Social Justice and Medical Mistrust

by: Josh Miller, Chief Executive Officer / Co-founder IDEAS xLab and Mallika Sabharwal, MD Candidate 2019

“Relationships build trust; organizations dismantle it.” read a 6-word memoir written during one of the focus groups conducted by University of Louisville medical student Mallika Sabharwal looking at medical mistrust. Engaging both community members and healthcare providers in and around the Smoketown neighborhood in Louisville, KY reiterated the importance of patient-provider communication as a means to build trust. And, at the same time, both groups acknowledged (with varying experiences) the barriers placed on these relationships at the systems level (healthcare organization, insurance, etc.).

Sabharwal, a fourth year medical student and HSC Office of Diversity and Inclusion Health and Social Justice Scholar, has been working with IDEAS xLab - a non-profit focused on leveraging the power of arts, culture, and the creative industries, to support health and wellbeing innovation by completing a community-based participatory research project (CBPR) that examines the role of medical mistrust in Louisville, KY’s Smoketown neighborhood. The approach, including the utilization of 6-word memoirs, which is an arts-based storytelling tool, has informed multiple initiatives over the past two years.

CBPR is a collaborative approach to scientific research where community members have input into the research process, including decision-making, data-gathering, and evaluation. Before researchers dive into the methods of a project they have to become familiar with the community. One method is a walking survey, where researchers walk around the blocks of a neighborhood and become familiar with its built environment, housing, advertisements, and businesses. Additionally, Sabharwal worked with a community health champion to go door-to-door and to community events to engage residents and stakeholders as part of the process.

Smoketown, a neighborhood located one mile southeast of downtown Louisville and adjacent to the University of Louisville Health Sciences Campus, is the oldest African American neighborhood in Louisville. According to the Louisville Metro Health Equity Report, Smoketown has a high percentage of adults and children living in poverty in Louisville. The age-adjusted diabetes death rate in Smoketown is the highest in Louisville and has an average life expectancy of just 69.4 years, 14 years less than other neighborhoods in the city.[1]

Despite the geographic proximity to healthcare services, it is important to understand other factors that impact accessibility. Besides environmental and socioeconomic factors, psychosocial behaviors also play an important role. Trust and confidence in a medical provider and healthcare organization is
important. Medical mistrust stems from historic events and institutional racism that perpetuate discrimination in society, causing the disbelief of individuals in a homogeneous healthcare system and its providers. This contributes to underutilization of healthcare and health inequities. Medical mistrust is also associated with poor communication in the patient-provider relationship.

Just as Sabharwal was embarking on the project, IDEAS xLab held the One Poem at a Time poetry walk where local spoken-word artists performed prose honoring landmarks and known businesses, like Meyzeek Middle School and Shirley Mae’s Café. The poetry walk featured a new series of billboards co-created with community members, and designed to engage stakeholders in a policy discussion around concentrated outdoor advertising and its impact on health. Sabharwal was able to experience first hand what the neighborhood was like, hearing both from residents and policymakers both about the rich heritage, and opportunities for change.

To understand how Smoketown residents interact with the healthcare system and the impact of medical mistrust, Sabharwal administered the Medical Mistrust Index (MMI) to Smoketown residents and local healthcare providers. Twenty-six community members and 80 providers completed the MMI survey. There were significant differences between community members and providers for 11 of the 17 MMI survey items. Based on survey results, focus groups and interviews were conducted to gather qualitative data in the form of 6-word memoirs, or 6-word phrases that encompass a narrative and draws a big idea into a six word description that serves as a catalyst for creativity.

Early findings were discussed and shared with participants at a community event to further validate the results, and through a poster presentation at Research!Louisville, designed with support from Theo Edmonds, co-founder of IDEAS xLab and professor within the University of Louisville School of Public Health & Information Sciences, and Faye Jones, Associate Vice President of Health Affairs/Diversity Initiatives.

In an effort to address medical mistrust and expand access to healthcare services, IDEAS xLab, University of Louisville School of Medicine, and several community partners will work with churches in the Smoketown community to provide free heart health assessment clinics starting in February 2019. The initiative, Heart of a Champion, will screen residents for cardiovascular disease and educate them on lifestyle interventions to lower their risk. If additional tests are needed they will be referred to a specialist at no additional cost. Six word memoirs will continue to be used to collect qualitative data and to measure residents and providers’ perceptions of trust specific to the healthcare sector.

Marginalized populations have endured generations of exclusionary practices and policies that have stripped their agency in medical situations. In order to fundamentally change this dynamic, the healthcare system needs to build trust with the community. This requires space and time—the space to connect with people and the time for the connection to materialize. Only then will people be given a seat at the table, feel accepted, and have the agency to improve their health.
Health Equity and Culturally Responsive Language
by Ashley O’Neil, QA Coordinator / Culturally Effective Care Program Facilitator

Here at the University of Louisville School of Dentistry (ULSOD) our clinics offer Language Access to help provide assistance for those patients who need help with interpretation during their appointment. We currently use Language Services Associates, which allows interpretation by passing a phone between the student and patient to speak with a translator. In 2018, we had over 1,200 calls placed which came out to about 21,000 minutes used!

According to LanguageLine Solutions, “the research is in and the evidence is clear: the Great American Melting Pot continues to grow and immigrants are helping our economy rebound all around the United States. So, providing meaningful access to services under Title VI and numerous State and Local Executive Orders is not just the law, but a good thing.” We want to continue to put forth an environment of inclusiveness here at the University of Louisville, and as our numbers grow each year, we want to continue to keep up with the demand of our growing patient population!

ULSD’s Clinical Operations Manager, Jillian Cain has been exploring the opportunity to adapt a technological video translation upgrade that uses iPads. With the adaption to iPads, the student or faculty member would use an app, called Iris by Language Service Associates that works in real time to provide a Certified Interpreter on-screen, to translate without passing a handset. The Iris currently provides access to 15 different languages used nationwide, in addition to American Sign Language (ASL). This would remove the requirement to set appointments for ASL translators to arrive for the appointment of a hearing-impaired patient. In the case where a patient speaks a language other than the 15 available on Iris, or prefers not to use the video app on the iPad, we will still have the option of using the traditional translating phones. We hope to launch this exciting new option for language services using iPads in the Fall 2019 semester!
Neighborhoods With More Greenspace May Mean Less Heart Disease

People who live in leafy, green neighborhoods may have a lower risk of developing heart disease and strokes, according to new research published online today (Dec. 5, 2018) in the Journal of the American Heart Association, the open access journal of the American Heart Association/American Stroke Association.

In this study, the first of its kind, researchers from the University of Louisville investigated the impact of neighborhood greenspaces on individual-level markers of stress and cardiovascular disease risk.

Over five years, blood and urine samples were collected from 408 people of varying ages, ethnicities and socioeconomic levels, then assessed for biomarkers of blood vessel injury and the risk of having cardiovascular disease. The participants were recruited from the UofL Physicians-Cardiovascular Medicine outpatient cardiology clinic and were largely at elevated risk for developing cardiovascular diseases.

The density of the greenspaces near the participants’ residences were measured using the Normalized Difference Vegetation Index (NDVI), a tool that indicates levels of vegetation density created from satellite imagery collected by NASA and USGS. Air pollution levels also were assessed using particulate matter from the EPA and roadway exposure measurements. Researchers found living in areas with more green vegetation was associated with:

- lower urinary levels of epinephrine, indicating lower levels of stress;
- lower urinary levels of F2-isoprostane, indicating better health (less oxidative stress);
- higher capacity to repair blood vessels.

They also found that associations with epinephrine were stronger among women, study participants not taking beta-blockers — which reduce the heart’s workload and lower blood pressure — and people who had not previously had a heart attack.

“Our study shows that living in a neighborhood dense with trees, bushes and other green vegetation may be good for the health of your heart and blood vessels,” said Aruni Bhatnagar, Ph.D., lead study author and professor of medicine and director of the UofL Christina Lee Brown Envirome Institute and the Smith and Lucille Gibson Chair in Medicine. “Indeed, increasing the amount of vegetation in a neighborhood may be an unrecognized environmental influence on cardiovascular health and a potentially significant public health intervention.”

The findings were independent of age, sex, ethnicity, smoking status, neighborhood deprivation, use of statin medications and roadway exposure.

Previous studies also have suggested that neighborhood greenspaces are associated with positive effects on overall physical and psychosocial health and well-being, as well as reduced rates of death from cardiovascular and respiratory diseases and improved rates of stroke survival, according to Bhatnagar. However, these reports are largely limited by their reliance on self-reported questionnaires and area-level records and evaluations, Bhatnagar said.

Co-authors of this study are Ray Yeager, Ph.D.; Daniel W. Riggs, M.S.; Natasha DeJarnett, Ph.D.; David J. Tollerud, Ph.D.; Jeffrey Wilson, Ph.D.; Daniel J. Conklin, Ph.D.; Timothy E. O’Toole, Ph.D.; James McCracken, Ph.D.; Pawel Lorkiewicz, Ph.D.; Xie Zhengzhi, Ph.D.; Nagma Zafar, M.D.; Sathya S. Krishnasamy, M.D.; Sanjay Srivastava, Ph.D.; Jordan Finch, M.S.; Rachel J. Keith, Ph.D.; Andrew DeFilippis, M.D.; Shesh N. Rai, Ph.D. and Gilbert Liu, M.D. Author disclosures are on the manuscript.

The WellPoint Foundation and the National Institute of Environmental Health Sciences of the National Institutes of Health supported the study.
Leading Through Grief
by: Carrie Bohnert, MPA, CHSE, Director of the Standardized Patient Program

In January of 2018, the Standardized Patient Program lost one of its team members in a brutal, senseless act. David Burch, an eleven-year veteran of the SP Program, our MVP, was gone.

We got the news on a Sunday night. Our instincts were right, the fact that he didn’t show up for work on Friday was, indeed, an indicator that something was wrong. He was likely already dead as we tried to reach him.

Now what? One of my team members has died and I don’t know what to do. Do I share the news? Do I wait for news to spread on its own? They didn’t teach me this in grad school, I am all at sea.

The EAP advises me to call everyone into an emergency meeting and share the news. It’s my job, they say, to lead my team through this grief, and anyone who can’t make this meeting needs a phone call from me.

Thank god there’s a grief counselor there with me. I stand in front of my team feeling like a fraud. Who am I to do this? I cry and my voice catches as I say “We lost a member of our team this weekend. David Burch was killed.”

I deliver this news over and over for the next 24 hours as I reach the remaining members of my 40-person team. I break the news every five minutes, ten minutes, twenty minutes. I practice what we teach medical students about breaking bad news. I give them a warning shot to let them know that bad news is coming. I allow for silence. I share empathetic statements. All the while I’m numb or angry or sad but I have to stay strong for them. I am their leader. This is my job. I walk person after person through their grief.

I begin to think that this is helping me process this trauma. Talking about it over and over makes it real. Makes it done. Makes it finished.

David’s brother calls me on Tuesday to tell me David won’t be back to work. “I know. I’m so sorry,” I tell him. I listen to his grief and tell him how much we loved David. How we’ll name the coffee station after David since he always made sure the pot was full.

Flash forward to this month. Grief appears everywhere. In a SP who drops in to tell me she can’t stop thinking about David. In a team member who shares a poem about him. In a meeting of faculty when David appears on a video we’re reviewing, and tears stream down my face. In a teaching session. I’m facilitating small group learning. I know there’s a video of David in this workshop. I’ve prepared myself for this. As the workshop proceeds and the video segment nears, I notice that I’m fidgeting. My eyes are shifty. My breathing is shallow. My palms are sweaty. I rub my palms over my lap again and again. I tug at my hem and collar. I take deep breaths. The learner on my right notices but doesn’t say anything. A colleague walks to the podium to begin the video. I apologize to my table of learners through tears and leave the room. I cry for the full twenty-minute video. “Pull it together,” I tell myself. “Today isn’t about you,” I tell myself. “Be their leader,” I tell myself.

I realize that I haven’t processed my grief. That all those phone conversations in the days after David’s death were their own kind of trauma. That my grief is surprising and real.
School of Nursing

2018-2019 Nursing Cohort Most Diverse Ever

by: Hayley Kappes, Communications and Marketing Specialist

One hundred nursing students marked their formal entry into the health care profession Sunday at the University of Louisville School of Nursing’s Transition Ceremony.

The ceremony signifies the advancement of future nurses from the classroom to clinical rotation learning during the final four semesters of the undergraduate program, known as the upper division. Students recited the School of Nursing Honor Code Pledge and received a pin to wear on their scrubs that serves as a reminder of their commitment to provide high quality care.

“The most important person for a patient or for their families is the nurse,” UofL President Neeli Bendapudi said during the ceremony. “You are entering a noble profession.”

The cohort of students is one of the most diverse the school has seen, with 31 percent ethnic minority and 19 percent male, Dean Sonya Hardin said. Men account for only 9 percent of the national nursing workforce.

Guillermo Aguirre, one of the new upper division students, said he decided to become a nurse while he was on a military deployment in Iraq in 2011. One of his friends was injured by an explosion and a young medic kept him alive until they reached the medevac.

“A nurse can go anywhere in health care, but most importantly, they have the most interaction with patients,” Aguirre said. “I’m going to make a difference and help people.”

During the ceremony, Brittney Corniel, a labor and delivery nurse at UofL Hospital and alumna of the UofL School of Nursing, spoke about how her passion for nursing ignited during a hospital externship after her junior year.

She cared for a pregnant patient who had been in a car accident and had an emergency cesarean section, holding the woman’s hand and reassuring her that the staff would provide the best care in their power.

A few hours later, the baby died.

“When everything settled down, the patient took me aside, thanked me for everything I had done, and said ‘you’re going to become an amazing nurse.’ In this moment, I realized this was a job I would be able to love on the bad days just as much as on the good days,” Corniel said. “As you all go through this program, you will have experiences like this. The School of Nursing will give you plenty of opportunities to serve others, and during that service, your passion for nursing will develop and lead you to what your purpose is.”
The Importance of Affirming Health Care Policies and Practices for Transgender People
by: Ryan Combs, PhD, University of Louisville School of Public Health & Information Sciences

Transgender people face substantial barriers to accessing health care. The 2015 U.S. Transgender Survey - a study of over 27,000 participants - found that one-third of respondents who had been to the doctor in the past year had at least one negative experience related to their gender. These experiences include incidents ranging from verbal harassment to refusal of treatment. A quarter of those surveyed did not seek the health care they needed due to fear of mistreatment. Moreover, negative interactions with health care providers are widespread in our state according to a study my research team conducted on lesbian, gay, bisexual, and transgender Kentuckians’ health equity and access. Transgender participants shared their most frequent and negative experiences. The transgender community responds to these challenges by sharing information about affirming providers, traveling long distances to receive competent care, not disclosing their identity to providers, or simply avoiding health care altogether.

As a result of these and other barriers to health, there are significant differences in health outcomes between transgender people and our population as a whole. They report more days of poor physical and mental health. They are also at an increased risk for social isolation and multiple types of violence. For those who experience additional oppression, such as transgender people of color and transgender people with disabilities, the health risks are compounded. Much of the debate over transgender health focuses on treatments related to gender transition, but they are also subject to the same illnesses as everyone else - from arthritis to Zika.

Federal legislation enacted in recent years had begun to make health care services more accessible to this population. The promise of nondiscrimination protection allowed patients to more safely come out to their providers. However, policymakers have recently shifted away from explicitly protecting the rights of transgender people in health care settings, leaving patients more vulnerable to discrimination by health care professionals. This may erode their trust in the health care system and is likely to directly contribute to a retrenchment of any gains recently realized in addressing health disparity gaps.

Every major association of health professionals in the United States has recognized the importance of accessible and inclusive health care for transgender people. As health professionals, we are in a position to work towards increased access for this and other marginalized populations. We must continue to collect more and better data on how to address the social determinants of health at the societal level and develop best practices on delivering high quality care to each individual. Anything less would run contrary to the core values and ethics of health professions.

Black History Film Series Collaborative with the Louisville Free Public Library
by: Karen Krigger, MD, Med, FAAFM, AAHIVM(S), Director of Health Equity HSC Office of Diversity and Inclusion

We currently live in a culture of divisiveness. Not, necessarily detrimental, unless points of contention cannot be exchanged in civil dialogue with conscious effort to engage in mutual understanding. If the goal of an encounter is to ‘win’ an argument instead of understanding the nuances, ramifications, and outcomes of the position neither discussant gains any more than what they personally brought to the table. The advancement of the solution is stymied in such encounters. These “win-win” scenarios limit the potential for exploration of alternatives, and perhaps, better products as a result of the interaction.

The Black History Film Series Collaborative between the HSC Office of Diversity and Inclusion and the Louisville Free Public Library provides a unique venue for rediscovering productive dialogue. This is the 2nd year of the collaborative allowing academic and community interchange on a variety of topics relative to the position of blacks in America. Lively discussions by attendants diverse in age, race, education, socioeconomic levels, and gender highlighted each viewing in 2018. For many attendees, it was the first time in many years they had visited the main branch library at 301 York Street, 40203. As 80% of our professional trainees come from the top 20% of our nation’s socioeconomic level, the films allow alternative viewpoints and history unknown to many of our university family. The movies are closed captioned for the hearing impaired with “hearing loops” available to facilitate discussion participation. Sign language interpreters are available with advanced requests. Most of the handicapped accessible parking is located on the 3rd Street side of the Library. This is also the side of the Centennial viewing room. Street parking is free on Sundays.

In honor of Black History Month, February 2019, 4 films were chosen to represent insightful topics on American culture: “The Immortal Life of Henrietta Lacks” “medicine and research; “Moonlight” LGBTQ and poverty; “Black Panther” “pop culture; and finally, “13th “social justice.

One film will be shown at each Sunday in February from 2pm-5pm. Each film will be followed by a discussion facilitated by UofL faculty and community leaders.

Film Schedule:
2/3
The Immortal Life of Henrietta Lacks (TV-MA), tells the story of an African American woman who unwittingly influenced the course of modern medi-
icine, and her descendants’ struggle to understand the significance of her legacy. The discussion following will focus on the rights of individuals participating in medical research. The discussion will also include ramifications of childhood trauma extending into adulthood as it relates to her children. The film is 1 hour and 33 minutes in length.

**University panelists:**
- Paula Radmacher, PhD, Vice-chair University of Louisville Institutional Review Board
- Linda Woolridge, MBA, community board member of the UofL Institutional Review Board.

**Community panelist:**
- Alphonso Nichols, MD, Adolescent Psychiatry

**2/10**

_Moonlight_ (R), a coming-of-age story about a young man grappling with questions of family, community, and sexuality in Miami, Florida. The film will be followed by a panel discussion with U of L faculty, and representatives of community organizations highlighting issues of the African American LGBT+ community and poverty. The film is 1 hour and 51 minutes in length.

**University panelist:**
- Aaron Weathers, MBA, Director of the Health Sciences Center LGBTQ Center

**Community panelists:**
- Jaison Gardner – co-host WFPL-FM “Strange Fruit “pod cast
- Keesha Gardner – employment specialist, St. John’s Center for Homeless Men

**2/17**

_Black Panther_ (PG-13), the international blockbuster about the heroes of the fictional African nation of Wakanda earned over a billion dollars in sales worldwide. The panel discussion led by U of L faculty, will include discussions of “black super heroes” in American culture, the film’s portrayal of African culture, and the role of women in society. The film is 2 hours 14 minutes in length.

**University panelists:**
- Dwayne Pruitt, PhD, Associate Dean A&S
- Kaila Story PhD, Professor, Pan-African Studies

**2/24**

_Thirteenth_ (TV-MA), is a documentary tracing racial inequality from the end of slavery through the modern criminal justice system. The film will be followed by a panel discussion with U of L faculty, representatives of community organizations, and members of the public about mass incarceration, voting rights, and other issues raised in the film. The film is 1 hour 40 minutes in length.

**University panelists:**
- Cedric Merlin Powell, JD, Professor, Brandeis School of Law
- John Chenault, PhD, Associate Professor and Medical Librarian
- Dewey M. Clayton, PhD, Professor of Political Science

**Community panelist:**
- Shelton McElroy, MSSW, Associate Director of The Bail Project

The movie screenings are free, but reservations are requested. Please call (502) 574-1603 for reservations or [click here to register online](#). Walk-ins will be accepted the day of the events, if space is available. We welcome ALL to attend this series in honor of Black History Month. This is a wonderful platform for community discussion of various viewpoints. We hope to see you at the main branch library in February.
HSC Office of Diversity and Inclusion

Helping Others Join the Healthcare Profession
by: Vicki Hines-Martin, PhD, RN, FAAN, Acting Assistant Dean, School of Nursing, Director of Community Outreach, HSC Office of Diversity and Inclusion

Think back to when you first decided to become a health professional. Did you always know? Were there some missteps along the way? Could you have used a little help to make things easier as you began your journey? Some of us were lucky, always knew what we wanted, had a solid educational foundation for health care and had all the support and resources we needed to be successful in starting our education in our chosen health career.

However, many of us began our educational journey through a more indirect route. Trying to discover what sparked our interest and what that meant for future education, what we thought we could offer others in our lives, what would help us earn a respectable living, and would give us a sense of pride was an essential part of the journey toward becoming a health professional. For those students who fall into the second category, The Summer Health Professions Education Program (SHPEP) might just be what is needed.

The University of Louisville Health Sciences Center (ULHSC) in partnership with Sullivan University College of Pharmacy is one of 12 host universities from across the U.S. The ULHSC will be hosting 80 students in summer 2019 who will engage in a curriculum that focuses on academics and interprofessional learning, development of lifelong friendships, networking and professional development through exposure to each of the disciplines.

Do you know someone who might benefit from the SHPEP program? Encourage them to apply. The requirements are:

1. Must be a high school graduate and currently enrolled as a freshman or sophomore in college.
2. Have a minimum overall college GPA of 2.5.
3. Be a U.S. citizen, a permanent resident, or an individual granted deferred action for childhood arrivals (DACA) status by the U.S. Citizenship and Immigration Services.
4. Must not have previously participated in the program.

Other factors for consideration include that a student:
1. Identifies with a group that is racially/ethnically underrepresented in the health professions;
2. Comes from an economically or educationally disadvantaged background; and/or
3. Has demonstrated an interest in issues affecting underserved populations.
4. Submits a compelling personal statement and a strong letter of recommendation.

All the preceding information, the portal for application and more are located at http://www.shpep.org/

Please spread the word. SHPEP might just be what someone you know needs to be successful in joining us as a health care professional.

Important Dates

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<td>December 1</td>
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<td>February 15</td>
<td>Application closes</td>
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<td>March 15</td>
<td>Admission decisions release date</td>
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Welcome!

Please join us in welcoming the newest member of the UofL Health Sciences Center Office of Diversity and Inclusion, Xian R. Brooks, MPH.

Xian R. Brooks (he/him/his) is a public health professional, born and raised in Louisville, KY. He completed his MPH in community and behavioral health at the University of Colorado Denver, and his BS in public health education at North Carolina Central University. While Xian's research interests lie in the areas of LGBTQ reproductive health and health equity; specifically transmasculine health, he has experience in the fields of clinical research trials (HIV and opiate dependence), and harm reduction. Xian's background in community organizing is responsible for his love of community outreach, community based participatory research, and boots on the ground recruitment methods. Xian fully embraces an intersectional public health practice, rooted in anti-racist frameworks. Xian loves bowties. A lot. Xian will fulfill a wide variety of roles in the HSC ODI such as:

- Collaborating on scholarly activities on diversity in healthcare and health disparities for campus partners.
  * Guide student scholarly activities under the Health and Social Justice Scholars program
  * Mentor HSC students and residents in scholarly activities related to health disparities and diversity in healthcare
  * Assist faculty in research activities related to diversity, health equity and social justice.
- Lead departmental research and evaluation initiatives related to diversity, health disparities, and social justice using both quantitative and qualitative research methods
- Develop and lead health equity curricular initiatives in partnership with the HSC schools
- Lead the identification, writing and submission efforts to secure grant funding for further health disparity research.
- Develop metrics and measures to assess the impact of programming provided by HSC ODI and in support of the HSC schools equity initiatives when needed.
- Assist in the development and planning for Research!Louisville Health Disparities section, including selecting the sub-topic, poster review, and evaluation of the Health Disparities component.

Events and Announcements

- **The Roots of Activism: Kentucky and Radical Southern Organizing—Exhibit**
  
  When: January 18—April 26, 2019
  
  Where: Ekstrom Library, First Floor, West Wing, University of Louisville
  
  What: "The Roots of Activism" examines local Kentucky connections to Highlander Research and Education Center—formerly known as Highlander Folk School—and radical southern organizing through three case studies: Anne Braden, the Appalachian Land Study, and Southerners on New Ground (S.O.N.G.).
  
  *Curated by the fall 2018 students of Public History (HIST 597/697).
  
  [Click here for further details.]
Events and Announcements

- **2019 African American History Film Series**
  When: Every Sunday in February, 2:00—5:00pm
  Where: Main Branch, Louisville Free Public Library, 301 York Street
  [Click here to see the detailed flier.]

- **Deception, the stage play.**
  When: February 1 & 2 at 7:00pm, February 3 at 4:00pm
  Where: Old Male High Auditorium, 911 S. Brook Street
  [Click here to see the detailed flier.]

- **2019 Minority Pre-Health Symposium**
  When: February 9, 2019, 8:30am—4:00pm
  Where: UofL School of Medicine, Instructional Building, Room 215, 500 S. Preston Street
  [Click here to see the detailed flier.]

- **Human Trafficking Awareness Conference**
  When: February 12, 2019, 5:30—8:30pm
  Where: Student Activity Center Ballroom, University of Louisville
  [Click here to see the detailed flier.]

- **Responding to Racial Health Disparities and Racism in Public Health Research and Practice: Women’s Empowerment and Other Life Course Strategies**
  When: March 28, 3:30—5:00pm
  Where: Chao Auditorium, Ekstrom Library, University of Louisville
  [Click here to see the detailed flier.]

- **2019 Youth Violence Symposium, Uprooting Violence in Our Community**
  When: April 6, 2019, 9:30am—3:30pm
  Where: Louisville Central Community Center, 1300 W. Muhammad Ali Blvd.
  [Click here to see the detailed flier.]