

IDEAS

INCLUSION, DIVERSITY, EQUITY, ADVOCACY, SUPPORT



HSC ODI QUARTERLY NEWSLETTER
FALL 2022

DISABILITY RESOURCES & SUPPORT

UofL Disability
Resource Center
502-852-6938
askdrc@louisville.edu

National Council
on Disability
202-272-2004
ncd.gov/resources

Southeast
ADA Center
404-541-9001
adasoutheast.org

National Center for
College Students
with Disabilities
844-730-8048
nccsonline.org



LET'S TALK ABOUT 'ACCESSIBILITY'

What are we really talking about when we attempt to discuss accessibility? Is it ADA compliance? Technology that can be used by everyone? Automatic doors, service animals, live captioning, ramps, lighting, Braille, bodily autonomy, sensory sensitive spaces, independence?

For non-disabled persons or those who can easily navigate a world mostly exclusive of those with disabilities, accessibility is often an afterthought. *"Oh, I guess it would be difficult for someone who uses a wheelchair to access this building."* So why is it that most of us never consider accessibility until someone with a need forces us to take notice?

The Americans with Disabilities Act (ADA) is beneficial in that it requires by law reasonable accommodation, equal opportunity, and protection from discrimination for persons with disabilities. It has effectively safeguarded civil rights for the largest minority population* in the United States since signed into law in 1990.

One issue with the ADA, however, is that it tends to serve as more of a reactive piece of legislation than a proactive one. While the ADA does contain specific legislation on new building construction and city planning**, it is limited in enforcing actions on buildings and technology already in existence.

Here at HSC, accessibility for people that utilize mobility devices, like wheelchairs, scooters, and prosthetics, might have extreme difficulty navigating our campus considering where automatic doors, ramps, restrooms, and elevators are located within our buildings. And that only addresses *some* of the accessibility concerns for those with a physical disability, whether chronic or temporary. Unfortunately for UofL, this makes our HSC campus and schools unattractive to prospective students, staff, and faculty. This lack of accessibility can lead to potential Cardinals ultimately making a pass on Louisville.

So, what *are* we talking about when we talk about accessibility? For now, it's understanding the needs and concerns of our disability community and determining ways to make HSC fully accessible for everyone. In the future, it's being a campus that wholly accommodates people of all abilities and not simply making adjustments only when requested. *IDEAS* will continue to identify barriers at UofL for people with disabilities, both apparent and non-apparent, and report on progress towards the goal of complete accessibility. It will not be a quick or easy process and there is no single correct fix, but we intend to combat inaccessibility and strive to find solutions that make our University inclusive and equitable for all.

Janisha Szabo works within the HSC ODI and is a current student in the American Sign Language Interpreting Studies program. Contact: janisha.szabo@louisville.edu

*<https://www.disabilityfunders.org/disability-stats-and-facts#:~:text=People%20with%20disabilities%20constitute%20the%20largest%20minority%20group%20in%20the,sexual%20orientation%20and%20socioeconomic%20status.>

**https://www.ada.gov/2010ADastandards_index.htm

AFTERSHOCK

Janisha Szabo

In late September, members of the ULSOM community partnered with the College of Business's Thrivals program to help facilitate a discussion on the documentary film *Aftershock*.

Thrivals consists of high school and college students, together with community professionals, who are future disruptors, seek the unknown, and desire to understand the major forces that shape our futures.

Our group of staff, faculty, and students attended the viewing of *Aftershock* at historic Churchill Downs with approximately 80 high school students from Jefferson County. After the film, intense discussion followed, with students addressing important topics of maternal mortality, medical mistrust, and racial health disparities.

The documentary film follows two families who are dealing with the after-effects of sudden loss. Two Black women, Shamony Gibson and Amber Rose Isaac, passed away unexpectedly after giving birth. Their post-partum health complications were entirely preventable and the film takes a broader look at maternal mortality rates amongst Black and Brown women, and the institutional racism that leads to higher mortality rates among this population. A must-see for all at HSC.

Email hscodi@louisville.edu if you are interested in volunteering at future similar events.



UPCOMING EVENTS

Pride Picnic & Resource Fair

Wednesday, October 12
11:30 AM - 1:00 PM
HSC Courtyard

Pride Keynote & LGBTQ+

Affirming Healthcare
Thursday, October 20
12:00 PM - 1:00 PM
Hybrid Event
[Registration Link](#)

LGBTQ+ Affirming Healthcare Series
November Date TBA

EXPANDING EQUITY AT RESEARCH!LOUISVILLE 2022

Ryan Simpson, Program Director, HSC ODI

At Research!Louisville 2022, equity and anti-racism focused programming were forefront. As racism is a fundamental driver of health inequities, it is vital that anti-racism research be highlighted. For the second consecutive year, faculty, staff and student researchers shared their completed or ongoing anti-racism related research efforts. Five topics were explored this year including the following:

- "Population Needs and Interest Similarities Despite Geographic Locations and Income", presented by Karen Krigger, MD Med, FAAFP, AAHV(S)
- "Caged Bird: Bluelining and Medicine", presented by Lisa Anakwenze, MPH, MS
- "The IMPACT Study - Impact of Access to Coronary Calcium Scoring and CTA for Prevention of Cardiac Events", presented by Muhammad Umer, MD
- "Parents' perceptions of medical provider encounters and access to care by race/ethnicity from the National Survey of Children's Health", presented by Jennifer M. Porter, MD, FAAP
- **"Racial, Skin Tone, and Sex Disparities in Automated Proctoring Software"**, presented by **Cara H. Cashon, PhD; Kaelin Kinney, MS; and Edna Ross, PhD**

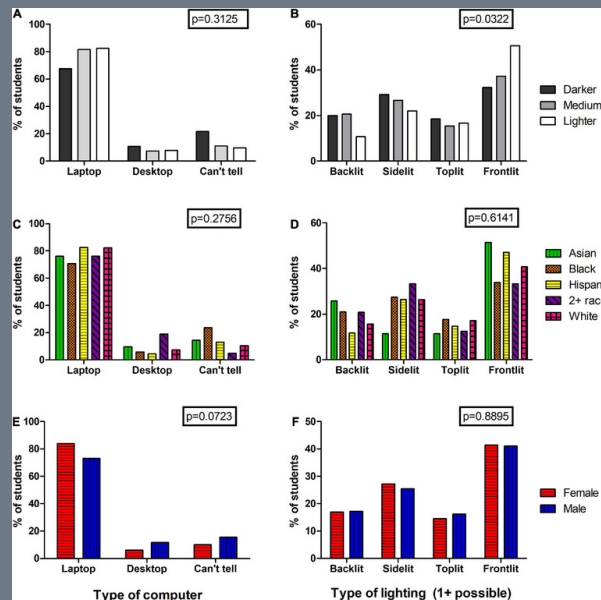
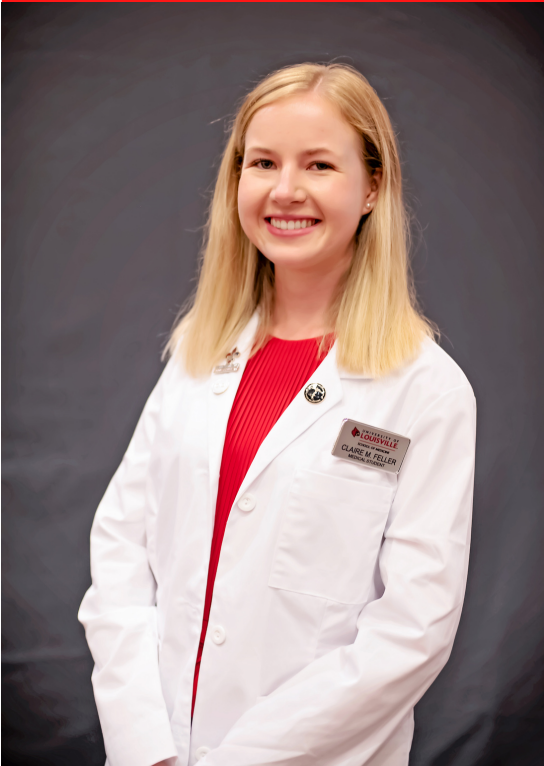


Figure from "Racial, Skin Tone, and Sex Disparities in Automated Proctoring Software" showing Analysis of student videos for student environments. Videos of students were coded for the type of camera/computer used for the exam (A,C,E), and what type of lighting was used for the exam (B,D,F). For the latter, students could be lit from multiple spots (e.g., from the side and from the computer screen) and this was coded as both when applicable. Percentages are shown in each bar and are color-coded for easy comparisons. Chi-squared p-values from raw data is shown in boxes at the top of each graph.

Meet Our HEMJ Distinction Track Scholars



Claire Feller
Medical Student
Class of 2025

The HSC ODI and ULSOM have commenced with the newest Distinction Track - Health Equity and Medical Justice (HEMJ). This distinction provides professional and personal development to guide students as change agents for health equity using a social justice framework.

Hello everyone! My name is Claire Feller, and I am thrilled to be part of ULSOM's Health Equity and Medical Justice Distinction Track. I am a Louisville native, and I graduated from University of Dayton with a degree in Biology in 2020. After college, I spent a year in the Mercy Volunteer Corps, where I served as a full-time volunteer at a free clinic in Detroit, MI. This experience greatly shaped my passion for health equity - I witnessed each and every day how healthcare is made less accessible by patients' income, immigration status, and neighborhood. During my year with Mercy Volunteer Corps, I often came across the adage "nothing about us, without us". To me, this means not just assuming what our patients might want or need, but rather taking the time to truly listen to them to better understand the barriers that may negatively impact their health and wellbeing. I believe bringing this intentionality to each patient encounter is the first step in working towards health equity and fighting against injustice. I am honored to be a part of this cohort, and I look forward to better understanding health equity and how to be a culturally and structurally competent physician advocate for my future patients.

...RESEARCH!LOUISVILLE 2022 (continued)

The Excellence in Health Disparities Research Award for poster submissions was given again this year. This award is open to all faculty, staff, students, residents and fellows presenting studies that investigate issues related to healthcare disparities and/or health status disparities. Over 20 posters were submitted for consideration, and the following three posters were selected as winners for this year's award (with a tie for first place):

Environmental Exposures of Ambient Arsenic: Examining the Odds of Residing in a Breast or Colorectal Cancer Hotspot in Kentucky
 Karen Udoh, BS¹, Madeline Tomlinson, MPH², Johnnie Newton², Felicia Pugh, MS¹, Matthew Ruther, PhD³, Tyler Ellis, MD¹, Natalie DuPre, ScD²

Introduction

- Kentucky (KY) has the highest overall cancer burden and mortality rates in the United States (US).
- Some studies have investigated the role of non-occupational environmental exposures to heavy metals such as arsenic in cancer incidence.
- Arsenic (As) is a known human carcinogen with detrimental effects on health.
- Previous epidemiologic studies have shown associations between higher concentrations of As in biofluid and ambient concentrations with higher breast cancer risk, but the data remains inconclusive.
- The literature on the effects of As in colorectal cancer remain limited.

Methods

- The primary aim of this study is to determine whether ambient As concentrations influenced residing in a breast cancer or colorectal cancer hotspot.
- Study populations: 14 colorectal cancer (n=106, 75%) and 14 female breast cancer (n=77, 61%) diagnoses in the Kentucky Cancer Registry from 1992-2016.
- Exposure: Census tract level estimation of arsenic ambient concentrations from the 2014 US EPA National Air Toxics Assessment.
- Outcome: Whether the cancer cases resided in a census tract with high incidence of male or female colorectal cancer or high incidence of female invasive breast cancer.
- High cancer incidence ("hot spots") were identified using the Getis-Ord G_i^* statistic in Geographic Information System.
- Covariates: Age at diagnosis, Race, Marital Status, Insurance Status, Tobacco use, Educational Status, Parity, and population density and census tract level health care, cancer screening, smoking, physical inactivity, and income.
- Statistical Analysis: Logistic regression models to estimate odds ratios (OR) and 95% confidence intervals (95% CI) for the association between arsenic concentration and the odds of residing in a colorectal cancer and/or invasive breast cancer hotspot. The arsenic exposures was modeled categorically using tertiles: Tertile 1 (T1), reference group; Tertile 2 (T2); and Tertile 3 (T3).

Results

Table 1: Individual and Census Tract Level Characteristics of Breast Cancer (n=77) and Colorectal Cancer (n=106) Cases by Residence in Breast Cancer or Colorectal Cancer Hotspot

Figure 1: Distribution of Ambient Arsenic Across Kentucky, 2014

Figure 2: Breast Cancer Hot Spots in Kentucky 1992-2016

Figure 3: Colorectal Cancer Hot Spots in Kentucky 1992-2016

Figure 4: The Odds Ratio of Residing in a Breast Cancer Hot Spot across Tertiles of Ambient Arsenic

Figure 5: The Odds Ratio of Residing in a Colorectal Cancer Hot Spot across Tertiles of Ambient Arsenic

Conclusion

- Cancer cases who lived in census tracts with higher exposures to ambient arsenic were more likely to live in colorectal and breast cancer hotspots.
- Hotspots are structurally independent of individual and neighborhood-level risk factors.
- Cancer cases that resided in a cancer hotspot may represent the populations most impacted by these environmental exposures.
- Our findings suggest that exposure to ambient arsenic concentrations are potential risk factors for colorectal and breast cancer.

Future Studies

- Analyze additional hazardous air pollutants in relation to colorectal and breast cancer incidence.
- Assess individual-level metal exposures in epidemiological studies of incidence of colorectal cancer and breast cancer subtypes in particular.
- Investigate environmental carcinogens and heavy metal exposures due to environmental conditions that may explain health disparities.

References

- American Cancer Society. U.S. Cancer Facts & Statistics. American Cancer Society; 2022. Accessed January 19, 2022.
- Marciniak W, Mabusuk E, Domchek R, et al. Blood Arsenic Levels as a Marker of Breast Cancer Risk among BRCA1 Carriers. *Cancers (Basel)*. 2021;14(10):2345. doi:10.3390/cancers14102345

Acknowledgments

- Research was supported by the University of Louisville (USA) Center for Integrated Environmental Health Sciences (CEHS) and the NIEHS P30 ES032083-01 (NIJ, P30 MD-001876).

CONTACT FOR INTERVIEW
 SHANNON@HEALTHSCIENCES.LOUISVILLE.EDU

- 1st - Parents' perceptions of medical provider encounters and access to care by race/ethnicity from the National Survey of Children's Health - Jennifer M. Porter, MD, FAAP
- 1st - Sexual and gender minority COVID-19 decision making - Ryan Combs, PhD
- 3rd - Environmental exposures of ambient arsenic: Examining the odds of residing in a breast or colorectal cancer hotspot in Kentucky - Karen Udoh, BS

Research!Louisville takes place every September. Visit <https://researchlouisville.org/>.

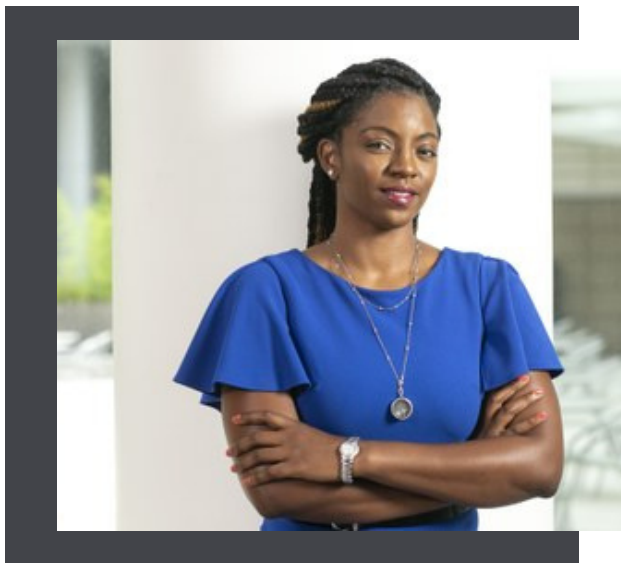
Poster submission from medical student Karen Udoh.

Image reference from page 2: Yoder-Himes DR, Asif A, Kinney K, Brandt TJ, Cecil RE, Himes PR, Cashon C, Hopp RMP and Ross E (2022) Racial, skin tone, and sex disparities in automated proctoring software. *Front. Educ.* 7:881449. doi: 10.3389/educ.2022.881449

Bierema and Merriam (2002) define mentoring as a “process of shared learning and growth that promotes mutual benefit, interaction and support for both parties.” The mentor-mentee relationship is critical for the development of junior academicians with the potential for positive or negative impacts on career advancement. Documented disparities in representation in academia, lack of access to cultural and social capital, and implicit and systemic bias underscore the importance of these relationships even further for persons from historically excluded backgrounds.

MENTORING FOR SUCCESS

V. Faye Jones, MD, PhD, MSPH
AVP for Health Affairs/Diversity Initiatives



*Johnna M. Frierson, PhD
Duke University School of Medicine
Associate Dean of EDI in the Basic Sciences
Asst. Professor of the Practice, Medical Education
Director, The IDEALS Office*

Mentorship does not occur in a vacuum. It is influenced by the cultural diversity and social identities of the individuals engaged in mentorship activities. This cultural context is critical to the success of the mentor-mentee interaction. It is too often assumed that serving as a mentor is a possibility simply because one has achieved the goal that the mentee desires. But effective mentorship requires continual learning for strengthening mentoring skills.

To assist with this mentor skill development, the HSC ODI provided a 6-hour workshop, facilitated by Dr. Johnna Frierson. Dr. Frierson engaged the group with the “Entering Mentoring” curriculum, developed by the Center for the Improvement of Mentored Experiences in Research at University of Wisconsin-Madison.

The “Entering Mentoring” training curriculum is comprised of case studies, interactive exercises, and in-depth discussions to the following enhance six competencies:

1. Maintaining Effective Communication
2. Aligning Expectations
3. Assessing Understanding
4. Addressing Equality and Inclusion
5. Promoting Professional Development
6. Cultivating Ethical Behavior

Mentor training and mentorship is an ongoing priority for the University. A new initiative from the School of Medicine Office of Faculty Affairs is the **F**aculty **L**eadership for **I**nclusion and **G**rowth in **H**ealth by **T**ransformation (FLIGHT) program. This is a one-year, professional development program, which prepares underrepresented minorities in medicine (URiM) for a successful career in academic medicine. Our office will continue to push for opportunities to address disparities in academia.

Please visit the [FLIGHT website](#) to learn more about the URiM-focused curriculum, mentorship program, application process, and benefits of the program; or contact Dr. Christopher Seals, Assistant Dean for Faculty Affairs and Advancement, at christopher.seals@louisville.edu.



Questions, comments, praise, criticism, corrections, submissions, or general conversation?

WE WOULD LOVE TO HEAR FROM YOU!

Contact us at hscodi@louisville.edu