is on the rise in the US and North Carolina ranks 9th in statewide prevalence of End Stage Renal Disease (ESRD).** This model for a the statewide Kidney Education Outreach Program (KEOP) is based on the science of how people learn and emphasizes the partnership between campus-based resources and community-based lay leaders in providing active learning opportunities that are customized to the needs/preconceptions of a targeted population. Lay leaders from targeted communities help design and lead the interactive outreach and the focus groups that are part of the preconceptions phase inform session development.

- **Identifying End-of-life Concerns with the Near East Side Community, Buffalo, New York**  
  *Mary Ann Meeker, School of Nursing, University at Buffalo, SUNY; Mark Lucas, Black Leadership Forum Near East Side Community Health Task Force*

  The purpose of this project is to develop a collaborative relationship between the University at Buffalo School of Nursing and community members from the predominantly African American Near East Side of Buffalo to identify concerns and needs of community members who are engaged in assisting a family member with cancer. The specific aims of the project are to: (1) elicit and describe the views of community members related to end of life caregiving and surrogate decision-making for family members with cancer, and (2) to develop specific interventions addressing identified needs. Data are being collected through focus groups and analyzed using grounded theory methods. Through the use of a community-based participatory approach, the work team will be able to create and implement culturally appropriate responses to the needs identified within this community.

- **Community and Institutional Readiness for Engagement in Community-Based Participatory Research**  
  *Kara Noelle Durand, School of Medicine, University of Pennsylvania*

  With ever increasing interest and funding for CBPR, the potential exists for enthusiastic researchers and/or community groups to attempt to engage in a research partnership without first ascertaining the readiness of the dyad for such an undertaking. In order for CBPR to be optimally and authentically conducted, both partners must have certain resources, structure and leadership in place. It is important for institutions to be cognizant and well-informed of the appropriateness of any given proposed partnership with a community or community organization. Likewise, for communities and community groups to maximally benefit from CBPR relationships, and to avoid the frustration and discouragement of failed attempts, it is imperative that the resources, both material and human, exist to support and sustain such relationships. The goal of this study is to elucidate these indicators of readiness, both in
research institutions and communities/community groups. A review of the literature as well as survey of past participants, both community members and researchers, as well as experts in the field will be employed to generate these guidelines.

(Thursday’s workshops, story sessions and thematic poster sessions continued below)
“I was taught that the world had a lot of problems; that I could struggle and change them; that intellectual and material gifts brought the privilege and responsibility of sharing with others less fortunate; and that service is the rent each of us pays for living—the very purpose of life and not something you do in your spare time or after you have reached your personal goals.”

Marian Wright Edelman

*Please note – Beginner, Intermediate, and Advanced indicate the intended audience for each workshop session.

DEVELOPING LOCAL THEORY FOR TAKING LOCAL ACTION TO ADDRESS COMMUNITY HEALTH PROBLEMS
Workshop (Intermediate/Advanced) ~ Sharing Power and Resources in Community-Campus Partnerships
Michael T. Wright, Martina Block and Karl Lemmen, Research Group Public Health, Social Science Research Center Berlin
Room: TBA

In community-based health programs an increasing emphasis is being placed on "theory-based" interventions; that is, those interventions which can be explained in terms of a specific theory or model. A common practice in proposal writing and project reporting is to take theories or models which have been developed by academics. This approach assumes that theory development is the exclusive domain of researchers. In reality, every community-based organization already operates according to their own theories, based on experience, regarding the causes of community health problems and how these problems can be solved. These theories often remain implicit, rarely being brought into the form of a systematic explanation which could serve as a basis for intervention development and evaluation. In this workshop a method will be demonstrated which is being developed in collaboration with non-governmental organizations (NGOs) in various parts of Germany for developing local theories to describe local health problems, based on the concrete experience of community workers.

CAMPUS POLICIES AND PROCEDURES: HOW TO AVOID STUMBLING WHILE "WALKING THE TALK"
Story Session (Intermediate) ~ Ethical Issues Raised by Community-Campus Partnerships
Terry L. Shelton and Jim Frabutt, Center for Youth, Family and Community Partnerships, University of North Carolina at Greensboro
Room: TBA

This story session will address some challenges and solutions faced by research centers as they engage in community based participatory action research and community-campus partnerships. This presentation is appropriate for multiple skill levels from those just beginning a research center to those who have centers established through a major grant (e.g., US Department of Housing and Urban Development’s (HUD) Community Outreach Partnerships Centers Program (COPC)) and seeking to sustain their activities to those who have well established centers. The story session will address two primary topics: ethical issues as well as challenges to sustaining partnerships. While trying to achieve the 9 principles of partnership (Community-Campus Partnerships for Health (CCPH)) is key to authentic collaboration, attention must also be directed toward the practices and infrastructure of the academic partner that can impede "walking the talk" even if the commitment to partnership is there. The lessons shared will highlight
both potential pitfalls that need to be addressed as well as possible solutions that can support the campus in the development of authentic collaboration.

MEN ON THE MOVE
Story Session (Intermediate) ~ Community-Campus Partnerships that Address the Major Determinants of Health and Social Justice
Alfonzo Branch and Victor Motton, Pemiscot County Community Coalition; Elizabeth Baker, Saint Louis University School of Public Health
Room: TBA

This story session will focus on developing educational and economic opportunities for African American men in a rural, economically depressed county in Missouri. We will include information on how we moved from a focus on heart health to a focus on social determinants, some of the processes we used to plan educational and economic opportunities for African American men, our current activities, and future plans. We will tell the story of the challenges we have faced in working together, telling our story to others, deciding on the path we want to take to reach our goals, and obtaining funding. The work of the PCCC is an example of how community members can participate in defining the underlying factors affecting the health of their community and work toward effective solutions.

THE ROLE OF A UNIVERSITY-BASED HEALTH POLICY CENTER IN INFORMING, ENGAGING, AND ENERGIZING THE PHILANTHROPIC COMMUNITY ON HEALTH-RELATED ISSUES IN GEORGIA
Story Session (Beginner) ~ Sustaining Community-Campus Partnerships
Mary Ann Phillips, Georgia Health Policy Center, Georgia State University; Bobby Cleveland, Tull Charitable Foundation
Room: TBA

Representatives of the Georgia philanthropic community joined forces to enhance the ability of foundations to identify, fund, and evaluate health grant-making opportunities throughout the state. This community, the Philanthropic Collaborative for a Healthy Georgia, asked and funded the Georgia Health Policy Center (GHPC) to provide research, programmatic, and administrative support for its efforts. During this five-year partnership, GHPC prepared several user-friendly publications for the Collaborative that have been disseminated to over 200 foundations around the state, served as the liaison between the foundations and the state’s Department of Community Health and the Division of Public Health, and monitored and provided technical assistance to 13 school health and 9 rural health Collaborative-funded communities. In addition to school health and rural health, GHPC and the Philanthropic Collaborative have partnered on cancer prevention and, currently, an initiative that engages foundations in addressing childhood obesity.

A COMMUNITY IMPACT STATEMENT: A PRE-NUPTIAL AGREEMENT FOR COMMUNITY-CAMPUS PARTNERSHIPS
Workshop (Intermediate) ~ Assessing, Documenting, & Realizing Benefits of Community-Campus Partnerships to All Partners
Susan Ann Gust, Partners Three Consulting Company; Cathy Jordan, Children, Youth and Family Consortium, University of Minnesota (Co-organizers, GRASS Routes)
Room: TBA

In 1993, Susan Gust, a community activist, and Cathy Jordan, then a University of Minnesota pediatric neuropsychology post-doctorate, were two of the founding members of the Phillips Neighborhood Healthy Housing Collaborative (PNHHC). Though we were unfamiliar with the concept at the time, the PNHHC designed and implemented two community-based participatory research (CBPR) projects. In our implementation of CBPR, the model of shared power of the PNHHC was of parallel importance to the research projects. Susan and Cathy have captured the best practices of the PNHHC, integrated them with Susan’s construction experience and knowledge of Environmental Impact Statements (EIS), and
drafted a Community Impact Statement (CIS). The CIS outlines a process for community and university partners to discuss issues such as project design, identifying participant assets and self-interests, addressing cultural/class differences and conflict, establishing understanding of each other's mutual knowledge, and anticipating the benefits to, and potential negative impact on, the community and the institution.

**CAN A "BROKER" BE AUTHENTIC? THE ROLE OF PUBLIC SERVICE CENTERS IN SUSTAINING PARTNERSHIPS**

*Story Session (Beginner/Intermediate/Advanced) ~ Campus Strategies for Community Engagement*

*Michaelann Jundt and Rachel Vaughn, Carlson Leadership & Public Service Center, University of Washington*

*Room: TBA*

Can the "broker" model achieve the goal of deepened learning? How well can a centralized center inspire colleges and communities to work together? Much of the literature in service learning and civic engagement focuses on building and sustaining partnerships between individual faculty and community partners. We will contribute to this conversation by discussing how centralized university public service centers can build and sustain enduring community-campus partnerships. Through the lens of the Principles of Partnership, we will discuss how service center staff work with students, community partners, and faculty to facilitate and coordinate partnerships, dissect the challenges inherent in the "broker" model, and begin to identify how a centralized center's philosophy and processes can contribute to your work.

**STUDENT LEADERSHIP AND ACTIVISM IN COMMUNITY-CAMPUS PARTNERSHIPS**

*Facilitator: TBA*

*Thematic Poster Session (Beginner/Intermediate/Advanced)*

- **Making the Links: A Vertical Theme in Social Accountability**  
  *Ryan Meili and William L. Albritton, College of Medicine, University of Saskatchewan*

  Making the Links (MTL) is a unique student-driven service-learning project in which medical students are exposed to, and learn to address, the determinants of health in multiple underserved contexts. It is a collaboration between the College of Medicine, the Northern Saskatchewan communities of Buffalo River Dene Nation and Ile a-la-Crosse, SWITCH; the Student Wellness Initiative Toward Community Health in inner-city Saskatoon, and THRP: Training for Health Renewal Program in Massinga, Mozambique. Selected first year medical students take a seminar course in Aboriginal and Northern issues. During their summer break they spend six weeks on the Buffalo River Dene Nation reserve or in the Metis town of Ile a-la-Crosse. While there they work alongside local health workers and take part in various youth-directed Community Health programs. During second year, the students work at SWITCH, an interdisciplinary student-run project in an urban underserved area of Saskatoon. They also take a survey course in Global Health. In the summer of second year they travel to Massinga, Mozambique where they work in a rural hospital and accompany Participatory Action Research in a nearby village. Making the Links is in the early stages of its development. The first groups of students have gone to the North and to Mozambique. The SWITCH clinic opens its doors in mid-October, 2005.

- **Project PATHS: Empowering Latino Youth to Choose Health and Science Careers**  
  *Holly E. Jacobson and Eva Peña, Department of Kinesiology, Health Promotion and Recreation; Francisco Soto Mas, School of Public Health, University of North Texas Health Science Center*
One of the goals of Project PATHS is to increase the representation of Latino students in health professions. Objectives include increasing the number of Latino students reporting interest in health professions and taking college entrance exams. In order to achieve program goals and objectives, Project PATHS has established a community-campus collaborative partnership between the Dallas Independent School District and the University of North Texas. The 3-year project, funded by the National Institutes of Health, is currently in the implementation phase. This paper describes intervention strategies of Project PATHS, the results of the midterm impact evaluation, and lessons learned. Project PATHS adopted an ecological approach based on the social learning theory.

- **CHIUS hearts@work as Model for Interprofessional Community Based Learning**
  *Andrew W. Morgan, University of British Columbia*

  CHIUS (Community Health Initiative by University Students) is an interprofessional student-led clinic in the Downtown Eastside (DTES) of Vancouver, an area of the city afflicted by extreme poverty, drug use, and crime. Hearts@work is a community-based organization that leads heart health workshops for employees at local businesses. Based on student experiences volunteering at the CHIUS clinic it was felt that “heart health” issues, hypertension, exercise, and proper nutrition in particular, were not being addressed. This was felt to be due largely to the fact that many patients have medical conditions such as HIV and/or Hepatitis C infection, mental illness, and substance use that are much more prominent health concerns than the relatively silent signs of heart disease. Thus an interprofessional group of students, representing the faculties of Medicine, Pharmacy, Dietetics, Nursing, and Occupational Therapy was established in an attempt to adapt the hearts@work program to suit the needs of the patient population, all while uniting the university, the hearts@work program, the Carnegie Community Centre, CHIUS, and DTES community itself in a health education intervention.

- **The Impact of Student-to-Patient Education at Community Health Fairs: A Pilot Study**
  *Christopher J. Dy, Leonard M. Miller, School of Medicine, University of Miami*

  Patient empowerment is key to achieving safe and high quality care and is becoming an increasingly prominent issue in our health care environment. It is imperative that community outreach projects help to shape and refine innovative educational efforts. Assessing and improving levels of chronic disease patient knowledge are critical steps towards assuring the effectiveness of preventive medicine. We conducted a pilot study in Key West, FL during the January 2005 Key West Health Fair (KWHF), and subsequently followed up with subjects via phone in the weeks following the fair to assess the effectiveness of dedicated student-to-patient education. After IRB approval, a convenience sample of subjects was recruited at the KWHF registration station; informed consent was obtained from 51 of the total 262 health fair participants (19%). We collected demographic information and, using an orally-administered true/false questionnaire, we assessed the subject’s level of knowledge about hypertension, high cholesterol, and diabetes mellitus. Trained medical students then used a standard student-to-patient education protocol to teach patients about chronic disease knowledge (CDK).

- **Developing Relationships: Vanderbilt University and the Nashville Community**
  *Sarah VanHooser, Darcy Freedman, Danielle Mezera, Barbara Clinton, Craig Anne Heffinger, and Sharon Shields, Vanderbilt University*

  This poster will highlight two campus strategies to increase community partnership between Vanderbilt and the Nashville community. It will also address efforts being made at Vanderbilt
to improve student and faculty knowledge, skills, and opportunities for conducting research and scholarship as a process that is shared with the community. This storytelling session will highlight the strengths of these experiences as well as lessons learned as a result of their development and implementation. Discussion about the promotion of community-based participatory research (CBPR) and teaching on other campuses will be also be explored.