

IN SOLIDARITY

THE ROLE OF
PUBLIC HEALTH

IN SOCIAL JUSTICE

FEBRUARY 26, 2016

The William & Ida Friday Center
CHAPEL HILL, NC

minorityhealth.web.unc.edu

**37TH ANNUAL
MINORITY
HEALTH
CONFERENCE**

MSC
MINORITY STUDENT CAUCUS



UNC
GILLINGS SCHOOL OF
GLOBAL PUBLIC HEALTH

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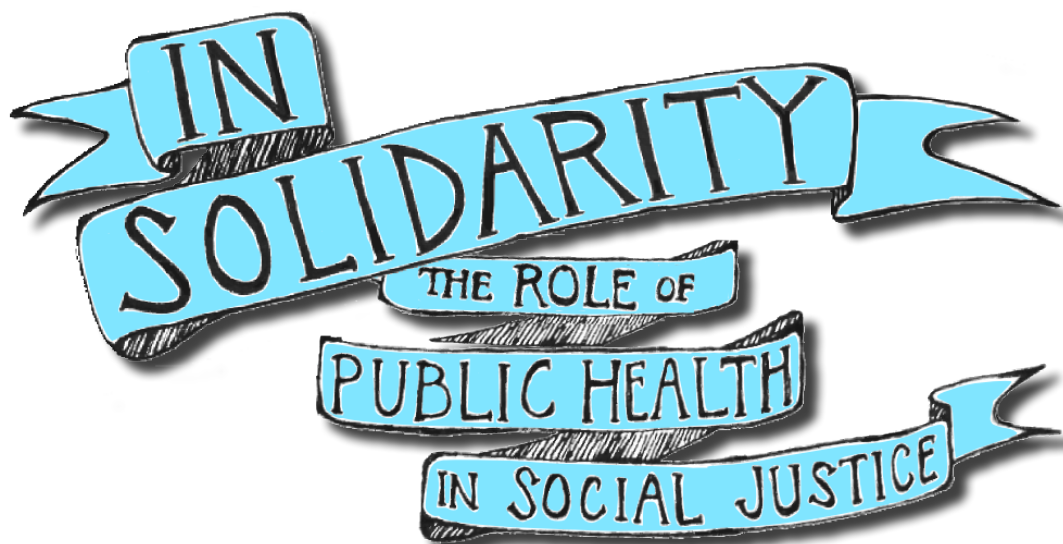


TABLE OF CONTENTS

Welcome	2
APHA Letter of Endorsement	4
Webcast Partner Conferences & Groups	5
Conference Center Map	6
Conference At A Glance	7
18th Annual William T. Small, Jr. Keynote Lecture:	8
Crystallee Crain, PhD Biography & Abstract	
5th Annual Victor J. Schoenbach Keynote Lecture:	9
Miriam Zoila Pérez Biography & Abstract	
Conference Agenda	10
Speaker Biographies	14
Poster Abstracts	20
Conference Exhibitors	30
Sponsors	32

WELCOME TO THE 37TH ANNUAL MINORITY HEALTH CONFERENCE



On behalf of the Minority Student Caucus, the Minority Health Conference Planning Committee, and the Gillings School of Global Public Health at Chapel Hill, we welcome you to the 37th Annual Minority Health Conference. Initiated in 1977, the conference has a rich history of student action and public dialogue, providing a platform for attendees from across the country to explore the behavioral, structural, political, and environmental conditions driving health disparities across diverse populations. Although the conference has grown in size and complexity, our goal remains the same: to bring the public health community together to engage in important dialogue and catalyze efforts to create equitable health outcomes for all.

Given the mission and rich history of the conference, it is truly our honor to continue this legacy for the 37th year. This year's conference theme, "In Solidarity: The Role of Public Health in Social Justice," will highlight opportunities for public health

researchers, practitioners, and social justice advocates to learn from each other to identify best practices for prioritizing minority health and fostering inclusive strategies for change. Our conference recognizes social justice as an ongoing process--not an outcome--that challenges the roots of injustice and oppression and seeks the fair distribution of resources, opportunities, and responsibilities through community empowerment and collaborative action. As public health professionals, we can look to social justice principles and practices to learn and deepen our commitment to eliminating those social and institutional factors, present and historical, that deny individuals the ability to attain the highest level of health. Throughout our day together, we will hear from a broad spectrum of presenters with diverse perspectives that will challenge us to think critically about our approaches to systemic change and improving minority health.

In addition to all of our in-person attendees, we would like to extend a special welcome to our partner conferences viewing the William T. Small, Jr. Keynote Lecture via webcast. Student groups at University of North Carolina Charlotte, University of Georgia, and University of New Hampshire have organized local events or conferences in conjunction with our conference. We are grateful for their support in broadening the reach of the conference and engaging in the discussion on minority health and justice that is occurring throughout the nation.

The delivery of this conference would not have been possible without a passionate and dedicated planning committee. As we reflect back on the past year, we are truly humbled by the generosity and hard work of our committee members, demonstrating once more the ability of students to present a high quality professional conference of this magnitude.

We also would like to give a special thank you to the Dean's Office at the Gillings School of Global Public Health for their ongoing support; Dean Charletta Sims Evans and Chandra Caldwell, our conference advisors; Cherelle Whitfield, Kathy Cheek, and Becky Hart for their logistical and technical support; Dr. Victor Schoenbach for his continued guidance on the conference and webcast; OJ McGhee for production of the webcast; and Sterling Frierson for his assistance on our fundraising efforts. Without their valuable guidance and encouragement, the existence and sustainability of the conference would not be possible. Please join us in thanking them throughout the day.

This year has been one of many firsts. We reached an unprecedented number of conference participants, and this will be the first year we feature interactive workshops, a middle-school partnership program, a gallery showcasing UNC justice movements, and much more. Here are a few highlights:

- This year, we extended the Minority Health Conference from a one-day conference to a Minority Health Week! We featured a photography exhibit of UNC justice movements, sponsored a talk on mapping police violence with the Epidemiology Student Organization, and a bone marrow drive leading up to today's conference.
- We launched a brand new Alumni Network to re-connect the more than 1,500 students who have contributed to the Minority Health Conference since 1977.
- We hope to bring our attendees tangible skills that they can bring back to their personal and professional lives. To this end, we are featuring two interactive workshops: "Forging Community Partnerships to Address Childhood Lead Exposure and Other Home Hazards" and "Activism, Resilience, and Coping: #BlackLivesMatter and The Push to End Police Violence."
- We are partnering with local middle and high school students, including ten students from Maureen Joy Charter School, to sponsor students to attend the conference, expose them to minority health and social justice issues, and engage them as advocates to improve the health of their communities.

WELCOME TO THE 37TH ANNUAL MINORITY HEALTH CONFERENCE

- We provided pronoun tags so you can display your own gender pronouns and easily see others. Throughout this conference, we request that you use the pronouns that your fellow attendees display.
- There are real impacts when bathrooms are labeled for women or men only. As a step toward being a more welcoming conference, four restrooms are designated for use by all genders. Gender-specific men's and women's restrooms are available in other sections of the conference center. Please trust that each individual knows which restroom is most comfortable and appropriate for them.
- We are offering a decompression room, where attendees can take a moment to relax. The content matter that we'll be discussing can be hard to hear and discuss, and we want attendees to be able to regain strength. Feel free to go to the decompression room where you can practice self-care, take a breath, and come back to the conference feeling rejuvenated.

Finally, we would like to thank each of you for supporting the conference. Whether today is your first time joining us or you are a long-time supporter, we hope you enjoy this year's conference, gain a fresh outlook on your work, and leave with a renewed passion for eliminating health disparities by fighting for justice in the communities you serve.

One of our greatest hopes for this conference is that you take three actionable steps towards a more just world back to your organization, school, community, or home. The themes and methods that we discuss today should not live only within the lines of a notebook or a forgotten audio recording - public health and social justice are meant to be enacted out in the world. Please help us continue this discussion within your own institutions, and actively usher in a more just future.

Warmly,



Anna Dardick
Conference Co-Chair
MPH Candidate, Health Behavior



Giuliana J. Morales
Conference Co-Chair
MPH Candidate, Health Behavior



February 17, 2016

Minority Student Caucus
University of North Carolina at Chapel Hill
Gillings School of Global Public Health

Dear UNC Minority Health Conference Participants:

On behalf of more than 50,000 members, the American Public Health Association extends its warmest wishes to the Gillings School of Global Public Health for another successful year coordinating the annual Minority Health Conference.

As the oldest student-led health conference in the nation, the Minority Health Conference has consistently brought salient public health issues to students, researchers, as well as practitioners and I hope you glean valuable information that will help us in realizing our vision of making America the healthiest nation. This year's theme, "In Solidarity: The Role of Public Health in Social Justice," is particularly critical as we engage in national conversations about justice and equity. Our long-time connections to the communities we serve and our deep understanding of the connections between individual health and community conditions are essential to achieving equity and eliminating health disparities.

Public health plays a vital role in shaping opportunities to attain good health and adopt healthy behaviors. Best of luck for a meaningful conference and congratulations to the Minority Student Caucus, Minority Health Conference Co-chairs, planning committee, and advisors in celebrating 37 years!

Sincerely,

Georges C. Benjamin, MD, MACP, FACEP(E)
Executive Director

2016 18TH ANNUAL WILLIAM T. SMALL, JR. KEYNOTE LECTURE WEBCAST

We would like to extend a special welcome to our partner conferences that utilize the William T. Small, Jr. Keynote Lecture via online broadcast. Student and community groups organized local events or conferences in conjunction with our conference. We are thrilled to have them join the conference in this manner, as it illustrates the importance and awareness of minority health issues at a national level.

PARTNER CONFERENCES



**North Carolina State Representative Beverly Earle
Minority Health Disparities Conference**
Charlotte, North Carolina

**University of Georgia, Center for Social Justice, Civil
Rights and Human Rights**
Lawrenceville, Georgia

University of New Hampshire Minority Health Day
Durham, New Hampshire

GROUP VIEWINGS

American Institutes for Research
Chapel Hill, North Carolina

American Institutes for Research
Washington, DC

Bayard Rustin's Place Drop-In Center
St. Louis, Missouri

Blue Ridge Community Health Services
Hendersonville, North Carolina

Carrboro High School Global Health Club
Carrboro, North Carolina

Chronic Disease and Injury Section, North
Carolina Division of Public Health
Raleigh, North Carolina

Colorado School of Public Health, in
association with Anschutz Medical
Campus Student Senate
Denver, Colorado

California State University Northridge -
POLS 467
Los Angeles, California

Connecticut Department of Public Health
Office of Health Equity
Hartford, Connecticut

Goddard Riverside Community Center
The Senate SRO Cultural Diversity
Training
New York, New York

Institute for Healthcare Improvement
Boston, Massachusetts

Inter-tribal Center for Social Change
Culowhee, North Carolina

Indiana University-Purdue University Fort
Wayne (IPFW) Project COMPASS
Fort Wayne, Indiana

Mount Mercy University, Department of
Nursing
Cedar Rapids, Iowa

Rhode Island Department of Health
Office of Minority Health
Providence, Rhode Island

Saint Louis University College for Public
Health & Social Justice
St. Louis, Missouri

Tompkins-McCaw Library
Virginia Commonwealth University
Libraries
Richmond, Virginia

Unity Center of Blackstone Valley
Community Action Program (BVCAP)
Providence, Rhode Island

University of Colorado, Anschutz Medical
Campus
Aurora, Colorado

University of Iowa College of Public
Health
Iowa City, Iowa

Virginia Department of Health
Office of Minority Health and Health
Equity
Richmond, Virginia

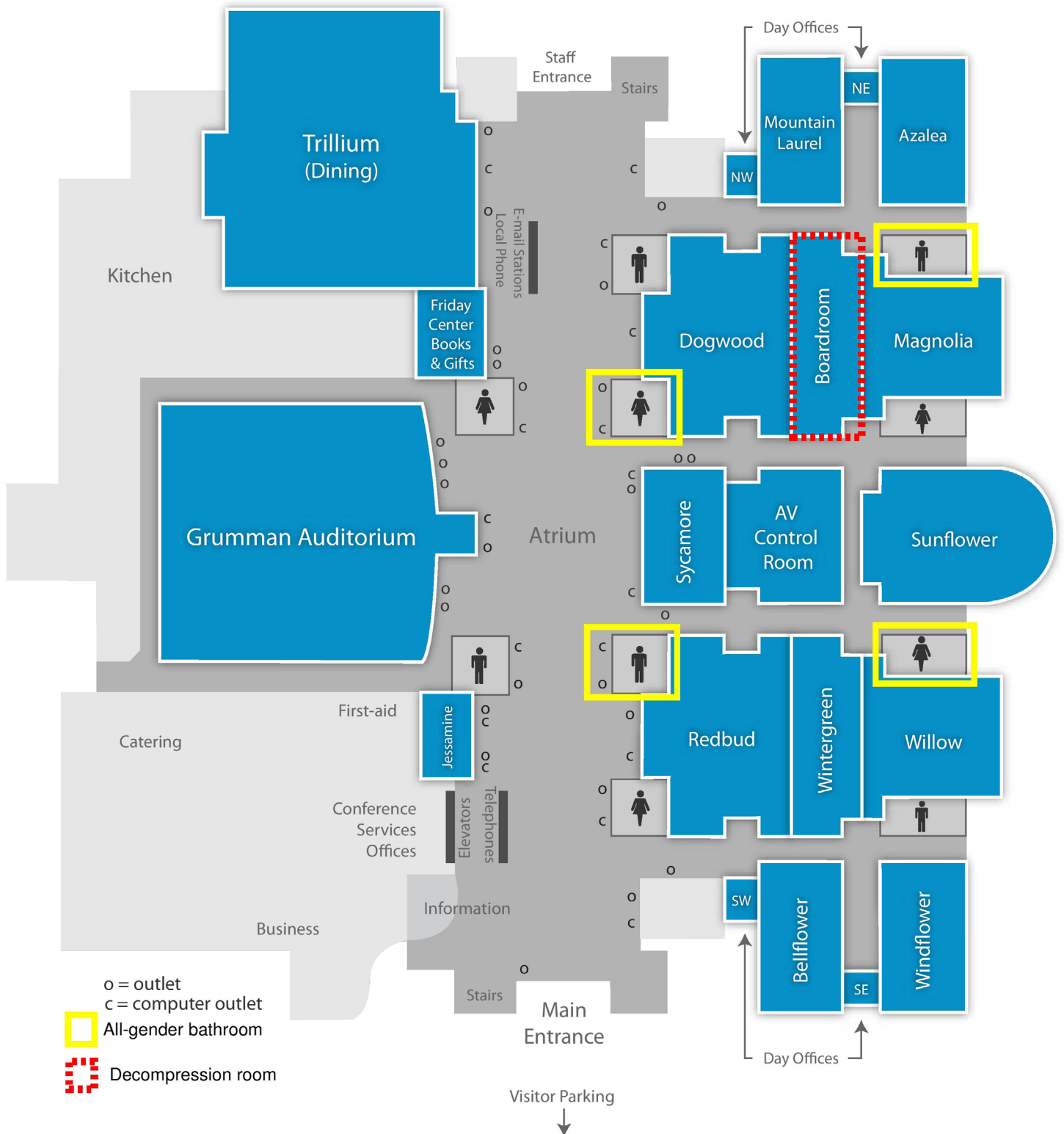
Waco-McLennan County Public Health
District
Waco, Texas

WEBCAST MODERATOR

Shekinah A. Fashaw, MSPH Candidate

Department of Health Policy and Management, Gillings School of Global Public Health

CONFERENCE MAP



CONFERENCE SCHEDULE

	Event	Room
8:00am	Check-in / Continental Breakfast	Central Atrium
9:00am	Introductions and Welcome	Grumman Auditorium
9:30am	18th Annual William T. Small, Jr. Keynote Lecture: Crystallee Crain, PhD	Grumman Auditorium
10:45am	Poster Presentations and Exhibitors	Willow and Atrium
11:00am	Morning Sessions	
	A1. Left Out: Challenges Immigrants Face in Accessing Health Benefits	Sunflower
	A2. Ban the Box: Combatting Consequences of Mass Criminalization in Communities of Color	Grumman Auditorium
	A3. Wellness in the LGBTQ Community: Addressing Issues of Health Disparities and Micro-Aggressions	Redbud
	A4. Solidarity in Perspective: Reproductive Health through the Eyes of Women of Color	Dogwood
12:00pm	Poster Presentations and Exhibitors	Willow and Atrium
12:30pm	Lunch	Trillium Dining
1:30pm	5th Annual Victor J. Schoenbach Keynote Lecture: Miriam Zoila Pérez	Grumman Auditorium
2:30pm	Poster Presentations and Exhibitors	Willow and Atrium
3:00pm	Afternoon Sessions	
	B1. Gendered Expectations: Masculinity in Health and Society	Sunflower
	B2. Power, Privilege & Partnership: The Role of Social Justice in Higher Education	Dogwood
	<i>Workshop</i> B3. Forging Community Partnerships to Address Childhood Lead Exposure and Other Home Hazards	Redbud
	<i>Workshop</i> B4. Activism, Resilience, and Coping: #BlackLivesMatter and The Push to End Police Violence	Grumman Auditorium
4:30pm	Conference Adjourns	



Mending the Wounds of Incompetence: Justice at the Intersection of Academia and Activism

CRYSTALLEE CRAIN, PHD

Abstract

For decades the people of the US have seen community change take place within and outside of institutions of higher learning, research, advocacy and policy development. As we firmly enter into the next phase of social justice leadership and public health we must work at the intersections to address what the system is unable to do for itself and for the people. Dr. Crain will discuss the structural and systemic barriers that prevent equitable health outcomes and wellness for marginalized communities. Strategies for coalition-building and working outside of our silos will be highlighted. Making the connections between capitalism, environmental degradation, and other forms of state violence she will conclude with a historical and contemporary analysis of communities fighting back against racism, classism, and heterosexism within movement building and public health.

Biography

Dr. Crystallee Crain began her career in public service with a passion for justice, equity, and access for low income communities and communities of color. Dr. Crain has worked as a professor for 10 years teaching in political science and sociology departments in California and Michigan. As a public health advocate Dr. Crain demands for better systems and services for the most marginalized. Crystallee earned a Doctorate of Philosophy in Transformative Studies at the California Institute of Integral Studies in San Francisco, CA. She holds a Master of Arts in Social Sciences, and a Bachelors in Political Science from Northern Michigan University. In 2013 she received advanced training in Health and Human Rights in the School of Public Health at Harvard University. In January 2011 she received the Norman Lear Award from People for the American Way (Young People For). Dr. Crain proudly serves as a member of the Alameda County Juvenile Justice & Delinquency Prevention Commission and the National Association for Civilian Oversight of Law Enforcement (NACOLE). In 2011 she was featured in the TIME Magazine PROTESTOR issue highlighting activists around the world who speak truth to power. Follow her on twitter @crystalleecrain.



Lessons from the Reproductive Justice Movement: Public Health as Disruption

MIRIAM ZOILA PÉREZ

Abstract

The reproductive justice movement is a thriving sector of the social justice field that prioritizes the needs of those most impacted by the problems we want to solve. It's also a movement that seeks to disrupt the mainstream reproductive rights arena, which often centers the needs of white middle and upper class women. In this talk, Miriam Zoila Pérez, activist, journalist and doula, will share what public health professionals might learn from the reproductive justice movement. What would it look like to approach public health as a disruption of the systems that shape health inequity? Disruption can be a powerful tool for questioning the status quo, innovating, and imagining beyond the confines of our current environment toward a more just future.

Biography

Miriam Zoila Pérez is a Cuban-American writer covering issues of race, health and gender. She is the founder of RadicalDoula.com, and was an Editor at Feministing.com for four years, during which time the site was awarded the Sidney J Hillman Prize for Blog Journalism. Her writing has appeared in The Nation, Talking Points Memo, The American Prospect, MORE Magazine, RH Reality Check, and a number of anthologies, including Yes Means Yes, Click and Persistence. Pérez is the author of The Radical Doula Guide: A Political Primer for Full-Spectrum Pregnancy and Childbirth Support. Learn more about her work on her website, or follow her on twitter @miriamzperez.

CONFERENCE AGENDA

8:00am	Check-in / Continental Breakfast	Central Atrium
9:00am	Introductions and Welcome Anna Dardick & Giuliana Morales 2016 Minority Health Conference Co-Chairs Lorenzo Hopper & Jasmine Dailey Minority Student Caucus Co-Presidents Taffye Benson Clayton, EdD Associate Vice Chancellor for Diversity and Multicultural Affairs and Chief Diversity Officer, UNC Chapel Hill Barbara K. Rimer, DrPH, MPH Dean and Alumni Distinguished Professor, Gillings School of Global Public Health Shekinah Fashaw 2016 Minority Health Conference Webcast Moderator	Grumman Auditorium
9:30am	18th Annual William T. Small, Jr. Keynote Lecture Crystallee Crain, PhD Mending the Wounds of Incompetence: Justice at the Intersection of Academia and Activism	Grumman Auditorium
10:45am	Poster Presentations and Exhibitors	Willow and Atrium
11:00am	Morning Sessions A1. Left Out: Challenges Immigrants Face in Accessing Health Benefits Kate Woomer-Deters, JD, Staff Attorney, Immigrant Rights Project, NC Justice Center Health benefits and income and nutritional support programs create a strong safety net for low-income people, and can improve health outcomes for recipients. However, the laws relating to immigrant eligibility for federal benefit programs are complicated and difficult to navigate for many health providers, social workers, and advocates. This presentation will discuss immigrant eligibility for health benefits such as Medicaid, Affordable Care Act subsidies, Women, Infants, and Children (WIC) nutrition program, mental health programs, food stamps, and more. The attorney leading the presentation will discuss both the laws and regulations for eligibility for the programs, and the practical barriers that prevent many immigrants and children of immigrants from participating in these critical programs. Participants will gain a basic understanding of immigrant eligibility for these programs, and learn about resources to turn to when difficult questions arise for immigrant patients and clients.	Sunflower
	A2. Ban the Box: Combatting Consequences of Mass Criminalization in Communities of Color Kathleen Lockwood, JD, Employment Opportunities Legal Corps Staff Attorney, Southern Coalition for Social Justice One in 5 adults in North Carolina has a criminal record. National research has long documented the ways that communities of color are disproportionately targeted and impacted by the criminal justice system. The effects of even a minor criminal record can be a lifelong sentence to poverty, presenting obstacles to employment, housing, education, public assistance, financial empowerment, and more. The Ban the Box Movement, which was designed to combat these obstacles to employment, removes questions about criminal history from initial employment applications, giving people with criminal records an equal opportunity to secure employment. This presentation will focus on these national problems and potential solutions through a case study of Durham, North Carolina. In doing so, we will look at racial disparities in Durham policing, collateral consequences in North Carolina, and the implementation of Ban the Box in Durham city and county. The ultimate goal of this presentation is to recognize the widespread problem of mass criminalization of people of color and identify a replicable tool to combat collateral consequences.	Grumman Auditorium

CONFERENCE AGENDA

A3. Wellness in the LGBTQ Community: Addressing Issues of Health Disparities and Micro-Aggressions

Redbud

Michele Lewis, PhD, Associate Professor, Psychological Sciences, Winston-Salem State University
Terri Phoenix, MS, PhD, Director, LGBTQ Center, UNC Chapel Hill

This session will recognize and discuss intersectionality and health disparities in LGBTQ communities. Dr. Lewis' presentation will focus on the significance of elevating Ubuntu as a means of advancing the collective well-being of people of the African Diaspora, with special attention to be paid to the frequent exclusion, invisibility, and micro-aggressions against Black queer, trans, or same-gender loving people. One of the various ways of defining Ubuntu is "the principle of caring for each other's well-being and as a spirit of mutual support. It also acknowledges both the right and the responsibilities of every citizen in promoting individual and societal well-being" (Chaplin, 2006). The potential benefits of fostering awareness of Ubuntu among people of the African Diaspora and among culturally-sensitive health care providers will be discussed. The session will highlight Ubuntu's potential capacity to advance the positive health agenda of Black queer, trans, same-gender loving, and gender nonconforming persons.

Dr. Terri Phoenix's presentation will address health disparities faced by lesbian, gay, bisexual, transgender and queer (LGBTQ) communities, offering suggested practices and resources to provide inclusive care to people who identify as LGBTQ, Two Spirit, or Same Gender Loving. In addition, T will address issues related to research with LGBTQ communities.

A4. Solidarity in Perspective: Reproductive Health through the Eyes of Women of Color

Dogwood

Park Cannon, Black Women's Wellness Program Coordinator, Feminist Women's Health Center; Board Member, SisterSong

Tanya Bass, MS, CHES, Co-President, North Carolina Society for Public Health Education

This presentation will address reproductive justice disparities that are specific to the Southern US. By introducing "The Crooked Room Perspective," the presenters will address issues that women of color face as they are forced to legitimize themselves, label inequalities, and lead movements that limit reproductive autonomy in professional and political settings. The presenters will share the history of the creation and work of the Women of Color Sexual Health Network (WoCSHN). Through the case study of Kenlissia Jones and House Resolution 746, the speakers will detail the impact of racism and discrimination on people of color seeking pre-conception health education, family planning, social assistance, and reproductive health care. As societal stigmas compound, contraception use patterns decrease in LGBTQ individuals, and a larger narrative of limited choice is apparent.

12:00pm	Poster Presentations and Exhibitors	Willow and Atrium
12:30pm	Lunch	Trilium Dining
1:30pm	5th Annual Victor J. Schoenbach Keynote Lecture Miriam Zoila Pérez Lessons from the Reproductive Justice Movement: Public Health as Disruption	Grumann Auditorium
2:30pm	Poster Presentations and Exhibitors	Willow and Atrium
3:00pm	Afternoon Sessions	

B1. Gendered Expectations: Masculinity in Health and Society

Sunflower

Will McInerney, Program Assistant, UNC Men's Project

Jeffrey Shears, PhD, Professor, Joint Master of Social Work Program, NC A&T and UNC Greensboro

Wizdom Powell, MS, MPH, PhD, Associate Professor, Health Behavior, UNC Chapel Hill

The way that our society constructs gender expectations and norms harms everyone in the community. This session will shed light on the ways in which gender norms lead to men being overlooked and underserved in various aspects of health and society. As boys develop and are socialized into adulthood, the roles of men in their lives influence the men they choose to become. As men, their health and

CONFERENCE AGENDA

health behaviors are typically addressed after adverse outcomes occur. The health and roles of men coincide with the mission of social justice because for both to advance, neither can be addressed in silos. The featured presenters represent the diversity in academic discipline, research, and practice that is required for equity to be realized among men in America. The presentations will examine the construct of masculinity and how it impacts health behavior, innovative work that encourages young men to be advocates for gender equity, and how essential fatherhood is in the lives of men and children.

B2. Power, Privilege & Partnership: The Role of Social Justice in Higher Education **Dogwood**

Geni Eng, DrPH, Professor, Department of Health Behavior, UNC Chapel Hill
David Caldwell, MSW, Project Director, The Rogers-Eubanks Neighborhood Association
Gene R. Nichol, JD, Boyd Tinsley Distinguished Professor of Law, UNC Chapel Hill

This panel will engage participants in a dialogue about community-academic partnerships, academic privilege, and community-based participatory research. Panelists will discuss economic equality, environmental justice, anti-racism, and health equity as they share experiences working with the NC Poverty Research Fund, the Rogers-Eubanks Neighborhood Association, and the Greensboro Health Disparities Collaborative. Participants will be encouraged to actively engage in the Q&A and analyze both the role of social justice in academia and the role of the university in community.

Workshop

B3. Forging Community Partnerships to Address Childhood Lead Exposure and Other Home Hazards **Redbud**

Neasha Graves, MPA, Environmental Resource Program, UNC Institute for the Environment
Megan Hughes, MEM, Research Associate, Environmental Resource Program, UNC Institute for the Environment
Lorisa Seibel, Housing Services Director, Reinvestment Partners
Lenora Smith, MS, Executive Director, Partnership Effort for the Advancement of Children's Health (PEACH)

The North Carolina Lead and Healthy Homes Outreach Task Force is a collaboration of local, state and federal health and housing agencies and community-based organizations working to implement lead and healthy homes programming for vulnerable populations in the state. In partnership with the NC Department of Health and Human Services, staff from the UNC Institute for the Environment will share ideas and address challenges for enhancing outreach around childhood lead exposure, mold, pests and pesticides, and other environmental health hazards in homes. This interactive session will include representatives from two longtime community-based partners in Durham, Reinvestment Partners and the Partnership Effort for the Advancement of Children's Health (PEACH). The presenters will demonstrate how their partnership and outreach strategies have influenced housing conditions for hundreds of families living in low-income Durham neighborhoods, as well as policies aimed at reducing children's exposure to lead and other hazards. Furthermore, session participants will take part in small-group discussions to identify and consider critical environmental health concerns in their own communities and to brainstorm initial steps toward building partnerships that can influence positive environmental health outcomes for underserved populations.

Workshop

B4. Activism, Resilience, and Coping: #BlackLivesMatter and the Push to End Police Violence **Grumann Auditorium**

Samuel Sinyangwe, Co-Founder, WeTheProtesters
Beverly "BJ" Council, Founder, You & Five-O, LLC
D'atra Jackson, MS, Triangle and East HBCU Coordinator, Ignite NC
Enrique Neblett, PhD, Associate Professor of Psychology and Neuroscience, UNC Chapel Hill

#BlackLivesMatter rose as a prominent social and political movement whose purpose is to create a platform to speak out against the ever-present institutionalized racism in law enforcement and the criminal justice system, which has led to the unfair treatment of people of color during police encounters and unwarranted criminalization of communities of color.

CONFERENCE AGENDA

The strength of the movement's social and political activism is fueled by the resilience and coping efforts of people whose communities have been subjugated to these unjust systems of oppression. Our workshop explores four interrelated tools in ending systemic and institutionalized racism in the criminal justice system: coping and resilience of individuals and communities, awareness of the rights and immediate safety needs for people of color who interact with law enforcement, policy change, and political organizing. The four panelists bring a wealth of professional knowledge and experience in coping, resiliency, political advocacy, and community organizing, and will help attendees understand how resilience and coping help individuals and communities channel their inner strength, with the goal of propelling advocacy and political change to eliminate existing systems of oppression.

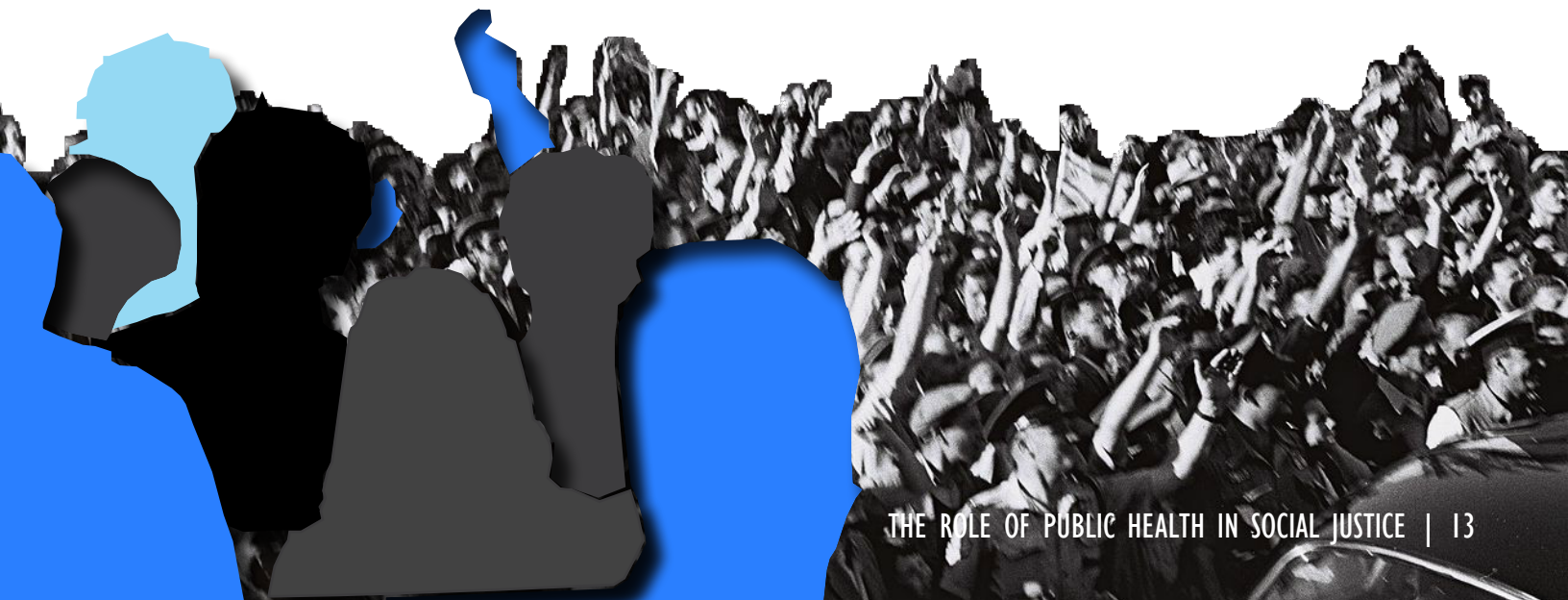
4:30 pm

Conference Adjourns



**JOIN THE CONVERSATION
ON TWITTER!**

**@MHC_UNC
#MHCUNC**



SPEAKER BIOGRAPHIES

A1.



Kate Woomer-Deters, JD joined the Justice Center in 2007. At the Justice Center, she litigates primarily employment, consumer, and housing cases on behalf of low-income immigrants. Some of her cases have included class action lawsuits for unpaid workers or for victims of immigration services fraud. She also conducts trainings across the state on immigrant eligibility for public benefits, and advocates for language access rights for limited-English proficient North Carolinians. Previously, she was an attorney with Legal Aid of North Carolina - Farmworker Unit, where she litigated employment and human trafficking cases for farmworkers, and practiced immigration law. Kate is a 2005 graduate of the University of Minnesota Law School where she was a founding member of the school's Workers' Rights Clinic.

A2.



Kathleen Lockwood, JD is an Equal Justice Works Americorps Legal Fellow with the Clean Slate Project at the Southern Coalition for Social Justice, which works with people who have criminal records to help relieve some of the collateral consequences of their criminal justice involvement. She has served on the Criminal Justice Team of SCSJ since May of 2014, assisting with the Clean Slate Project and advocacy for Ban the Box, an initiative to take questions about criminal justice involvement off of initial employment applications. Kathleen is a 2015 graduate of UNC School of Law and received her Bachelors of Arts in Women's Studies and English from UNC in 2011. Prior to attending law school, Kathleen worked at a domestic violence shelter and served as a Guardian Ad Litem in Davidson County, North Carolina. She currently resides in Durham, North Carolina.

A3.



Michele Lewis, PhD

is an Associate Professor of Psychology and Chair of the Department of Psychological Sciences at Winston-Salem State University in North Carolina. She is the author of two books, *Multicultural Health Psychology: Special Topics Acknowledging Diversity* and *LGBT Psychology: Research Perspectives and People of African Descent*. She has been a member of the WSSU faculty since the Fall of 2007. During her graduate studies, she was trained as a biopsychologist. Currently she writes, researches, and teaches in psychology with attention to liberation psychologies, and advocates for the application of psychology to serve public interests. She uses intersectional, interdisciplinary, and cultural approaches to understand human thoughts, behaviors, and emotions.



Terri Phoenix, MS, PhD

is the Director of the LGBTQ Center at UNC-Chapel Hill. Terri has served on the Executive Board of the National Consortium of Higher Education LGBT Resource Professionals and as Chair of the Board for Safe Schools North Carolina. Terri has given numerous invited and peer-reviewed presentations on cultural competency and inclusive practices at local, regional, and national conferences. Terri is an alumnus of East Carolina University (BA), UNC-Greensboro (MS), and University of Georgia (PhD).



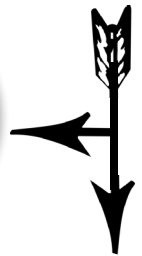
SPEAKER BIOGRAPHIES

is a 24 year old, politically active, pro-choice woman of color who matriculated from UNC Chapel Hill. Her studies include degrees in Linguistics and Women's and Gender Studies along with fluency in three languages. Past work includes policy creation, grant writing, grassroots organizing, lobbying, sexual education, and domestic violence prevention. Current work includes patient advocacy, program coordination, and health education in one of the last late term abortion clinics in the South.

Park Cannon



A4.



B1.



Will McInerney is an award-winning spoken word poet, storyteller, speaker, and educator specializing in the intersection of conflict resolution and creative expression. Over the past decade, Will's work has focused in three primary areas including Poetic Diplomacy: oral history collection and storytelling in Middle East and North African-based conflict zones, Youth Arts Empowerment: harnessing the power of our stories to create positive impact through arts education and non-profit development, and Engaging Men: gender equity and violence prevention work on college campuses. Since 2013, Will has worked at the University of North Carolina at Chapel Hill where he co-founded the UNC Men's Project. Through a unique fusion of education, fellowship, and creative practice, Will teaches college students about masculinities, social norms, violence, intersectionality, and leadership development. Will is a US State Department Program Fellow, a Regional Poetry Slam Champion, and a National Poetry Slam Finalist. Will's work has been featured on NPR, American Public Media, Al Jazeera English, TEDx, McKinsey & Company Consulting, and at numerous conferences, performance venues, and universities across the US and internationally. In recognition of his work, Will was recently selected as one of the top six emerging storytellers in the US by the International Storytelling Center.

Tanya Bass MS, CHES

has 19 years of experience and is viewed as a subject matter expert in the field of health education, minority health, reproductive health, and sexual health. She is an alumnus of the North Carolina Central University (NCCU) Department of Public Health Education. She is currently the lead instructor for Human Sexuality and has been a part time instructor at NCCU for 12 years. She also serves as a facilitator of evidenced based and evidenced informed curricula. Tanya is committed to reducing health disparities and intends to earn a doctorate to begin researching and addressing specific issues impacting sexual health and sexual behavior. She is a Certified Health Education Specialist (CHES) and enjoys planning and attending professional development activities. She is a member of the Women of Color Sexual Health Network (WoCSHN) and the 2016 Co-President of the NC Society for Public Health Education (NCSOPHE).



SPEAKER BIOGRAPHIES

Jeffrey Shears, PhD

is a joint appointed Professor in the Social Work Departments at North Carolina A&T State University & UNC Greensboro, where he is also the Director of the Joint Masters Social Work Program (JMSW). Dr. Shears earned his BSW and Masters in

Education Administration from North Carolina A&T State University and his PhD in Social Work from the University of Denver.

His research interest is men (fathering, multicultural issues, HIV and AIDS) and quantitative research with an emphasis on data sharing among social service agencies. In addition, Dr. Shears has an extensive list of academic publications on fathering featured in national and internationally refereed journals. He is co-author of the acclaimed *What all Dads Should Know*.



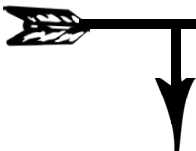
Wizdom Powell, MS, MPH, PhD

is Associate Professor of Health Behavior at UNC-Chapel Hill's Gillings School of Global Public Health. Dr. Powell is also a faculty member at UNC's Lineberger Comprehensive Cancer Center and Director of the UNC's Men's Health Research Lab. In 2011-2012, she was appointed by President Obama to serve as a White House Fellow to the Undersecretary of Defense for Personnel & Readiness and Secretary of Defense Leon Panetta.

In this role she served as Special Advisor on Military Mental Health (e.g., PTSD, Suicide, and Military Sexual Trauma). Her community-based research focuses on the role of modern racism and gender norms on African American male health and healthcare inequities. In addition to being a Kaiser Permanente Burch Fellow, she is an American Psychological Association (APA) Minority, Robert Wood Johnson Foundation, and Ford Foundation Predoctoral Fellow who received a Ph.D. and M.S. in Clinical Psychology and M.P.H. from the University of Michigan-Ann Arbor. In recognition of outstanding dissertation research, Wizdom received APA's Division 51 (D51) Loren Frankel Award. She serves as chair of the APA's workgroup on Health Disparities in Boys and Men and co-chair of the Health Committee for President Obama's My Brother's Keeper Initiative in Durham County. In recognition of her public service to young males of color, she received the American Psychological Association's (D51) Distinguished Professional Service Award. She recently received the prestigious Phillip and Ruth Hettleman Prizes for Outstanding Artistic and Scholarly Achievement by Young Faculty.



B2.



Geni Eng, PhD has, over the past 25 years, developed a body of community-based participatory research (CBPR) work that is recognized both nationally and internationally. Dr. Eng focuses on the integration of community development and health education interventions in the rural United States and developing countries. Her current research projects apply community-based research principles to the design and evaluation of lay health advisor interventions and look at the influence of sociocultural factors on STDs and early detection of breast cancer. Dr. Eng directs the Community Health Scholars post-doctoral

program. She also serves as principal investigator on the National Cancer Institute-funded Cancer Health Disparities training grant housed in the department. She teaches community organization, cross-cultural aspects of health education practices, community diagnosis and health issues relevant to women, ethnic minorities, and developing nations.

SPEAKER BIOGRAPHIES



David Caldwell, MSW has been appointed as the Community Center Coordinator for Orange County. David is a lifelong resident of Orange County. He has most recently served as the Project Director and Community Organizer for the Rogers Eubanks Neighborhood Association (RENA) and its Executive Board of Directors. He is also a member of the Coalition to End Environmental Racism and serves on the Board of Directors for the North Carolina Environmental Justice Network. David is also a Community-Based Participatory Research (CBPR) expert and has significant experience in supporting and leading positive community development across the region. David served in the Orange County Sheriff's Office as a Lieutenant in the Patrol division and retired after 22 years of service. Prior to his service with the Sheriff's Office, David served as a Sergeant in the United States Army Military Police Corps where he performed duties as a general officer body guard, a Drill Sergeant, a combat participant during the Invasion of Grenada, and as an instructor for Police Officers from the Caribbean Islands. David holds Bachelor's Degrees in Recreation Administration from North Carolina Central University and Criminal Justice from Mount Olive College.



Gene R. Nichol JD is Boyd Tinsley distinguished professor of law at the University of North Carolina. His scholarly work is supported by the North Carolina Poverty Research Fund. From 2005-2008, he was president of the College of William and Mary. Nichol was Burton Craige professor and dean of the law school at UNC (1999-2005); law dean at the University of Colorado (1988-1995); and Cutler professor and director of the William & Mary Bill of Rights Institute (1985-1988). In 2003, Nichol received the ABA's Edward Finch Award for delivering the nation's best Law Day address. In 2004, he was named Carolina's Pro Bono Professor of the Year. The next year, Nichol was inducted into the Order of the Long Leaf Pine, North Carolina's highest civilian honor; and Equal Justice Works named him Pro Bono Law Dean of the year. In 2008, he received Oklahoma State University's Distinguished Alumnus Award; the "Courage To Do Justice Award" from the National Employment Lawyers Association; and the Thomas Jefferson Award, for courage in the defense of religious liberty, from the Military Religious Freedom Foundation. In 2013, the NC Council of Churches gave Nichol its Faith Active in Public Life Award; the NC-ACLU named him its W.W. Finlator Award winner; and the University of North Carolina gave him its Thomas Jefferson Award – the university's highest faculty honor. In 2014, he received the McCall Teaching Award from the UNC Law School and the Joanne Arnold Award for Courage and Commitment from the University of Colorado-Boulder. Nichol attended Oklahoma State University, receiving a degree in philosophy (1973) and playing varsity football. He obtained his JD from the University of Texas in 1976, graduating Order of the Coif.

Neasha Graves MPA

is the community outreach and education manager for the UNC Institute for the Environment's Environmental Resource Program, the public engagement, science education and research translation group of the Institute. In her current position, she coordinates environmental health outreach initiatives aimed at sharing research on pulmonary disease, environmental cancers, and other environmental health issues with community and professional audiences. Her areas of expertise include teaching and administering programs for youth and adults in the public school, state government, nonprofit and university sectors. Prior to her position at UNC Chapel Hill, she was the public health program consultant for the NC Childhood Lead Poisoning Prevention Program in the NC Children's Environmental Health Branch and has resumed that role in a partnership between UNC and the NC Department of Health and Human Services. Mrs. Graves earned her Master's degree in Public Administration from NC Central University in Durham.



B3.

SPEAKER BIOGRAPHIES



Megan Hughes, MEM

As a Research Associate with the Environmental Resource Program, Megan Hoert Hughes conducts outreach on asthma, healthy homes and the health effects of shale gas extraction. She also manages a summer science enrichment program aimed at increasing diversity in the geosciences. She has significant experience as an environmental educator and community advocate and has held positions at the Center for Environmental Programs at Bowling Green State University in Bowling Green, OH and the Environmental Finance Center at the University of Maryland in College Park, MD. Mrs. Hughes has a Master of Environmental Management degree from Duke University (2000) with an emphasis on Resource Ecology.



Lorisa Seibal is the Housing Services Director for Reinvestment Partners, a

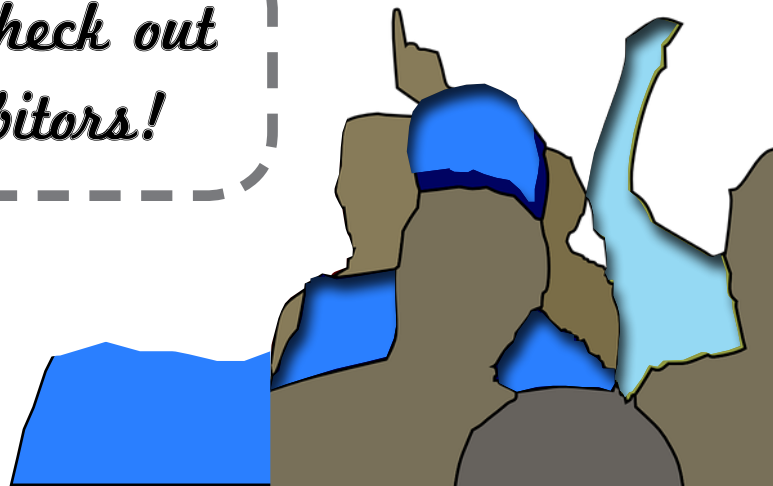
Durham area nonprofit agency that advocates for economic justice, community develop and opportunity for the city's residents and families. Ms. Seibel helps residents advocate for healthy homes, trains owners and contractors to prevent lead poisoning of children, and manages housing counseling grants. Prior to Reinvestment Partners, she worked with the Durham Affordable Housing Coalition for fifteen years as a Community Organizer, serving as Interim Executive Director in 2008 and 2011. Ms. Seibel was also an elected member of Durham City Council from 1991 to 1995.



Lenora Smith MS is the Executive Director of the Partnership Effort for the Advancement of Children's Health (PEACH), a twenty-year-old nonprofit agency with a mission to improve community economics and health by creating a sustainable workforce to reduce environmental hazards in the community. Ms. Smith's focus in building PEACH's influence has been on community connectivity – creating, directing, and working with residents and other organizations to make resources available to marginalized and underserved residents throughout the community. Specifically,

PEACH has sought to influence community health and economic development through its role as a comprehensive lead-based paint training and environmental remediation program. She currently serves on the Duke Chancellor's Community Health Advisory Board, the Durham Mayor's Poverty Reduction Initiative, Northeast Central Durham Leadership Council, and Latino Health Roundtable. Ms. Smith is a native of Port Chester, NY and lives in Durham with her husband Lester, and they have three grown children.

*Don't forget to check out
posters & exhibitors!*



SPEAKER BIOGRAPHIES

B4.



Samuel Sinyangwe is a policy analyst and data scientist who works with communities of color to fight systematic racism through cutting-edge policies and strategies. Sam has supported movement activists across the country to collect and use data as a tool for fighting police violence through Mapping Police Violence and has worked in collaboration with activists to develop Campaign Zero, a comprehensive national platform of policy solutions to end police violence. Sam's work has been featured on MSNBC, CNN, FiveThirtyEight, CBS, BBC, MTV News and a variety of other national and international publications. Sam grew up in Orlando, FL, and has been involved in organizing and advocacy since he was in high school. He graduated from Stanford University in 2012, where he studied how race and racism impact the U.S. political system.



Beverly "BJ" Council is the founder of You & Five-O, LLC. A retired Deputy Police Chief, Council's gift for analyzing and diffusing situations simultaneously has informed her that she must do something to address the crisis between law enforcement and the residents they are charged to protect and serve. You & Five-O is the result. As the first African-American female to ascend the ranks of Deputy Chief with the Durham City Police Department, she is no stranger to challenges and seemingly unsurmountable odds. She has a proven record of achievement in implementing crime reduction and crime diversion programs, a unique ability to work during and post crisis to foster collaboration among stakeholders to create practical and powerful ideas that bring about culture shifts that positively brand organizations, and she is a consensus-builder who can easily translate policy, ideas, and concepts to build support. Council's work is based on the philosophy of customer service, thereby modeling servant leadership. She hosted regular open houses, and personally knocked on citizens' doors to develop relationships in her district.

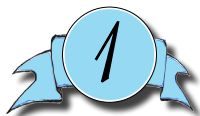


D'atra Jackson, MS is originally from Philadelphia and moved to Durham from Florida. She attended Cheyney University of Pennsylvania where she received her Bachelor's Degree in Recreation and Leisure Mgmt. She went on to obtain her Master's Degree in Recreation and Sport Management from Florida International University on December 2013. While in Miami, she was active in an organization called Dream Defenders, founding the FIU chapter. Dee Dee was a featured panelist at Make Progress, and Next Step Summit by AFL-CIO. She was an organizer with the first statewide #BlackLivesMatter youth assembly. Dee Dee work within Southern Vision Alliance has included coordinating coalitions, leading student debt campaign, summer staff for the Youth Organizing Freedom School, and organizing at HBCU campuses.



Enrique Neblett, Jr., PhD is an Associate Professor of Psychology and Neuroscience and Lab Director of the African American Youth Wellness Laboratory at UNC Chapel Hill. His research examines the association between racism and health in African American youth, with a focus on the protective function of racial identity and racial socialization. He has published scholarly articles in outlets such as Psychophysiology, Child Development, The Journal of Counseling Psychology, Cultural Diversity & Ethnic Minority Psychology (CDEMP), and the Journal of Black Psychology and directed several studies funded by the National Science Foundation and the Robert Wood Johnson Foundation. Dr. Neblett teaches courses on youth psychological disorders, African American psychology, and racism, racial identity, and African American mental health. Currently, he serves on the National Mentoring Resource Center Research Board and the Editorial Boards for CDEMP and the Journal of Black Psychology. He is Co-Chair of the Psychology and Neuroscience Diversity Committee and a member of the Society for the Psychological Study of Ethnic Minority Issues, the Society for Research in Child Development, the Society for Research on Adolescence, and the Association of Black Psychologists. He has received the NSF Postdoctoral Research Fellowship and in 2014 the Chapman Family Teaching Award, among UNC's highest campus-wide recognitions for teaching.

POSTER ABSTRACTS



Adverse Childhood Experiences, Sexual Orientation, and Adult Health

Anna Austin, MPH, Doctoral Student, Maternal and Child Health Department, UNC
Harry Herrick, MSPH, MSW, Med North Carolina State Center for Health Statistics
Scott Proescholdbell, MPH, North Carolina Division of Public Health

Introduction: Health disparities among individuals identifying as lesbian, gay, or bisexual (LGB) have been identified. However, little research has explored the link between multiple forms of childhood adversity and poor adult health outcomes among LGB individuals compared to heterosexuals. The purpose of this study was to explore the association of sexual orientation with poor adult health outcomes before and after adjustment for exposure to adverse childhood experiences (ACEs). **Methods:** Data from the 2012 North Carolina, 2011 Washington, and 2011 and 2012 Wisconsin Behavioral Risk Factor Surveillance System (BRFSS) surveys regarding ACE exposure, health risks, perceived poor health, and chronic conditions were analyzed by sexual orientation using bivariate and multivariate methods. **Results:** Results revealed an increased prevalence of all ACE categories among LGB individuals compared to heterosexuals with odds ratios ranging from 1.43 to 3.11. A significantly higher proportion of LGB individuals (73.2%) reported exposure to multiple ACEs as compared to heterosexuals (59.6%). After adjustment for ACE exposure, sexual orientation was no longer associated with poor physical health, current smoking, and binge drinking in multivariate models. Associations with poor mental health, activity limitation, HIV risk behaviors, current asthma, depression, and disability remained, but were attenuated. **Conclusions:** A higher prevalence of ACEs among LGB individuals may account for some of the excess risk for poor adult health outcomes among LGB individuals. A greater understanding of the contribution of ACEs to health disparities among LGB individuals will help to inform prevention and intervention efforts to promote optimal health outcomes in this population.



Racial, ethnic, & socioeconomic disparities in tobacco retailer proximity: A spatial approach

Amanda Y. Kong, BA, Graduate Student, Department of Health Behavior, UNC
Lisa F. Isgett, MPH, Spatial Analyst, Counter Tools
Allison E. Myers, MPH, Graduate Student, Department of Health Behavior, UNC; Executive Director, Counter Tools
Kurt M. Ribisl, PhD, Professor, Department of Health Behavior, UNC; Program Leader, UNC Lineberger Comprehensive Center

Background: Density to tobacco retailers is a determinant of tobacco use behaviors. Differences in density have been documented for some racial and ethnic groups and in low-income areas. We assessed whether differences in proximity exist in 1.) lower-income areas and 2.) areas with increasing percentages of Black, Hispanic, and Asian/Hawaiian Pacific Islander (AHPI) residents. **Methods:** Geographic Information System was used to spatially join 2013 American Community Survey census tract data for race, ethnic and median household income to residential addresses (n=438,166) in Mecklenburg County, NC. Quintiles of each demographic variable were created using SAS 9.4. Average distances from each residence to the nearest one, five and ten retailers were calculated by demographic quintile. **Results:** As the percentage of White residences increased, distance to the nearest ten retailers increased from 3972 to 7037 feet. In contrast, as the percentage of Black residences increased, distance to the nearest ten retailers decreased from 6969 to 4365 feet. Areas with the lowest median household income were on average closer to ten retailers (3081 feet) than those in the wealthiest areas were to just one (4368 feet). **Conclusions:** Disparities in proximity were observed by income and percent Black. Tobacco retailer proximity disparities should be assessed and, if present, eliminated through policy changes by local and state organizations. A lack of targeted tobacco control policies in these high-risk areas may further exacerbate this disparity, potentially leading to greater disparities in tobacco use behaviors. Further research is needed to assess potential differences in point-of-sale exposure of those living near multiple retailers.

POSTER ABSTRACTS



The Development of a Critical Consciousness Intervention for HIV-Infected Young Black Men Who Have Sex with Men

Emily M. Cherenack, BA, Graduate Student, Duke University

Introduction: Young Black men who have sex with men (YBMSM) are disproportionately impacted by the HIV crisis. Many experience poor self-esteem, low self-efficacy, and high levels of psychological distress due to stigma related to race, sexual orientation, and HIV status. A critical consciousness health-enhancement intervention was developed to help HIV-infected YBMSM between 16 and 24 identify and positively respond to forces of oppression, with the aim of increasing feelings of empowerment, adaptive psychosocial factors (e.g., self-efficacy and sociopolitical development), and related health promotion behaviors (i.e., treatment adherence, sexual risk reduction, and substance use reduction). **Methods:** Utilizing community-based participatory research strategies, Mobilizing Our Voices for Empowerment (MOVE) was finalized as part of three phases across two studies: 1) intervention development, 2) testing for feasibility and acceptability, and 3) testing for efficacy. Process evaluation data was collected from youth advisory board members (n = 8), focus group participants (n = 19), intervention participants in a randomized control trial (n = 40), and intervention facilitators (n = 6) at HIV clinics in four US cities. **Results:** MOVE was revised four times and implemented as a four-day group intervention. Activities involve the critical analysis of oppressive or discriminatory messages in popular media and the creation of action plans to empower participants to respond to oppression on the individual, relational, and community level. **Conclusion:** This study offers an example of the only critical consciousness intervention developed for HIV-positive YBMSM. It is important to continue developing interventions that address the relationship between oppression and health behaviors among HIV-positive youth.



Community-Engaged Participatory Research Project to Improve Health Equity

Daniel Forriester, PharmD, Assistant Professor, College of Pharmacy, University of South Florida

Kristy Andrew, MPH, MSM, Health Information Systems, University of South Florida

Hiram Green, College of Medicine, University of South Florida

Kevin Sneed, PharmD, CRPh, Professor and Dean, College of Pharmacy, University of South Florida

The University of South Florida (USF) College of Pharmacy is implementing a community-based participatory research program to increase minority engagement and enrollment in research studies. Community members will serve on a Community Research Review Committee (CRRC) to review and vet research studies prior to promoting to the community at large. The CRRC will serve as a review board for community research proposals, using a standard set of criteria and guidelines to screen projects for opportunities to increase minority participation and impact. Activities will include CRRC member recruitment, development of committee member training modules and guidelines, development of a pipeline for receiving proposals, and centralizing data related to impact on health disparities and research best practices. A network of religious, social, and civic groups will be created to cultivate relationships with community members and faculty researchers. One of the aims is to broaden diversity of clinical trial participants to optimize safety and efficacy data of new drugs, vaccines, and other treatments. The project will facilitate community conversations regarding the importance of minority participation in clinical trials and effective strategies for engaging minorities in the research process. The future goal is to replicate this model across Florida and the US and develop a data coordinating center through which clinical trial data can be synthesized and shared to maximize benefit in reducing health disparities. This collaborative project was created through a NIH P20 grant in conjunction with USF, the Center for Equal Health, Moffitt Cancer Hospital and the Florida Health Equity Research Institute.

POSTER ABSTRACTS



“Ready, Set, Baby” Prenatal Breastfeeding Education Appointment and Comfort with the Idea of Formula Feeding

Paige Schildkamp, BA, MPH Candidate, Carolina Global Breastfeeding Institute, Department of Maternal and Child Health, Gillings School of Global Public Health, UNC

Kathy Parry, MPH, IBCLC, Carolina Global Breastfeeding Institute, Department of Maternal and Child Health, Gillings School of Global Public Health, UNC

Miriam Labbok, MD, MPH, IBCLC, Director, Carolina Global Breastfeeding Institute, Department of Maternal and Child Health, Gillings School of Global Public Health, UNC

Introduction: Previous literature shows that decreasing comfort with the idea of formula feeding is associated with increased breastfeeding intentions and, thus, breastfeeding outcomes, positively impacting maternal and infant health. The objective of this study was to evaluate if the “Ready, Set, BABY” (RSB) prenatal breastfeeding education session decreases a mother’s comfort level with the idea of formula feeding, particularly within minority populations with lower breastfeeding rates. **Methods:** Women’s comfort with formula feeding was assessed pre and post RSB, via self-report questionnaires on a 1 (very comfortable) - 8 (very uncomfortable) scale. Paired t-tests and multivariate logistic regression examined whether formula feeding comfort decreased after the intervention. **Results:** Pre to post questionnaire differences are significant for the total sample, and specifically for non-Hispanic White women, first time mothers, women with a high school diploma/GED or less education or master’s/other advanced degrees, above thirty years of age or between 25 and 29 years of age, and multiparous mothers with any breastfeeding experience. Multivariate analysis showed Non-Hispanic Black women as equally likely and Hispanic women as 0.6 times as likely of a positive change score as Non-Hispanic White women. First time mothers were twice as likely as multiparous mothers with any previous breastfeeding experience to have a positive change score. **Conclusion:** RSB sessions’ success in decreasing comfort with the idea of formula feeding supports increasing availability of these prenatal breastfeeding education sessions to improve breastfeeding outcomes, especially among first time mothers. Qualitative follow-up would help fine-tune the appointment to even better meet the needs of minority populations.



Parent Advocates: The School-Family Connection for Low-Income Families in East Durham

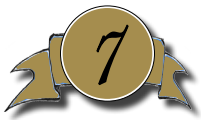
Kendra Madding, BA, MPH Candidate; Bilingual Elementary Parent Advocate, East Durham Children’s Initiative

Esther Mateo-Orr, BA, MA, MEd, Elementary Parent Advocate Program Manager, East Durham Children’s Initiative

The Parent Advocate program was created by the East Durham Children’s Initiative (EDCI), a nonprofit founded in 2011 with the goal of improving outcomes in Durham’s most underserved neighborhood. EDCI’s service area, a 120-block neighborhood referred to as the EDCI Zone, has high rates of adult poverty, crime, child maltreatment, teen pregnancy, child obesity, and food insecurity. EDCI provides a pipeline of high-quality services for East Durham children from birth through high school. Parent Advocates serve as the school-family connection for low-income families. Advocates work alongside families to accomplish four goals: 1) support parents, 2) facilitate parent-to-school communication, 3) develop supportive home environments, and 4) increase parent access to community resources. Services provided include assessing family needs, providing child and family educational enrichment activities, assessing children’s development, making referrals for services, conducting workshops, crisis management, and more. Engaging and empowering underserved populations: Families in the EDCI Zone are mostly minorities: 49% identify as African American and 47% as Latino. Many Latino parents are undocumented and speak Spanish as their primary language. The majority of these families live in poverty. Advocates have used a number of strategies to engage families, including phone calls, community meetings, door knockers, mass text messages, and more. They also work closely with school staff to advertise EDCI programs and earn parents’ trust. Many Advocates are bilingual in English and Spanish. Advocates employ a number of community programs to empower families and help them lead healthier lives, such as food assistance programs, bike/

POSTER ABSTRACTS

walk to school days, nutrition and cooking workshops, and ESL classes. Community input about programs comes from a 15 member Parent and Community Advisory Council, in addition to community forums and surveys. Parent Advocate Kendra Madding and Program Manager Esther Mateo-Orr will present lessons learned through EDCI's engagement strategies, share tips for bringing similar health programs to underserved communities, and discuss the importance of empowering low-income families as a form of social justice (particularly single mothers). The presentation will focus on EDCI health programs and health outcomes for more than 1,000 children served by EDCI. EDCI's evaluation uses a longitudinal survey design conducted by Duke's Center for Child and Family Policy, which tracks engagement and outcomes for more than 1,000 children.



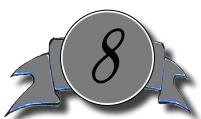
Mobilizing the Montagnard Refugee Community and Academic Community to Address Hypertension: “We need to conquer hypertension together.”

Sharon D. Morrison, MSPH, MHSE, PhD, Associate Professor, Department of Public Health Education, UNC Greensboro

Lek Siu, BA candidate, Peace and Conflict Studies, Guilford College

Tou H. Vang, MPH Candidate, Department of Public Health Education, UNC Greensboro

Andrew Young, MFA, Volunteer Training Coordinator, The Bonner Center for Community Service & Learning, Guilford College The Montagnards are an indigenous people from the Central Highlands of Vietnam who resettled in the U.S. in the 1980s. Montagnard and American mainstream communities are in conflict. Despite being in the Southeast U.S. for almost 30 years, there is little help for this community. Families continue to face social and health related barriers such as difficulty speaking and learning English, raising children and helping them succeed in school, securing a job, good housing, transportation, and accessing affordable health care and chronic disease prevention services. Montagnard leaders, who do not understand why community members suffer from chronic conditions such as high blood pressure or its root causes, called for help from academic allies. The Montagnard Hypertension Project team, comprised of community partners and faculty researchers, is working collaboratively to identify contributing factors to hypertension. Our presentation chronicles a process of Montagnard community engagement, which can only happen through community mobilization and activism. Initial joint steps involved recruiting Montagnard first generation students and professionals who received training to conduct community interviews and collect household level data. Leaders, community members and academics learned to work together and trust one another through small group meetings, a community dinner, multiple visits to churches, and a culturally-appropriate response to findings which recently culminated in a health fair. Dialogue between leaders and academics has helped inspire activism within the community towards nonviolent social change, a transformative process empowering Montagnards by increasing their knowledge and awareness about hypertension effects and prevention.



A Pilot Intervention Assessing the Feasibility of Patient Navigators to Address Healthcare Disparities for Spanish-Speaking Families in an Academic Medical Center

Sam Wurzelmann, BA, Program Coordinator, Carolina Conexiones

Claudia Rojas, BS, Program Manager, Center for Latino Health; Program Director, Carolina Conexiones

Carlos Jimenez, BS Candidate, Navigator, Carolina Conexiones

Kori Flower, MD, MS, MPH, Associate Professor, Department of Pediatrics, UNC Chapel Hill; Physician Advisor, Carolina Conexiones

Introduction: Spanish-speaking families face barriers to care at medical centers. Patient navigators have been used successfully in various healthcare settings, but the feasibility and effectiveness of this approach has not been evaluated specifically for Spanish speakers in an academic medical center. **Methods:** We implemented bilingual navigators in the children's outpatient clinic of one academic medical center. Navigators are trained community volunteers who assist patients and families with non-medical issues and expedite connection to interpreters. **Assessment of navigation feasibility**

POSTER ABSTRACTS

and effectiveness included: 1) Success rate of applicants becoming navigators 2) Number of families assisted by navigators, 3) Types of assistance provided by navigators, 4) Navigators' perceived impact of navigation on patient experience. Results: Over 3 months, 22 of 32 applicants (69%) passed the bilingual assessment, completed navigator training, and together served 197 families. The percentage of all Spanish-speaking families served monthly increased from 9.3% to 20.1%. Navigators reported assisting patients by: facilitating communication at registration (87%); clarifying appointment times/locations (54%); accompanying patient to lab or Xray (17%); connecting families with financial counselors (15%). Navigation reportedly improved family understanding of care (85% families) and hospital staff understanding of patient needs (82% families). Conclusions: A volunteer, bilingual navigation service was feasible to develop in an academic medical center children's outpatient clinic, and quickly connected families to resources that may reduce barriers to care. Early process outcomes suggest that navigators improve patient and staff understanding of care. Future work includes evaluating the impact of navigation on additional outcomes, including patient satisfaction and follow up.



Cottage Grove for LIFE!

Sharon D. Morrison, MSPH, MHSE, PhD, Associate Professor, Department of Public Health Education, UNC Greensboro

Lek Siu, BA candidate, Peace and Conflict Studies, Guilford College

Tou H. Vang, MPH Candidate, Department of Public Health Education, UNC Greensboro

Andrew Young, MFA, Volunteer Training Coordinator, The Bonner Center for Community Service & Learning, Guilford College

Goals: Bringing together community residents, community based organizations, and health care providers to reduce negative health outcomes and revitalize the economy of Greensboro's Cottage Grove neighborhood without displacing long-term African American residents and newcomers from Africa, Asia, and Latin America.

Activities: 1) Seven year process to build a broad collaboration of partners including New Hope Community Development, Greensboro Housing Coalition, Cone Health, Cottage Grove Initiative, Guilford Public Health, and a community doctor. 2) Organization of the Cottage Grove Neighborhood Association (CGNA) to identify and lead strategies to address resident priorities. 3) Preparation for Mustard Seed Community Health to provide on-site primary/behavioral health, integrated with reduction of housing impact on health, vegetable gardens, partnership with Hampton Elementary. 4) Recognition by BCBSNC Foundation with a capacity-building grant for Community-Centered Health to use community-led best practices for improved health.

- Plan to develop Community Health Workers program to visit homes with nurses, nutritionists, and social workers to encourage, educate, and organize for community health initiatives and strategies in addition to monitoring chronic disease management of the residents. Community engagement: CGNA interviewed 300+ neighbors about health concerns and priorities; collaborative decision making team of neighborhood and community partner representatives; community leaders are sharing our story nationally at health conferences

Outcomes: Evaluators will use quantitative measures (reduced hospital visits for asthma and diabetes), qualitative measures (increased leadership capacity, environmental improvements, system changes), and participatory research methods (collaboration, decision-making processes). Public health + social justice: Shared leadership for "upstream" health and neighborhood empowerment demonstrate an effective model for reducing health disparities.



Racial Justice Matters: Advocating for Racial Health Equity, 8th Annual Dalla Lana School of Public Health Student-led Conference

M. Bhardwaj, HBSc, MPH student, Dalla Lana School of Public Health, University of Toronto

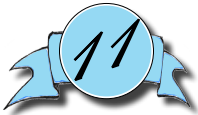
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Introduction: Spanish-speaking families face barriers to care at medical centers. Patient navigators have been used successfully in various healthcare settings, but the feasibility and effectiveness of this approach has not been evaluated specifically for Spanish speakers in an academic medical center. **Methods:** We implemented bilingual navigators in the children's outpatient clinic of one academic medical center. Navigators are trained community volunteers who assist patients and families with non-medical issues and expedite connection to interpreters. **Assessment of navigation feasibility and effectiveness included:** 1) Success rate of applicants becoming navigators 2) Number of families assisted by navigators, 3) Types of assistance provided by navigators, 4) Navigators' perceived impact of navigation on patient experience. **Results:** Over 3 months, 22 of 32 applicants (69%) passed the bilingual assessment, completed navigator training, and together served 197 families. The percentage of all Spanish-speaking families served monthly increased from 9.3% to 20.1%. Navigators reported assisting patients by: facilitating communication at registration (87%); clarifying appointment times/locations (54%); accompanying patient to lab or Xray (17%); connecting families with financial counselors (15%). Navigation reportedly improved family understanding of care (85% families) and hospital staff understanding of patient needs (82% families). **Conclusions:** A volunteer, bilingual navigation service was feasible to develop in an academic medical center children's outpatient clinic, and quickly connected families to resources that may reduce barriers to care. Early process outcomes suggest that navigators improve patient and staff understanding of care. Future work includes evaluating the impact of navigation on additional outcomes, including patient satisfaction and follow up.



Measuring Changes in Solidarity to Promote Sustainable Improvements in Health in Marginalized Communities

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Introduction: SOMOS and MANOS (undergraduate engaged-scholarship projects) have developed partnerships with communities to promote improved health and health care. For ten years, we have worked in two small communities in the Dominican Republic and Nicaragua, focused on promoting collective capacity. Through research-based efforts, the project teams have articulated a model of participatory development that centers on solidarity (Durkheim, 1897; Bhattacharyya, 2004). We report changes in measures of collective capacity from the beginning to the present. **Methods:** Through ethnographic research, we identified residents' "felt needs" (Bhattacharyya, 2004) as agreements about top health priorities. In the Dominican Republic community, residents chose mitigation of flooding and its health effects; in Nicaragua, residents voted unanimously to focus on access to water and the reduction of water-borne health problems. We encouraged "self-help" through communications and collaboration among smaller groups identified using social networks analysis (SNA). We compare data to measure collective capacity at the beginning (Time 1) of efforts in both communities to findings from recent studies (Time 2) to describe changes over time in organizing and organized efforts to advance health priorities. **Results:** Preliminary analyses reveal significant changes in levels of social network density in both communities, suggesting increases in both communications and collaboration as elements of collective capacity. Ongoing analyses examine other structural characteristics of networks and community-level organization using a structural code. **Conclusions:** Sustained improvements in health and healthcare communities may be possible through participatory development methods. The next step is to link improved health outcomes to changes in collective capacity.

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'Yeah, [teachers] leave out the important stuff': Using qualitative research methods to understand NC sexual health education and assess the value-fit of an arts-based HIV prevention program

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Introduction. The US South bears a disproportionate burden of sexually transmitted infections, including HIV, among adolescents compared to the nation as a whole. AMP! (Arts-based, Multiple component, Peer-education) is a theater-based sexual health education and HIV prevention program originally developed for use in California. Adapting AMP! to North Carolina (NC) requires serious consideration of the social/cultural needs and values of communities across the state. **Methods.** We conducted formative research with diverse stakeholders to gather information about the NC context for sexual health education to guide AMP!'s adaptation to reflect the communities in which it will be implemented. Focus group and interview guides were reviewed by community experts with decades of experience in HIV prevention interventions in NC, and revised based on their feedback. Four focus groups (urban parents; urban students; rural parents; rural students) and six semi-structured interviews (urban/rural health teachers) were conducted. **Lessons-Learned:** Our research process strived to be participatory, but we learned the challenges of balancing research objectives with full community engagement. Involving community experts in drafting our focus group/interview guides ensured community-friendly content/language. Eliciting input from multiple stakeholder groups in rural and urban settings provided essential perspective to guide AMP!'s adaptation. It is critical to incorporate meaningful stakeholder engagement into ongoing intervention adaptation. **Conclusion.** Developing and implementing programs that fit the values of diverse communities while delivering evidence-based sexual health education is key to tackling adolescent health disparities. Qualitative research methods that elicit the voices of communities of practice can strengthen the development of programs with value-fit.



The Tobacco Free HBCU Initiative: how policies can help to reduce the burden of tobacco use and secondhand smoke exposure amongst students, faculty and staff at HBCU campuses

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Pamela Diggs, MPH, Director of Local Program Development and Regulations, Tobacco Prevention and Control Branch, NC Division of Public Health

Background: Tobacco use disproportionately burdens and kills 47,300 African-Americans each year, compared to the general population. Comprehensive policies supporting tobacco prevention and cessation lead to improved health outcomes. Truth Initiative supports Historically Black Colleges and Universities (HBCU) to implement comprehensive tobacco-free campus policies. These institutions serve predominately low-socioeconomic communities, where tobacco products are heavily advertised and there are disproportionately high smoking rates. These institutions are less likely to have a comprehensive tobacco-free campus policy than predominantly white institutions. **Community engagement:** The HBCU Initiative focuses on task force building that consists of diverse campus and community stakeholders. This community engagement assists with assessment, planning student-led activism campaigns and education, and identifying cessation services. Collaboration and education on why tobacco use and marketing is a social justice issue, helps lead to development, adoption, and implementation of a smoke-free or tobacco-free policy. **Outcomes:** 1) reduce secondhand smoke exposure, 2) reduce the burden of tobacco related death and disease and 3) by December 2017 having 40 HBCUs adopt comprehensive tobacco-free campus policies. **Methodology:** The Tobacco Free HBCU Initiative provides grant

POSTER ABSTRACTS

funding and technical support to HBCUs to support the campus to develop a comprehensive tobacco-free policy through a community engagement process. Relevance: In order to create social change on HBCU campuses organizations must foster the power of student activism and empower their ability to seek change in their communities. Other institutions can implement this model to enact community level change.



Meaning Active Productive Science in Service to Communities (MAPSCorps) NC: Employing Local Youth in a Community-Engaged Asset-Mapping Project

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Giselle Corbie-Smith, Director, Center for Health Equity Research

Background: Interventions that build on existing assets in communities are limited by incomplete inventories of community resources, and these databases are also largely inaccessible by community members. Additionally, there is a paucity of constructive summer opportunities for low-income youth in rural Eastern North Carolina. MAPSCorps NC seeks to address both of these issues by employing local youth to conduct a census of all public-facing built assets in two counties in this region. **Activities:** Using community-engaged methods, we are adapting MAPSCorps, which has been implemented in numerous urban settings, to be appropriate for rural communities. We will hire and train local high school students to collect data, using a smartphone app, on every businesses and organizations that serves the public in their communities. Students will code the business based on an established classification system. Concurrently, students will engage in a public health-focused STEM curriculum. **Outcomes:** Employed youth will be exposed to research processes, gain insight about community resources, engage community leaders, and develop important leadership skills. Based on previous MAPSCorps iterations, the resulting dataset is expected to offer a more comprehensive picture of available community assets and resources. **Conclusion:** MAPSCorps is a unique asset-mapping program intervention that offers meaningful employment opportunities to local youth. Additionally, the MAPSCorps will produce a high-quality dataset to be used by local community members and investigator to design asset based interventions and programs.



Fitness Breaks: Promoting Social Justice Through Worksite Wellness

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Program Purpose & Activities: Our goal is to promote overall health, prevent injury, and improve quality of life for Facilities Services (FS) staff. Fitness Breaks provides free 10-15 minute workout sessions for the UNC-CH FS staff, which consists of minority groups including Burmese, African American, and Latino. They are the lowest-paid staff on campus, and due to the physically demanding nature of their jobs they are at the greatest risk for worksite injury. Fitness Breaks gives this population an opportunity to engage in physical activity at their workplace and has provided free health screenings at employee events. **Partnerships/Engagement:** Fitness Breaks was created as a result of focus groups with all levels of FS staff as well as evidence based literature. Throughout design and implementation, FS staff have provided continuous feedback in order to shape Fitness Breaks to fit their wellness needs. We have partnered with SHAC (Student Health Action Coalition) and Student Recreation to assist with providing health screenings. We also receive guidance and support from UNC WorkWell LiveWell, UNC Sport Science & Exercise, UNC Campus Recreation, UNC Gillings SPH, and the Carolina Collaborative for Research on Work and Health. **Achievements:** We provide 14 individual sessions across campus and on average 35 - 40 individual staff members participate in 1 - 3 sessions per week. We offered free health screenings to all Housekeeping staff this Fall and had 75 staff members participate. Most recently we have implemented new program improvements including improvements offering regular health screenings and incorporating fitness equipment into sessions.

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From Adjustment to Advocacy Support Groups: Refugee Mental Health and Wellness Partners with Refugee Communities

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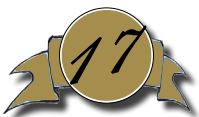
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Caitlin Bearden, MSW, UNC Global Transmigration – Refugee Mental Health and Wellness Initiative

Introduction: According to the U.S. Department of State, the U.S. has admitted over 3 million refugees since 1975. Refugees experience high rates of anxiety, depression, substance abuse, and other stress-related disorders (Palinkas, Pickwell, Brandstein, Clark, Hill, Moser, & Osman, 2003). However, mental health screening, assessment, and treatment are often not available to recently arrived refugees. Barriers to service provision include a lack of culturally appropriate treatment and limited access to interpretation services. **Methods:** In response, the UNC Refugee Mental Health and Wellness Initiative (“Refugee Wellness”) collects data on the mental health needs of recently resettled refugees in Wake, Durham, and Orange Counties using the Refugee Health Screener-15. The project provides free individual/family therapy, support groups, and psychiatric case management. By adapting the Pathways to Wellness Community Adjustment Support Group curriculum to fit client needs, Refugee Wellness staff normalize the refugee experience and focus on individual and cultural strengths. As a result, the group members build social capital; learn about culture shock and coping skills; and contextualize anxiety, depression, PTSD, and loneliness. **Results:** After completing the curriculum, refugees expanded their goals to include continuing education, accessing health care, learning job skills, and lobbying for improved housing. Based on this feedback, Refugee Wellness staff now engage refugees as equitable partners through co-led group discussions, “field trips” in the community, and advocacy visits with elected officials. **Conclusion:** This presentation provides an overview of the research and evaluation processes in analyzing the effectiveness of interventions in helping refugees overcome health inequities.



Using CBPR to Understand Local Collaborations Addressing CVD Risk

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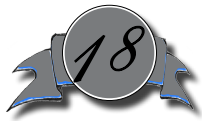
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Introduction: Cardiovascular disease (CVD) is the leading cause of death in the U.S., but African Americans in the rural south have the highest CVD mortality and related risk factors than any other group. Project GRACE, a community-based participatory research partnership (CBPR) in Eastern NC, is working to reduce these disparities by adapting an evidence-based intervention tailored to the needs of rural African Americans. This study sought to understand how organizational collaborations could influence the development and sustainability of a CVD risk intervention. **Methods:** We designed a survey instrument using previously validated tools and developed additional items based on existing literature and community interests. Using a multi-modal design, participating organizations completed the survey either using a web-based survey link or in-person guided by a community member. Organizational collaboration was analyzed using univariate statistics. **Results:** 53 organizations completed the survey. Of the 49% of organizations that are currently collaborating to address CVD risk, and the average size of these existing partnerships consist of 3 agencies. Organizations that listed health as a core component of their mission were more likely to be involved in current CVD-related partnerships. Overall, 61% of organizations are interested in future collaborations around this issue. A larger proportion

POSTER ABSTRACTS

of faith-based organizations were interested in future collaborations (76%) compared to community-based organizations (43%). Conclusions: This CBPR approach was successful in collecting interest in local CVD-related collaborations and existing collaborations. The results of the survey will be used to identify organizational assets available for CVD risk reduction and sustaining related interventions.



Implications for a Paradigm Shift: Factors Related to Breastfeeding Among African American Women

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Introduction: Despite efforts to address the disproportionately low rates of breastfeeding among African American women, disparities continue. There is widespread consensus that breastfeeding has health benefits for infants, mothers and society. An underexplored area explanation may be socio-historical factors unique to African Americans. These are events, experiences and phenomena whose impact has been passed down and now influences breastfeeding beliefs and behaviors. The goals of the study were to describe cultural factors influencing African American mothers' perceptions of infant breastfeeding and to identify possible connections between socio-historical factors and African American infant feeding decisions. **Methods:** Six focus groups, three breastfeeding groups and three formula feeding groups, were conducted in May 2015- September 2015. The groups were composed of a purposeful sampling of African American women stratified by age 18-29, 30-50 and 51+. MAXQDA computer software was utilized to conduct a qualitative thematic analysis. **Results:** The analysis revealed four themes: 1) negative feeling about breasts, 2) infant feeding traditions within families, 3) breast as sexual, not functional and 4) negative historical influences (i.e., mammy, wet-nursing, aggressive formula marketing). These results support the need for a new approach and the use of three frameworks to guide practice and research; embodiment, historical trauma and the PEN-3 model developed by Collins Airhihenbuwa (1995). **Conclusion:** A novel approach for African American breastfeeding research is postulated. Research methods that examine the contribution of socio-historical factors to breastfeeding disparities may illuminate key areas that can be targeted for the development of culturally-sensitive interventions.



Combining the Racial Equity Framework with Community-Based Participatory Research (CBPR) Approach to Identifying Barriers to Care in the Analysis of Cancer Navigator “Real Time” Communications

Jamie Steed, BS; Christina Yongue, MPH; Eugenia Eng, DrPH; Alexandria Lightfoot, EdD; Stephanie Baker White, PhD; Chris Goettsch, BA

Background: African American cancer patients, as compared to their White counterparts, continue to initiate treatment later and remain less apt to undergo complete treatment, fueling worse treatment outcomes including shorter survival. ACCURE is evaluating two innovations: the “real-time registry” (RTR), an electronic warning system tool, and a unique “nurse navigation” program to determine whether these interventions support breast and lung cancer patients' receiving appropriate and timely treatments, and if they help to narrow the racial disparity difference in completing treatment. The study is using an Racial Equity framework and a community-based participatory research (CBPR) approach to guide the analysis process. **Methods:** Two academic and two community partners from different ethnic backgrounds reviewed and coded the nurse navigator communication notes. The purpose was to provide inclusion of the Racial Equity framework to reveal barriers and facilitating factors that patients have in completing treatment. **Results:** Having an anti-racism perspective and involving community members led to the development of an ACCURE Navigation Communication Code Book. **Conclusions:** The Racial Equity framework and the CBPR approach to analyzing qualitative data serves to deepen the relevance and authenticity of qualitative data.

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