UNIVERSITY OF LOUISVILLE

# Health Sciences Center Office of Diversity and Inclusion

## 2016 – 2017 Annual Report

## August 1, 2016 – July 31, 2017

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**Appendices**
Separate document

**Message from the Associate Vice President for Health Affairs/Diversity Initiatives**

To our Stakeholders,

Once again, I have the privilege of providing our 2016-2017 Annual Diversity Report from the Health Science Center (HSC) Office of Diversity and Inclusion. Using the *American Association of Colleges and Universities Model of Inclusive Excellence and Change in Postsecondary Institutions*, which includes four critical and interdependent components of 1) Access, Equity & Success; 2) Campus Climate; 3) Curricular Transformation; and 4) Learning & Development, we feel our success is dependent on how well we value, engage and include diversity throughout each of these interconnected venues.

Although never ending, our purpose is to create an inclusive, engaged community through the understanding and celebration of the many differences in perspectives, thoughts, experiences, belief systems and cultures of our students, faculty and staff. We place a great deal of emphasis on providing opportunities - opportunities to engage our HSC community in learning activities; opportunities to enhance and/or create partnerships; opportunities to showcase group and individual activities; and opportunities to grow as a community. We do this by working with multiple partners to pursue and develop initiatives with the long term goal of achieving health equity by re-envisioning educational frameworks, developing fuller research agendas, enriching clinical experiences and deepening community involvement for students, staff, faculty, and community partners. Through this strategic approach of intentionally promoting the integration of diversity initiatives into all the core aspects of the institution, we feel it will bring about a culture of truly valuing the importance of our differences and commonalities.

As we continue to move toward a campus centered on our mutual goal of health equity, this report provides a record of our accomplishments, outcomes, stories and a pictorial view that illustrates the wide range of programs and activities that occur in our HSC schools. Although we are proud of the achievements thus far, we understand we are only scratching the surface of what can be accomplished. We recognize this work is a continuum and needs to be advanced and adapted over time. In this period of discourse, sitting still is not an option. We have to be action and proactive oriented, instead of responding only to the events of the moment. We are requesting the active engagement of each of you to transform our community into a community of excellence so we may continue making progress to our ultimate goal of health equity.

Sincerely,

V. Faye Jones, M.D., Ph.D., M.S.P.H.

## Vision & Mission

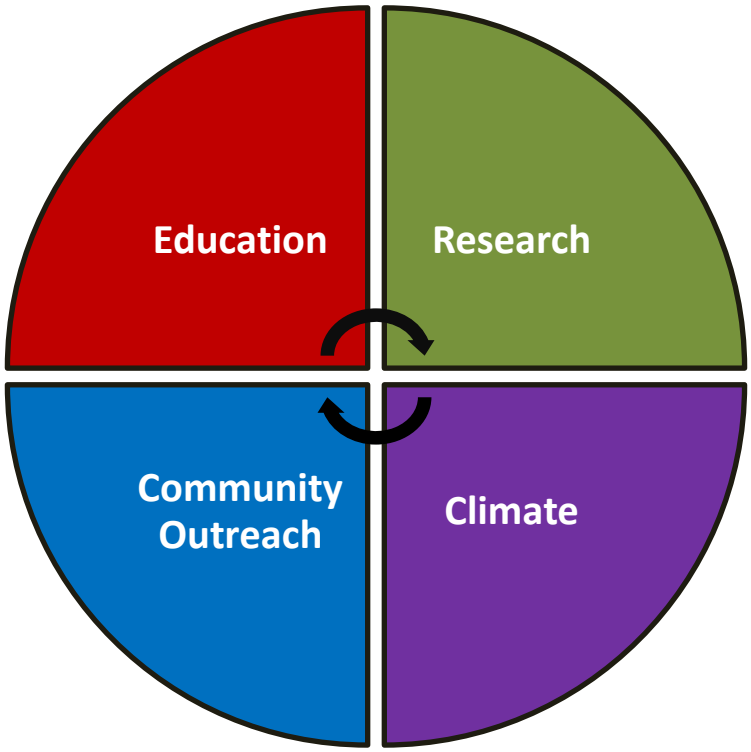
**Vision**

To be a model for innovation for health equity driven by excellence in education, community outreach and research. We strengthen the climate by supporting a diverse and inclusive learning and working environment.

**Mission**

To conceptualize, cultivate and coordinate partnerships across the schools of Dentistry, Medicine, Nursing and Public Health & Information Sciences by building organizational capacity and expanding leadership competency for the HSC diversity and inclusion efforts.

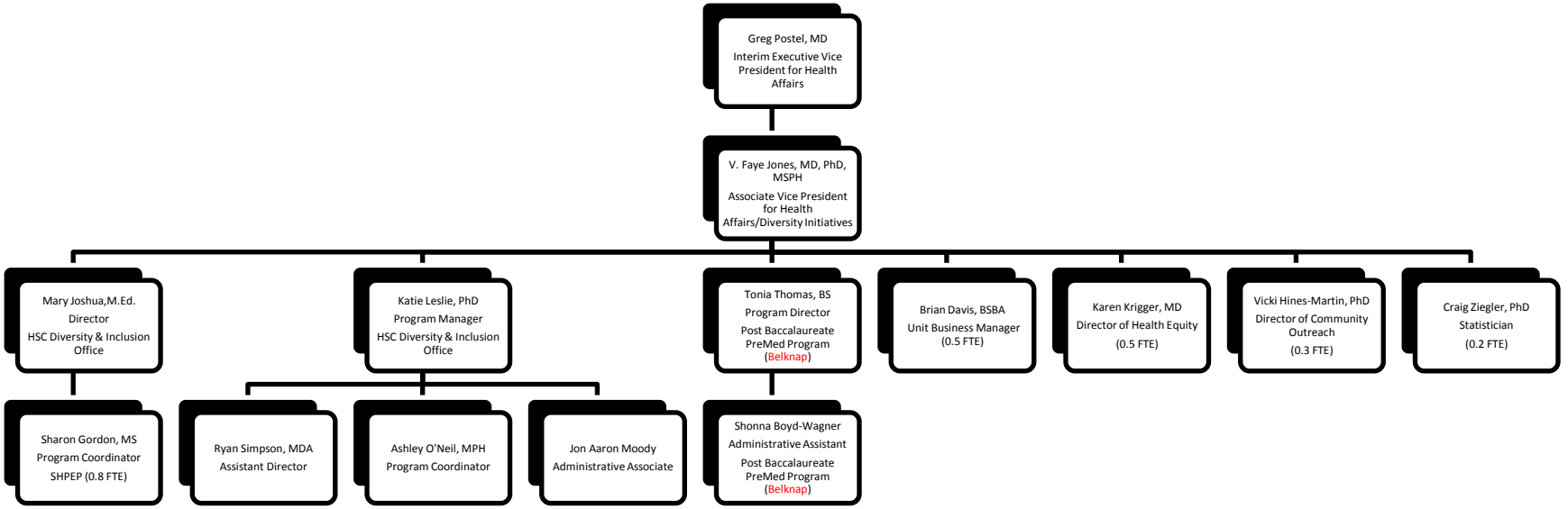
**HSC Office of Diversity and Inclusion**
**Pathways to Health Equity**




Interconnection of Education, Research, Community Outreach and Climate to impact health

UNIVERSITY OF LOUISVILLE

# Current Organizational Chart as of 7/31/17



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# Education

**Our objective is to provide a forum for the HSC community that addresses issues of diversity and health inequality.**

## Health and Social Justice Scholars

The first cohort of Health and Social Justice Scholars with Drs. Jones and Leslie

As noted by the World Health Organization and the United Nations' International Covenant on Economic, Social and Cultural Rights, health is central to the attainment of social justice. Healthcare professionals and researchers working within marginalized communities need concrete skills to address health disparities, which may not be part of their academic training. Implemented in fall 2016, the Health and Social Justice Scholars (HSJS) program provides a unique opportunity of educating health sciences professional and doctoral students in an interprofessional manner to produce high quality scholarly activities related to health equity, health and healthcare disparities, social justice, and healthcare innovation with the goal of benefitting underserved populations. The long term goal of the program is to cultivate regional and national leaders in the field of health equity who will in turn influence health policy and practice.

By the end of the program, scholars will be able to:

- Design and conduct a community-engaged research project to promote social justice and health equity
- Apply the principles of an effective mentor-mentee relationship
- Synthesize community-level information to perform an effective service activity
- Analyze the impact of causal factors of social issues on community health

This three-year cohort-based program is comprehensive, providing scholars conceptual learning modules, research experience, mentoring, service learning, professional development, and financial support for their professional/doctoral education. Scholars are trained in the techniques of community-based participatory research (CBPR), and are actively involved in the interactive process of translating research findings into policy development. Each scholar has two mentors; one to guide their CBPR project and the other from their chosen field to provide career guidance. First year deliverables of the inaugural cohort of diverse HSJS scholars from the Schools of Dentistry, Medicine, Nursing, and SPHIS include scholar project proposals, service projects, along with completion of monthly online educational modules.

**Scholar Research Projects**

In June 2017, scholars presented their project proposals, the main year 1 deliverable, at an open forum with faculty and community feedback. Program year 2 focuses on project data collection, and Year 3 will focus on dissemination of results and policy change. Scholar projects are described below.

***Ashton Green – School of Dentistry***
Project Mentor: Karen Krigger, M.D.
"Improving Access to Dental Care and Resources for Individuals Living with HIV"

Oral signs are often the first indication of larger health problems, and related oral conditions occur in 30 to 80 percent of HIV-infected individuals. Green hopes to improve dental care compliance in this population by developing and testing educational materials that will reinforce the importance of oral health and encourage them to seek and continue dental health care.

***Diana Kuo – School of Public Health and Information Sciences***
Project Mentor: Brandy Kelly Pryor, Ph.D.
"Examining and Addressing the Effects of Food Systems on Health Outcomes in Louisville"

Neighborhoods with limited access to healthy food, known as food deserts, are associated with reduced health among residents. A number of areas in central Louisville have been identified as food deserts. Kuo plans to evaluate whether neighborhood international markets are good sources of fresh food for the community.

***Jade Montanez – School of Nursing***
Project Mentor: Vicki Hines-Martin, Ph.D.
"Confronting Health Disparities through Post-Secondary Health Sciences Degree Attainment"

Montanez hopes to support an increase in the number of underrepresented minorities in nursing by strengthening a program that prepares junior high and high school students for post-secondary education. She anticipates that a more diverse health-care workforce will benefit not only the students themselves, but also the community through reduced health disparities.

***Mallika Sabharwal – School of Medicine***
Project Mentor: Theo Edmonds, J.D., M.H.A., M.F.A.
"Understanding Medical Mistrust in Smoketown"

Mistrust of the medical community can prevent individuals from receiving care and cloud interactions with health-care providers. Sabharwal plans to survey residents of Smoketown and UofL students and providers to assess mistrust of health professionals. She then will develop tools to improve cultural competency among providers and improve communication between providers and Smoketown residents. She hopes to include a focus group for creative expression by Smoketown residents, providers and students, possibly resulting in a creative project.

**Scholar Service Projects**

In March of 2017, the Health and Social Justice Scholars partnered with the Black Student Nurses Association to develop and host a diversity summit for minority high school students at the Health Sciences Center. More than 25 students from local high schools and their guests attended the summit. They worked with a number of other university and community partners in the effort including: the University of Louisville Schools of Dentistry, Medicine, Nursing and SPHIS, Engage Lead Serve Board, Nursing Student Council, Multicultural Association of Pre-medical Students, Louisville Urban League, Norton Health Care, KYANNA Black Nurses Association of Louisville, Student National Medical Association.

Health and Social Justice Scholars and members of the Black Student Nurses Association host the 1st Annual HSC Diversity Summit, held in March 2017

Scholars also collaborated with a number of university and community partners in the development of educational and programming content for the June 2017 Women's Pre-exposure Prophylaxis (PrEP) Summit held in West Louisville. Scholar contributions included: *Immunizations for Safer Sex* and *Oral Health and HIV* module development, recruitment of child care volunteers, and development of child educational activities.

**Perspectives**

*"Prior to the Health and Social Justice Scholars program, I had a very narrow idea of what effective community service meant… Providing a service to a community in need is not enough. To actually help a community in need, we must involve the community in the process."*

-Ashton Green

*"The entire year in this program has made a huge positive impact on me as a student and research professional. First, getting to know and interact with faculty and students outside of the School of Public Health and Information Sciences encouraged me to have an open dialogue with individuals with differing research interests and priorities… Additionally, having guidance and feedback from Drs. Katie Leslie and Faye Jones about our projects has always been productive and well-received."*

-Diana Kuo

Health and Social Justice Scholars team building exercise and confronting assumptions–
Marshmallow Challenge

## Culturally Effective Care Symposium

Each year, students from 10 health sciences degree programs participate in a 1-day educational symposium focused on interprofessional education as a driver for health equity, held at the Kentucky Center for African American Heritage. The symposium includes over 500 student learners from the University of Louisville Schools of Dentistry, Medicine, Nursing, Public Health and Information Sciences and Social Work, and Sullivan University College of Pharmacy (see table 1 below). The goal of the Culturally Effective Care Symposium is to provide instruction and interprofessional foundational experiences in culturally effective care to equip future health professionals in achieving optimal patient care. By the end of this symposium, students are able to:

Students at the 2016 Culturally Effective Care Symposium

- Identify health and health care disparities in diverse populations
- Recognize the influence of social determinants on the health of individuals and populations
- Recognize strategies for culturally effective care with individuals/families in a diverse society
- Provide examples of resources that support culturally effective care
- Distinguish their role and responsibilities of other health professionals in an interprofessional treatment team
- Demonstrate interprofessional shared problem solving in culturally diverse case scenarios

Social determinants of health related to diverse communities are explored to identify strategies in addressing health and health care disparities. Interprofessional teams work to coordinate patient care and identify resources through clinical vignettes.

Small group discussions at the symposium

**Table 1 – Session Participants of 2016 Culturally Effective Care Symposium by Academic Program (*N=524)***

| School | Educational Program | # of Participants | Academic Year(s) | Required Curriculum |
|---|---|---|---|---|
| Dentistry | DMD | 120 | 1 | Yes |
| Dentistry | BS Dental Hygiene | 30 | 3 | Yes |
| Medicine | MD | 162 | 1 | Yes |
| Medicine | AuD | 10 | 1 | Yes |
| Nursing | MS Nursing | 11 | 1 | Yes |
| Nursing | BS Nursing | 89 | 3 | Yes |
| SPHIS | MPH | 7 | varies | No |
| Pharmacy | PharmD | 86 | 1 | Yes |
| Kent | MS Social Work | 9 | varies | No |

**2016 Enhancements**

Based on evaluation feedback from the 2015 Symposium, several revisions were made to programming. Overall, the 2015 symposium was effective in improving health disparities knowledge; however, clinical vignettes seemed to confuse health professions students about their role in addressing disparities within a health care team. The 2016 CECS had additional emphasis on professional roles and culturally effective care through interprofessional practice. New sessions included *Defining Culturally Effective Care*, *Exemplary Interprofessional Practice Models*, and *Small Group Orientation*.

With these necessary additions, as well as feedback that there were too many breakout case sessions during the 2016 program (with not enough time to fully explore each case), each student participated in two breakout sessions (instead of the four in 2015). The two breakout sessions that all students participated in were *LGBT Health Equity* and *Culturally Effective Care for Refugee and Immigrant Populations.* A simulation-based component was added to the refugee session. To aid in small group discussions during breakout sessions, over 70 faculty, staff, and community representatives served as small groups facilitators, each attending a 2-hour facilitator training developed by the HSC Office of Diversity and Inclusion the week prior to the symposium.

**Evaluation**

Three hundred seventy (370) students completed both pre and post-tests for the event (70% response rate). The pre- and post-test (see attached pre/post-test) included three main sections: attitudes toward determinants of health, the Readiness for Interprofessional Learning Scale (RIPLS), and a knowledge scale pertaining to breakout session content.

Students were asked to indicate the extent to which they agreed or disagreed if the following factors were strong determinants of the health status of individuals or populations: individual behaviors, biology and genetics, access to health services, housing, employment, poverty, federal state and local policies, food security, environmental conditions, literacy, language, educational status, and discrimination. Other than "individual behaviors," a statistically significant ($P < 0.05$) change in level of agreement was observed for all factors from pre- to post-test, with participants increasing their level of agreement that these factors are strong determinants of health. All RIPLS items around interprofessional learning demonstrated a significant positive change ($P < .05$) for 18 of the 19 items. Post-test scores reflected a significant increase in knowledge ($P < 0.001$) for all questions. Additional content analysis of breakout session worksheets and observational checklists confirmed student interprofessional engagement and achievement of learning objectives.

The post-test also contained several questions regarding satisfaction with attending the symposium. Student feedback on these questions was highly positive with results is presented in Table 2 below.

**Table 2 – 2016 Culturally Effective Care Symposium Student Satisfaction Items**

| | Strongly Disagree/ Disagree (1/2) | | Undecided (3) | | Agree/ Strongly Agree (4/5) | | | |
|---|---|---|---|---|---|---|---|---|
| Post | Freq | (%) | Freq | (%) | Freq | (%) | Mean | (SD) |
| The symposium provided new resources and strategies for culturally effective care. | 7 | (2%) | 15 | (4%) | 329 | (94%) | 4.41 | (0.69) |
| The symposium increased my knowledge and understanding of culturally effective care. | 12 | (3%) | 14 | (4%) | 325 | (93%) | 4.38 | (0.75) |
| I felt comfortable expressing my opinions and perspectives. | 10 | (3%) | 23 | (7%) | 318 | (91%) | 4.34 | (0.78) |
| The material presented was relevant and valuable to me. | 10 | (3%) | 31 | (9%) | 310 | (88%) | 4.28 | (0.79) |
| The symposium was well organized and effectively conducted. | 19 | (5%) | 32 | (9%) | 300 | (85%) | 4.22 | (0.86) |
| Attending this symposium was a good use of my time. | 38 | (11%) | 54 | (15%) | 259 | (74%) | 3.94 | (1.04) |

**Perspectives**

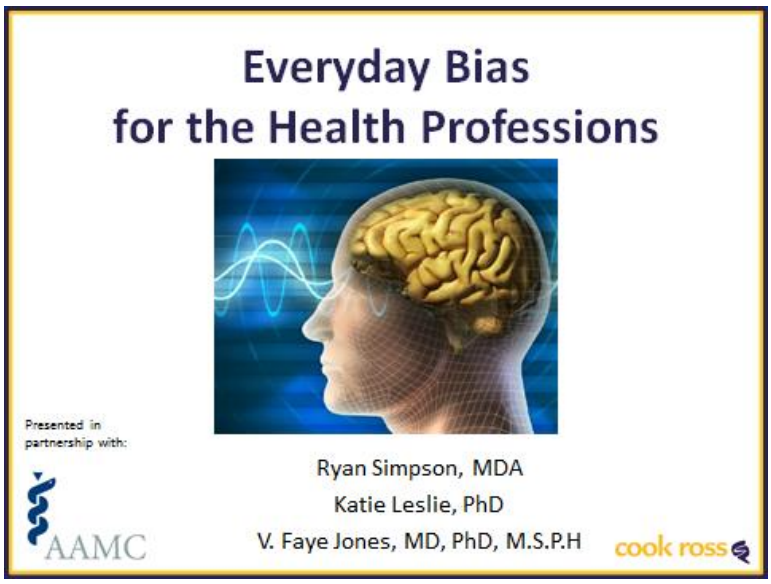
*"I really enjoyed participating in this year's Symposium. I could see each group realizing the depth of the issues some individuals face in receiving appropriate, respectful and needed health care. It may be useful for us to help those future health care professionals understand what they are/will agree to during the oath they take at graduation. One group participant focused on what a provider 'legally' had to do to dismiss a patient from their care and refer them out to someone else. After a more pointed conversation with that table about the moral and ethical compass a health care provider should use in caring for 'individuals,' we arrived at the decision that they 'should be caring for all patients,' no matter who [they are] ."*

-Small Group Facilitator

*"I really enjoyed the portion of the day that was formatted like a patient role play. It could be helpful for us as providers… you got the factual information but you also got an emotional sense of how that would go in real life which was helpful."*

-First Year MD Student

## Unconscious Bias Training




Unconscious or implicit bias refers to a positive or negative mental attitude or stereotype toward a person or group an individual holds at an unconscious level. Evidence indicates that implicit attitudes among health care professionals can result in unequal treatment in disparate populations. However, these biases are malleable. Group-based sessions for participants to reflect on bias, is a promising educational tool with implications for mitigating bias.
The Association of American Medical Colleges partnered with Cook Ross, Inc. to develop a course on unconscious bias for health professions audiences. Facilitators from the HSC Office of Diversity and Inclusion were trained to deliver this evidence-based workshop to student, faculty, and staff audiences.

In this workshop, participants:

- Explore the science and research of unconscious bias
- Identify how bias and the processes of the unconscious mind can impact critical healthcare decisions and results
- Become aware of your own background, and its impact on your perceptions so you are better able to advocate for inclusion within your organization
- Apply new strategies for practicing more conscious awareness individually and organizationally

During the past year, the HSC Office of Diversity and Inclusion provided this training for diverse groups across the HSC and throughout the University, resulting in over 900 participants. In addition, another 400 individuals were trained from the community. Community partners include the Family Health Centers and the Commission for Special Needs Children.
Table 3 provides a summary of the training groups within the university.

**Table 3 - "Everyday Bias Workshop" Participants for the 2016-2017 Academic Year**

| Date(s) | Group | School | Classification | # Trained |
|---|---|---|---|---|
| 9/8/16 | Introduction to Clinical Dentistry 1 | Dentistry | Students* | 120 |
| 9/28/16 | GME Program Directors | Medicine | Staff | 30 |
| 10/14/16 | SPHIS Faculty and Staff Development | SPHIS | Faculty/Staff | 30 |
| 11/3/16 | Dental Faculty Development | Dentistry | Faculty | 3 |
| 11/28/16 | NURS 361: Community Health Nursing | Nursing | Students* | 89 |
| 1/11/17 | PHUN 405: Health Equity | SPHIS | Students* | 55 |
| 1/19/17 | PHPB 611: Community Organization and Assessment | SPHIS | Students* | 11 |
| 1/21/17 | Post Bac Pre-Med Program | A&S/Medicine | Students | 8 |
| 3/8/17 | Family Health Centers Staff Development | NA | Community | 500 |
| 6/8/17 | Professional Education Preparation Program | NA | Students | 20 |
| 7/17/17 | NURS 361: Community Health Nursing | Nursing | Students* | 27 |
| 7/25/17 | GEAR UP Program | NA | Students | 20 |
| **Total Trained 8/1/16 - 7/31/17** | | | | **913** |

**denotes required course curriculum*

**Implicit Association Test**

In order to enhance learning and evaluate the effectiveness of this workshop, Project Implicit, a non-profit organizational and international collaborative network of researchers investigating implicit social cognition, developed a University of Louisville IAT portal. The UofL portal contains three IAT tests: Sexuality IAT, Race IAT, and Weight IAT. The IAT portal collects additional demographic variables for analysis and comparison across groups which include: age, race, ethnicity, sex, gender, sexual orientation, political identity, religious affiliation, religiosity, and geographic background.

For the 2016-2017 academic year, participating groups were offered the opportunity to complete the IAT tests using the UofL Portal. However, there was a lag in portal access during the fall 2016 semester. Two courses from the School of Nursing and the School of Public Health and Information Sciences utilized the IAT portal, requiring students to complete the task as part of the curricula during the spring and summer semesters. Analyses of these data are ongoing,

with plans for dissemination of results in respective nursing and public health pedagogical journals. The HSC ODI is working with the new course director for Introduction to Clinical Dentistry for IAT data collection within the fall 2017 dental curriculum. The School of Medicine continues to utilize IAT tests and discussions around unconscious bias within the undergraduate medical education curriculum; however, these efforts are led by the School of Medicine Office of Community Engagement and Diversity. Students select to take an IAT of their choice from the Project Implicit public website without their results recorded. Students then debrief in their Integrated Clinical Cases 1 (ICC) small groups, which are facilitated by their longitudinal faculty small group leader.

**Participant Perspective**

*"We must constantly work on identifying, accepting, and working on ways to mitigate implicit biases. If we do not actively do this, they may affect the way we approach communities or individuals in our everyday lives or in our work as public health professionals, whether they be negative or positive."*

- Spring 2017 Undergraduate Public Health Student

## HSC ODI Lunch & Learns

Lunch and Learn sessions provide HSC communities with the opportunity to dialogue on diversity, equity and inclusion topics. During their lunch breaks, participants from around the HSC are able to increase their knowledge of the topic at hand, and engage with others on these issues. The Lunch and Learn format allows a wide variety of topics to be explored from culturally effective care content, to how racism is impacting individual and societal health.

Marian Vasser lead a discussion on "THAT'S NOT WHAT I MEANT, LET ME EXPLAIN!" An interactive session exploring the quality and effectiveness of your interactions with others.

Feedback about lunch and learns have included some of the following comments:

- *"The presentation gave me the tools to communicate effectively with someone I have offended."*
- *"The discussion really reminded me of how diverse everyone is, and how often I'm not aware that I am biased."*
- *"It (the lunch and learn) showed avenues on how to engage discussions about racial injustice."*
- *"It (the lunch and learn) increased my knowledge of activism, and how to plug-in and influence change."*
- *"I learned for the first time the issue on how race was invented in colonial Virginia and how it transcended to the present."*

Carla Wallace led a discussion on "White People Engaging White People to Achieve Racial Justice"

John Chenault lead a discussion entitled, "Medicine and the Black Body: Examining the shameful and tragic history of the medical mistreatment and exploitation of African Americans"

**Table 4 - HSC Lunch and Learn Topics**

| Topic | # of Participants | Composition (based on evaluations) | Evaluation Average (Likert-type scale 1-5) | % who would recommend program |
|---|---|---|---|---|
| That's Not What I Meant, Let Me Explain! An interactive session exploring the quality and effectiveness of your interactions with others – 8/16/2016 – Marian Vasser | 118 | 34% Student<br>52% Staff<br>13% Faculty | 4.64 | 100% |
| White People Engaging White People to Achieve Racial Justice – 9/27/2016 - Carla Wallace | 98 | 22% Student<br>48% Staff<br>10% Faculty | 4.28 | 93% |
| Post-Election Grief and Responses to Societal Stress – 12/13/2016 – Quinn Chipley | 20 | 44% Student<br>50% Staff<br>6% Faculty | 4.67 | 100% |
| Medicine and the Black Body: Examining the shameful and tragic history of the medical mistreatment and exploitation of African Americans – 2/27/2017 - John Chenault | 69 | 7% Student<br>51% Staff<br>26% Faculty | 4.51 | 91% |
| Self-Care: An interactive session taking a look at what it means to take care of yourself – 3/30/2017 – Dr. Aesha Uqdah and Marian Vasser | 94 | 13% Student<br>59% Staff<br>22% Faculty | 4.46 | 97% |

**Other sessions which were held as learning opportunities and/or to support various populations at the HSC included (these were not evaluated due to the format of the programs):**

- You Belong: Post-election campus conversation – 11/17/2016 – Ryan Simpson (~30 participants)
- Women of Color for Women of Color – 1/13/2017 – Dr. Aesha Uqdah (6 participants)
- Post Traumatic Slave Syndrome and Black Healing – 2/6/2017 – Pam Newman (26 participants). Comment from participant about their biggest takeaway from this discussion: *"A deeper understanding of racism in America and its effects on black families through history – post slavery, Jim Crow, de-segregation, civil rights, and today!"*

## Poverty Simulation

There are clear links between poverty and disparities in health care access, utilization of health services, and health status, risk factors, and outcomes. To compound these issues, clinicians often exhibit negative attitudes or stereotypical assumptions about patients who are impoverished, which may impact patient care.

The Community Action Poverty Simulation (CAPS) is a unique tool used to educate individuals about the day to day realities of life with a shortage of money and an abundance of stress. During the simulation, participants role-play the lives of low-income families. The task of each family is to provide food, shelter, and other basic necessities during the simulation while interacting with various community resources. The HSC Office of Diversity and Inclusion offers the simulation to student, faculty, and staff groups at Health Sciences Center, with an adapted emphasis on the role poverty plays in healthcare processes and outcomes. Three simulations were held during the 2016-2017 academic year (10/26/16; 2/15/17; and 7/10/17).

Kent School of Social Work Instructor and Poverty Simulation program partner, Larry Michalczyk, leads a debrief with simulation participants and volunteers at the October 26, 2016 simulation

**Participants**

Each simulation may accommodate up to 88 participants. The HSC Office of Diversity and Inclusion recruits participants through a number of channels. Faculty from the 4 HSC schools as well as the Kent School of Social Work may offer course credit for student participants (some make attendance a course requirement, some choose to offer credit for a course experiential requirement). Email and social media advertisements are placed throughout UofL channels for open online registration (as space is available). Sullivan University College of Pharmacy (SUCOP) partners on the simulation project, providing financial support for simulations. SUCOP currently requires all first year PharmD students to participate. Two hundred thirty-six individuals participated in the simulation during the 2016-2017 academic year. A summary of participant affiliations is presented in Table 5.

**Table 5 - 2016-2017 Poverty Simulation Participants by Affiliation (*N*=236)**

| Affiliation | Classification | # of Participants |
|---|---|---|
| Dentistry | Faculty | 1 |
| Dentistry | Staff | 1 |
| Kent | Student | 31 |
| Medicine | Student | 6 |
| Medicine | Resident/Fellow | 3 |
| Medicine | Staff | 5 |
| Nursing | Student | 77 |
| Public Health and Information Sciences | Student | 5 |
| Public Health and Information Sciences | Staff | 1 |
| Public Health and Information Sciences | Faculty | 1 |
| Sullivan College of Pharmacy | Student | 94 |
| Community | N/A | 7 |
| Misc. Belknap Offices | Staff | 4 |
| Total Participants | | 236 |

**Volunteers**

In addition to educating members of the campus community, the simulation program also facilitates community engagement. Working with community partners, low-income volunteers with first-hand experiences of poverty, homelessness, and accessing social services are recruited to staff the simulated community agencies and businesses, and share their real world experiences of accessing services during the debriefing session following the simulation. Partner agencies include St. John Center for Homeless Men, Catholic Enrichment Center, Metro Louisville Retired and Senior Volunteer Program, and others. Volunteers are provided with breakfast during the training orientation, a $20 gift card for their time, and lunch after the simulation. Each simulation requires between 18-25 volunteers to staff community agency and resource tables. Table 6 presents the number of volunteers present at each simulation. Volunteers enjoy the experience and find the simulation empowering. Many of our volunteers return for multiple simulations.

Simulation participants seeks services from volunteers at CAPS agencies

**Table 6 - 2016-2017 Poverty Simulation Volunteers**

| Simulation Date | # of Volunteers |
|---|---|
| 10/26/16 | 19 |
| 2/15/17 | 19 |
| 7/10/17 | 23 |
| | 61 |
| **Simulations Attended** | **Recurring Volunteers** |
| 1 | 24 |
| 2 | 8 |
| 3 | 7 |
| **Total Unique 2016-2017 Simulation Volunteers** | 39 |

**Outcomes**

The HSC Off of Diversity and Inclusion currently has matched pre/post data for 200 student simulation participants (2014 - 2/15/17 simulation). The 21 item Likert-type Attitude toward Poverty (ATP) Scale Short Form are administered to measure participant attitudes regarding poverty, including factors related to personal deficiency, stigma, and structural perspective. Overall, post-test scores reflect a significant improvement in attitudes towards poverty ($p < .001$). Preliminary results of the first simulation (n=65) were presented at an AAMC regional meeting in 2015. A manuscript reporting full results is in preparation. Pre/post tests were not administered during the 7/10/17 simulation, nor will they be administered in future simulations as the efficacy of the simulation in changing attitudes toward poverty have been well-established both in the literature and in our own data. A qualitative study reporting on the empowering experiences of simulation volunteers (n=19) was published in the fall 2016 issue of the *Journal of Community Engagement and Scholarship* (see "Research" section of this report).

**Perspectives**

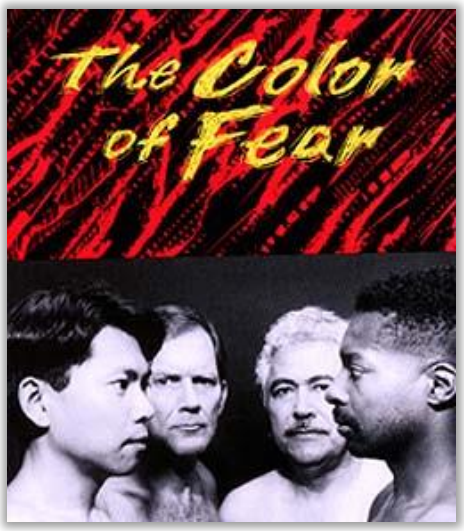
*"This experience allowed us to see poverty from a totally different perspective. The approaches included the simulation itself and the discussion afterward. Personally, one of the best moments of this experience was when one of the volunteers told his story during the discussion. He was a middle-aged man who had spent many months in the hospital due to a medical condition. Prior to entering the hospital, he had lived a "privileged" life, meaning he had a home, a car, and a cell phone. While being in the hospital for months, he was unable to work, which led to him being unable to pay bills such as his utilities, his rent, and his car payment. As a result, he lost everything. This made me understand, everyone has a story. As the man stated while telling his story 'no one living on the streets or in poverty wants to be there and they didn't choose to be there'."*

-Ashley Lanham, Undergraduate Public Health Student, February 15, 2017

*"To sum up, the poverty simulation was a powerful experience for me. To be honest, when I first arrived I thought it was going to be silly and overly-simplistic. Although the concept itself was indeed simple, the process itself provided a meaningful glimpse into the stress that those who live in poverty experience on a daily basis."*

-Master of Science Social Work Student, October 26, 2016

## HSC ODI Discussions on Racism – Professional Development




As professionals who do diversity, inclusion and equity work, HSC ODI staff are at numerous times in situations where race, racism, discrimination and white supremacy are the topics of discussion. Whether those were the intended topics to be explored or not, they intertwine many conversations and therefore it's vital that HSC ODI staff continually hone and develop skills in having these discussions. It's also important that HSC ODI staff are familiar with each other's skills and individual journeys so that staff can support each other when discussing racism and other "–isms."

The HSC ODI Discussions on Racism allow staff to explore our own journeys with race and racism, to confront our biases and prejudices and to practice challenging each other on these issues. We approach these discussions based on some of the approaches and resources developed by StirFry Seminars and its founder, Lee Mun Wah, and in particularly we focus on components of their documentary "The Color of Fear". In our discussions we encourage personal conversations in regards to the effects of racism instead of lectures or relying on one facilitator, but rather to engage in active listening and coming from a place of curiosity and self-reflection. Our ongoing discussions allow for personal reflection on contemporary events as well as historical and personal struggles in a much needed nurturing and supportive environment. When we get good at noticing when we're acting defensive, adversarial or stuck in privileged lenses, then we get better at helping others through their own processes.

## Additional Collaborative Curricular Activities

### Cultural Competency Standardized Patient Program (School of Dentistry)

Dr. Faye Jones, Dr. Katie Leslie, and Ryan Simpson serve as evaluators for this project. Standardized patient cases are designed as a student competency assessment tool at the pre-doctoral DMD dental education level, in order to assess culturally and linguistically appropriate care. Students are provided treatment options and complete medical histories, in order to focus these sessions on cross-cultural communication and interpersonal skills.

A dental student provides a patient-centered, culturally-appropriate interview with a standardized patient

### Poverty and Social Justice Elective (School of Medicine)

Dr. Faye Jones is a co-director of the Poverty and Social Justice in Children's Health for the Department of Pediatrics pediatric residency program. The month-long rotation delves into the social aspect of health care, exposing residents to the realities of poverty, food insecurity and housing instability. Among other activities, residents must tackle public transportation to better understand the daily routine of many of their patients.

### eQuality Project (School of Medicine)

The eQuality Project at the University of Louisville aims to provide a clear strategy and national model for implementation of the new AAMC LGBT-DSD competencies within the Undergraduate Medical Education (UME) curriculum. The Health Sciences Center Office of Diversity and Inclusion was part of the eQuality steering committee that developed and evaluated a pilot curriculum for the 2015-2016 academic year. In July of 2016, the HSC ODI determined that the project was sustainable within the School of Medicine diversity structures, and stepped down from the steering committee. The project is now a collaborative effort between the Undergraduate Medical Education Office, the School of Medicine Office for Community Engagement and Diversity, and the LGBT Center. Members of the HSC ODI continue to serve as contributors to the eQuality project.

**Course Leadership (School of Public Health and Information Sciences)**

Dr. Katie Leslie also holds an adjunct assistant professor appointment in the department of Health Promotion and Behavioral Sciences within the School of Public Health and Information Sciences. In the spring of 2017, she served as course director for PHPB 611: Community Organization and Assessment in the Master of Public Health program, and PHUN 405: Health Equity for the BS/BA Public Health program.

**Course Collaboration (Schools of Nursing and Public Health and Information Science)**

Dr. Karen Krigger served as a conduit to the community agency program site that students evaluated in the courses PHPB 615: Public Health Program Evaluation and NURS 746: Program Development and Evaluation. For the course deliverable, nursing and public health students collaboratively assessed the clinical screening and outreach programs at Redeemer Lutheran Church. Dr. Krigger helped to facilitate the course partnership and served as a key stakeholder to the student project.

**Didactic/Guest Lectures**
**University**

- Dr. Karen Krigger: *World AIDS Day: Global Health HIV 2016.* Distinction in Global Health Lecture Series. Department of Undergraduate Medical Education, School of Medicine- Fall 2016.
- Dr. Karen Krigger: *Sexually Transmitted Infections in HIV.* NURS 361: Community Health Nursing, School of Nursing- Spring 2017.
- Dr. Katie Leslie: *Advocating for Health Equity: The Role of a Change Agent.* HSS 631: Leadership in Health Promotion. Department of Health and Sport Sciences, College of Education and Human Development- Spring 2017.
- Dr. Karen Krigger: *Effective Safer Sex Counseling for Diverse Sexual Behaviors.* Disease and Therapeutics (D&T 2). Department of Undergraduate Medical Education, School of Medicine- Spring 2017.
- Dr. Karen Krigger: *LGBT Clinical Screenings.* LGBT Health and Wellness Competency Certificate Series- Spring 2017.
- Dr. Faye Jones and Marian Vasser: *Effects of Racism on Child Outcomes*. Pediatric Resident Communication Curricular Series, Department of Pediatrics – Spring 2017.
- Dr. Faye Jones: *The Importance of the Team in Healthcare*. School of Medicine JCPS Brown School Initiative. Spring, 2017.

**National**

- Dr. Faye Jones: *Panel Discussion*. Academic Pediatric Association Research Academic Pediatrics Initiatives on Diversity (RAPID). Winter, 2017

- Dr. Faye Jones: *Diversity Accountability Plan*. UCLA School of Medicine Leadership. Summer, 2017.
- Dr. Faye Jones: *Race, Racism, and Child Health*. UCLA Department of Pediatrics Grand Rounds, School of Medicine Leadership. Summer, 2017.
- Dr. Faye Jones*: The Role of the Mentor/Mentee Relationship. Academic Pediatric Association New Century Scholar's Program*. Spring, 2017.

**Facilitation**

Faculty and staff from the HSC Office of Diversity and Inclusion also serve as small group facilitators on the following educational programs:

- School of Dentistry Book in Common
- School of Medicine Graduate Medical Education Residents in Scholarly Activity
- School of Medicine Graduate Medical Education Residents as Teachers
- School of Medicine LGBT Health Summit

Symposium Planning Committee

- Pediatric Annual Mental and Behavioral Health Symposium, sponsored by the Pediatric Behavioral and Mental Health Alliance of Kentucky. Louisville - KY, Fall, 2016
- Dismantling the Next Generation Jim Crow: A Race, Community, and Child Welfare Forum, sponsored by the Race, Community, and Child Welfare Task Force - Louisville, KY, Fall, 2016.

**Upcoming Initiatives**

***GEN 101: Diversity in the Health Professions***

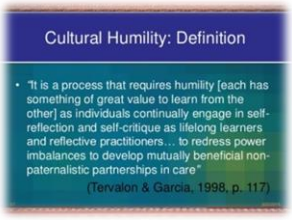
The past several years, Arts and Sciences has offered a few special sections of GEN 101 that we geared toward specific student populations while the rest were general sections with no specific population or target audience. The University of Louisville Arts and Science Department have found that students in the special sections build relationships more easily as well as are more engaged in-class and with the course in general. Additionally, instructors find it more rewarding to gear their courses toward a specific student population (whether it be by career interest, background, academic major, or other interest such as service learning). In turn, Arts and Sciences decided all sections in 2017-2018 will have a specific theme or target population in order to help build community among students through a shared interest as well as integrate material of particular interest. Additionally, we expanded our course offerings taught by campus partners in order to bring in experts from various programs across campus to meet students' interests. Ashley O'Neil who serves as Program Coordinator in the HSC Office of Diversity and Inclusion will be a campus partner teaching a section in Fall 2017.

This course will entirely focus on student success in college. Success looks different from student to student and this course will provide you with tools to help define what it looks like to you and you alone. Through the duration of this course, students will be engaged in a series of activities, discussions, and reflections that will help you in the pursuit of answers to the questions above.

The title of the class is, "Diversity in Health Professions" and the target for this class is open to any student especially any minority student, or underrepresented students, from rural area, etc.) that is interested health care field. Some key points that students in this class shall take away:

- Interacting with a health care professional is such a personal relationship that it's important that the provider you have understands the values and beliefs of the individual with whom they are working
- If we don't have the cultural context of the people we're serving, we're not going to be effective as health care professionals.
- By embracing cultural competence and diversity in health care, providers can improve the overall quality of care.
- Overall health of the American population has improved over the past few decades, but not all Americans have benefitted equally from these improvements.

***Cultural Humility Academy***




For over a year the HSC Office of Diversity and Inclusion has been working with local, and national resources in the development of its Cultural Humility Academy which will be a cohort based program. Cultural Humility is a concept that is more focused on the self, individuals and institutions than learning about aspects of various cultures as many cultural competency based approaches typically have done. This academy is built around exploring and learning skills about critical self-critique/reflection and lifelong commitment to doing so, addressing power differentials in all situations, and holding institutions accountable for the impacts of their policies, structures and practices. The first session of the Cultural Humility Academy will begin in the fall 2017, and its launch open to the university is planned for the following year.

UNIVERSITY OF LOUISVILLE

# Institutional Climate and Accountability

**Create an environment of inclusivity and active engagement of the campus community.**

**Cultivate a supportive and equitable environment for our workforce by ensuring constituent engagement on campus.**

## Accountability and Institutional Climate

Diversity and inclusion accountability requires the commitment and engagement of each of us at all levels. It is more than just the numbers and involves a variety of assessments to move us forward. As Edward E. Hubbard, author and diversity return-on-investment measurement expert states, "one of the 'critical misses' occurs when organizations fail to assess the entire culture system and infrastructure and processes surrounding the diversity and inclusion change process." With that "truth" in mind, we continue to focus on the institutional and social context, structures and policies, and human capital to measure our progress.

**Current Analysis and Next Steps:**
In the spring of 2017 each HSC school submitted their first accountability reports to the HSC Office of Diversity and Inclusion with a wealth of information on how each school chooses to improve their institutional culture and climate. Feedback has and is being shared with the HSC schools, and the deans of each school will present to the HSC in the fall of 2017 on their diversity, equity and inclusion efforts and progress.

**Highlights from each of the Schools**

*Strengths*

- SOD demonstrated institutional capacity around diversity and inclusion work across the system to ensure leadership commitment in a diverse society by integrating diversity throughout its' strategic plan.
- SOM and the SPHIS have developed a diversity mission statement which enhances the overall mission statement of the schools.
- SON addresses their role of commitment for serving diverse populations in their mission statement.
- Climate surveys were completed during the time frame for SOD, SOM, SON with results being reviewed and strategies for improvement being developed.
- All schools are providing education related to diversity, health disparities, and cultural sensitivity with differing levels of engagement.
- All schools were either currently mapping or developing tools for mapping curriculum.
- Although all schools were involved with research related to health disparities and/or community-based-participatory-research, the SPHIS stood out.

*Opportunities of Improvement*

- Specific policies related to diversity and inclusion need to be enhanced.
- Resources specifically related to diversity and inclusion has the potential to be heightened.

UNIVERSITY OF LOUISVILLE

# Pipeline Programs Recruitment and Retention Strategies

**Our objective is to create a culture that will attract, maintain and allow diverse engaged individuals who are committed to the mission of the University to thrive.**

## GEAR UP Health Sciences Summer Academy

The University of Louisville 2017 GEAR UP Health Sciences Summer Academy was an academic enrichment and career exploration program for rising 11th and 12th grade GEAR UP high school students who were interested in the health fields. This was the third year of the Academy at UofL and its intent is to cultivate student interest in health careers, expose them to a full residential experience on a college campus, and assist the participants in navigating a road map to success.

2017 GEAR UP participants

The Academy provided a three week residential college experience housed on the Belknap Campus. The program was comprised of three components: Academic Enrichment, College Preparation, and Career Exploration, which were interwoven into the Academy's curriculum. The students learned about numerous health careers and the academic foundations of various health disciplines through a series of lectures and experiential sessions.

Twenty students participated in the Academy. All twenty identified as female. Five students identified their race/ethnicity as Black, one as Biracial, one as Latino, and 13 as White. Forty percent of the students identified themselves as someone who would be the first in their family to go to college.

In Table 5, student confidence improved in regards to applying to college, knowing where to look for scholarships, and in their study skills. Confidence in knowledge of how to apply to college grew from 40% agreeing in the pre-test versus 100% agreeing in the post test. Confidence in where to look for financial aid grew from 25% agreeing in the pre-test to 95% in the post test. The changes for both of these items were statistically significant ($p < .001$).

Other general college knowledge outcomes to highlight (both positive and negative) are:

- 85.0% of students correctly answered that the ACT is the test most commonly used when applying for undergraduate admission to a university within the state of Kentucky.
- Only 36.8% of students answered correctly that college students on average have to take 15 credits per semester to graduate in four years.
- In terms of cultural awareness 90.0% answered yes, being aware of my own cultural background is important to my educational experience.

- For public health content, 65.0% answered the question “what is a food desert” correctly. One area where students did not grasp the content was for the question “what is food insecurity” where only 40.0% answered the question correctly.
- For dental hygiene/dentistry content, 85.0% of students got the question, “what steps are necessary to obtain a license to practice dental hygiene in the state of Kentucky?” correct.

GEAR UP students on the public health bus tour

**Table 5 - GEAR UP 2017 Pre/Post-Test Results**

| | | Strongly disagree/ disagree | | Neither disagree or agree | | Agree/ strongly agree | | Mean | (SD) | P Value |
|---|---|---|---|---|---|---|---|---|---|---|
| | | N | (%) | N | (%) | N | (%) | | | |
| I feel confident in my knowledge of how to apply to a university or college. | Pre | 7 | (35%) | 5 | (25%) | 8 | (40%) | 2.90 | (1.12) | <0.001 |
| | Post | 0 | (0%) | 0 | (0%) | 20 | (100%) | 4.30 | (0.47) | |
| I feel confident in knowing where to look for financial aid, scholarships and grants. | Pre | 10 | (50%) | 5 | (25%) | 5 | (25%) | 2.65 | (1.14) | <0.001 |
| | Post | 1 | (5%) | 0 | (0%) | 19 | (95%) | 4.10 | (0.85) | |
| I feel confident in my study skills. | Pre | 1 | (5%) | 5 | (25%) | 14 | (70%) | 3.80 | (0.77) | 0.745 |
| | Post | 3 | (15%) | 4 | (20%) | 13 | (65%) | 3.70 | (0.98) | |

**Perspectives:**

*“Before the Academy, I didn’t know what type of nurse I wanted to be, I wasn’t very confident on what to choose. Now I know what path I can take and I know people that can help me.”*

-Sandy Ortiz, 2017 GEAR UP Participant
Owen County, KY

## Professional Education Preparation Program (PEPP)

The 2017 Professional Education Preparation Program (PEPP) Pre-College Summer Workshop was a residential academic enrichment and career exploration summer program for Kentucky graduating high school seniors interested in medicine or dentistry. This program equips young scholars in their transition to college and helps them to plan for competitive medical or dental school applications. This program, established in 1981, seeks to assist in diminishing the number of medically underserved areas in Kentucky by developing more competitive applicants for medical and dental school from those areas. The underlying premise is that such students are more likely to return to their hometowns or similar areas to practice medicine or dentistry, thus helping to eliminate the health professional shortage areas in Kentucky.

Table 6 indicates that 91% of 2017 program participants had an increase in knowledge and awareness, while Table 7 suggests that 54% of participants intend to serve the medically underserved. Table 8 shows the positive participation and matriculation of PEPP participants throughout the years (students from 2013 to present are still enrolled in undergrad).

**Table 6 – Change in Health Career Knowledge, 2017 PEPP Participants**

| Question | % |
|---|---|
| I had little awareness of health careers before this program and this experience provided me with important additional awareness and knowledge | 14% |
| I was somewhat aware of health careers before this program and this experience provided me with important additional awareness and knowledge | 77% |
| I was already quite aware of health careers before this program and this experience provided me with no significant additional awareness and knowledge | 4.5% |
| Did not answer | 4.5% |

**Table 7 – Intention to Practice in Underserved Populations, 2017 PEPP Participants**

| Question | % |
|---|---|
| I intended to provide care to underserved patients before this program and my experience strengthened my commitment | 45% |
| I intended to provide care to underserved patients before this program and my experience had no impact on my plans. | 9% |
| I intended to provide care to underserved patients before this program and my experience changed my plans so that I no longer plan to provide care to underserved patients. | 0% |
| I did not intend to provide care to underserved patients before this program and my experience changed my plans so that I now plan to provide care to underserved patients. | 18% |
| I did not intend to provide care to underserved patients before this program and my experience had no impact on my plans | 23% |
| Did not answer | 5% |

**Table 8 – Student Matriculation Outcomes of the PEPP Pre-College Summer Workshop (1997-2013)**

| ULSOM | | Other Medical School | | ULSOD | | Other Dental School | | Other Health Grad/Prof Program | | Total |
|---|---|---|---|---|---|---|---|---|---|---|
| Freq | (%) | Freq | (%) | Freq | (%) | Freq | (%) | Freq | (%) | |
| 27 | (7) | 44 | (11) | 13 | (3) | 1 | (.25) | 40 | (10) | 389 |

2017 PEPP Students

## Summer Health Professions Education Program (SHPEP)

2017 SHPEP Scholars

The Summer Health Professions Education Program (SHPEP, formerly known as the Summer Medical and Dental Education Program, SMDEP) is a six-week academic enrichment program sponsored by the Robert Wood Johnson Foundation (RWJF) for first and second year college students interested in medicine, dentistry or pharmacy, and who are from underrepresented minority/ethnic groups or rural and underserved areas of the country. Each summer, 80 students (55 pre-medical, 20 pre-dental, 5 pre-pharmacy) attend this free residential program at the University of Louisville. Housing, meals, and stipends are provided at no cost to students in addition to a tuition-free 3-hour science enrichment course. The upper-level science material includes Physics, Organic Chemistry, Medical Biochemistry, and Human Physiology allowing scholars to master a new way of integrating and applying the basic sciences and math, utilizing team-based medical/dental applications. The scholars are given many opportunities to interact with current medical, dental and pharmacy students as well as the faculty and staff of the UL Schools of Medicine and Dentistry, as well as, the Sullivan University School of Pharmacy.

Since the establishment of the University of Louisville SHPEP program in 2006, 952 SMDEP scholars, including 706 pre-medical, 241 pre-dental and 5 pre-pharmacy students have completed the program. Geographically, these students are from Kentucky and approximately 39 other states, the District of Columbia, and Puerto Rico. Of the 952 scholars who have participated in SMDEP at the University of Louisville, 716 are eligible to apply to medical, dental or pharmacy school based on academic classification.

The HSC Office of Diversity and Inclusion maintains a database of self-reported SHPEP participant outcomes. These outcomes for students who participated in the program for the years 2006-2015 are demonstrated in table 9 (some students participating in 2015, as well as all students in the 2016 and 2017 programs have not had the opportunity to graduate or apply to graduate or professional school programs). Based solely on self-reported data: 29% of SHPEP participants matriculated to medical school (74 at the University of Louisville School of

Medicine); 17% matriculated to dental school (64 to the University of Louisville School of Dentistry); and 13% matriculated to other graduate or professional school programs. Overall, 321 University of Louisville SHPEP alumni report their matriculation to medical, dental or pharmacy school, with 136 attending programs at the University of Louisville. Table 9 below summarizes the outcomes of the 716 eligible participants in the SMDEP/SHPEP program from 2006 through 2015.

**Table 9 - Self-Reported Student Outcomes for the SMDEP Program (2006-2015)**

| Focus | ULSOM | Other SOM | ULSOD | Other SOD | Other Health Career | Grad School | No Self Report | Total |
|---|---|---|---|---|---|---|---|---|
| | Freq (%) | Freq (%) | Freq (%) | Freq (%) | Freq (%) | Freq (%) | Freq (%) | |
| Medical | 74 (10) | 131 (19) | NA | NA | 35 (5) | 47 (7) | 230 (32) | 517 |
| Dental | NA | NA | 62 (9) | 54 (8) | 2 (0) | 6 (1) | 75 (10) | 199 |
| Total | 74 | 131 | 62 | 54 | 37 | 53 | 305 | 716 |

**Perspectives**

"*SHPEP has given me a summer experience I truly will never forget. Apart from the amazing professors and fellow scholars, the amount of information we have learned in the past six weeks is priceless. Since day one, I have felt like I was part of a team. Until this program, I have never been told that medical school was going to be a part of my future if I wanted it. Medical school had always been surrounded in doubt, but at SHPEP, those doubts have been thrown aside. This program has provided me the confidence to say I will become a physician that helps my community and doesn't forget those who have helped me along the way. I am truly grateful to all of the SHPEP team and the University of Louisville for an experience that I will hold with me for the rest of my life."*

-Angela Gonzalez, Sophomore Biology major at the University of Texas Rio Grande Valley

*"SHPEP has made a positive impact on my life. I have gained a new level of self-confidence, along with an awareness of the importance of diversity, inclusion and collaboration. I have learned that teamwork among professions is an essential factor in providing the best care possible to patients. SHPEP has helped me grow as a student and an individual while attending this program, and will continue to use the skills I have learned here throughout my career."*

-Lauren Williams, Sophomore Biology major at the University of Kentucky

## MCAT / DAT Review Summer Workshop

The MCAT-DAT Review Summer Workshop is a residential academic enrichment program designed to prepare pre-medical students for the Medical College Admission Test and pre-dental students for the Dental Admission Test. In addition, this program enhances student preparation for the medical school or dental school application process. This program was established to assist in diminishing the number of medically underserved areas in Kentucky by developing more competitive applicants for medical and dental school from those areas. The underlying premise is that such students are more likely to return to their hometowns or similar areas to practice medicine or dentistry, thus helping to eliminate the health professional shortage areas in Kentucky. Annual program evaluation measures indicate increased student exam and application process preparation.

MCAT-DAT Participants with Program Coordinator, Ashley O'Neil

**Table 10 - Student Matriculation Outcomes of MCAT-DAT Summer Workshop (1997-2016)**

| ULSOM | | Other Medical School | | ULSOD | | Other Dental School | | Other Grad/Prof Health Prog. | | Total |
|---|---|---|---|---|---|---|---|---|---|---|
| Freq | (%) | Freq | (%) | Freq | (%) | Freq | (%) | Freq | (%) | |
| 75 | (13) | 113 | (19) | 98 | (17) | 33 | (6) | 28 | (5) | **587** |

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## Post-Baccalaureate Pre-Med Program

The Post-Baccalaureate Pre-Med Program is designed for career changers. Our students have earned a Bachelors' degree and desire to pursue medical school, but lack the pre-med requirements and preparation for medical school admission. Our program is a link with the University of Louisville School of Medicine granting assured admission for our students who are qualified. The program produces competitive applicants for medical school consideration in Kentucky, throughout the United States and abroad.

The structured two year program is two-fold with an academic and enrichment component. The academic component allows our students to take the necessary pre-med requirements and optional upper level science courses for medical school and MCAT preparation. The enrichment component consists of extracurricular activities; shadowing physicians, volunteering, peer mentoring and medical student mentors, teambuilding, cultural awareness presentations and enrichment sessions with guest physician speakers. Our ultimate goal is for our students to successfully matriculate to medical school and become the physician they always wanted to be.

**Fall 2016 Program Enrollment**

The fall 2016 enrollment included 4 new students and 9 returning students. Three students were dismissed over the summer.

**Table 11 -Program Enrollment Fall 2016**

| | | | |
|---|---|---|---|
| **# New Incoming Students (4)**<br>**# Returning Students (9)** | | | |
| **Gender** | | | |
| **Female** | **7** | Male | **6** |
| **Ethnicity** | | | |
| **Hispanic** | **0** | Non-Hispanic | **13** |
| **Race** | | | |
| **Asian** | **1** | Black | **0** |
| **White** | **12** | Other | **0** |
| **Age Range** | | | |
| **21-29** | **10** | 30-39 | **2** |
| **40-45** | **0** | 46-50 | **1** |
| **Residency** | | | |
| **KY** | **8** | Out of State | **5** |
| **States Represented** | | | |
| **Indiana, Mississippi, Ohio and Texas** | | | |

**Fall 2016 and Spring 2017 Program Graduates**

Eight of our students graduated during the fall 2016 – spring 2017 academic year; three in December 2016 and five in May 2017.

Fall 2016 and spring 2017 program graduates

**Entering 2016 Medical School Class Acceptances**

Fourteen of our students applied to medical school. One was denied and another was waitlisted. Twelve students were accepted, but one deferred to start in 2017 at Mt. Sinai. Eleven enrolled in medical school. Below is a breakdown of medical school enrollment.

| | |
|---|---|
| University of Louisville | 9 |
| East Tennessee State University School of Medicine | 1 |
| Mt. Sinai School of Medicine ***Deferred to start in 2017*** | 1 |
| Pikeville University College of Medicine | 1 |

**2016 Medical School Graduates**

Nine of our alumni graduated from medical school in May 2016. All nine were ULSOM graduates and received residency appointments. Four are in residency programs at the University of Louisville.

## Medical Education Development Program (M.E.D.)

MED Students, Drs. Marner and Mason, 2017 ULSOM graduates

Medical Education Development Program (M.E.D.) since 1987: The MED program is a one year program that is designed to provide an enhanced sciences and academic background to selected students from groups underrepresented in medicine and/or from disadvantaged backgrounds, who are seeking admission to the UofL School of Medicine. Students are selected from a pool of applicants to the UofL School of Medicine who were denied admission during the regular selection process but were viewed to have many of the positive qualities that contribute to making a good physician. However, it was felt that the academic preparedness was insufficient to ensure successful completion of the medical school program. In an attempt to increase the likelihood of success in completion of our medical curriculum by these students, the School of Medicine has developed an intensive one year program that provides exposure to graduate level basic sciences courses taught by medical school faculty.

As a Medical Education Development Program participant, the student's official academic status is a University of Louisville Non-degree graduate student through the Department of Physiology. Upon successful completion of program requirements, the student is recommended for admission to UofL School of Medicine. Thus far, 86 students have entered the program. Of the 69 students who matriculated into our medical school, 85.5% have either graduated M.D. or remain enrolled. Fourteen percent (one student in 1989, one 1990, one 1994, two 1997, one 1998, one 2003, one 2006, one 2007, one 2011 participant) either withdrew or were dismissed. Physicians who started in this program state that without it, their dream would not have become a reality.

**Table 12 - Student Outcomes of the Medical Education Development Program (1987-Present)**

| Did Not Matriculate ULSOM | | Matriculated to ULSOM | | Currently Enrolled ULSOM | | Unsuccessful after Admitted ULSOM | | Graduated ULSOM | | Total |
|---|---|---|---|---|---|---|---|---|---|---|
| Freq | (%) | Freq | (%) | Freq | (%) | Freq | (%) | Freq | (%) | |
| 17 | ( 20 ) | 69 | ( 80 ) | 7 | (8 ) | 10 | ( 12) | 52 | ( 60 ) | 86 |

*NOTE: **85.5%** of program participants who matriculated have graduated or remain enrolled in the SOM*

## Pre-Matriculation Program

Prematriculation Program (PMAT): A Summer Prematriculation Program was implemented in 1989 at the University of Louisville to help prepare students for the demands of professional school. The goal is to facilitate the transition into medical school by exposing students to key aspects of their first year and introducing them to available resources. With a very limited number of available seats, priority is given to incoming first year students from racial/ethnic groups underrepresented in medicine, medically underserved counties, non-traditional age groups, and educationally or economically disadvantaged settings. During earlier years, the program was offered to medical, dental and graduate students. Service to dental students ended in 1996 when their curriculum changed; the four year pilot program for a small group of graduate students ended in 2005.

This academic program is conducted during the four weeks immediately preceding the beginning of the school year. The areas of emphasis include integrated basic science lectures, gross anatomy labs, group centered learning; written and practical exams. Sessions designed to enhance academic performance (e.g., stress management, coping, study, and test-taking skills) are included. The 2017 program introduced the students to weekly sessions centered on managing stress through mindfulness directed by Dr. Jennifer Brueckner-Collins.

In addition to academic preparation, this program provides for the development of peer groups; establishment of support systems; familiarity with the city and school; one-on-one and group time with physicians, administrators, faculty and upper-level students; and an early establishment of day-to-day routine and study group.

**Table 13 - Graduation Outcomes for Pre-Matriculation Program Participants (1989-2013)**

| | Graduated | | Did not Graduate | | Still Enrolled | | Total |
|---|---|---|---|---|---|---|---|
| Focus | Freq | (%) | Freq | (%) | Freq | (%) | |
| Medical | 348 | (84) | 59 | (14) | 7 | (2) | 414 |
| Dental | 42 | (70) | 18 | (30) | 0 | (0) | 60 |
| Physiology | 7 | (78) | 2 | (22) | 0 | (0) | 9 |
| Total | 397 | (82) | 79 | (16) | 7 | (2) | 483 |

**13 medical students who did not graduate were actually MED Program participants who did not enter medical school. Eighty-nine percent of program participants who entered medical school have graduated or remain enrolled.*

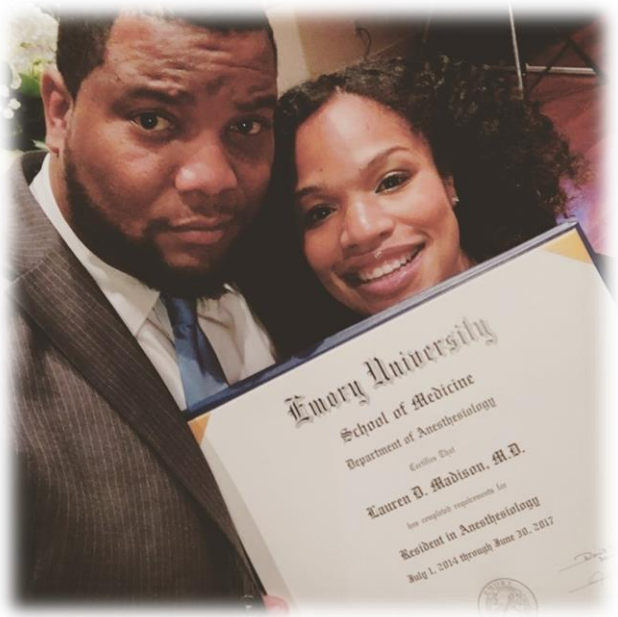
The 21 students who participated in the 2017 Summer Prematriculation Program provided both written and oral feedback to assist as we assess success of the program. After just one month in medical school classes, a PMAT participant stated:

**Perspectives**

*"PMAT has helped me tremendously as I prepared mentally, psychologically, and academically to start medical school. It truly showed me the demands and hard work medical school requires. I have always heard how strenuous medical school can be, but I never truly understood until I started PMAT. Also, during the program, I realized some study techniques that do not work for me. PMAT was a great experience that allowed me to become accustomed to ULSOM in a somewhat relaxed environment before the rush of orientation and starting classes. I cannot imagine hearing all the new material for the first time while trying to develop better study habits, adjust to the new environment, and meet 160 new friends! If I could participate in PMAT more than once, I absolutely would; a great learning and growth experience!"*

-Yomna Amer, 2017 PMAT Participant

**Alumni**




Anesthesiologist, Dr. Lauren DuBose Madison acknowledges PMAT as a program that set her up for success!

Dr. Shorye Payne returns each year to share with PMAT Participants the ways PMAT helped her to succeed and become an Ophthalmologist. In 2017 she celebrated 20 years as a graduate of UofL SOM.

## Additional Academic Support Programs

Individual and group counseling is provided by the staff of the HSC Office of Diversity and Inclusion to students at the undergraduate or professional school level. Students are closely monitored and counseled to provide for early intervention. Continuous collaboration is maintained between staff and course directors. Tutoring is available to students in need of assistance. Supplementary books and board preparation materials are available for review and checkout. Periodic follow-up continues during clinical rotations.

**Multicultural Association of Premedical Students (MAPS)**

MAPS is an academic support group that motivates, encourages and prepares pre-medical students to become competitive applicants for medical school or another health field program. The Multicultural Association of Premedical Students is the associate chapter of the Student National Medical Association (SNMA) at UofL. The ultimate goals of MAPS are to produce more competitive health professional school applicants and to diversify health professional school enrollment and the health professions workforce. This will be accomplished by better preparing pre-health students who may be from an underrepresented minority group, a medically underserved area and/or from a disadvantaged background. MAPS membership provides students with additional academic guidance, contacts for shadowing opportunities, community service involvement, pre-health resource materials, health career information, and advising to become a competitive professional school applicant. MAPS students also have the opportunity to develop and enhance their leadership qualities. In addition, MAPS is a Recognized Student Organization, which is organized by and led by students under the guidance of the MAPS Advisor, Katie Leslie (transitioning to Ashley O'Neal in August 2017).

MAPS students at a community service activity

Membership size also fluctuates each semester, but the organization tends to be a small, close-knit group of 10-15 students. Since the establishment of the University of Louisville MAPS chapter in the spring of 1999, at least 69 students have matriculated to health professional schools: 52 to medical school (28 to the University of Louisville School of Medicine); nine to dental school (all at the University of Louisville School of Dentistry); four to graduate programs in public health (three to the University of Louisville School of Public Health and Information

Sciences); one to a doctoral program in physical therapy; one to optometry school; and three to pharmacy school.

Here are a few highlights from the 2016-2017 academic year:

- 12 MAPS meetings
- 12 Community Service activities with various community organizations (Uspiritus, Supplies Over Seas, Dare to Care Food Bank, Leukemia and Lymphoma Society, and the American Heart Association)
- 2 Health Sciences Campus Visits (University of Louisville Health Sciences Center, University of Kentucky Health Sciences Colleges)
- 2 Army simulations
- Fall Semester: 40 students were involved in some MAPS activity; 16 students met the requirements to be considered members in good standing (attend half of all meetings and service events, maintain a minimum 3.0 GPA, meet with advisor at least once per year, pay semester membership dues)
- Spring Semester: 33 students were involved in some MAPS activity; 19 students met the requirements to be considered members in good standing (attend half of all meetings and service events, maintain a minimum 3.0 GPA, meet with advisor at least once per year, pay semester membership dues)

MAPS students engaged in clinical skills

**Student National Medical Association Chapter**

SNMA Co-Presidents

The SNMA organization provides a setting which engages UofL medical students to promote increased awareness regarding the impact of diversity and inclusion in healthcare. It serves as a credible source of information on issues in the field of medical education directly related to underrepresented and underserved populations. UofL SNMA members are also committed to increasing the pipeline of students from groups underrepresented in medicine who consider and prepare for medical and scientific careers.

SNMA members participate in a monthly gathering in the form of a general group meeting with a physician, an activity to interact among themselves or with physicians, an opportunity to serve within the community, a chance to assist/mentor pre-medical students, or a time to discuss local or national issues and concerns that impact their medical education and career planning. These gatherings include staff, administrators and faculty who support, encourage, and foster the development of the students in pursuit of careers as physicians. In addition to enhancing their own career development, members of SNMA focus on providing a networking and support base for potential medical students by reaching out and sharing information with students in local public schools as well as undergraduates in the local Multicultural Association of Pre-Health students.

Usually, 30+ medical students participate in the scheduled SNMA general meetings. In addition to networking and information general sessions with physicians, other recent activities involving SNMA members include: planning and implementing a Minority Pre-medical and Pre-dental weekend symposium engaging approximately 60 pre-health students at HSC, in collaboration with UofL Student National Dental Association (SNDA); participation in the SNMA national conference; hosting/housing minority medical school interviewees; serving as Student Development Assistants, instructors, and panelist for summer pipeline programs; grooming members of local Black Achievers Organization for health careers; and participating in local health screenings in disadvantaged settings.

**HSC Diversity Alliance**

Gerdie Jean-Smith, MD, President of HSCDA
Geriatric Medicine Fellow, UofL School of Medicine

The Health Sciences Center Diversity Alliance (HSCDA) exists to collaboratively support underrepresented post-graduate trainees in healthcare in achieving their personal and professional goals. This is achieved through easing the transition from student to medical/dental professional, fellowship, promoting personal health and wellness, and advocating for the advancement of underrepresented health professionals in their fields. Every year HSCDA holds social gatherings where underrepresented UofL School of Dentistry and Medicine residents, fellows and faculty can meet their peers from around the institution to network and relax.

In past years a survey was used to collect input and feedback from participants about how the HSC could best support underrepresented residents/fellows. Participants have included dental and medical residents and fellows, as well as HSC faculty, staff and administrators. From the surveyed, residents/fellows reported they participate in social gatherings in order to network and meet people. They requested more networking opportunities and general support from the HSCDA. More diverse faculty was suggested as better way to recruit and retain residents.

Beginning this year, and going forward in the coming year, HSCDA will begin to place a greater emphasis on:

- Ongoing social events with underrepresented residents/fellows.
- Connecting to the HSC, UofL and Louisville communities through volunteering and supporting pipeline programs.
- Informing new residents/fellows about local resources with the assistance of the resource list compiled by the Multicultural Association of Graduate Students.
- Working with Graduate Medical Education in increasing the recruitment and retention of more underrepresented residents/fellows

Residents and faculty networking at an HSCDA reception

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# RESEARCH and SCHOLARLY ACTIVITY

**Our objective is to provide an avenue to collaborate and/or provide research expertise and opportunities related to diversity, health disparities and the impact of culture on health.**

## Publications

### Peer-Reviewed Publications

1. Hines-Martin, V. & Nash, W. (2017). Social justice, social determinants of health, interprofessional practice and community engagement as formative elements of a nurse practitioner managed health center. *International Journal of Nursing and Clinical Practices, 4*(218), online.
2. Holthouser, A, Sawning, S., Leslie, K.F., Jones, V.F., Steibock, S., Noonan, E.J., Martin, L.J., Weingartner, L., Davis, J., Ekstrand, K. L., Potter, J., & Shaw, M.A. (2017). eQuality: A process model to develop an integrated, comprehensive medical education curriculum for LGBT, gender nonconforming, and DSD health. *Medical Science Educator, 27*(2), 371-383. doi: 10.1007/s40670-017-0393-5.
3. Leslie, K.F., Steinbock, S., Simpson, R., Jones, V.F., & Sawning, S. (2017). Interprofessional LGBT health equity education for early learners. MedEdPORTAL Publications, 13(10551). https://doi.org/10.15766/mep_2374-8265.10551
4. Leslie, K.F., Jones, V.F., Thomas, T.A., & Michalczyk, L. (2016). Sharing our stories with the future health care workforce: Perspectives of low-income poverty simulation volunteers. *Journal of Community Engagement and Scholarship, 9*(2), 103-109.
5. Chlebowy, D., Coty, MB., Fu, L., & Hines-Martin, V. (2017). Comorbid diabetes and depression in African Americans: Practice Implications. *Journal of Racial and Ethnic Health Disparities.* (online ahead of print) doi: 10.1007/s40615-017-0349-x.
6. Leslie, K.F., King, K.M., Wilson, R.W., Gagne, P., & Jones, V.F. (2016). Parent perceptions of a child physical activity initiative in a rural community. *American Journal of Health Studies, 31*(2), 103-110.
7. Lohr, D., & Jones, V.F. (2016). Mental health issues in foster care. *Pediatric Annals, 45*(10), e342-e348. DOI: 10.3928/19382359-20160919-01
8. Noonan, E., Sawning, S., Combs, R., Weingartner, L.A., Martin, L., Jones, V.F., & Holthouser, A. (In Press). Engaging the transgender community to improve medical education and prioritize health care initiatives. *Teaching and Learning in Medicine.*

### Textbook

1. Yearwood, E. & Hines-Martin, V. (Eds). (2017). *Routledge Handbook of Global Mental Health Nursing: Evidence, Practice and Empowerment*. New York, NY: Routledge/Taylor & Francis Group

*Specific Chapters authored*

a. Hines-Martin, V. Mental health promotion. In E. L. Yearwood & V.P. Hines-Martin (Eds.)
b. Hines-Martin, V., Pearson, G.S., Walters, M. & Hall, M. Standards of mental health care: Meeting consumer needs.
c. Ayala, L., Hazelton, M. & Hines-Martin, V**.** Strategies for health promotion after violence exposure.
d. Hines-Martin, V**.** & Yearwood, E.L. Mental health literacy. In E. L. Yearwood & V.P. Hines-Martin (Eds.)
e. Yearwood, E.L. & Hines-Martin, V. Global mental health: Conclusions and recommendations.

## Presentations: International, National and Regional Meetings

1. Noonan, E.J., Leslie, K.F., Combs, R.M. & Sawning, S. (2016, September). *Measuring climate for LGBT people on an academic medical campus.* Poster session at the 34th GLMA Conference on LGBT Health, St. Louis, MO.
2. Muvuka, B.*, Gray, A.*, Aramburu, C*, Kakar, R.*, Ayangeakaa, S.*, Leslie, K.F., Krigger, K., & Spencer, C. (2016, October). *Increasing access to HIV pre-exposure prophylaxis: An assessment of physician barriers to administration.* Roundtable presentation at the 144th American Public Health Association (APHA) Annual Meeting, Denver, CO.
3. Krigger, K. (2016, October). *PrEP- Nuts and Bolts.* Presentation at the 2016 KY Conferences on HIV/AIDS, Lexington, KY.
4. Krigger, K. (2016, October). *Physical signs of abuse from eight common drugs.* Presentation at the 2016 KY Conferences on HIV/AIDS, Lexington, KY.
5. Choe, A.*, Jones, V.F., Leslie, K.F., Choe, S., & Seo, J.M. (2016, October). *Perceptions of healthcare in populations of Korean descent in a Midwest urban setting.* Poster session at the 2016 American Academy of Pediatrics (AAP) National Conference, San Francisco, CA.
6. Leslie, K.F., Jones, V.F., Sawning, S, Steinbock, S., Simpson, R., Martin, L., & Shaw, M.A. (2016, November). *Baseline bias: Implicit attitudes of first year medical students prior to a health equity curriculum intervention.* Research Oral Abstract Presentation at the 2016 Association of American Medical Colleges Annual Meeting, Seattle, WA.
7. Sawning, S., Martin, L., Steinbock, S., Holthouser, A., Noonan, E., Jones, V.F., Leslie, K.F. & Shaw, M.A. (2016, November). *Lesbian, gay, bisexual, and transgender (LGBT) patient care: Undergraduate medical students' attitudes and knowledge.* Poster Session at the 2016 Association of American Medical Colleges Annual Meeting, Seattle, WA.
8. Leslie, K.F., Simpson, R.C., Betz, C. Downs, J.*, & Jones, V.F. (2016, November). *Beyond cultural competency training: An interprofessional approach to health disparities education.*

Oral presentation at the 144th American Public Health Association (APHA) Annual Meeting, Denver, CO.

9. Leslie, K.F. (2017, January). *Baseline bias: Implicit attitudes of first year medical students prior to a health equity curriculum intervention.* Invited Presentation to Curriculum Inventory Administrator's Group Webinar of the Association of American Medical Colleges (AAMC) Annual Conference.
10. Jones, V.F. (2017, January). *Mentoring: Panel discussion*. Invited presentation at Academic Pediatric Association Research in Academic Pediatrics Initiative on Diversity (RAPID) Annual Meeting. Irving, TX.
11. Noonan, E.J., Leslie, K.F., McIntosh, D., Combs, R.M., & Sawning, S. (2017, April). *Understanding LGBT climate on a health sciences campus.* Oral presentation at the 2017 AAMC Southern Group on Educational Affairs Conference, Charlottesville, VA.
12. Holloman, J.L.*, Boland, K.A., Jones, V.F., McKinley, T.F., Calhoun, A.W. & Leslie, K.F. (2017, April). *Evaluation of poverty and social justice rotation in pediatrics residency using narrative analysis.* Poster session at the 2017 Association of Pediatric Program Directors National Meeting, Anaheim, CA.
13. Hines-Martin, V. & Yearwood, E. (2017, May). *Global mental health: Nursing leadership and cross-national collaboration.* Presentation at the International Council of Nurses Congress, Barcelona, Spain.
14. Davis, D., Lohr, D., Jones, V.F, et al. (2017, May). *Addressing the mental healthcare needs of foster children: Perspectives of stakeholders from the child welfare systems.* 2017 Pediatric Academic Societies Meeting, San Francisco, CA.
15. Hines-Martin, V. (2017, July). *Culturally competent: Engaging with families and communities.* Invited presentation at Eliminating Mental Health and Substance Use Disparities through Leadership, Education, and Community Engagement, SAMHSA/ANA Minority Fellowship Program Conference and Institute, Silver Springs, MD.
16. Jones, V.F. *Diversity accountability plan*. (2017, July). Invited presentation at UCLA SOM Leadership, Los Angeles, CA.
17. Jones, V.F. (2017, July). *Race, racism and child health*. Invited lecturer at UCLA SOM Pediatric Grand Round, Los Angeles, CA.

**denotes student or resident at the time of contribution to the submission*

## Research!Louisville Health Disparities Components

Research!Louisville is an annual celebration of health-related research held at the University of Louisville Health Sciences Center. During the 2016 Research!Louisville, held October 10-14, the HSC Office of Diversity and Inclusion collaborated with conference planners to greater promote health disparities research with the addition of a health disparities researcher as a guest speaker and through sponsorship of poster awards.

**Health Disparities**

The HSC Office of Diversity and Inclusion sponsored a 2-hour health disparities lecture which was added to the Research!Louisville program. Glenn Flores, MD, FAAP, presented *Racial/Ethnic Disparities in Children's Health and Healthcare and Their Successful Elimination.* Dr. Flores is the Distinguished Chair of Health Policy Research at the Medica Research Institute, a Research Affiliate in the Department of Health Sciences Research at the Mayo Clinic, and Affiliate Professor of Public Health in the Division of Health Policy and Management at the University of Minnesota.

Dr. Glenn Flores

**Excellence in Health Disparities Research Award**

The HSC ODI Excellence in Health Disparities in Research Award is open to all faculty, staff, students, residents, and fellows at the university who present studies at Research!Louisville that investigate issues of disparities related to healthcare disparities and/or health status disparities. The award, sponsored by the Health Sciences Center Office of Diversity and Inclusion, is designed to recognize and reward investigators' efforts to address gaps in knowledge and to encourage new investigation focused "population-specific differences in the presence of disease, health outcomes, or access to healthcare." Among all abstract submitted to Research!Louisville poster competitions, 51 authors selected to be considered for the award (5 dental, 32 medicine, 2 nursing, 9 public health, 3 other). First ($500), second ($300), and third place ($200) prizes were awarded. The winning posters are listed below.

***1st Place- Collette Davis***
Mentor: Kathy Baumgartner
"Evaluating Quality of Life, Health Behaviors, and Body Mass Index in Cervical Cancer Survivors: New Mexico's Community Health Survey"

***2nd Place- Suur Ayangekaa***
Mentor: Ryan Combs
"Health Literacy in West Louisville: Examining the Development, Use, Applicability, and Design of Health Insurance, Health Systems, and Health Behavior Literacy Materials to West Louisville Residents"

***3rd Place- Nida Ali***
Mentor: Ryan Combs
"Promoting Health through the Utilization of Novel Community-Based Participatory Research Methods: Using Boot Camp Translation to Improve Depression Literacy in West Louisville"

## Grants

The Health Sciences Center Office of Diversity and Inclusion relies on numerous funding sources for the sustainability and growth of our vast portfolio of programs and initiatives.

**Grants Active during Reporting Period**
Below are summary of funding from public and private agencies as well as internal grant sources that were active at any time within the reporting period (8/1/16-7/31/17).

*Summer Medical and Dental Education Program (2016)*
Funding Agency: Robert Wood Johnson Foundation (Private Foundation)
Funding Amount: $315,000
Funding Period: 11/01/2015 – 10/31/2016
PIs: Mary Joshua & Jeff Falcone
Project Partners: Dentistry, Medicine

*GEAR UP Kentucky 2016*
Funding Agency: GEAR UP/Kentucky Council on Postsecondary Education (Federal/State)
Funding Amount: $120,000
Funding Period: 04/01/2016 – 09/25/2016
PIs: V. Faye Jones & Katie Leslie
Project Partners: Dentistry, Medicine, Nursing, SPHIS

*GEAR UP Kentucky 2017*
Funding Agency: GEAR UP/ Kentucky Council on Postsecondary Education (Federal/State)
Funding Amount: $140,000
Funding Period: 05/01/2017 – 09/25/2017
PIs: V. Faye Jones & Katie Leslie
Project Partners: Dentistry, Medicine, Nursing, SPHIS

*Professional Education Preparation Programs*
Funding Agency: Kentucky Council on Postsecondary Education (State)
Funding Amount: $184,700
Funding Period: 07/01/2016 – 06/30/2018
PIs: V. Faye Jones & Katie Leslie
Project Partners: Dentistry, Medicine

*Culturally Effective Care Symposium*
Funding Agency: Passport Health (Private Foundation)
Funding Amount: $20,000
Funding Period: 2016
PI: V. Faye Jones
Project Partners: Dentistry, Medicine, Pharmacy, Social Work, SPHIS

*Culturally Effective Care Symposium*
Funding Agency: Foundation for a Healthy Kentucky (Private Foundation)
Funding Amount: $1,000
Funding Period: 11/02/2016 – 02/02/2017
PI: V. Faye Jones
Project Partners: Dentistry, Medicine, Nursing, Pharmacy, SPHIS, Social Work,

*Culturally Effective Care Symposium*
Funding Agency: WellCare (Private Foundation)
Funding Amount: $750
Funding Period: 2016
PI: V. Faye Jones
Project Partners: Dentistry, Medicine, Nursing, Pharmacy, SPHIS, Social Work

*Culturally Effective Care Symposium*
Funding Agency: Commission on Diversity and Racial Equality (UofL Internal)
Funding Amount: $400
Funding Period: 2016
PIs: V. Faye Jones, Katie Leslie
Project Partners: Dentistry, Medicine, Nursing, Pharmacy, SPHIS, Social Work

*Partnership for Research: Culturally Informed Science and Excellence in Translation (PRECISE-T) Project*
Funding Agency: Office of Community Engagement Faculty Grant Program (UofL Internal)
Funding Amount: $6,000
Funding Period: 2017
PI: Vicki Hines-Martin

Project Partners: College of Education, HSC ODI, Office of Community Engagement, Nursing, Signature Partnership Resident Advisory Council

*2016 Louisville Pre-exposure Prophylaxis (PrEP) Summit*
Funding Agency: Gilead Sciences Inc. (Private Foundation)
Funding Amount: $9,000
Funding Period: 2016
PIs: Karen Krigger
Project Partners: LGBT Center, Louisville Metro Department of Public Health and Wellness, Medicine, Norton Healthcare, Nursing, SHPIS, Sullivan Pharmacy, Volunteers of America, 550 Clinic

*Black Men as Agents of Change in Children's Literacy Success: A Study of the Effects of Volunteer Readers and Early Literacy Behaviors in a Pediatric Clinic Waiting Room*
Funding Agency: Cooperative Consortium for Transdisciplinary Social Justice Research (UofL Internal)
Funding Amount: $7,500
Funding Period: 2017
PIs: Kathryn Whitmore (College of Education)
Project Partners: College of Education & Human Development, HSC ODI, Medicine (Pediatrics)

Cooperative Consortium for Transdisciplinary Social Justice Research.
Funding Agency: University of Louisville
Funding Amount: $250,000
Funding Period: 2017
PIs: Enid Truncois-Haynes (School of Law); Cate Fosl (Arts and Sciences);
Co-PI (Lead Partner Group) - Jones VF (HSC Office of Diversity and Inclusion), Powell C (School of Law), Wendell M (School of Public Health and Information Sciences)
Project Partners: 45 faculty from various schools, 31 University offices, units, centers, institutes and departments

**Additional Grant Applications during Reporting Period**

Additionally, the HSC ODI submitted several other grant submissions during the reporting period that are either still under review with the funding agency or were not funded.

***Promoting Protective Factors against Exposure to Racism in Early Childhood Using a Parenting Program in the Patient Centered Medical Home***
Funding Agency: National Institute on Minority Health and Health Disparities (Federal)
Application Amount: $227,423 (Year 1)
Funding Period: 09/01/17 – 08/31/18

PIs: V. Faye Jones, Vicki Hines-Marin (Project is a component of Commonwealth Institute of Kentucky grant submission "*Center for Addressing Racism and Structural Discrimination as Root Causes of Health Inequity"*)
Project Partners: Medicine, Nursing, Public Health, Kent School of Social Work
Status: NOT FUNDED

***National Association of State Offices of Minority Health: Health Equity Summer Institute***
Funding Agency: Office of Minority Health (Federal)
Application Amount: $155,681 (Year 1)
Funding Period: 09/01/17 – 08/31/18
PIs: V. Faye Jones, Katie Leslie
Project Partners: Public Health
Status: NOT FUNDED

## Other Research Activities

HSC Office of Diversity and Inclusion faculty and staff were involved in a number of other research activities that may not have current funding sources or immediate plans for publication/presentation.

**Highlights include:**

- Drs. Jones and Leslie currently serve on the master's thesis committee for Samuel Petersen in the Department of Oral Biology in the School of Dentistry. His thesis is titled, "*Long Term Outcomes of the Professional Education Preparation Program: Increasing Diversity and Access to Dental Care."*

- Drs. Leslie and Krigger continue to collect Pre-exposure prophylaxis for HIV (PrEP) needs assessment data in the community in collaboration with Dr. Jelani Kerr in the Department of Health Promotion and Behavioral Sciences, School of Public Health and Information Sciences.

- Drs. Jones and Leslie are assisting the School of Medicine Office of Diversity and Community Engagement and Diversity with data collection and analysis of focus groups for a climate study within the Department of Pediatrics.

- Drs. Hines-Martin and Krigger serve as project mentors for the Health and Social Justice Scholars Program.

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# *Community Outreach*

**Our objective is to provide opportunities to learn about the community and how to navigate within the health care system to provide care as well as to collaborate with community partners on pipeline programming.**

## Dare to Care / Food Pantry Program

The Dare to Care/Food Pantry program: provides food for individuals and families monthly, as well as a warm clothing drive in November. In addition, HIV testing is available, and nursing students (10 to 12 students per month) provide basic medical screening for hypertension, asthma, diabetes, and body mass index while pharmacy students deliver influenza immunizations. During Dare to Care Food Pantry sessions over 232 community members have been assessed in the last fiscal year.

## Redeemer Lutheran Church Annual Block Party

Under the direction of Dr. Karen Krigger, Redeemer Lutheran Church puts on an annual street and health fair for the community. This free community health festival focuses on enriching the body, mind and spirit. The fair offers food, live music and entertainment, games for children, a yard sale, Dental and Medical students provide basic education and health screenings (asthma, diabetes, HIV, mammograms, vision, blood pressure, BMI) , health education (cancer, nutrition, harm reduction, oral health), physical activity (yoga, tai chi), and other informational resources (voter registration, FreshStop) in the Fellowship Hall. In 2016, 174 community members participated in the event, with 46 service providers present. Table 14 provides a summary of screenings at the 2016 health fair.

**Table 14 – Screening Performed at 2016 Health Fair**

| Screening | Number |
|---|---|
| Asthma | 36 |
| Blood Pressure | 58 (15 abnormal) |
| Body Mass Index | 10 |
| Diabetes | 52 |
| HIV | 13 |
| Mammogram | 18 |
| Vision | 8 |

## Pre-Exposure Prophylaxis for HIV (PrEP) Summits

### Training for Community Healthcare Providers

Through collaboration with the Sullivan School of Pharmacy and the School of Public Health, Dr. Krigger and associates secured a funding grant with the assistance of the Office of Continuing Medical Education of $9,000.00 for a community PrEP summit which occurred in November, 2016. Practitioners and the community were invited to Louisville Metro Health and Wellness Department to learn more about PrEP, why it is important to incorporate PrEP in practice, how to access it in our community, and how to prescribe PrEP. CME was offered to physicians and nursing practitioners. Forty-two participates attended the 5 hour session.

Dr. Jelani Kerr at the 2016 PrEP Summit

### PrEP for Women

In collaboration with the UofL School of Nursing faculty as well as student representatives from all HSC schools the 2017 Women's PrEP Summit was presented at Redeemer Lutheran Church. The 2017 Women's PrEP Summit served to educate the community on pre-exposure prophylaxis for HIV (PrEP). The focus of this initiative was educating black and transgender females in the Louisville Community.

## Additional Community Collaborations

The goal of health equity is to decrease differences in health care quality for traditionally underserved and marginalized populations including minorities, intravenous drug users, the elderly, and the LGBTQ community. Some activities provided safe, positive interactions between the Health Science Center campus students and the citizens in the west end of Louisville while others involved multidisciplinary academic and community collaborations for service development. Under the direction and action of Dr. Karen Krigger, activities included the following:

- The Syringe Exchange program: services are provided by Volunteers of America and The Louisville Metro Department of Health and Wellness. This program provides clean syringe exchange (1:1 exchange) weekly, HIV rapid-testing, HCV testing, and addiction services referrals
- The Project Compassion program: sponsors services related to HIV outreach by providing incentives to community members who opt to take an HIV test: TARC tickets/Kroger gift cards. Project Compassion also offers episodic programming related to AIDS awareness.
- The Redeemer Health and Wellness Outreach program: provides health related programming weekly-monthly. Topics include Proper Breathing Courses, Hands only CPR, and Birds and the Bees discussions, presented for a vast group of community members
- Asthma Bootcamp: a three session educational outreach for persons in the West End who suffer from and asthma and their family members.
- HIV Bootcamp: on February 8$^{th}$ and March 8$^{th}$ Dr. Krigger met with the bootcamp members to provided expert HIV education and assist with working to eradicate HIV in the West End.
- Healthy Holiday for Elementary Kids: educational course for children grades K-5 offering information on how to maintain a healthy lifestyle through diet and exercise.
- Assisted in the revision of Provider Manual on Pediatric Lead Surveillance
- Served as an expert HIV Panelist for the 2017 VOA PrEP Rally that reached out to educate the community on procurement and usage of Pre Exposure Prophylaxis for HIV

## Community Engagement in Service

**Community Service** is defined by the Office of Community Engagement as "engaging with the community to provide services for the benefit of the community….{including} civic engagement." Our team members are committed to participating in activities related to civic engagement.

- V. Faye Jones:  Passport Health - Board member
- V. Faye Jones: Family Scholar House – Trustee
- Sharon Gordon: Division Street School in New Albany, IN – Board of Directors
- Katie Leslie: Leukemia and Lymphoma Society – League Champion for Team and Training Arm
- Vicki Hines Martin: Minority Fellowship Program (MFP), SAMHSA and ANA, National Advisory Committee
- Vicki Hines Martin: Neighborhood House (Portland Community) – Board of Directors member 2012- present; Executive Committee member (At-Large) 2016, Secretary, 2017.
- Ryan Simpson: Americana - Board member

Another form of Community service is through Outreach and Partnerships. Outreach services and programs support the university's mission and priorities

- *Color of Health* – This web-based provides resources to assist the provider to make health care decisions in a culturally responsive manner. Being a culturally competent provider means continually educating yourself about issues affecting diverse communities. The Color of Health website to help you provide resources and materials for your patients and their families. This site includes locations and other vital information regarding health and wellness resources for the greater Louisville region. Links to health education materials are included in Russian, Somali, Chinese, Japanese, French, Spanish, Vietnamese and Korean as well as English.

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# LGBT Center's Satellite Office on the HSC

The LGBT Satellite Office's mission is to promote exceptional LGBT healthcare and create an inclusive environment for students, faculty, and staff in the health sciences. We do this by improving the climate, services, education, research, and support within the University of Louisville and affiliated healthcare settings.

Students enjoying the HSC Pride Week Picnic in 2016. Over 500 people enjoy this inspiring community event each year.

## LGBT Satellite Center: Strategies and Program Highlights

**Education: Educate students, faculty, and staff on LGBT health and health disparities.**

- eQuality Curriculum: National pilot project in partnership with the AAMC to infuse LGBT health competencies into the medical school curriculum. Started in 2014.
  - ✓ 23 Peer-reviewed presentations
  - ✓ 6 peer-reviewed publications
- LGBT Health Certificate: Has graduated 267 students, staff and faculty from across the HSC schools over the past 4 years

Dr. Amy Holthouser (Associate Dean for Medical Education) and Stacie Steinbock (Director of the HSC LGBT Center) celebrating after winning a HealthCare Heroes award from Business First in the category "Best Innovators" for their work on the eQuality curriculum in LGBT health care competencies.

65 of the 267 graduates of the LGBT Health Certificate over the past four years

**Climate: Promote LGBT diversity and inclusion among students, faculty, and staff.**

- **2017 Ally Campaign: Highlighted the importance of letting colleagues and patients know** that you are an ally, and provided the skills and tools to do so.
  - ✓ 228 rainbow lapel pins and 150 Ally stickers requested by HSC members
  - ✓ 130 Safe Zone training packets requested by HSC members
  - ✓ 42 participants in Safe Zone trainings

Deans of our HSC schools participating in the highly successful 2017 Ally Campaign! These images were included in emails, on flyers and on electronic bulletin boards. Since the campaign started the online "Ally List" has grown by 250 names!

**Support: Provide programming that enhances LGBT and ally student experiences and supports their academic success.**

- Advisor to student group HSC Pride which hosted 15 events last year
- One-on-one informal counseling provided to 12 students across the HSC with all students informed of HSC Counselor, Dr. Chipley, for further support

**Services: Improve patient care for the LGBT community at UofL-affiliated healthcare settings.**

- 126 staff trained in 4 outpatient primary care clinics within ULP.
- Expert and on-going guidance provided to ULP administration regarding inclusion of sexual orientation and gender identity categories in EHR (per federal requirements)
- Training support for 5 large trainings in September 2017 for *all* ULP staff on how to collect sexual orientation and gender identity within the EHR
- Trainings provided on a yearly basis to residents in Med-Peds, ENT, Peds, EM

**Research: Support the expansion of, and contribute to, LGBT health research.**

- Participation in all scholarly activities listed above associated with eQuality and highly engaged membership on the eQuality Steering Committee
- Leadership role with ULP's research efforts to better understand the healthcare needs of the LGBT community with two publications in process

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