On November 17, 2016, the HSC Office of Diversity and Inclusion held a community conversation using the post-election as a catalyst. I had the privilege of opening the conversation with the following words.

“First, I would like to welcome you and thank each of you for your participation in the conversation today. I want this to be the first of many respectful conversations that we have to allow discussion of the many issues we are facing no matter what your beliefs are. As I was pondering what I would actually say, no words of wisdom would come easily. Then I decided to think in terms of - A Time to … Absorb, to Reflect and a Call to Action. This is ultimately what I’d ask us to do today. Absorb what has happened in this election and how it is impacting those of different political beliefs and individual/group identities. Listen, to what your peers share today, don’t just react. Reflect on how this election has and will impact your life and especially those within this campus community. And let’s build a Call to Action to support this campus community, especially those who are experiencing fear and isolation. Within the Health Sciences Center one thing we can agree upon is that we are in these fields to support those in need.

My own experience with this election has followed these concepts of Absorb, Reflect and a Call to Action, but my journey also started with, and somewhat continues with Grief. I share this in part to show that people across this institution, no matter what position/role are experiencing some type of emotion (sadness or joyfulness) because of this election as well. We aren’t exempt from being impacted. My experience is in part my own, but I’m also processing this election as many of you are, or else you wouldn’t be here today.

A Time to Grieve ….

The last 18 months have been both frustrating and enlightening. The passion that was expressed from both camps was at times exciting and scary simultaneously leading to a lot of unwanted stress. Stress that increased as November 8th grew near. Stress that invaded my thoughts as I woke each morning following me like a gleeful child throughout the day, and invading my dreams as I slept. I asked myself, “Why was this event different than others? Why did this election permeate my being like no others had before?” The answer that always came to me was that our beliefs, our dreams, our wellbeing were on the line as never before in my lifetime.

Then the day came – November 8th. I voted before I came to work feeling very proud to perform my duty as an American. I intermittently checked the news throughout the day to see what the media had to say. Although the news seemed to be going in a direction I wanted I still had an uneasy feeling. The anxiety increased as I rushed home to await the closing of the polls. As expected, KY was one of the first to declare, still I was hopeful. As more results were announced I could visibly palpate the tension and disappointment in my own home. Reality set in. It was not going to be the result I hoped. As I spoke to some
of my family and friends, we were all in a state of disbelief as if a family member had suddenly taken gravely ill. Other extended family and friends were quite different. It was an exuberating feeling. They had achieved what many had seen as the unachievable. But for all of us the unknowing, the uncertainty, continued to dominate the conversation. What was to come next? How could our nation accept the rhetoric of the campaign and begin to heal? How did we sink as a nation to the point of blaming “others” for the problems of society? How could the insults, the macro and macroaggressions, the outright vandalism, the intimidation - be so celebrated in this time in our country and our own community when we are supposed to be a nation, a place, of hope and change. Our belief in the past had been that we were a nation who embraced diversity as we strived for compassion, acceptance and thrived for excellence. A Time to Reflect…..

As I continue to reflect on the state of affairs, I truly believe that we, as a whole, are better than the crude rhetoric that we were subjected to during these last months. Margaret Wheatley, who studies theories of change and chaos once said, “Without reflection, we go blindly on our way creating more unintended consequences, and failing to achieve anything useful.”

If ever a time to reflect it is now. Think about what dynamics played into the decision making for each of us. What aspects of our own life led us to the road we choose? There are a multitude of reasons why the outcome occurred and I won’t speculate on the variety of powers that played a part in the decision. Still, we have to be able to consider and respect everyone’s viewpoint, not just ours even when many times it will be the total opposite of our own. The question to contemplate is, “How can we move on from here to improve the quality of life for everyone regardless of race, ethnicity, gender, sexuality, immigration status, and the many other layers that define us.”

A Time for Action......

Let us be the example of how to move forward for the betterment of humanity. Let’s begin with the conversation today. The Health Science Center Office of Diversity and Inclusion has an imperative to promote an environment of inclusiveness through the understanding and celebration of the many differences in perspectives, thoughts, experiences, belief systems and cultures of our students, faculty and staff. With this goal in mind, it is our intention to provide support toward our efforts of excellence in education, community outreach and research. We can use this platform to address the issues of social injustice and institutional climate. We need everyone’s help to develop strategies to move us all forward.”

The community forum was empowering on many levels. First it was a reminder for everyone that the election may have been a catalyst for the conversation but the issues have been longstanding and deep in our HSC culture. Secondly, it gave a platform for individuals to share their experiences and perspectives in front of administrators who have the opportunity to effect change without fear of reprisal. Additionally, an overwhelming desire for our campus to be welcoming and inclusive while understanding the unique role of how diversity drives institutional excellence was expressed by many in attendance. Lastly, existing resources on the HSC campus were highlighted. We closed by reviewing the overriding themes from the audience:

• Need for reporting structures of unprofessional behavior where the individual is assured that there will be no negative repercussions for the person reporting;
• Desire for meaningful accountability for misbehavior including statements from leadership;
• Review all policies and change/remove those that in some way produce racialized outcomes for faculty, students and staff;
• Need for the leadership and the institution to take bold changes to improve the institution.

Our Commitment

Because of these conversations, we, in the HSC Office of Diversity and Inclusion, felt that we should reiterate our commitment for diversity and inclusion with the following heart-felt statement.

Diversity, Inclusion, Equity and Social Justice have long been important, but not always given priority by the University of Louisville,
and it’s Health Sciences Campus. Much has been achieved over the years and these advances should undoubtedly be celebrated, but we can’t become placated that enough is being done. During these times of divisiveness and uncertainty, it is vital that the University of Louisville continue to strengthen efforts to build an environment which values and applauds a diverse intellectual climate and nurtures the wide range of identities at this institution. Our institution needs to be bold in its actions and aspirations to diversify our student, faculty and staff workforce, ensure all identities are in fact included and cultivated at all levels, and to re-envision our curriculums and research agendas. We must at all times be beholden to the best interests of our students and our workforce, and always work to make sure their voice is recognized and heard. We should strive to be a model for other institutions to emulate in achieving diversity, inclusion, equity and justice.

We call on all of our campus constituents and partners to fully embrace the “You Belong” message and movement being headed by the Office of Diversity and International Affairs. We ask that together we prioritize making this an institution where you belong, I belong, and where we are all nurtured in achieving our goals no matter our race, ethnicity, gender, gender identity and expression, sexual orientation, age, socioeconomic status, disability, religion, national origin or the many other layers that define us. Individually and collectively we must change our behaviors, practices, policies and structures which may contribute to racialized gaps in promotion, tenure, graduation, and retention. To do so means doing more for our colleagues, especially for those who currently don’t feel welcomed, included, heard or supported. It means creating a fuller picture of inclusiveness as we walk the halls of our perspective schools, listening to concerns, having tough conversations, and changing how this institution normally operates, no matter how hard.

One small step that we as the HSC Office of Diversity and Inclusion are taking, and would encourage others to do as well, is to publicly support the Black Lives Matter movement and its principles. Our colleagues at the Kent School of Social Work have a powerful statement about why this is important as educators and we endorse their position. See the Kent School statement here.

We will hold more conversations such as the one that occurred on November 17th and move forward with addressing the important issues that were brought forth. Through these efforts and others we ask for your support and commitment in making this an environment where everyone feels proud to be a part of this institution. Our office is committed to doing the work, in partnership with each of the HSC schools and the university, which has a resounding impact for our faculty, staff, and students, whether it means change comes swiftly, gradually or painstakingly slow. We will push for “quick wins” to begin the process but will not be content with only “low hanging fruit.” We have greater ambition for the place where our constituents work and learn. We will push for strategies and solutions that will have an enduring positive influence on the quality of life for all of our constituents. A place where you truly feel that you, and I... belong.

-Members of HSC Office of Diversity and Inclusion
Cooperative Consortium for Transdisciplinary Social Justice Research

by Nia Holt, Graduate Assistant, Anne Braden Institute for Social Justice

The establishment of the Cooperative Consortium for Transdisciplinary Social Justice Research in January 2017 will mark a new age for social justice research at the University of Louisville. Although it will be known simply as “The Consortium,” it is by no means a simple endeavor. This initiative represents the effort of more than 30 faculty who participated in brainstorming and conceptualizing its formation. In addition to receiving one of the new internal iRFP grants, the Consortium is supported with pledges from 31 University offices, units, centers, institutes, and departments, and includes participation from 7 colleges and schools. These include Arts & Sciences, Education & Human Development, Law, Medicine, Nursing, Public Health & Information Science, and Social Work, with opportunities for further expansion.

The Consortium will act as a university-wide hub for interested faculty and students to come together for community-engaged transdisciplinary research devoted to social justice aims. Its understanding of social justice relies on scholars who conceptualize how systems activate and reinforce inequality. The Consortium uses a transdisciplinary model that goes beyond traditional academic multi-disciplinarity to foster collaborations across disciplines, colleges, and beyond academia that are dedicated to finding new solutions to complex, intransigent social problems. There are two primary goals of this initiative: (1) function as the outward face of social justice at the University and (2) support social justice research, creative activity, advocacy, and community engagement through projects designed to bridge the gap between research and action.

The Consortium will achieve these goals by creating structured opportunities for faculty across disciplines and schools to gather and to pursue both internal and external support for their research, as well as provide opportunities for student engagement. The Consortium will put out Calls for Proposals in the next few weeks for funding that will begin in early 2017. Research support from the Consortium will come in the form of faculty fellowships (direct grants and course or clinical buyouts), graduate student research assistantships, and undergraduate fellowships, as well as volunteer opportunities for interested students. Areas of focus for the Consortium’s research are Community Justice, including Restorative Justice and Housing Justice; Environmental Justice; Social Justice in West Louisville; and Emerging Social Justice Issues (such as Health Equity).

The Consortium’s co-PI’s are Enid Trucios-Haynes, professor of law and interim director of the Muhammad Ali Institute for Peace and Justice; and Cate Fosl, professor of Women’s and Gender Studies and director of the A&S Anne Braden Institute for Social Justice Research. A Lead Partner Working Group will oversee the Consortium—including Fosl and Trucios-Haynes representing their respective institutes, Cedric Powell representing the Brandeis Laboratory for Democracy and Citizenship, Monica Wendel representing the SPHIS Office of Public Health Practice, and Faye Jones representing the HSC Office of Diversity and Inclusion.
Spreading Cheer: Five Things to Learn About U of L’s ISLP Philippines Trip
by Lacee Crail

The holidays will include a different kind of giving for 48 UofL students and faculty who are headed to Cebu, Philippines, Dec. 7-16 as part of an International Service Learning Program.

The ISLP is designed to encourage students to learn and serve in other countries. Since 1997 there have been 38 trips to destinations such as Belize, Botswana, Croatia, and Trinidad and Tobago.

The students typically spend their time on the trip teaching and providing much-needed services to underserved areas and populations. The December trip to the Philippines will focus on providing dental care and teaching high school students.

Here are 5 things to learn about UofL’s ISLP:
1. ISLP’s first trip was to Barbados in 1997.
2. It will take the UofL team roughly 24 hours of travel time as they make their way from Louisville to Cebu.
3. The nine School of Dentistry students who are going to the Philippines will run a dental clinic that is expected to serve more than 100 Filipinos.
4. Other students going on the trip will help in the clinic and spend 8-hour days in the classroom teaching 100 scholars from three area schools.
5. The students and faculty will also take time out for fun. They will go snorkeling and shopping and visit local landmarks including Magellan’s Cross.

For more on the ISPL, check out their website at www.louisville.edu/islp

UofL students who went on the 2014 ISLP trip took time to dance with some of the people from the city of Cebu, Philippines.
It was my first summer in Tennessee. My family had recently moved from Louisville and we were trying to transition to a new environment. Not knowing anyone in this new city, I spent most of the time at home hanging out with my older brother and sister who were in high school. Still infatuated with cartoons, video games, and Pokémon, I did not understand the intricacies of teen life and why everyone was so obsessed with The Real World. My parents knew the move was hard on us and they really pushed us to make this new place our home. They invited one of my best friends from Louisville, Alex, to spend a couple of weeks with us because of how well he got along with everyone. I was a shy kid and Alex was adventurous and outgoing, and for this reason, I felt that my summer was going to turn around. In Louisville, Alex always knew what to do whether it was skating, meeting new people, or just finding somewhere to go swimming. Though once in Nashville, even he could not break the routine. Day by day it remained the same: video games and TV. After being cooped up, Alex convinced me to go out and explore my new neighborhood.

At first I was hesitant, I knew my brother would be mad if we left, but I felt guilty that I could not entertain my guest so I gave in. Of course, Alex brought his skates, so we each put one on alternating feet and we were off. I remember the neighborhood being very quaint with trees everywhere and a manmade creek that ran through our backyard. If you woke up at the right time you could easily spot a deer walking across the drive way. Cul de sac after cul de sac, I started to feel less like I lived on an island and more accepting of Tennessee. Balancing on one foot and pushing off with the other, we found ourselves at a department store. We went in and walked around until arriving at the electronic section where we played more video games. After a stay, I knew my brother would be upset when he realized that we had left, so I urged Alex to leave. He agreed on the condition that we would stop and get some food at a nearby Arby’s. We put our skates back on and headed home. As we left Arby’s, I thought we might make it home without my brother finding out. We got our food and within a few feet outside of the parking lot, in an instant, we were surrounded by five police cars and officers with guns drawn screaming at us saying, “Don’t move.” I froze. I was eleven. I figured that my brother called the police because he thought something happened to us. We stood there—afraid to move, breathe, or even utter a word. It felt like an eternity but eventually an officer walked up to us and he changed my life forever. The officer proceeded to tell us that a woman at the department store had lost her purse and when they saw me and my friend rolling away, they thought we stole it. I was floored. Before I could even speak to profess my innocence, he cut me off and told me that she found her purse a few moments ago. He then said that we should not be roaming outside by ourselves. He told us to get in the back of his car and he would take us home.

I truly felt like a criminal for just walking outside. I remember getting home and sitting in silence. My brother called my parents and told them what happened and I just knew they were going to lay into me. When my mom walked through the door, I did not see anger, I saw relief. My mom and dad had just come back from the police station, furious at what had happened, which was exacerbated by the lack of accountability by the officers. I was still confused. This was not my first instance of discrimination. However, this was the first time that I understood the dynamics between the police and race and gender.

Every day I am inundated by the
media showing men, teens, boys, fathers and brothers being shot by police. I then hear people make excuses about the extraneous circumstances which seem to support their actions whether valid or not. I then recount this experience and several other experiences that have occurred where I have been followed and stopped by the police. I remember in the back of my mind, the many conversations with my mother explaining to me the script that I can almost see right in front of my eyes that I was to recite every time I encounter a situation like this. As a black man, I must stifle my emotions and overthink every move, not for myself, but because my pride is not worth putting my mother through what I see on the news.

I really hate this story. While I agree that most officers are competent and moral, I question the professional orientation of those who would on the complaint of one woman approach a child, a resident of a large community of middle class status, in the same manner as a fugitive. Weapons pointed at an eleven-year-old could illicit a response different than that of an adult. If a child acts unpredictably in response to this degree of intimidation shown, my life could have summated as another tragic shooting at the footnote of a news cycle. While I have met mostly good police officers who are really trying to display the professionalism to keep communities safe, I hate this story because it reminds me that I live in a casino where the odds are stacked against me and I have to hope I do not get profiled. It seems that officer training should differentiate between threats based on perceived guilt and focus on due process and the notion that everyone is innocent until proven guilty.

I came to medical school because, as the son of a pastor and a teacher, I was taught that my life should be in service to society. Living in the medical school bubble surrounded by great people daily, it is easy to become oblivious to the workings of the real world happening a few feet outside of the health sciences campus. Regularly my mind drifts through questions, “What is my role as a future physician and community leader regarding social issues like this?” “Why am I serving a community that can turn a blind eye to blatant discrimination?” “Am I stuck in a cycle?” These are usually fleeting thoughts because even though I know the world is not perfect, I am more fortunate than others and intend on having a positive impact on society. Unfortunately, too often we become numb, whether as a protective mechanism or through desensitization, to the barrage of negativity surrounding these issues. The truth becomes that we must embody the change that we want to see and collaborate as a constructive impetus to enact social reform.

**Dean Ganzel Receives 2016 LGBT Center Ally Award**

During the annual Pride Week Celebration, School of Medicine Dean Toni Ganzel was named the LGBT Center’s 2016 Faculty/Staff Ally Award winner for the Health Sciences Center. Dean Ganzel has established the School of Medicine as a national leader in teaching care providers for LGBT patients. Under her direction, the school’s eQuality Project brought together LGBT Center staff with the Office of Undergraduate Medicine, the HSC Office of Diversity and Inclusion (2014-2016), and the School of Medicine Office for Community Engagement and Diversity (2016-present) to infuse the curriculum with LGBT competencies established by the American Association of Medical Colleges. She also commissioned a survey to assess the climate for LGBT students, faculty, and staff and presented certificates to graduates of the LGBT Health and Wellness Competency Certificate program. Stacie Steinbock, director of the LGBT Center's satellite office at the Health Sciences Center, says Ganzel's leadership has been a key to success. "There is a reason we are national trailblazers and without a doubt it's Dean Ganzel's vision and courage in moving us forward. She deeply believes this is the right thing to do and never wavers in her support."
School of Nursing study Examines the Experiences of Muslim Cancer Survivors

A study being conducted at the University of Louisville School of Nursing will provide insight into cultural and religious influences on the experiences of Muslim cancer survivors living in the United States.

The results will be used to develop culturally and religiously sensitive interventions, such as support groups for Muslim cancer survivors, to improve quality of life and health outcomes.

Funded by a $4,712 grant from the American Nurses Foundation, the study is led by UofL School of Nursing Assistant Professor Fawwaz Alaloul, Ph.D., M.P.H., M.S.N., R.N., and focuses on Muslims of African, Middle Eastern and South Asian descent who reside in the United States.

“Previous studies conducted in Islamic countries showed that the religion and culture of Muslims have a great influence on their experience and how they perceive their cancer diagnosis, treatment and survivorship after treatment,” Alaloul said. “This study will help us understand the influence of religion, faith and cultural practices on their cancer experience.”

Studying Muslim cancer survivor experiences has become increasingly important as the Muslim population continues to grow in the United States. Lack of understanding by health care providers of Muslim cancer survivor experiences within the context of culture can create barriers that may interfere with health outcomes, Alaloul said.

Prior research has shown that some Muslim cancer patients use herbs and other dietary supplements to treat disease or manage symptoms and they do not share this information with health care providers. The supplements might interact with prescribed medication, adversely impacting treatment outcomes. Patients might also refuse to take medications that contain swine-derived gelatin because Muslim law forbids the consumption of pork and they do not disclose this to their providers.

“We need to make sure health care providers are aware of these differences when treating Muslim patients,” Alaloul said. “If providers are aware of these issues, they will better identify, understand and meet patients’ religious needs, which can reduce health disparities and improve health outcomes.”

Muslims are less likely to disclose their cancer diagnosis to their community and even some relatives because they think the information is too personal. Withholding their health status means the patient forgoes emotional support from the community. Cancer support groups tailored for Muslims could improve quality of life, Alaloul said.

For more information, contact Dr. Fawwaz Alaloul at fawwaz.alaloul@louisville.edu or 502-852-8396. Study participants should identify as Muslim, speak and read English, Arabic or Urdu, be at least 18 years old and be one to six years post cancer diagnosis. Interviews can be done in person, over the phone or through video conference.
Public Health and Information Sciences

Public Health and Medical Student Volunteers Talk Nutrition in Under-served Neighborhoods

by Diana Pantalos, PhD, Registered Dietitian/Nutritionist, Adjunct Assistant Professor, School of Public Health and Information Sciences, Metabolic Nutritionist, Weisskopf Child Evaluation Center, Department of Pediatrics

Nutrition professionals recognize that respect for an individual’s food culture is fundamental when promoting changes in eating patterns to improve health. University of Louisville students from the School of Public Health and Information Sciences (SPHIS), and from the School of Medicine, had an opportunity to implement this concept among diverse populations through the Cooking Matters at the Store program.

The goal of the non-profit sponsor of the program, Share Our Strength/No Kid Hungry, is to end childhood hunger in the United States. SPHIS was awarded a one-year grant to reach over 200 low-income adults in underserved neighborhoods of Louisville. The 13 U of L students who served as volunteer leaders included graduate and undergraduate SHPIS students, and first-year medical students. One benefit of bringing the program to U of L was the opportunity for students to interact with people in their own neighborhoods. The Cooking Matters curriculum and training emphasized listening as part of the process of providing strategies for people for whom healthy eating can seem too expensive. Two students shared their experience:

Rebecca Lepovsky, senior, SPHIS undergraduate program:
Although food may be a common thread, every person this program brought me into contact with had a different experience, which shaped her or his view and attitude to-

A mother and teenage son, recent immigrants from the Congo, learned which fruits and vegetables are in season in the fall and winter in the Kentucky climate. Dr. Diana Pantalos met them at the Family Health Center - E. Broadway in November.
wards food. As a volunteer, it was important for me to be open to learning and hearing every person’s story, and to try to communicate within that story, in a way that will in hopefully improve their health and well being.

Ryan Parker, second year medical student:
The most important lesson that we learned was simply interacting with people as individuals. With the Cooking Matters tours, we asked lots of questions of the participants. “What kind of food do you like to make at home? Which types of food do you normally buy?” And so on. This helped us to uncover a diversity of deeper motivations for eating certain foods beyond just health, cost, taste, availability, etc.

Venues for the educational program included grocery stores in low-income neighborhoods, community health clinics, health fairs, and schools for pregnant teens. The target audience was parents of young children and pregnant women, but adults of all ages who rely on food assistance also participated, including families new to Louisville from other parts of the world. The Cooking Matters grant funds allowed participants to choose $10 worth of healthy foods to take home at the conclusion of the learning session.

During the program another principle of nutrition education also became apparent: food choices are complex. Some individuals are ready to implement new strategies, while for others information alone may not be enough to spur change.

Rebecca:
The most important insight I have realized throughout this experience is the resiliency of people. Even if they are in an underserved population, that does not stop anyone from making the most of what they have and the opportunities that may arise. Every participant has been eager to soak up advice and knowledge that will make their and their children’s lives better for the future.

Ryan:
During the course of our discussions, we learned about the participants’ home and work lives. One woman valued healthy foods, but simply did not make it a habit to check nutrition labels. Another was the sole provider for a disabled partner and child, so she made food decisions based on what her family felt comfortable eating. I could have talked all day about how to save money on groceries, but it would not have made a difference to either of these individuals since that was not their motivating factor! As a future physician, I plan to translate this lesson into clinical practice, not only for conversations around eating habits, but in general so that I can better identify hidden motivating factors that could make a difference in patient care.

The Cooking Matters at the Store program at UofL reached 216 diverse participants, providing basic strategies to eat healthy foods on a limited income. Student volunteers connected with Louisville residents by listening and sharing information, meanwhile gaining insights about nutrition education that they will take forth into their careers as health professionals.
Office of Diversity & Inclusion Partners with HSC LGBT Satellite Office for Successful Blood Drive

by Darryl J. Young, Jr., Program Coordinator

On October 28th the Office of Diversity & Inclusion partnered with the HSC LGBT Office for their PRIDE week to host a blood drive at the Cardiovascular Innovation Institute. The event was inspired by the tragic shooting that happened over the summer in Orlando at Pulse Night Club, a prominent LGBTQ club where 49 people were killed and 53 were injured by a lone gunman.

During the aftermath of the crisis there was a huge call for blood to help victims locally. Sadly though, FDA regulations do not allow Gay men to donate blood. The drive was meant to serve as a remembrance of the lives lost in Orlando and a way for allies to stand in and support the LGBTQ community in a meaningful way.

The blood drive was indeed a success, as 49 people were able to successfully donate blood. Each donation equals enough blood to help 3 people. Due to the amazing kindness of the donors 147 people can positively be affected.

The blood drive was also an opportunity to address the FDA ban as a petition was created to ask the FDA to repeal its ban on Gay male donors. Between the drive and the previous day’s pride cookout 300 signatures were collected.

Hopefully, the blood drive will continue on as a tradition that can foster fairness and equity on the HSC campus and greater partnership between the LGBTQ community and its allies.

World AIDS Day, December 1

by Karen Krigger, MD, Med, FAAFP, AAHIVM(S), Director of Health Equity, HSC Office of Diversity and Inclusion, Professor, Department of Family and Geriatric Medicine, Co-Director, American Academy of HIV Medicine Southeast Division

World AIDS DAY, December 1, 2016 illustrates many celebrations in HIV history. While 78 million people on the planet have been infected with HIV since the start of the epidemic, with 35 million dying, we had 46% of the world’s HIV positive population having access to life saving antiviral therapy in 2015. Antiviral therapy in this country has created a normal lifespan for its citizens. Seventy-seven percent of all HIV pregnant women in the world received medications preventing transmission of HIV to their babies in 2015. New infections among children, globally, have declined by 50% since 2010. Unfortunately, the same decline as not been observed among adult infections. Since 2010, there have been no declines in new HIV infections among adults, globally.

Currently, UNAIDS has a fast-track approach to the global eradication of HIV by the year 2030. This involves a target of 90% of infected
people knowing their HIV positive status and accessing treatment by 2020 with 90% of people on antiretroviral treatment having suppressed viral loads (a laboratory measure of the amount of HIV virus in the patient’s blood) to non-detectable blood levels by 2020. To achieve this goal, people who are HIV positive have to be identified, linked to care and retained in care to facilitate the non-detectable viral load status. Additionally, people at risk for HIV acquisition should have available to them PrEP, Pre-Exposure Prophylaxis, a method of reducing HIV transmission involving one pill a day. Regrettably, only 25% of known US HIV positive patients have suppressed viral loads to non-detectable levels. On the whole, our US challenges are clear: Educating our population about their risks of contracting HIV, identifying those who have HIV, and linking those patients to care with retention in medical care. Additionally we need to provide education to our medical community in asking patients about their risks for getting HIV and how to provide PrEP services for patients who have risks for acquiring HIV.

If you have a historical predilection, HIV is the perfect disease to research the history of its recognition, identification, treatment, and cultural impact. Avert has provided an interactive timeline. A far more comprehensive timeline of 18 pages is provided by AIDS.GOV, documenting the epidemic from 1981 through new discoveries in 2016 focusing on cultural and scientific impact globally and in the United States. I offer this warning to you in advance; the outline makes a powerful statement for any person with knowledge of HIV personally, academically, or culturally.

Happy World AIDS DAY to you! Do what you can to help win this war by 2030!

Upcoming Events & Announcements

- **“Race: Are We So Different”**
  Muhammad Ali Center Special Exhibit
  Exhibit open now until January 2
  Location: Muhammad Ali Center

- **LGBT Health and Wellness Certificate**
  Gender Affirming Surgery
  (Medical Focus)
  Tuesday, January 17
  More Information: Chaz Briscoe

- **MLK Week 2017**
  An annual week-long series of events that honor the life and legacy of Rev. Dr. Martin Luther King, Jr., and educate the UofL campus and community on the importance of actualizing Dr. King’s ideals of social justice, non-violence, education, and service
  January 13—20, 2017
  More Information here

- **44th Dr. Joseph H. McMillian National Conference on the Black Family in America**
  February 24—25, 2017
  Location: Hilton Garden Inn
  More information here

Would you like to submit an article or announcement to this newsletter? For full submission instructions, please visit the Health Sciences Center Office of Diversity and Inclusion website.