

11TH ANNUAL COMMUNITY SERVICE LEARNING (CSL) CONFERENCE

Health Where We Live

THE ROLE OF THE NEIGHBORHOOD

Saturday, February 3, 2018, from 8 am to 2 pm
UT Health San Antonio





UT Health San Antonio

Center for Medical
Humanities & Ethics



Health Where We Live THE ROLE OF THE NEIGHBORHOOD

11TH ANNUAL COMMUNITY SERVICE LEARNING (CSL) CONFERENCE

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Introduction

Community Service Learning (CSL) is a structured learning experience that combines community service with explicit learning objectives, preparation, mentorship and reflection. Health Science Center students address community-identified needs while learning about the context in which illness develops, connecting their academic coursework to real-life situations, and reflecting on their roles as future healthcare professionals.

The Annual CSL Conference at The University of Texas Health Science Center at San Antonio originated in 2008 as an opportunity to learn from the CSL experiences of students, faculty, staff, and community partners in San Antonio and across Texas. Each year, the conference focuses on a theme relevant to service-learning and hosts experts and guest lecturers, provides skill-building workshops, and showcases CSL projects through students' poster presentations.

Presented by the Center for Medical Humanities & Ethics in conjunction with an interprofessional planning committee, the conference is free and open to the community.

Conference Objectives

To share best practices and scholarship in community service learning with a focus on innovative solutions to bridging the health care system with addressing health needs.

To bring together an interprofessional group of University of Texas (UT) Health Science Center students, faculty, and staff from across the state with community partners to foster service-learning collaborations.

To highlight existing UT Health Science System community service learning projects and future opportunities with community partners.

To recognize and reward excellence in community service learning within the UT Health Science System.



WILLIAM L. HENRICH, M.D., MACP
PRESIDENT
THE UNIVERSITY OF TEXAS HEALTH SCIENCE CENTER AT SAN ANTONIO

December 5, 2017

Ruth Berggren, MD, FACP
Director, Center for Medical Humanities & Ethics
UT Health San Antonio, MC 7730

Dear Ruth,

I wholeheartedly support the 11th Anniversary Community Service Learning (CSL) Conference hosted by the Center for Medical Humanities & Ethics. For over a decade, this annual event has been a notable resource for our entire university, our partners in San Antonio and the South Texas region and our sister institutions within The University of Texas System.

UT Health San Antonio has a mission to engage our community to improve health, and this excellent learning opportunity helps further us in our shared mission. As educators, we are dedicated to instilling not only technical excellence in our students but also compassion for individuals and commitment to service. The conference is an important call to action, encouraging community-mindedness and imparting the tools and leadership skills that students need to make a difference in San Antonio or any community where they choose to practice.

This year's theme, "**Health Where We Live: The Role of the Neighborhood,**" will engage us in exploring health care as a collaborative effort that extends beyond the walls of hospitals and clinics and into neighborhoods. This is the direction that the future of health care is moving, and by connecting health services to neighborhoods and empowering social institutions as partners in promoting health, we can ensure that our students' community-based projects have greater impact.

Our Health Science Center is proud to be part of San Antonio and to celebrate its tricentennial anniversary. We are deeply invested in making our community better. That is evident in the over 25,000 hours that our students and faculty spend yearly in service to those in need. The CSL Conference gives us a chance to reflect on that achievement and rededicate ourselves to our commitment to the communities we serve.

On behalf of the entire Health Science Center, thank you for leading this important effort.

Sincerely,

A handwritten signature in cursive script that reads "Bill".

William L. Henrich, MD, MACP

WLH/ms



THE UNIVERSITY of TEXAS SYSTEM
FOURTEEN INSTITUTIONS. UNLIMITED POSSIBILITIES.

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210 W 7th Street
Austin, Texas 78701
512-499-4224
WWW.UTSYSTEM.EDU

December 12, 2017

Dear Friends,

Thank you for joining our colleagues at UT Health San Antonio for their 11th Anniversary Community Service Learning (CSL) Conference. Along with Dr. Henrich, I want to express my excitement about this year's program, *Health Where We Live: The Role of the Neighborhood*, and for the distinguished keynote speaker from Mount Sinai Health System, Dr. Prabhjot Singh. His insight into innovative solutions for bridging health care with the settings where most of us live, work, play and learn holds promise for all of us engaged in community.

Eleven years of a conference focused on promoting sustainable academic-community partnerships through community service learning is an accomplishment that should be recognized and celebrated. The UT System appreciates the efforts of the Center for Medical Humanities & Ethics in organizing this annual inter-professional endeavor that is inclusive of our many valued community partners in the state in addition to the students, staff, and faculty who dedicate their time to improving the lives of others.

This conference is well-aligned with UT System-wide efforts to bring together collaborators from multiple sectors and disciplines to foster community-level partnerships for the optimal health and well-being of all Texans. Our six health science institutions are working hand in hand with a wide range of community partners across the state to develop innovative, evidence-based health initiatives addressing underserved communities, including: *SA2020*; the *Hispanic Health Research Center (HHRC)* in Brownsville; the *Paso Del Norte Institute for Healthy Living* in El Paso; the *We Can Do More* initiative on healthy relationships and preventing teen pregnancy; *Brighter Bites* delivering fresh fruits and vegetables to underserved families; and *CATCH*, a school-based program to combat obesity and cardiovascular disease. We are excited to announce our newest community initiative - *Healthier Texas*, a new public-private partnership between UT System and *It's Time Texas* to address obesity statewide.

I applaud UT Health San Antonio for continuing this critical conversation at the table with key community partners to create roots for lasting local solutions to the health issues facing our state. I thank each of you for the hard work you do each day to improve health in your community, and I hope you will return home from the conference and share the knowledge gained here with your partners.

Thank you,

David Lakey, MD
Vice Chancellor for Health Affairs
Chief Medical Officer
The University of Texas System
Senior Advisor to the President
The University of Texas Health Science Center Tyler

President's Higher Education Community Service Honor Roll

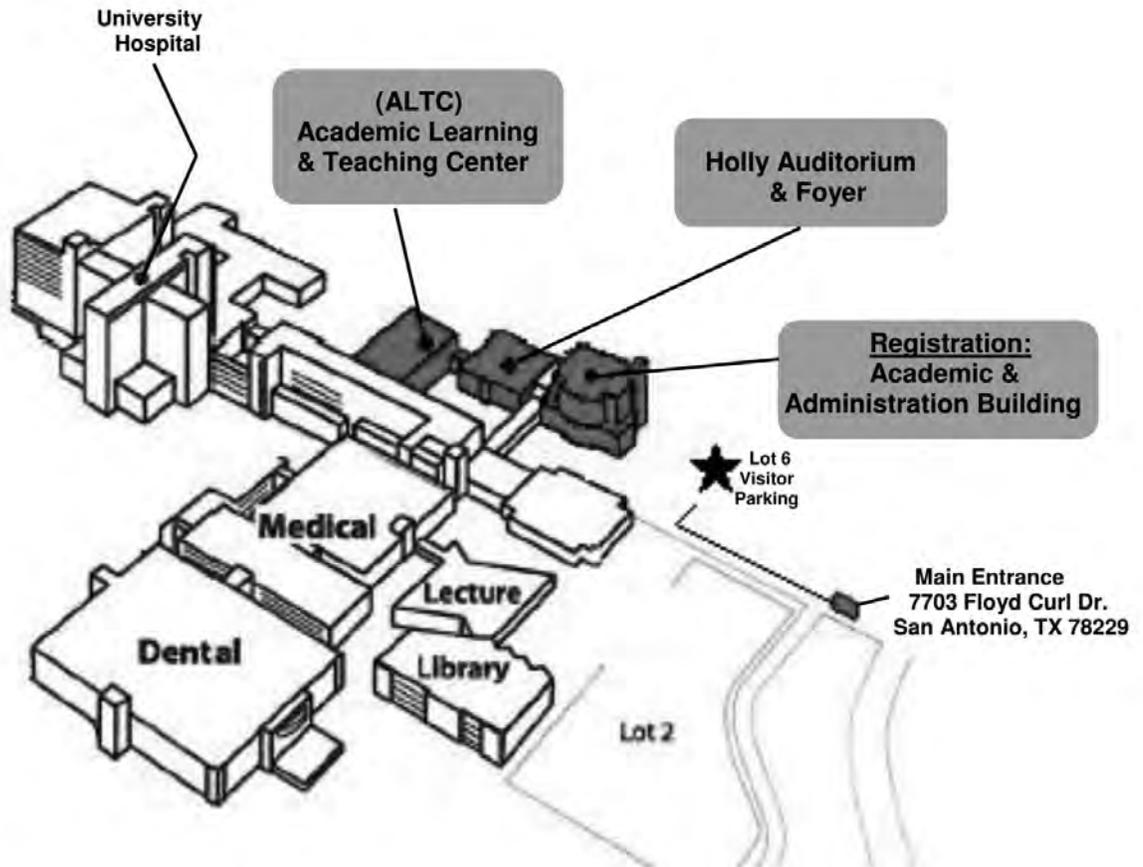
The University of Texas Health Science Center at San Antonio is committed to engaging our community to improve health. In support of our university's service mission, our students use what they learn both inside and outside of the classroom to empower medically underserved communities in San Antonio, across Texas and around the globe. The Community Service Learning (CSL) Program provides a structure to engage faculty, staff and institutional support of these activities. This university-wide dedication to helping others has earned our institution a place on the United States President's Higher Education Community Service Honor Roll annually since 2009. This is the highest federal recognition that an institution can receive for its commitment to service. Our university is the only health science center in Texas, and one of only ten across the nation, recognized by the Honor Roll.

Each year, the Honor Roll showcases the U.S. colleges and universities that have best demonstrated their commitment to addressing community needs and engaging students on a lifelong path toward civic engagement. Institutions must demonstrate widespread support and cooperation, as well as meaningful, measureable outcomes in the communities they serve.

At the Center for Medical Humanities & Ethics, we believe that CSL is ethics in action. We are proud of the leadership that our students exhibit and the promise that they will become community-connected healthcare providers who work to reduce disparities and enhance access to healthcare throughout their careers.



11TH Anniversary CSL Conference Map



NOTES

Conference Agenda

Saturday, February 3, 2018

UT Health San Antonio

8:00 am	Registration Opens	Academic & Admin Bldg. (AAB) Foyer
8:15-8:45	Breakfast with Community Partners	Holly Auditorium Foyer
8:45-9:00	Welcome / Opening Remarks Ruth Berggren, MD, FACP, Director, Center for Medical Humanities & Ethics, UT Health San Antonio	Holly Auditorium
9:00-10:15	Keynote: <i>Dying and Living in the Neighborhood: A Street Level View of America's Healthcare Promise</i> Prabhjot Singh, MD, PhD, Director of the Arnhold Institute for Global Health and Chair of Healthy System Design & Global Health, Mount Sinai Health System, Author of <i>Dying and Living in the Neighborhood</i>	Holly Auditorium
10:15-10:45	Plenary: <i>A City's Focus on Health and Equity</i> Ana Sandoval, MS, MPH, San Antonio City Council District 7	Holly Auditorium
10:45-11:15	Networking with Community Partners / Book Signing	Holly Auditorium Foyer
11:15-11:20	Break	
11:20-12:20	Skill-building Workshops <i>*Choose one session to attend*</i>	
	<i>Training a New Generation of Health Professionals to be Invested in their Communities</i> Adelita Cantu, PhD, RN, UT Health San Antonio	Academic Learning & Teaching Center (ALTC) 301
	<i>From the Heart: The Work of the Promotor(a): Building Trust to Achieve Health in the Neighborhood</i> Carolina González Schlenker, MD, MPH, UT Health San Antonio and Martha Castilla, Madonna Neighborhood Center	Academic Learning & Teaching Center (ALTC) 302
	<i>Community Based Participatory Research (CBPR) and the Practice of Hope in Nicaragua: Using the CBPR Model to Take Action to Reduce Health Inequities</i> Laura Chanchien Parajón, MD, MPH, AMOS Health and Hope	Academic Learning & Teaching Center (ALTC) 303
12:20-1:00	Networking Lunch	Academic Learning & Teaching Center (ALTC) 304
1:00-2:00	CSL Poster Session with Dessert Reception	Holly Auditorium Foyer

NOTES

Networking with Community Partners Holly Auditorium Foyer

Network with community partners during the conference. Below are brief descriptions of the organizations that will be exhibiting. Stop at their tables to learn more and how to partner through community service learning. Note: These are the community partners confirmed at the time of publishing and may not include all of the community partners who will have exhibitor tables at the conference.

American Red Cross Serving Greater San Antonio (redcross.org)

Mission: The American Red Cross prevents and alleviates human suffering in the face of emergencies by mobilizing the power of volunteers and the generosity of donors.

The American Red Cross responds to nearly 64,000 disaster responses yearly. Ninety-five percent of the disaster relief workers are volunteers. The Red Cross opens shelters to make sure people have a safe place to stay, a hot meal and access to other support from trained volunteers. Every night a person stays in a shelter counts as one overnight stay; for example, a family of four staying in a shelter for three nights would total 12 overnight stays. Emergency supplies, hot meals and snacks are distributed to people in the immediate aftermath of a disaster and in the days and weeks that follow. Red Cross health and mental health volunteers travel to disaster sites to help people cope. Health workers can provide first aid treatment for injuries, monitor the well-being of people staying in Red Cross shelters, and replace prescription medications or eyeglasses. Other workers specialize in providing emotional support and helping people to cope after a disaster.

Center for Health Care Services (chcsbc.org)

Mission: The Center for Health Care Services improves the lives of people with mental health disorders, substance use challenges and intellectual and developmental disabilities. Services for adults and children include Mental Health, Intellectual and Developmental Disabilities (IDD) and Substance Use Treatment.

For over 50 years, CHCS has been making a difference in people's lives. Every day, CHCS team members work with people from all around Bexar County, providing them with the counseling, resources and support they need to make their life better. Whether it is working with people struggling with addiction or providing support and therapy to individuals with mental illness and other physical challenges, CHCS is making a difference in their life and their family's life. Our skilled and compassionate team members help people find solutions they need and give them hope by putting them in touch with others who have been in their shoes. At CHCS, we're making a difference, because we are hope!

For Intake and Eligibility: Adult Services: (210) 261-1250; Children's Services: (210) 261-3350.
24-Hour Crisis and Substance Use Helpline: 800-316-9241 or (210) 223-SAFE (7233)

Center for Refugee Services of San Antonio (sarefugees.org)

Mission: Our mission is to promote the wellness, self-sufficiency and successful community integration of resettled refugees and their families.

CRS is located in the NW Medical Center and is staffed by volunteers. The center assists approximately 120-150 legally resettled refugees per week with the following:

- Assistance with basic needs, such as clothing, household items, furniture, food, and referrals to other local social services.
- Educational services: practical English classes, U.S. citizenship preparation, tutoring for school-aged children, career orientation for college students and professionals, educational rights awareness, scholarships and mentoring. Among the many community partnerships we are proud to maintain, CRS values a partnership/liaison

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with the free San Antonio Refugee Health Clinic (SARHC) that is operated by students and faculty from the UT Schools of Dentistry, Medicine and Nursing. The clinic is a significant health care service that uninsured patients can access as needed. SARHC is held at St. Francis Episcopal Church each week.

CPS Energy (cpsenergy.com/content/corporate/en/about-us.html)

CPS Energy is the nation's largest municipally owned energy utility providing both natural gas and electric service. We serve more than 786,000 electric customers and 339,000 natural gas customers in and around San Antonio, the nation's seventh largest city. As part of San Antonio's New Energy Economy, we're also investing in innovative technologies that will:

- Help customers use energy more wisely and lower their bills
- Create jobs and educational investments
- Leverage valuable economic development opportunities for our community's future
- Protect the environment.

The Health Collaborative (healthcollaborative.net)

Mission: To improve the health status of the Bexar County community through collaborative means.

The Health Collaborative began informally in 1997 when the city's major healthcare organizations agreed to put aside their competitive business practices to conduct a comprehensive health needs assessment. The evolution in 2000 to an incorporated entity with a long-range strategic plan is in response to the founding members' interest in improving the health status of the community by working together.

The Health Collaborative has developed into a powerful network of citizens, community organizations and businesses. The result is a more robust, less duplicative, more synergistic approach to solving critical community health needs, while efficiently utilizing resources.

Healthy Neighborhoods Program, San Antonio Metropolitan Health District (www.sanantonio.gov/Health/HealthyLiving/HealthyNeighborhoods)

Mission: Healthy neighborhoods helps residents revitalize their community for better health. We know that involving residents in community decisions benefits everyone. Healthy Neighborhoods wants to hear what our neighbors have to say - understand their concerns, dreams and solutions to help make the neighborhood healthy and secure for our children. We'll help define who and what contributes to a safe and healthy life and lend a hand to improve conditions.

How it Works: One local community health worker, or promotora, works in each of the targeted neighborhoods and identifies community resident leadership within the neighborhood. Resident leadership teams are formed in each neighborhood and trained by a community health worker to co-facilitate community asset mapping. Asset mapping is the participatory process by which residents identify their neighborhood assets, which would include individuals, agencies and physical assets. The community health workers will then assist the residents in co-producing individualized community action plans. Residents that are passionate about healthy eating and active living will be supported with resources from Metro Health to plan and initiate evidence-based childhood obesity prevention strategies at the neighborhood level.

Healthy Start Program, San Antonio Metropolitan Health District (www.sanantonio.gov/Health/HealthServices/HealthyStart#10362306-services)

Mission: San Antonio Healthy Start offers the nation's most vulnerable women and families high quality services and resources for healthy pregnancies and healthy births.

San Antonio Healthy Start services the entire San Antonio community, with in-depth focus to Bexar County areas with the highest infant mortality rates. Health Start provides home visitation services to pregnant

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women until the baby turns two years of age. The program offers: case management, outreach, health education, depression screening and referral.

Madonna Neighborhood Center, Inc. (madonnacentersa.org)

Mission: To serve families struggling with issues of poverty in a culturally responsive environment through comprehensive social services, ensuring the human dignity of all.

The agency was founded in 1939 by the Sisters of Divine Providence as the Girls Club of San Antonio. We are proud to be celebrating over 75 years of service in San Antonio. With the support of generous donors and sponsors over many years, we have been able to grow to meet the increasing needs of our community. The Center offers an Emergency Food Program which provides basic necessities for survival on short term basis. In addition to food this service provides limited amounts of toiletries, as well as assistance with pet food based on availability. This assistance is for families who are self-sufficient but in crisis situations. Our clothing closet is open once a week for our families. Clients in need of clothing may utilize the closet once a month. Madonna Center is also a distribution site for Project HOPE and CSFP (commonly known as the cheesebox), which both provide monthly food commodities to people over 60 years of age. In addition, Madonna Neighborhood Centers is licensed by the Texas Department of Family and Protective Services Child Care Licensing to provide services for children between the ages of 2 months and 12 years. Childcare rates vary according to family income, but are scheduled reasonably to enable low-income parents or guardians to pursue employment or education to promote family self-sufficiency. We are proud of all that we have been able to accomplish in partnership with our community, but our vision is expanding to meet challenges yet to be addressed.

Mayor's Fitness Council (fitcitysa.com)

Mission: To lead San Antonio to be one of the healthiest and most active communities in the nation in which residents, groups and organizations work collaboratively to achieve targeted health and fitness goals.

The Mayor's Fitness Council (MFC) was established in 2010 under Mayor Julian Castro's initiative to bring a new level of awareness to healthy living. The goals of the MFC, consistent with SA2020 goals, are to reduce adult obesity by 10% and reduce childhood obesity by 25% by increasing physical activity and healthy eating. The MFC works to challenge San Antonio residents to increase their physical activity, persists in seeking opportunities to enhance obesity prevention, and improve the health status of the San Antonio work force and student population. Members of the MFC include representatives from local non-profits, businesses, city governments, health systems, schools and universities. The Mayor's Fitness Council is divided into several committees that work together to achieve these goals including Communications, Community, Healthcare, Healthy Schools and San Antonio Business Group on Health (SABGH).

Methodist Healthcare Ministries (mhm.org)

Mission: "Serving Humanity to Honor God" by improving the physical, mental and spiritual health of those least served in the Rio Texas Conference area of The United Methodist Church.

Methodist Healthcare Ministries of South Texas, Inc. is a private, faith-based, not-for-profit organization dedicated to creating access to health care for uninsured and low-income families through direct services, community partnerships and strategic grant-making in 74 counties across South Texas. The Wesley Nurse program spans more than 80 sites throughout South Texas and is Methodist Healthcare Ministries of South Texas, Inc.'s largest geographic outreach program. A key component Wesley Nurses undertake in their communities is providing health education, health promotion and facilitation of resources. While the Wesley Nurse program is a component of Methodist Healthcare Ministries' ecumenical outreach and located within churches, it does not teach a set of denominational beliefs. All Wesley Nurse programs are free, and all members of the community are welcome. Programs are offered to groups or on an individual basis.

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Northwest Vista College / Community Health Worker Program
(<http://alamo.edu/nvc/academics/departments/community-health>)

Mission: Northwest Vista College creates opportunities for success by offering quality academic, technical and life-long learning experiences to its diverse communities in a collaborative, student-centered, data-informed and shared leadership environment.

This program prepares students to work in public health, private health care delivery systems, community-based social service agencies, and health care insurance organizations. Community Health Workers provide services to increase wellness and improve access to health services through outreach activities to target populations. The program will train students to develop positive relationships with individuals who need assistance and support in developing healthy behaviors, utilizing health resources, and gaining educational support to prevent or alleviate the effects of chronic disease. Emphasis is on health education, health promotion, and community outreach. Coursework in this program is intended to develop and enhance the skills of community health advisors, social and human service assistants, and other people interested in working in the field of social work, community health and advocacy.

Population Health Club, UT School of Public Health and South Central Area Health Education Center (<https://sph.uth.edu/campuses/san-antonio> and <http://uthscsa.edu/cstp/areas/SCentral.aspx>)

Mission: Promoting youth leadership in population health through evidence-based methods and practices to address community specific health priorities.

The UT Health School of Public Health in San Antonio (UTSPH) and UT Health San Antonio - South Central Area Health Education Center (AHEC) joined forces to generate a health club, which fosters understanding and interest among area high school students for the many facets of population health. Each summer UTSPH and the South Central AHEC sponsor a Public Health Camp for area high school students designed to engage students through hands-on learning and teach them the skills and knowledge needed for a career in Public Health. A perceived need to keep students informed about public health issues throughout the year was the genesis for the Population Health Club. The club modules are set one Saturday a month for eight months and features speakers from diverse health professions who share their knowledge of various population health topics. The goals of the Population Health Club program include providing students with knowledge and understanding of (1) a population health framework, (2) basic population health concepts and principles, (3) investigation and data collection to identify risk and protective factors, (4) examine best practices to address community specific health priorities, (5) hands-on learning through field-based modules, (6) bridging the various facets of population health and (7) population health-related careers.

San Antonio Food Bank (safoodbank.org)

Mission: To fight hunger in Southwest Texas through food distribution, programs, education, and advocacy.

The San Antonio Food Bank provides food and grocery products to more than 500 partner agencies in 16 counties throughout Southwest Texas. The San Antonio Food Bank cultivates 25 acres spread across three unique agricultural sections at the main facility and an additional 50 acres at the National Park Service's Mission San Juan Capistrano, a World Heritage site. The fruits and vegetables grown on the farms feed the hungry in our community. A small portion of the produce grown is available for purchase at local Farmers Markets operated by the Food Bank as well as and the Food Bank's Mobile Mercado. Currently, the Food Bank serve 58,000 individuals each week through their networks of agencies and programs. In FY2017, the San Antonio Food Bank estimates it will distribute 77 million meals.

South Central AHEC and ReACH (uthscsa.edu/cstp/areas/SCentral.aspx)

Mission: The mission of the South Central AHEC is to improve access to quality health care through facilitation of community-based health professions training programs and initiatives.

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Since 1996, the South Central AHEC has worked with area school districts, college, universities and regional community based partners to increase the capacity of the communities to address the unmet and disparate health needs of their citizens through educational intervention.

The Center for Research to Advance Community Health (ReACH) is multidisciplinary collaboration of researchers and clinicians from three institutions including the University of Texas Health Science Centers at San Antonio, the University Health System in San Antonio, and the University of Texas School of Public Health.

YMCA of Greater San Antonio Healthy Living (ymcasatx.org)

Mission: To put Judeo-Christian principles into practice through programs that build health spirit, mind and body for all.

Strengthening community is our cause! For 141 years, we have been listening and responding to our community's most critical social needs, ensuring that everyone has the chance to learn, grow and thrive, regardless of age, income, ability, ethnicity or faith. We focus on youth development, healthy living, and social responsibility, and incorporate core values of caring, honesty, respect, responsibility, and faith into all we do. At the YMCA we are more than a gym, we are a community with something for everyone in your family. We offer state-of-the-art fitness facilities at 13 locations across San Antonio, Boerne and New Braunfels. Our Healthy Living Programs include YMCA's Diabetes Prevention Program, Y Living Program, Healthy Weight and Your Child, Blood Pressure Self-Monitoring, Livestrong at the Y, Health Matters in connection with ARC of San Antonio and Enhance Fitness (Arthritis Management) and cooking classes. Our youth programs include early childhood education at three San Antonio locations, youth sports, school-age after school programs and summer overnight camp at Camp Flaming Arrow.



Lunch

Academic Learning & Teaching Center (ALTC) Room 304, 12:20-1:00 PM

Lunch is provided for those who registered by the **January 27th** deadline. Boxed lunches will be available at the seats in ALTC Room 304 at 12:20 pm. For those who registered for a vegetarian lunch, you will be handed your boxed lunch before sitting down. For those who did not register in time, you will be asked to wait and any extra lunches will be made available to you after all of the pre-registered attendees receive their lunches.

Enjoy the lunch time to network with the other attendees: students, faculty, staff, and community partners who share similar interests in community service learning.

Poster Session

Holly Auditorium Foyer, 1:00-2:00 PM

Visit with students presenting their Community Service Learning posters while you enjoy dessert. An index of posters and the abstracts are listed on page 19.

Blue Ribbon Award

Note the 3 posters with large blue ribbons on them — they are the Blue Ribbon Winners! These posters were selected by an interprofessional committee who reviewed all submissions and chose the top 3 outstanding abstracts. The 2018 Blue Ribbon Winners are:



Lessons Learned: A Slapdash Sexual Education Intervention for Adolescent Girls at a Secondary Boarding School in Masaka, Uganda

Student Team: Jaclyn Boozalis, Chidimma Amunke-Nze, Katy Kazen, Taylor Russell, Averi White, Travis Bishop, Andrew Maroda, Chase Romere

Faculty Mentor: Jason Rosenfeld, MPH, DrPH(c)

Community Partner: US2Uganda4Life

Safe Space Training Expansion to Enhance LGBTQ Sensitivity Training and Clinical Competency

Student Team: Cassandra Jones, Claude Hardy, Nathaniel Nevitt, Josey Richards, Jelina Castillo, Adaora Ofomata, Brittany Schall, Christopher Smith, Camille Spears, Fadi Al-Asadi, Olivia Thornton, Briette Moser

Faculty Mentor: Peter Guarnero, RN, PhD, MSC

Community Partner: Alamo Area Resource Center

Skin Cancer Screening and Education in Homeless Underserved Populations

Student Team: Yimage Ahmed, Emily Fung, Ko Choi, Anand Kornepati, Leah Bailey, Rahul Patel, Prem Menon, Keri Rowley, Pavela Bambekova

Faculty Mentor: Richard Usatine, MD

Community Partner: Haven for Hope

Judges' Choice Award



During the Poster Session, a panel of Hidden Judges will be speaking to the presenters and one poster will be selected for the Judges' Choice Award. This award comes with a monetary prize. The winner will be announced by email following the conference.

Kleberg Scholars

New to this year's conference is a section of posters by Kleberg Scholars. The Kleberg Scholars program is funded by Robert J. Kleberg, Jr. and Helen C. Kleberg Foundation and creates opportunities for students, residents and fellows to experience working within the community-based clinical settings available through UT Health San Antonio partnerships in South Texas. These are advanced community-based research and clinical projects with CSL attributes.



Presentation Summaries

Opening Remarks

Presented by: Ruth Berggren, MD, MACP



Dr. Ruth Berggren directs the Center for Medical Humanities & Ethics at The University of Texas Health Science Center at San Antonio. In this role, she teaches ethics and professionalism while nurturing empathy and humanitarian values. Dr. Berggren is the Marvin Forland, MD, Distinguished Professor in Medical Ethics, and she holds the James J. Young Chair for Excellence in Medical Education. Dr. Berggren is board-certified in both internal medicine and infectious diseases with significant experience and particular interest in clinical AIDS and viral hepatitis research, as well as in implementing HIV care in resource poor settings.

Keynote: *Dying and Living in the Neighborhood: A Street Level View of America's Healthcare Promise*

Speaker: Prabhjot Singh, MD, PhD

Session Description: Our health and wealth are rooted to the places where we live. Americans are struggling to give their children a good education, take care of their parents and find opportunities for their family to do better. For most Americans, the stress of getting by means that health comes second. By the time we figure out how to stay afloat, someone around us gets sick, which is the leading cause of bankruptcy, while rising costs of care consume any extra earnings we make for our hard work. At the same time, the overall costs of healthcare systems are eating up the taxes we expect to make our schools better, invest in our neighborhoods and give us the support we need to take care of people who depend upon us. Healthcare reform, in both its currents and countercurrents, is breathing new dynamism into systems that are leaving us dying and stranded in our neighborhoods.



Dr. Singh spent the past decade as a healthcare insider and street-level entrepreneur who has looked for pioneers and solutions that are bridging the expensive world of healthcare with the rest of America. In his book, he travels across the country to identify the most promising areas where social movements and economic investment can tip the scales back to supporting Americans as they build a life, rather than just when we're sick and dying.

Dr. Prabhjot Singh is Vice Chairman of Medicine for Population Health and Director of the Arnhold Institute for the Mount Sinai Healthcare System, as well as Special Advisor for Strategy and Design at the Peterson Center for Healthcare. Dr. Singh is the author of *Dying and Living in the Neighborhood: A Street-Level View of America's Healthcare Promise*. In his global work, he is senior advisor and co-founder, with economist Jeffrey Sachs, of the One Million Community Health Worker Campaign across sub-Saharan Africa, which is supported by the African Union and UN Sustainable Development Solutions Network. Domestically, he co-chairs the 100 Million Healthier Lives Campaign, which is hosted by the Institute of Healthcare Improvement and supported by the Robert Wood Johnson Foundation, among others.

Plenary

A City's Focus on Health and Equity

Speaker: Ana Sandoval, MS, MPH



Ana Sandoval is a product of San Antonio's District 7. After graduating as Valedictorian of Thomas Jefferson High School in 1993, Ms. Sandoval went on to obtain a BS from MIT in Chemical Engineering, MS at Stanford University in Civil and Environmental Engineering and a Master's in Public Health from the Harvard School of Public Health. As a Fulbright Scholar in 1997-1998, she also obtained a Diplomado in Binational Business from the ITAM in Mexico City. A former strategic planner for VIA Metropolitan Transit, Ms. Sandoval won election to City Council in District 7 in May 2017.

Workshop A

Training a New Generation of Health Professionals to be Invested in their Communities

Speaker: Adelita G. Cantu, PhD, RN

Session Description: This session will provide attendees with useful and creative strategies that can be used to facilitate learning about social determinants of health within the health professions. We will discuss hands-on ways that students can address environmental and structural barriers to achieving healthy neighborhoods. Innovative curricular and non-curricular examples of what students are accomplishing in their communities will be shared.



Dr. Adelita Cantu is an Associate Professor at UT Health San Antonio School of Nursing. She is a public health nurse focused on primary and secondary health promotion and the initiation and sustainability of healthy behaviors in individuals, families and communities. She serves as a mentor to Health Science Center students engaged in Community Service Learning (CSL) projects in partnership with community-based organizations.

Workshop B

From the Heart: The Work of the Promotor(a): Building Trust to Achieve Health in the Neighborhood

Speakers: Martha Castilla and Carolina González Schlenker, MD, MPH

Session Description: Promotores (also called Community Health Workers) are natural helpers that become engaged in promoting the wellbeing of others. Because of their authentic caring and respect, they gain people's trust. Promotores are great allies for healthcare's compassionate mission. In this interactive session, a model of trust-building called "Nosotros" will be presented. It will show how trust has been harmed or put at risk by unhealthy social conditions; how courage and other virtues are needed in order to repair and protect trust; and how this practice can make it possible to believe in justice and strive for peace in our neighborhoods.

(Continued on next page.)

Workshop B (continued)***From the Heart: The Work of the Promotor(a):
Building Trust to Achieve Health in the Neighborhood***

Martha Castilla is a grassroots promotora who has dedicated her life to serving the Edgewood community in San Antonio, Texas. After working in the medical field, she became a leader and trainer of promotores/community health workers in San Antonio, taking different roles to bring the voice of her community to different institutional and policy forums. Ms. Castilla believes it is important to build health on the strengths, gifts and experiences of families and has emphasized the heart-driven nature of promotores' work. She currently works at the Madonna Neighborhood Center.

Dr. Carolina González Schlenker is a physician, master in public health and a fellow on health disparities that has dedicated her life to operationalize the teachings received by Mayan promotores during her medical work in Mexico. With contributions of many others and from transdisciplinary evidence, she has summarized promotores' practice of trust-building into an actionable model based on relational and virtue ethics. She currently works with promotores at UT Health San Antonio's Department of Family and Community Medicine.

**Workshop C*****Community Based Participatory Research (CBPR)
and the Practice of Hope in Nicaragua:
Using the CBPR Model to Take Action to Reduce Health Inequities*****Speaker: Laura Chanchien Parajón, MD, MPH**

Session Description: In this interactive workshop, Dr. Laura Parajón will share her experience in Nicaragua using the CBPR Model framework¹ as a tool for facilitating community empowerment. Participants will also have the opportunity to learn how to use the CBPR Model Framework as a logic model to show connections between their partnering and community engagement practices and their goals to better serve communities and improve inequities in health, education and community development. The model can also serve as a tool for program planning and evaluation, community initiatives and other efforts directed at social change.



Dr. Laura Parajón is the Medical Director and co-founder of the non-profit organization, AMOS Health and Hope (amoshealth.org). Based in Nicaragua, AMOS is dedicated to using community-based and empowering approaches to reduce health disparities in Nicaragua. Trained in family medicine and public health, she is a teacher at heart who is passionate about applying Community-based Participatory Research (CBPR) frameworks in global health using transformative CBPR principles and practice to develop future leaders - health professionals, students and community health workers (CHWs) - to work toward "health for all." With a collaborative team, AMOS supports and trains a network of CHWs in difficult-to-reach areas of Nicaragua to provide basic medical care, disease prevention and health promotion to their communities, as well as organize to address social determinants of health and advocate for social and policy change.

¹ CBPR Definition: "Collaborative efforts between multi-sector stakeholders who gather and use research and data to build on the strengths and priorities of the community in order to co-develop multi-level strategies to improve health and social equity." *Wallerstein, Duran, Oetzel, Minkler (in press, 2017)*

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*Blue Ribbon Winner

Capacity Building

Fitness in the Park: Community Awareness

Project Discipline: Medicine

Primary Presenter: Julia Kirsten

Other Student Team Members: Lindsay Euers

Name of Mentor: Amanda Merck, MPH

Community Partner: Fitness in the Park (San Antonio Parks & Recreation)

Project Location: San Antonio, Texas

Background: Fitness in the Park is a San Antonio program that offers free exercise classes in city parks and community centers year-round. Many people who would benefit the most from these classes (i.e. people who can't afford a gym) don't seem to be utilizing this program as much as others.

Objectives: We sought to conduct surveys across San Antonio to better determine awareness and use of these exercise classes. We hoped this data would help the Fitness in the Park Program Manager and the Mayor's Fitness Council directly target certain areas under-utilizing the program.

Methods: We surveyed San Antonio residents aged 18 years and older at four locations across the city. We asked the following questions: (1) Have you heard about Fitness in the Park? (2) If you have, have you attended a class? (3) Do you currently exercise at least 30 minutes a day? (4) If you don't, what's the biggest barrier preventing you from doing so? (5) How could a health care provider help you to exercise more? Districts in which each person resided were collected and represented in graph form.

Results: Out of 120 respondents surveyed, 32 (27%) had heard of the Fitness in the Park program while 88 (73%) had not heard of the program. Out of the 32 respondents that were familiar with the program, only three (9%) had attended a class in the past month. The biggest barriers to fitness in the population sampled was time (n=36) and issues regarding childcare/caring for family members (n=21).

Conclusion: Many San Antonio residents are unaware of Fitness in the Park's free fitness classes. Health professionals should familiarize themselves with Fitness in the Park and other free community services that could greatly benefit the health of San Antonians.

Capacity Building

Implementing Lean Six Sigma Methodology to Increase Clinic Performance

Project Discipline: Medicine

Primary Presenter: Pavela Bambekova

Other Student Team Members: Chirag Buch

Mentor: John Browning, MD

Community Partner: Travis Park Dermatology Clinic

Project Location: San Antonio, Texas

Background: Travis Park (TP) Dermatology Clinic is a student-run clinic that takes place bimonthly in a downtown church in San Antonio, Texas. Since its creation in 2009, TP welcomes patients of all ages, socioeconomic levels, and dermatologic concerns. During clinic, patients are seen by students and physicians. When students arrive, the student coordinator trains them to interview patients and perform physical exams while waiting for a physician to arrive to call patients into the exam rooms. This process had potential for improvement to align the demand for dermatological care with the access of care offered at TP.

Objectives: By first quarter of 2017, TP would have a framework for training volunteers and reduce non-value added time. By second quarter of 2017, TP would implement a 5S workplace organization technique in the supplies room. By the end of 2017, TP would deliver care to 5% more patients than in 2016.

Methods: Starting 2017, the following interventions were put in place: training student volunteers in small groups as soon as students walked into the clinic; dedicating time outside of clinic to implement a 5S technique; and conducting patient interviews prior to doctors' arrival.

Results: TP saw an increase in the number of patients. A total of 415 patients were seen between January 1 and December 31, 2016 compared to 460 patients seen between January 1 and December 31, 2017. This is a 10.84% increase.

Conclusion: Implementing these interventions is sustainable, and if all else equal, TP can accommodate 450 new patients in the next ten years. Furthermore, clinic time was shorter in 2017 than in 2016 by an average of 30 minutes per clinic. This intervention can serve as a model for other community clinics that face increasing demands for patient care but are limited to a confined clinic time.

Capacity Building

Photovoice Project Highlights Nutritional Needs in the Community of Xecam, Guatemala

Project Discipline: Medicine

Primary Presenter: Madeline Flores

Other Student Team Members: Natasha Mitra, Matthew Cochran, Will Manning, Madeleine Puig

Mentor: Jason Rosenfeld, MPH, DrPH(c)

Community Partner: Puesto de Salud, Xecam

Project Location: Xecam, Guatemala

Background: National data provided by USAID reveals that 13% of Guatemalan children are underweight and 50% of children less than 5 years old are affected by stunting. Local community health leaders from Quetzaltenango, Guatemala self-identified nutrition, and particularly childhood nutrition, as a primary area of public health concern for this region.

Objectives: Our team of five medical students from UT Health San Antonio sought to use Photovoice explore nutrition in the community of Xecam, 15 km on the outskirts of Quetzaltenango.

Methods: Photovoice is a participatory community based research design centered on communication and advocacy through the use of photography. Seven Guatemalan women were given cameras and asked to convey nutrition. Selected by local nurse Maria Josefina Garcia Velasquez, each woman had one week to take photographs. They returned to share the significance of each selected photo followed by a town discussion with the town mayor, community leaders to discuss the nutritional status in their community.

Results: Our discussion determined childhood nutrition in Xecam, Guatemala, was impacted by these factors:

- Hygiene in the home, particularly in the kitchen and around food preparation
- Hygiene among family members around meal time
- Lack of knowledge and awareness of age-appropriate food preparation for infants
- The quality of water used to cook foods, clean foods, and clean utensils

Conclusion:

Benefits of Photovoice for community engagement:

- Served to empower community members by giving each participant an equal voice
- Encouraged each member to actively and introspectively evaluate their own nutritional health status
- Allows for future public health initiatives in the area to create missions in line with community needs

Ways to improve nutrition in Xecam, Guatemala:

- Teach community leaders a sanitation program
- Encourage the Community Council to teach courses on healthy foods for community members

Capacity Building

ScribeMD: Analysis of an Intra-class Pen Pal Program in Undergraduate Medical Education

Project Discipline: Medicine

Primary Presenter: Garrett Kneese

Other Student Team Members: Shelby Barrera, Jelina Castillo, Matthew Garcia, Alex Ryden, Juan Vargas, Averi White

Mentor: Jeff Jackson, EdD

Community Partner: UTHSA Office of Undergraduate Medical Education

Project Location: San Antonio, Texas

Background: ScribeMD is student-run, student-centered anonymous pen-pal program designed to promote professional identity formation(PIF), emotional intelligence development(EID), narrative competency improvement(NCI) in the medical student community. These areas have been identified as crucial to the development of competent, humanistic physicians and are considered generally underserved in traditional medical education. The ScribeMD Pen Pal Program seeks to create a reflective, connective, and developmental experience that will improve outcomes in the aforementioned areas by giving students a safe and anonymous way to discuss sensitive subjects with their fellow classmates.

Objectives: The study sought to evaluate the efficacy of ScribeMD in improving PIF, EID, and NEI outcomes among first and second-year medical students at the Long School of Medicine.

Methods: Participants completed a Pre and Post-Survey to provide data, while control data was gathered from students who did not enroll in the program. We paired participants intra-class using anonymous aliases and gave specific prompts on a 2-week writing cycle, with each participant writing a letter in this time period. Prompts are specifically engineered to meet PIF, EID, and NCI objectives. Survey questions fell into one of 7 categories that were then mapped onto the three aforementioned objectives.

Results: Survey results demonstrated an overall improvement among members in 6/7 of the categories measured when comparing the Pre- and Post-surveys. Survey results demonstrated higher scores among post-survey members compared to controls in 6/7 categories.

Conclusion: ScribeMD was effective in improving PIF, EID and NEI among medical students at Long School of Medicine. We hope to use this data as support for expanding the program and furthering the growth of upcoming physicians.

Capacity Building

Team Kisoboka Uganda, "It is Possible": A Guide to Approaching Nodding Syndrome in Uganda's Northern Region

Project Discipline: Medicine

Primary Presenter: Averi White

Other Student Team Members: Chidimma Amuneke Nze, Travis Bishop, Jaclyn Boozalis, Katy Kazen, Andrew Maroda, Chase Romere, Taylor Russell, Dannel Orech

Mentor: Nurani Kester, MD

Community Partners: Omoro District Health Office and WEND Africa

Project Location: Gulu, Uganda and San Antonio, Texas

Background: Nodding Syndrome is an elusive epileptic encephalopathy characterized by involuntary head nodding, seizures, and progressive neurological defects. Currently, the condition's etiology is unknown, but it is predominant in children and isolated to Uganda, Sudan and Tanzania. This summer, our global health team, Kisoboka Uganda, witnessed the devastating effects of Nodding Syndrome among children in Uganda's Northern region.

Objectives: To identify and quantify common challenges among patients with Nodding Syndrome in Uganda's Northern Region. There is currently no literature on this topic.

Methods: Under the guidance of leaders from the Omoro District Health Office, we made home visits to six families over the course of two weeks. We asked each family four questions: (1) When was your child diagnosed with Nodding Syndrome? (2) How has your child's diagnosis impacted the dynamic of your family? (3) Has your child's health improved, diminished, or remained the same since leaving Hope for HumanS Rehabilitation Center? (4) What are your family's biggest obstacles in maintaining your child's health?

Results: We identified the following common challenges among patients: malnutrition, open wounds, lack of clothing, difficulty obtaining medication and decline in symptom control since returning from the center.

Conclusion: We recommend three areas of focus: (1) Nutrition - proper caloric supplementation is critical in preventing seizures; yet supplements such as Plumpy'Nut are scarce in Uganda. We recommend manufacturing a similar supplement in-country. (2) Wound care - patients with Nodding Syndrome frequently fall into fires, occasionally leading to infection and limb/digit loss. We recommend educating caregivers in proper wound care to prevent infection. (3) Medication distribution - many families must travel long distances to obtain their child's epilepsy medication. We recommend implementation of a formal distribution system for medication. We look forward to presenting these recommendations to district leaders upon our return to Uganda.

Capacity Building

The Interprofessional Education Collaboration Perspectives at the San Antonio Refugee Health Clinic

Project Disciplines: Dental, Medicine, Nursing

Primary Presenter: Prem Menon

Other Student Team Members: Jenna Bednarz, Aliaskandr Dolbik, Christina Tyson, Michael Tcheyan, Kristina Arciniega, Jiye Moon, McKenzie Sorensen, Parisa Samadi, Browning S. Wayman, Ruth Grubestic, Moshtagh R. Farokhi

Mentor: Moshtagh Farokhi, DDS MPH

Community Partner: San Antonio Refugee Health Clinic

Project Location: San Antonio, Texas

Background: San Antonio Refugee Health Clinic (SARHC) is a faculty-student collaborative clinic managed by teams of dental, medical and nursing students and faculty from UT Health San Antonio (UTHSA). Research shows that students exposed to interprofessional education (IPE) practices during training tend to work more respectfully during post graduation practice. Previous needs assessment at SARHC highlighted the inquiry to assess interprofessional teamwork.

Objectives: The purpose of this research is to evaluate levels of IPE student engagement. We hypothesize that UTHSA students with exposure to IPE will experience a higher satisfaction rate because the teamwork exposure at SARHC.

Methods: Knowledge and attitudes towards IPE was attained via a validated, Interprofessional Collaborative Competency Attainment (ICCAS) survey tool. The ICCAS was offered to newly active UTHSA students attending the SARHC as pre and post clinic experience questionnaires. After informed consent, students took the ICCAS via a link sent to their smart phones with the QR Code. The pre-questionnaire assessed existing student attitudes regarding communication, collaboration, roles/ responsibilities and team functioning. Following student's IPE exposure at SARHC a post ICCAS questionnaire was administered vial email. The data design and management were formatted in Qualtrics. SPSS was utilized to analyze the data.

Results: Twenty-seven students inclusive of 8 medical, 8 nursing and 11 dental participated. Student satisfaction regarding interprofessional collaborative training for average category scores increased from Pre to Post surveys and for each category. Communication ($p < 0.031$, roles and responsibilities ($p < 0.041$ and conflict management/resolution ($p < 0.035$) categories were the most significant.

Conclusion: When stratifying by groups (nursing, dental, medical), nursing students exhibited the most change from Pre to Post surveys, most notably in the collaboration category ($p < 0.031$). Results indicated that participant students benefited from the improved communication, roles/responsibilities and conflict management/resolution, which IPE fosters. Differences between pre and post data were significant, implying that the engagement at SARHC played a role.

Clinical Service

#Rockport Strong

Project Disciplines: Medicine, Nursing

Primary Presenter: Prem Menon

Other Student Team Members: Natasha Bakunda, RN; Beverly Gail Hutzler, RN, OCN; Allison Stepanenko, BA,RN; Stephanie Lopez, RN

Mentor: Wendy Lee, DNP, RN, FNP-BC; Cindy Sickora, DNP, RN; Tracey Smith Page, DNP, RN, FNP-BC

Community Partner: Rockport Strong Mobile Medical Unit

Project Location: Rockport, Texas

Background: On August 25, 2017, Hurricane Harvey resulted in 40-61 inches of rainfall with wind gusts over 150 mph in Rockport, Texas (*The Weather Channel, 2017*). Prior to Hurricane Harvey, many Rockport residents were uninsured, disabled or living in poverty. Hurricane Harvey left the community devastated and in need of nursing interventions. Paul Simon, Edie Brikell and the Children's Health Fund of New York provided monetary support for UT Health San Antonio to deliver health care services. Rockport Strong Mobile Medical Unit consisted of a RV, 6-10 chairs outside under a tent in a condemned grocery store parking lot located near a FEMA Assistance Center.

Objectives: Apply community health assessment skills acquired in the classroom setting to an active grass-roots movement to provide post-disaster nursing care. Provide nursing interventions focused on primary, secondary and tertiary health promotion and illness prevention at a mobile medical unit.

Methods: Nursing students and faculty documented health assessments and disease screenings on the displaced individuals. Provided and documented primary prevention of illness by administering influenza, hepatitis A, and Tdap vaccinations. Educated on secondary prevention topics such as sexually transmitted, smoking cessation and annual gynecological screenings. Tertiary interventions provided by advanced practice nurses included prescriptions and treatment of acute and chronic illnesses.

Results: Representative sample of intervention is reflected in data collected on November 1, 2017. Nursing care and interventions provided to 30 patients based on evidenced based peer reviewed literature.

Conclusion: Valuable lessons learned from this experience about the needs of a community post-disaster were demonstrated in the nursing care, education, vaccinations and prescriptions provided. The primary target of this vulnerable population was to rebuild and support one another. It became evident to our team that many of the people we served were so focused on helping others they often neglected their own health needs.

Clinical Service

An Assessment of the Patient Experience at Travis Park Dermatology Clinic

Project Discipline: Medicine

Primary Presenter: Kavina Patel

Other Student Team Members: Farhan Ahmad, Shawna Mattathil, Ryan Luna

Mentor: John Browning, MD

Community Partner: Travis Park Dermatology Clinic

Project Location: San Antonio, Texas

Background: Travis Park Dermatology Clinic (TPDC) is a student-faculty collaborative practice clinic that provides dermatologic aid to lower socioeconomic status and disadvantaged individuals living in the San Antonio area.

Objectives: The project goal is to understand and address areas of improvement for the patient experience, ranging from the waiting room environment to health literacy to the doctor-patient relationship — all of which had not previously been assessed.

Methods: After seeing the attending physician, patients completed a needs assessment survey. This bilingual survey comprised Likert 5-point scale questions regarding the clinic's atmosphere, health literacy, and knowledge of disease prevention. Staff members were also interviewed about their opinion of the health literacy needs of the clinic.

Results: 15 patients completed the needs-assessment survey. Overall, the patients reported satisfaction regarding clinic set-up and flow, with no area receiving less than 80% satisfaction. The highest area of concern was long wait times to see the doctor, with this area receiving an average score of 4.4/5. The next areas were knowledge of how to prevent conditions and the waiting room environment, both receiving 4.53/5.

Conclusion: Based on the needs of the patients, we will create a patient-centered bilingual document that includes questions to ask the doctor and helpful links to web-based information and local community resources. The plain language document will be graphically designed and serve as a resource for patients to gain information about their condition and seek means of prevention after the visit, thereby increasing patients' health literacy. Second, we will create a guide for the clinic's student volunteers on how to create a welcoming environment before, during, and after the patient encounter. This will be sent to volunteers before their shift to increase awareness of health literacy needs at the clinic. The guide will also be available on studentrunclinics.org where the clinic sign-up is located.

Clinical Service

Describing the Patient Population of Pride Community Clinic

Project Disciplines: Medicine, Nursing

Primary Presenter: Claude Harvey

Other Student Team Members: Cassandra Jones, Briette Moser, Christopher Smith, Camille Spears, Fadi Al- Asadi, Olivia Thornton, Nathan Nevitt, Adaora Ofomata, Josey Richards, Brittany Schall

Mentor: Sean Garcia, MD

Community Partner: Alamo Area Resource Center

Project Location: San Antonio, Texas

Background: The Pride Community Clinic came into being after a needs assessment conducted within the San Antonio LGBT community, demonstrated a high lack of insurance, high rates of alcohol use, low rates of HIV testing, as well as feelings of distrust towards healthcare professionals. Most respondents preferred to receive care from an LGBT-friendly provider. Due to these results, the clinic received the green light to begin operations September 2017.

Objectives: Our main objectives were to document patient demographics and chief complaints and to educate patients about HIV and STI risk factors, screen for mental health and substance abuse, and offer PrEP or HRT if warranted.

Methods: Data collection took place using paper forms and RedCap as our data storage tool. Information was collected during initial intake process and after verbal consent. Screening for mental health and substance abuse occurred via PHQ-9 and CAGE questionnaires respectively.

Results: 16 patients were seen between September 2017 and January 2018. All patients were Transgender. 50% reported less than a \$12,000 personal income. 50% made between \$12,000 and \$24,000. 90% had no primary care provider. The majority were uninsured (72.2%) while 27.8% had insurance. The chief reason for visiting the clinic for all patients was to receive HRT.

The PCC has experienced a high demand for appointments months in advance. Due to the lack of HRT providers in San Antonio, virtually all interest was for HRT; all patients have been transgender. Other services like PrEP and STI testing are less popular.

Conclusion: Our population is mostly under the poverty line and uninsured. All patients were screened for substance abuse and mental health issues and subsequently interviewed based on the decision of our mental health counselor. Based on conversations with community partners, San Antonio will soon get access to HRT on a sliding scale basis, allowing the clinic to diversify its services.

Clinical Service

Determining the Frequency of Medications Distributed and Chief Complaints Reported to Better Serve Populations in Guatemala

Project Discipline: Medicine

Primary Presenter: Keerthana Pakanati

Other Student Team Members: Callie Marshall, Amanda Wedelich, Miren Pena,
Robert Travis

Mentor: Mark Nadeau, MD

Community Partner: Iglesia Episcopal de Guatemala Anglicana

Project Location: Quetzaltenango, Guatemala

Background: Our team of medical students from UT Health San Antonio traveled to Quetzaltenango, Guatemala to provide medical care for underserved patient populations in the area.

Objectives: We collected intake forms from each patient and compiled data about the most frequent chief complaints and medications prescribed in an effort to better prepare future groups of students traveling to the area in access to care or no access to care populations.

Methods: We analyzed three patient populations which we categorized as having either access to care or no access to care. The first patient population consisted of thirty-nine patients at a pre-existing clinic in the Cantel region. The second population consisted of twenty-three church members of La Iglesia Episcopal who had regular access to urban clinics. We were informed by our local coordinator that the final patient population of approximately sixty women had not received any medical care since our trip the previous year. Therefore, we categorized this population as having no access.

Results: The most frequently-prescribed medications were NSAIDs, correlating with the most common chief complaints including muscle and joint pain, headache, and menstrual pain. In addition to taking a well-stocked inventory of NSAIDs, future global health programs can better serve these patient populations by coming prepared with antibiotics, fungal creams, corticosteroids and heartburn medications, in addition to diabetes medications, antihypertensive medications and reading glasses for patients with chronic conditions.

Conclusion: Our data can serve as a template for future global health trips traveling to Quetzaltenango. Many patients classified as access to care had been previously diagnosed with chronic conditions and presented to our clinic because they could not afford their medications, suggesting that cost may be a larger barrier than access to medical care in this population seeking treatment.

Clinical Service

Evolving Health Needs in Rural Panamanian Communities

Project Discipline: Medicine

Primary Presenter: Emily Henkel

Other Student Team Members: Pavela Bambekova, Chirag Buch, Raul Membreno, Alejandra Morfin

Mentor: Richard Usatine, MD

Community Partner: San Francisco Javier Hospital

Project Location: Cañazas, Panama

Background: This project focused on continuing data collection from the previous year to assess the pattern of infection and disease in three rural villages in Panama with limited access to healthcare.

Objectives: In addition to data collection, this project aims to evaluate the impact of previous student global health trips to the rural communities students visit.

Methods: The team traveled to Cañazas, Cerro de Plata and Los Valles to host a health clinic and recorded every patient encounter, concentrating on chief complaints and diagnoses. Because the clinics were close to schools, most of the patients were children and adolescents under the age of 16.

Results: In accordance with the findings from the year before, skin conditions comprised the majority of all complaints and diagnoses. There was a statistically significant decrease in the number of scabies cases encountered in 2017 compared to 2016 ($p < 0.001$). Just as the cases of scabies decreased, pediculosis capitis infections (lice) and dandruff increased from zero cases in 2016 to 31% of all patient diagnoses in 2017. Benign skin conditions were the most common diagnoses (41%) and included staphylococcal skin infections (impetigo), atopic dermatitis, hyperhidrosis, keratosis, and lichen simplex chronicus among others.

Conclusion: Previous global health trip interventions likely decreased the prevalence of scabies in the community and the Panamanian communities would benefit from increased education regarding prevention of lice transmission and increased access to medical care and clean water.

Clinical Service

Improving Health Literacy Through Pharmacy Labeling in the Bateyes of the Dominican Republic

Project Discipline: Medicine

Primary Presenter: Amanda Cruz

Other Student Team Members: Codey Pham, Josh Walther

Mentor: Jason Rosenfeld, MPH, DrPH(c)

Community Partner: Hospital El Buen Samaritano

Project Location: La Romana, Dominican Republic

Background: Project Hispaniola is a group from UTHSA that has been collaborating with Hospital El Buen Samaritano in La Romana, DR since 2014 with the goal of providing primary care services to laborers and families living in agricultural sugarcane communities called Bateyes. Our teams have identified a problem concerning medication instructions. Instructions are written in Spanish, but many individuals are illiterate and/or only speak Creole. In 2017, the Project Hispaniola team tested the efficacy of using pictograms to represent prescription instructions in an effort to improve health literacy and streamline pharmacy labeling.

Objectives: The objective was to gauge the understanding and the receptiveness of the participant to images shown pertaining to medication instructions. This was done by measuring which images were selected most for each instruction and by how many participants understood the meaning of the picture.

Methods: Using published peer-reviewed studies and a database created by the International Pharmaceutical Federation, we created a list of common instructions and an associated bank of pictograms. A sample of 80 people, both Spanish and Creole-speaking, from several Bateyes were invited to complete a 20-minute survey. Participants were asked to pick which of the presented pictograms helped them understand each specific pharmacy instruction.

Results: For the majority of pharmacy instructions, participants chose one pictogram as most helpful in conveying the desired instruction. In some cases, the presented pictograms were not helpful in conveying the instruction.

Conclusion: Challenges included limited sample size and language barriers. We believe that pictograms can be useful in improving health literacy in this population. These results will be presented to El Buen Samaritano and images will be improved through future surveys. The long-term goal is to create a standard set of pictograms that can be used by all the groups that provide primary care services to these Bateyes.

Clinical Service

Port Aransas Community Outreach

Project Discipline: Nursing

Primary Presenter: Natasha Bakunda

Other Student Team Members: Natasha Bakunda, RN; B. Gail Hutzler, RN, OCN; Allison Stepanenko, BA, RN; Stephanie Lopez, RN

Mentor: Cindy Sickora, DNP, RN

Community Partner: UT Health San Antonio, School of Nursing

Project Location: Port Aransas, Texas

Background: Hurricane Harvey, the costliest hurricane, to make landfall in the USA, devastated the town of Port Aransas. Its 130 mph winds and lashing torrential rains brought the seaside community to its knees. A majority of homes and business were destroyed or sustained significant damage. Within hours, residents of "Port A" were left homeless, with no access to the mainland, no internet or phone service, no running water, no electricity and a dawn-to-dusk curfew. In the immediate aftermath, non-residents were cut off from the island and unable to provide relief services to this community.

Objectives: Our objective was to provide nursing services that promoted health and prevented illness while restoring normalcy. Financial support and guidance from the Children's Health Fund of New York and folk music icons Paul Simon, and Edie Brickell, was foundational to the success of this initiative.

Methods: Key informant interviews and repeat community assessments revealed a need for immunizations (Tdap, influenza, and hepatitis A), primary health care, and health education. These interventions are evidence based and present in current health care literature. A team of nursing faculty and students representing the School of Nursing at UT Health in San Antonio collaborated with the district nurse at Port Aransas ISD to meet these needs.

Results: On December 12, 2017, more than 24 families and school district employees were vaccinated. In addition, we provided primary interventions including education, provision of supplies for dental care and first aid. Health education included the prevention of mosquito borne illnesses. The provision of condoms and related education was explicitly declined by the school district nurse.

Conclusion: Four months after the Hurricane, Port A is still in recovery. More than 11,000 people remain displaced. This immunization event was successful, however it is evident that this community remains in need of additional health services.

Clinical Service

Skin Cancer Screening and Education in Homeless Underserved Populations*

Project Discipline: Medicine

Primary Presenter: Yimage Ahmed

Other Student Team Members: Emily Fung, Ko Choi, Anand Kornepati, Leah Bailey, Rahul Patel, Prem Menon, Keri Rowley, Pavela Bambeklova

Mentor: Richard Usatine, MD

Community Partner: Haven for Hope

Project Location: San Antonio, Texas

Background: Homeless individuals make up a significant portion of the medically underserved population in San Antonio, TX. Healthcare professionals recognize homeless people have higher risk for skin cancer because of chronic sun exposure, limited knowledge about skin cancer prevention, and significant barriers to medical assistance.

Objectives: The purpose of this study was to screen the homeless population at Haven for Hope (H4H) shelter for skin cancer and connect affected patients with appropriate care at the H4H student-run free clinic. Another objective was to educate H4H residents about proper skin care.

Methods: The study was conducted at H4H, the largest homeless shelter in San Antonio. Medical students were trained by a dermatologist to identify potentially dangerous skin lesions. A standardized pre-survey was administered to the homeless population prior to their screening to gauge the level of understanding homeless individuals have about skin cancer. A standardized post-survey was given to determine the effectiveness of the educational session (pamphlets, verbal communication) provided. Those that were determined to have potential skin cancer lesions were referred to the H4H Clinic. Screened individuals were given hats, sunscreen, and sunglasses for skin cancer prevention.

Results: To date, a total of 128 homeless individuals have been screened. 17/128 were referred to H4H Clinic for a suspicious skin lesion. 2/17 patients had skin lesions that required biopsy. Both biopsies came back negative for melanoma. All patients demonstrated an increase in their awareness and knowledge about skin care and skin cancer, reflected by the post-surveys.

Conclusion: The implementation of skin cancer screenings at student-run free clinics and homeless shelters directly addresses health disparities affecting homeless populations. This project reflects the prevalence of skin cancer at H4H in San Antonio while providing a potential model for student-run free clinics to connect individuals with proper care and prevention education.

*Blue Ribbon Winner

Education

Breast and Colorectal Cancer Screening Among South Texas Asian Americans

Project Disciplines: Medicine, Nursing

Primary Presenter: Maggie Zhang

Other Student Team Members: Seulgi Kim, Aileen Hsi, Joy Tsai, Codey Pham, Richard Tran, Bryan Ralloma

Mentor: M. Danet Lapiz-Bluhm, PhD, RN

Community Partner: Aguman Capampangan of San Antonio (ACOSA)

Project Location: Schertz, Texas

Background: Cancer screenings are associated with early cancer detection and better prognosis. Among minority populations, including Asian Pacific Americans (APA), screening rates for breast and colorectal cancer have declined while incidence has increased. The Aguman Capampangan of San Antonio (ACOSA) hosts an annual Filipino Fiesta that draws APA and other minority populations around South Texas. Our team of healthcare professional students surveyed and provided education to attendees of the Fiesta.

Objectives: To gain an understanding of the views and accessibility to breast and colorectal cancer screening among APA and minority populations, and to test the efficacy of an educational infographic aimed at improving cancer screening knowledge and encourage proactive, preventative health behaviors.

Methods: These objectives were evaluated using a pre- and post-educational material survey and quantified using a Likert scale system. Participants (N=23) initially completed a survey on their knowledge and access to breast and colorectal cancer screenings, followed by an education session using infographics depicting current American Cancer Society guidelines to screening and the benefits of breast and colorectal cancer screening. Participants then completed a post-survey following the education session. Data were then analyzed.

Results: The majority of our population were female (73.91%), Asian American (73.91%), and married (47.83%). Our preliminary data suggests greater understanding of both breast and colorectal cancer screening methods following the educational session with an increase in average scores of 10% for breast cancer and 13% for colorectal cancer. There was a 37% increase in general colorectal cancer knowledge and a 7% increase in general breast cancer knowledge following the educational session.

Conclusion: Preliminary data indicates a trend in improvement of knowledge scores about breast and colorectal cancer and health screening. Future community outreach activities are planned to increase the sample size in order to improve screening rates among Asian Pacific Americans in South Texas.

Education

Community Health Club in a High School Setting

Project Disciplines: Medicine, Public Health

Primary Presenter: Jaclyn Boozalis

Other Student Team Members: Amanda Wedelich, Gwendolyn Hardy, Maci Chapman

Mentor: Jason Rosenfeld, MPH, DrPH(c)

Community Partners: Harlandale High School

Project Location: San Antonio, Texas

Background: The first School Health Club (SHC) in the United States, modeled after the internationally recognized Community Healthy Club (CHC), was established in fall 2017. This pilot program was launched in response to a request made by one member of the Alpha Wellness CHC, the first CHC established in the United States at Santa Fe Episcopal Church in the Columbia Heights neighborhood. SHCs are extracurricular, health-promotion organizations that aim to improve health through engaging educational activities, supportive peer networks and health behavior modification.

Objectives: The Zika curriculum from the Alpha Wellness CHC was adapted for high school students in order to increase Zika awareness and inspire students to take action, with the aim of reducing the risk of transmission. While Zika was used as an introductory curriculum, the goal is to encourage members to continue the club by focusing on health issues and topics specific to their interests.

Methods: Students were recruited during health track classes at Harlandale High School. The Zika curriculum provided an overview of mosquito-borne disease, and Zika history, transmission, and prevention. Trained medical student facilitators implemented the curriculum during ten one-hour sessions on campus. Data collection involved pre- and post-surveys to assess Zika knowledge and reflections from club members.

Results: Pre-surveys were taken by eight students. All students were aware of Zika virus and transmission via mosquitoes, but only 12.50% and 25% knew about sexual and vertical transmission, respectively. Post-surveys will be analyzed and compared to pre-intervention results. Qualitative analysis of challenges and successes from the students' and facilitators' viewpoints will be used to improve the program.

Conclusion: Implementing an SHC has not been without its challenges. However, through our experience working with the students, we have learned how to better tailor the curriculum to address topics more relevant to the students' interests.

Education

Don't Sugarcoat Diabetes (DSD): An Interactive Program for South Texas High School Students

Project Discipline: Medicine

Primary Presenter: Christopher Ching

Other Student Team Members: Matthew Deng, Prem Menon

Mentor: M. Danet Lapiz-Bluhm, PhD, RN

Community Partner: UT Health San Antonio's Office of Recruitment and Science Outreach

Project Location: San Antonio, Texas

Background: Diabetes, which has a high prevalence in South Texas, is a preventable condition associated with significant morbidity and mortality. The 2017 National Diabetes Statistics Report indicates that more people are developing diabetes during their youth, with associated increased rates among racial and ethnic minorities. The DSD project provided high school students in South Texas an education program on diabetes and its risk reduction through interactive simulations and informative presentations.

Objectives: The aim of the DSD program is to increase knowledge about diabetes and diabetes risk reduction among high school students in order to improve their confidence to advocate for healthy lifestyles among their peers and families. It also provides an avenue for healthcare professional students to improve their confidence in providing health education to high school students.

Methods: Students (N=251) participated in the DSD program from September to November 2017. Students were assessed pre and post program for their self-confidence about their knowledge of diabetes and their actual knowledge, with planned follow-up survey at one month. Volunteers who provided the DSD training completed a pre- and post-survey on their confidence in working with the adolescent population. The data was analyzed using the Kruskal-Wallis Test, with Dunn's D5s multiple comparison test as post-hoc.

Results: The students demonstrated increased knowledge about diabetes and diabetes risk reduction (mean pre=4.28 vs post=5.94, $p<0.0001$). They showed increased confidence in diabetes knowledge, diabetes risk reduction, and ability to share diabetes knowledge (mean pre=3.39 vs post=4.65, $p<0.0001$). One-month follow-up and volunteer data are in the process of being collected.

Conclusion: The program was effective in significantly improving the students' knowledge and confidence about diabetes. Challenges include increasing in actual sharing of diabetes information beyond immediate family. Ultimately, incorporating DSD into high school curriculums may help younger populations to engage in the battle to combat obesity and diabetes.

Education

Educating Adolescents of Laredo on Bullying and Peer Pressure

Project Discipline: Medicine

Primary Presenter: John Sladic

Other Student Team Members: Nimi Bhattatiry

Mentor: Glen Medellin, MD

Community Partner: Mercy Ministries of Laredo

Project Location: Laredo, Texas

Background: Mercy Ministries of Laredo Clinic hosted a health fair on October 28, 2017, and they invited students from UT Health San Antonio to provide adult health screenings and nutritional counseling. Our community partners feel that many youths in Laredo do not always have good role models and allowed us to give an interactive presentation on bullying/peer pressure to adolescents before conducting sports physicals.

Objectives: 50% of teenagers receiving our presentation on bullying and peer pressure will demonstrate a significant improvement on their post knowledge survey assessing how bullying can lead to deterioration of mental health and in their peers. 50% of teenagers receiving our presentation on bullying and peer pressure will demonstrate a significant improvement on their self-efficacy survey assessing their likeliness to intervene if they witness bullying.

Methods: Student volunteers were given jobs as screeners (measuring BMI, blood pressure, lipid levels and blood glucose levels), health counselors or performing sports physicals. A bullying/peer pressure power point presentation was given to teenagers receiving sports physicals. Afterwards the teenagers were given a survey regarding their perceptions on bullying to see if they were able to recognize examples of bullying and how they would react.

Results: 14 bullying surveys were completed after our presentation on bullying and peer pressure. 78% of surveyors felt the statistics presented made them more aware of the prevalence and effects of bullying on the adolescent population. 85% of surveyors rated better overall understanding of bullying and self-esteem. 78% of surveyors showed understanding of appropriate bullying interventions.

Conclusion: Most adolescents showed increased understanding of bullying and demonstrated knowledge of appropriate bullying interventions. One challenge we encountered was that some of the wording on our bullying surveys were too advanced for the adolescent surveyors. Next time it would be better to use age and education appropriate language.

Education

Elementary Nutrition: Adaption for Bilingual Students

Project Discipline: Medicine

Primary Presenter: Maria Leon-Camarena

Other Student Team Members: Blake Seeker, Miren Pena, Averi White

Mentor: Tisha Lunsford, MD, AGAF, FACG

Community Partner: Walzem Elementary

Project Location: San Antonio, Texas

Background: In 2016, 44.1% of Texas fourth graders qualified as obese or overweight. Despite high rates and risks of childhood obesity, the average hours of required instruction in nutritional and dietary behaviors in elementary school curriculum remains less than five hours per academic year. Expanding nutrition curriculum in schools could significantly combat the current childhood obesity crisis.

Objectives: The goal of Elementary Nutrition (EN) was to adapt and evaluate a nutrition curriculum created and taught by medical students to fourth-grade students in 2016. The 2017 iteration aimed to be 1) less time intensive (8 v. 12 sessions) 2) applicable to a Spanish-English bilingual class, and 3) show a sustained improvement in nutritional knowledge, as measured by an improvement in post quiz scores.

Methods: Four medical students instructed EN in two fourth grade classes at Walzem Elementary School (WES): bilingual class (N = 20) and monolingual class (N = 17) for eight one-hour lessons, which combined discussion on nutrition fundamentals with age-appropriate cooking activities. Pre- and post-intervention quizzes were administered to assess baseline and improvement in nutrition knowledge. Attitudes and behavior surveys were also administered pre- and post-intervention.

Results: Cumulative pre-program quiz mean was 34.1% (SD = 12.8), and post-program quiz mean was 49.1% (SD = 20.5). Thus, knowledge improvement was found to be significant ($p < 0.001$) and comparable to the previous year's results. Our results suggest this curriculum can successfully improve nutritional knowledge in monolingual and bilingual elementary school populations. This intervention enables students to understand and apply basic principles of nutrition including: reading and interpreting nutrition labels, understanding MyPlate, and choosing healthier substitutions for processed, calorie-dense foods.

Conclusion: We hope these findings will support the continuation of Elementary Nutrition at WES and encourage increased nutrition education at pediatric populations, in order to prevent future development of chronic medical conditions.

Education

Head Safety in Youth Sports: Curriculum Training for Texan Youth Athletes to Promote Concussion Prevention and Recognition

Project Discipline: Medicine

Primary Presenter: Raul Membreno

Other Student Team Members: Raul F. Membreno, Kevin Chorath, Brandon May, Prem Menon, Ryan Willett, Nick Gonzaba, Matthew Parker, Jacob Becker

Mentors: Ali Seifi, MD

Community Partner: San Antonio Christian School and Alamo Heights ISD

Project Location: San Antonio, Texas

Background: As noted by the American Association of Neurological Surgeons, sports and recreational activities contribute to about 21% of all traumatic brain injuries among American children and adolescents¹. We believe that a significant underserved and underreported population of athletes is being excluded in this movement: youth athletes.

Objectives: The purpose of the project was to provide youth athletes with information regarding the prevention, recognition and consequences of concussions, and evaluate the effectiveness of the curriculum on the retention of information measured by pre- and post-tests.

Methods: Medical students traveled to middle schools in San Antonio, Texas to present information regarding concussion recognition, prevention and consequences and basic anatomy and physiology of the head. Half the students received Form A of the pre-test and the other half received Form R of the pre-test. Half of the students who were given the Form A pre-test were given the Form A post-test and the other half received the Form R post-test and vice versa for the Form R pre-test group.

Results: The test forms (A and R) were randomly administered for both pre-test and post-test and students were grouped based on the combination of test forms they took, AA, AR, RA, and RR. Out of the three grades, the eighth grade group AR demonstrated the highest increase in scores from pre-test to post-test scoring, 70.2% and 90.7% respectively. All three grades (n=627) showed statistically significant improvement in test score after administration of the HSYS Program workshop.

Conclusion: The results support the hypothesis that PowerPoint presentations on head safety are an effective way to increase youth athlete knowledge about concussions and head safety in sports. Educators may utilize the results to incorporate HSYS information in the curriculum of middle schools in Texas.

Education

Health-ESNACs: Elementary School Nutrition and Activity Club

Project Discipline: Medicine

Primary Presenter: Emily Sendukas

Other Student Team Members: Meredith Furst, Abigail Souryal

Mentor: Tisha Lunsford, MD, AGAF, FACG

Community Partner: Walzem Elementary School

Project Location: San Antonio, Texas

Background: In Texas elementary schools, nutrition education is infrequent if not altogether absent. After-school clubs provide an opportunity to fill the gap, as they have been shown to increase academic and social skills of students. Therefore, as childhood obesity rates rise, a health focused after-school program is essential in promoting health and preventing the obesity epidemic.

Objectives: Elementary School Nutrition and Activity Club (ESNAC) is an expansion of Elementary Nutrition, a pilot nutritional literacy curriculum proven to enhance nutritional knowledge in elementary aged students. ESNAC incorporates physical activity and interactive cooking lessons, creating a comprehensive health curriculum able to serve a wider audience in a practical and accessible setting.

Methods: ESNAC consists of seven meetings over seven weeks. Each meeting, led by two medical students, used various physical activities and hands-on cooking lessons to emphasize importance of nutrition and healthy living in a cost-effective and memorable way. Pre- and post-surveys were administered to evaluate opinions or habits regarding nutrition and health. Additionally, a focus group was conducted in the final meeting to analyze information retention and feedback.

Results: Survey analysis demonstrated improved opinions about exercise and nutrition, as measured by an increased number of students reporting interest in cooking healthy snacks at home after this experience. Data collected from the focus group revealed retention of key concepts and application of that knowledge at home.

Conclusion: Ultimately, the interactive methods used in ESNAC allowed for successful retention and understanding of nutrition, health and wellness, while utilizing the existing after-school club format. In moving forward, the curriculum could be smoothly and sustainably implemented in other schools by the medical students, allowing for a greater benefit to the San Antonio community and beyond.

Education

Healthy Children, Healthy Citizens

Project Disciplines: Medicine, Nursing

Primary Presenter: Cody Carnes

Other Student Team Members: Margaret Ashoo

Mentors: Laura Sisk, DNP, RN and Melanie Stone, MPH, MEd

Community Partner: Castroville Elementary

Project Location: Castroville, Texas

Background: Healthy Children, Healthy Citizens is a multidisciplinary community service learning project teaching healthy lifestyle habits to elementary aged students. The curriculum focuses on health literacy, and health promotion concepts such as, hand hygiene, nutrition and healthy living. A recent study showed a 19.8% reduction in absenteeism through hand hygiene and healthy habit education.

Objectives: The purpose of this project was to instill healthy habits that could be applied to everyday activities and to improve health literacy. With limited access to health care, education at an early age is imperative to an overall healthier community.

Methods: The target population included a fourth grade summer school class of 16 students and later, the entire fourth grade class at a Title One elementary school in a rural South Texas community. During the summer, a comprehensive interactive health education class was taught for two consecutive weeks to a select 4th grade class. The curriculum included hand hygiene, asthma care, first aid, diabetes maintenance, heart health and nutrition. During the fall, we taught an interactive hand hygiene activity and a computer lab based health literacy lesson to the entire fourth grade class.

Results: Most students demonstrated a willingness to participate and were engaged throughout the curriculum. During the summer, students accurately answered review questions from previous lessons. Additionally, art projects were used to measure learning outcomes. During the fall lessons, the students were intrigued and asked many stimulating questions. After each session, all students completed the lesson's post-worksheets.

Conclusion: The elementary students were highly receptive to all lessons. Classroom teachers reported the students being mindful of hand hygiene during lunch time weeks after the lessons. Though the health literacy lessons discussed high level topics, the students were very capable of these issues at a young age. Instilling healthy habits and health information early is vital to a healthy future.

Education

Healthy Moms and Babies Equal Happy Moms and Babies

Project Discipline: Nursing

Primary Presenter: Jasmine Graw

Mentor: Laura Sisk, DNP, RN

Community Partner: Healy Murphy

Project Location: San Antonio, Texas

Background: Texas is ranked number three nationally for teen pregnancy. The collaborative relationship between the Healy Murphy Center and UT Health School of Nursing provides supportive services for parenting adolescents such as childbirth, prenatal, postnatal, parenting and health education.

Objectives: The Healthy Moms and Babies Equal Happy Moms and Babies program being implemented at the Healy Murphy Center encourages childbearing adolescents to participate in wellness activities to include infant care, stress reduction, nutrition during pregnancy, breastfeeding and safe sleep for the newborn to name a few. By November 2017, participants will be able to identify an adult to talk with, describe pregnancy prevention measures, describe benefits safe sleep, describe benefits of breastfeeding their child and specify an intention to breast feed, describe benefits from handwashing and demonstrate proper handwashing techniques, describe ways of coping with and reducing stress and engage in aerobic physical activity.

Methods: Sixth-semester baccalaureate nursing students had two class periods to educate parenting teens at Healy Murphy. A needs assessment was given the first week of each 9-week program to gather what topics the parenting teens needed education on. The nursing students then collaborated within small groups on ways to creatively present the educational information to the parenting teens.

Results: Many of the objectives were met including 100% breastfeeding rate by the Healy Murphy students. They rated their experience as positive and verbalized interest in continuing in the program. Nursing students expressed positive views about the experience and considered it as a valuable learning tool that will assist them in their future.

Conclusion: The partnership between UT Health and Healy Murphy was limited by time. Individual time between the parenting teens and the nursing students was found to have a positive impact. Future collaboration between UT Health and Healy Murphy will continue with goals of expanding class time with the parenting teens.

Education

HELP for Better Health, 2017-2018: Use of Goal Attainment Scaling in Health Literacy Curriculum

Project Disciplines: Medicine, Occupational Therapy

Primary Presenter: Shreya Reddy

Other Student Team Members: Joy Tsai, Savannah Sublousky, Cody Carnes, Brinley Williams, Carly Peters, Amy Honeck

Mentor: Melanie, Stone, MPH, MEd

Community Partner: Providence Place

Project Location: San Antonio, Texas

Background: Learning personal hygiene skills, nutritional values and the importance of exercise are essential to living independently. For individuals on the autism spectrum, these social rules and expectations are sometimes confusing and easily neglected (*Wrobel et al, 2003*). The Health Education and Literacy Program (HELP) has been partnering with Providence Place since 2012 to teach its residents health education and health literacy.

Objectives: The goal of HELP is to promote independence and quality of life in the participants of this program by increasing their knowledge of health-related topics and their awareness of healthy lifestyle choices. The HELP curriculum includes nutrition, personal hygiene and physical fitness, among other health education topics.

Methods: The efficacy of this curriculum was evaluated using a Goal Attainment Scale. At the beginning of each unit, each student made a personal goal pertaining to that specific topic. Students were reminded of their goals regularly and the information was reinforced throughout the curriculum. At the beginning of each week, the students evaluated themselves on how well they achieved their goal.

Results: By the end of the nutrition unit, 69% of students had met or exceeded the nutritional goal they set for themselves. For the hygiene unit, 74% of students had met or exceeded their goals. There was less success with the physical exercise goals, with only 57% of students meeting or exceeding their goals.

Conclusion: Most of the students had success with their nutrition goals and personal hygiene goals, but not so much with the physical exercise goals. Even though the students have demonstrated comprehension of the information, it is nevertheless still difficult to change people's behaviors in such a short amount of time. The HELP curriculum and process of developing and adhering to self-made goals will motivate the students to practice healthy habits not only now, but also well into the future.

Education

Improving Sexual Health Knowledge Among Urban and Rural Adolescents in Nicaragua

Project Disciplines: Medicine, Public Health

Primary Presenter: Cara Forsythe

Other Student Team Members: Rachel Dang, Marian Fagbemi, Claude Hardy, Jaswanth Kintada, Maureen Montgomery, Rosemary Liu, Blake Seeker, Eden Sirak, Yvonne Uyanwune, Joseph Wortman, Cindy Yang

Mentor: Ruth Berggren, MD, MACP

Community Partner: AMOS Health & Hope and Healthy Futures of Texas

Project Location: Nejapa, Nicaragua

Background: Nicaragua has one of the highest adolescent fertility rates in the world and the second highest rate in Latin America and the Caribbean. According to The World Bank, in 2015, births per 1,000 women ages 15-19 in Nicaragua was 88.1, while the regional average was 63.7.

Objectives: In an effort to improve sexual health knowledge in Nicaraguan youth, UT Health San Antonio collaborated with AMOS to pilot the first adaptation of the Big Decisions curriculum in Nicaragua.

Methods: Two cohorts of mixed-gender adolescents were taught a culturally adapted, abbreviated version of Big Decisions over the course of 2-3 days: 9 students (ages 12-18 years) in Nejapa, a suburban community within the capital city of Managua, and 15 students (ages 12-23 years) in Nawawasito, a rural community in the South Atlantic Region. Pre- and post-tests were completed. Survey questions addressed curriculum content including pregnancy, conception, sexually transmitted infections, contraceptive methods and healthy decision-making in relationships. We hypothesized an improvement in knowledge of reproductive health in both communities, as evidenced by survey results, upon completion of the curriculum.

Results: Adolescents in Nejapa (N=9) improved their knowledge by 24.31% ($p=0.00$, 95% CI: 0.1712 to 0.3149). Adolescents in Nawawasito (N=15) improved their knowledge by 18.33% ($p = 0.00$, 95% CI: 0.1111 to 0.2555).

Conclusion: Due to marked improvement in both groups, we conclude that Big Decisions is an appropriate, acceptable intervention for adolescents in Nicaragua. Expanded implementation of this curriculum could decrease the adolescent fertility rate and improve overall health in Nicaragua. Further research goals include assessment of curriculum content areas that need improvement. In future cooperation with AMOS, we hope to adapt the Big Decisions curriculum to more effectively empower Nicaraguan youth with knowledge about reproductive health.

Education

"Improving the Access of Dental Care and Oral Health Education to Children and Homeless Families" Interdisciplinary Collaboration at the San Antonio Metropolitan Ministries Transitional Living & Learning Center

Project Disciplines: Dental, Dental Hygiene, Medicine

Primary Presenter: Ana Gonzalez

Other Student Team Members: Christian Lopez, Natasha Mathews, Jason Poon, Mahmoud Irranezhad, Leslie Ugarte, Heather Burbick, Kimberly Lehr, Natalia Garza

Mentor: Adriana Vargas-Green, DDS, MPH

Community Partner: San Antonio Metropolitan Ministries (SAMM) Transitional Living and Learning Center

Project Location: San Antonio, Texas

Background: San Antonio Metropolitan Ministries Transitional Living & Learning Center (SAMM TLLC) of San Antonio, Texas is an interfaith ministry whose mission is to help the homeless by providing shelter, housing, and services. The SAMM Dental and Medical Clinics are individually organized by faculty and students from the respective UT San Antonio Dental and Medical schools.

Objectives: The goal of this project is to begin interdisciplinary collaboration between dental and medical professionals at the SAMM Infante Dental and Medical Clinics. Each profession will provide an educational presentation to the other to help integrate disciplines to improve overall healthcare for the patients at SAMM TLLC. The project will continue previous study educating patients at SAMM TLLC on dental knowledge and oral care.

Methods: Dental and medical students each provided a pre- and post-questionnaire survey, and gave a 10-minute educational presentation to evaluate change in both dental and medical student knowledge. Also, SAMM TLLC patients' dental knowledge was evaluated with pre- and post-questionnaire surveys administered before and after an educational presentation given by dental and dental hygiene students. The O'Leary plaque index score was used to evaluate changes in oral care in the patients between an initial assessment and a three-month recall.

Results: 5 dental students and 5 medical students participated in the educational interdisciplinary collaboration. Both dental (pre: 54%; post: 96%) and medical (pre: 49%; post: 98%) students scored significantly higher on questionnaire surveys after receiving the educational presentation. 16 patients completed the project. Results showed the 16 patients increased their dental knowledge, and an improvement in plaque index scores.

Conclusion: The educational interdisciplinary collaboration encouraged dental and medical students to interact and exchange knowledge to merge disciplines to provide improved overall healthcare to patients. Also, improving patients' dental knowledge leads to patients having improved oral health and the responsibility to maintain it.

Education

Increasing Nutrition Awareness in South Texas Populations

Project Discipline: Medicine

Primary Presenter: Giselle Castillo

Other Student Team Members: Jomari Guerrero

Mentor: Melanie Stone, MPH, MEd

Community Partner: Salud Today

Project Location: Eagle Pass, Texas

Background: Obesity is one of the leading public health threats in the United States and is a growing problem for the people of South Texas. In South Texas, Type 2 diabetes rates are double the national average. These health problems are linked to lifestyle choices. With the cost of processed foods decreasing, low-income populations are at risk. Frontera de Salud is committed to educating these populations in South Texas.

Objectives: The goal of our project is to instill healthy habits in daily food choices. We will educate community members about nutrition through posters, flyers, and visual aids provided by Salud Today, a social media campaign to raise awareness about Latino health issues. Those who sign up for Salud Today's newsletter will be emailed healthy habits while being informed of upcoming health events in their community.

Methods: During Frontera's health fair, participants visit our station to receive nutrition education while waiting for blood pressure, glucose, and cholesterol checks. A voluntary, post-presentation survey will be administered to determine whether there were any increases in knowledge. With the help of Salud Today, the number of people who open the newsletter and visit the website will also be tracked.

Results: Twenty-four participants were surveyed. Results from post-presentation surveys showed 100% of the participants found the visual representation helpful and insightful. 95.8% of the participants learned something about obesity or BMI that they didn't know before the presentation. 45.8% said they were likely to visit www.saludtoday.com for more information and 4 people signed up to receive their newsletter.

Conclusion: Nutrition access, resources, and knowledge were assessed. One of the major challenges of this study includes small sample size due to limited number of trips by Frontera de Salud. We hope that by starting this project we have opened the door for continued partnership of Salud Today and Frontera de Salud.

Education

Lessons Learned: A Slapdash Sexual Education Intervention for Adolescent Girls at a Secondary Boarding School in Masaka, Uganda*

Project Disciplines: Medicine. Public Health

Primary Presenter: Jaclyn Boozalis

Other Student Team Members: Chidimma Amuneke-Nze, Katy Kazen, Taylor Russell, Averil White, Travis Bishop, Andrew Maroda, Chase Romere

Mentor: Jason Rosenfeld, MPH, DrPH(c)

Community Partner: US2Uganda4LIFE

Project Location: Masaka, Uganda

Background: According to the Uganda's 2016 Demographic and Health Survey, 25% of girls aged 15-19 have become pregnant. Adolescent pregnancies pose health challenges because teenage mothers are constrained in their future pursuit of education and have an increased likelihood of adverse pregnancy outcomes. During summer 2017, US2UGANDA4LIFE invited the Kisoboka Uganda group from the Long School of Medicine to perform histories/physicals on a collection of students at a secondary boarding school in Masaka, Uganda. Because multiple students required treatment for sexually transmitted infections (STIs), it was suggested that Kisoboka provide a brief, one hour sexual education session for female students.

Methods: Kisoboka developed and facilitated a didactic sexual health curriculum for 148 female students, aged 12-21. The curriculum consisted of four parts: female hygiene/menstruation, defining sex, STIs/prevention, and abstinence. In addition to addressing misconceptions about sex and contraceptives, we incorporated the Ugandan "ABCs" of sexual education: Abstinence, Be faithful, Condoms.

Objectives: A pre- and post-survey were administered to gather demographics, collect anonymous questions, and measure changes in knowledge and attitudes toward sex, STIs, female hygiene, and contraception.

Results: 148 pre- and post-surveys were collected. An estimated 21.8% of students reported being sexually active, 17.6% had experienced a UTI, 6.8% experienced an STI, 54.7% experienced a Candida infection, and two students were pregnant. We found no significant difference between the pre- and post-survey knowledge data.

Conclusion: Our data suggests that an adequate sexual health curriculum was not built in a day. This experience and subjective data will serve as a foundation to adapt an appropriate sexual health curriculum for these students. Kisoboka has compiled the questions from the students and will use them to build a pilot curriculum with advisement from local healthcare contacts, UTHSA advisors, and leaders at the secondary school.

*Blue Ribbon Winner

Education

Making Education more Patient-Centered: Interviews with Geriatric Patients and their Caregivers

Project Discipline: Medicine

Primary Presenter: Richard Tran

Mentor: Becky Powers, MD

Community Partner: San Antonio Geriatric and Palliative Education Symposium

Project Location: San Antonio, Texas

Background: San Antonio is the 7th largest city in the U.S., yet ranks 64th on the notable "Top 100 Cities for Successful Aging" list. This problem is expected to only worsen over time with the San Antonio-New Braunfels area expected to double in older adults to 1,039,000 by 2050. One solution to this issue is the use of Continuing Medical Education (CME) to help fill this geriatric education gap; the San Antonio Geriatric and Palliative Education (SAGE) Symposium is one such local CME conference with this goal.

Objectives: This study aims to make the educational content of the SAGE Symposium more patient centered by conducting a qualitative community needs assessment to better meet the medical needs of San Antonio's older adults.

Methods: Unstructured in-depth interviews were conducted via convenience sampling methodology at San Antonio public locations frequented by older adults and their families until thematic saturation. Transcripts were analyzed via thematic network analysis.

Results: 33 respondents at 14 locations around San Antonio were interviewed before reaching thematic saturation. Three main themes emerged from the transcripts: Geriatric Syndromes (polypharmacy, falls), Patient-Provider Relationship (respect for patients, communication), and Patient Support (resources, system navigation). Out of all respondents, 45% discussed topics under the Geriatric Syndromes theme, 33% under the Patient-Provider Relationship theme and 42% under the Patient Support theme.

Conclusion: Although our interviews demonstrate the need for further educational content in all three thematic areas, historically, the SAGE Symposium and other CME programming have primarily focused on the Geriatric Syndromes theme with less attention given to the Patient-Provider Relationship and Patient Support themes. Future SAGE conferences will include expanded content in the latter two themes, will utilize compilations of these interviews as multimedia educational tools, and will seek to survey healthcare providers of geriatric patients for provider centered needs assessments as well.

Education

Maternal Care and Support at The Mommies Program: Preliminary Results

Project Discipline: Medicine

Primary Presenter: Lauren Paraison

Other Student Team Members: Jesse "Mimi" Rogers, Molly Jenner, Emily Sendukas, Olivia Hunt, Brinley Williams, Maggie Zhang

Mentor: Ometeotl Acosta, MD

Community Partner: The Mommies Program-University Health System and Center for Health Care Services

Project Location: San Antonio, Texas

Background: Overdose was the second leading cause of maternal death in Texas between 2011 and 2012. The majority of maternal overdose involved opioids. The Center of Health Care Services operates a methadone clinic that treats those with opioid use disorder (OUD). Pregnant patients with OUD are concurrently enrolled in The Mommies Program and receive prenatal care through University Health System. We aim to educate about OUD in pregnancy and provide motivational incentives for sustained abstinence.

Objectives: Participants counseled at their prenatal visit will have an improved understanding of the effects of OUD on their pregnancy health. Participants will take action in the immediate future to achieve sustained abstinence from illicit opioid use.

Methods: Contact current Mommies Program participants to introduce project. Discuss OUD in pregnancy including the health effects of OUD to mother and child and review resources for sustained peripartum abstinence. Provide motivational incentives, which include newborn supplies, for mitigation of stressors related to newborn care and education on caring for an infant. Assess measurable objectives with pre and post intervention surveys.

Results: Of the participants surveyed, 75% had a minimal to moderate understanding of the effects of opioid use on their health and their fetus. All participants reported that pregnancy made them more motivated to quit illicit drug use, very willing to stay sober after child birth, and felt that they had protective factors for abstinence.

Conclusion: Participants who participated in the surveys were self-motivated to adhere to methadone treatment and remain abstinent from illicit opioid use in the postpartum period. They were also receptive to learning about the effects of opioid use on themselves and their newborn. Our greatest challenge was contacting participants to meet them at their prenatal visits. In the future, we will aim to increase awareness of our project and the benefits of participation.

Education

Operation Naloxone: Interprofessional Overdose Prevention Service Learning

Project Disciplines: Medicine, Nursing, Pharmacy, Physician Assistant

Primary Presenter: Khine Tun

Other Student Team Members: Thuy Nguyen, Kimberly Nguyen, Lindsey Groff

Mentor: Kirk Evoy, PharmD, BCPS

Community Partner: Lifetime Recovery and Alpha Home

Project Location: San Antonio, Texas

Background: Opioid overdose is the fastest growing cause of death in the U.S. Operation Naloxone is an overdose prevention program in which students are trained and subsequently lead trainings related to opioid overdose response, including the proper use of the opioid reversal agent naloxone, and to increase access to naloxone within the community.

Objective: The goals of this project were to: 1) conduct train-the-trainer sessions open to all University of Texas Health San Antonio (UTHSA) students; 2) provide trainings and naloxone supply for vulnerable populations; and 3) assess the training effectiveness.

Methods: UT Austin College of Pharmacy faculty members led two trainings for UTHSA students. Trained students participated in three interprofessional, student-led overdose prevention trainings for drug rehab center residents and staff. Naloxone was also provided to these centers. Pre- and post-training surveys were administered to student and rehab center training attendees to evaluate the impact on knowledge and attitudes regarding naloxone use and the interprofessional learning experience.

Results: 84 UTHSA students were trained to provide naloxone education. Student-led trainings reached 272 rehab center residents and staff. Results displayed a significant increase (61% vs. 76%, $p < 0.0001$) in mean knowledge, self-efficacy (median 3.5 vs. 5, $p < 0.0001$) and attitude on harm reduction scores (4 vs. 5, $p < 0.0001$). Interprofessional competencies of student participants also significantly increased (median 6 vs. 7, $p = 0.002$).

Conclusion: Through this project, UTHSA students were trained to provide opioid education and subsequently led trainings for vulnerable populations in Bexar County regarding appropriate opioid overdose response, and naloxone was provided to three rehab centers. Those attending trainings displayed improved knowledge and perceptions on overdose prevention and treatment and participating students gained valuable interprofessional collaboration experience. Based on this data, this train-the-trainer approach to opioid overdose education proved valuable for the community and participating healthcare students.

Education

Patient Voices

Project Disciplines: Medicine, Occupational Therapy

Primary Presenter: Anisha Guda

Other Student Team Members: Cindy Wu, Sammar Ghannam, Ryan Reyes, Alexis Ramos, Sara Noble, UTHSA Oncology Student Interest Group, UTHSA Project 6-55 Team

Mentor: Bridgett Piernik-Yoder, PhD, OTR

Community Partner: Gemini Ink

Project Location: San Antonio, Texas

Background: The lives of cancer patients are often encompassed by isolation and disease. In clinical settings around the country, creative writing activities help patients improve self-esteem and enhance optimism. However, there is a lack of accessibility to such programs in San Antonio's hospitals.

Objectives: Patient Voices addresses this need by fostering a partnership between Gemini Ink (local nonprofit literacy center), the UT Health San Antonio Project 6-55 (a reflective writing practice) students, and the Methodist Hospital Oncology Unit. Patient Voices hosts writing workshops at Methodist Hospital to facilitate a positive healing experience for oncology patients. The workshop series will culminate in a literacy event to celebrate patient-written works and promote the benefits of reflective writing.

Methods: Gemini Ink instructors and UT Health San Antonio Project 6-55 students led various writing workshops for Methodist Hospital oncology patients. Surveys were given to patient participants to assess project outcomes. The Patient Voices Literacy Event will be held on April 14th, 2017 at 10:00 AM on the Methodist Hospital oncology floor. Patients, families, and hospital staff are invited to write reflective pieces with the guidance of Project 6-55 students and Gemini Ink staff. With consent, literary pieces will be combined into a book that will be published in partnership with Gemini Ink. Participants' surveys at the end of the event will measure patients' interest in using reflective writing in daily life and for personal growth.

Results: Survey results from the workshops and Literacy Event were analyzed. Participants showed an increased interest in using reflective writing in daily life and for personal growth.

Conclusion: Writing workshops allowed patients to share their story and improve healing. After piloting the workshop series and literacy celebration, Patient Voices hopes to catalyze this partnership model and bring the program to other Methodist Hospital departments and area hospitals.

Education

Safe Space Training Expansion to Enhance LGBTQ Sensitivity Training and Clinical Competency*

Project Disciplines: Medicine, Nursing

Primary Presenter: Cassandra Jones

Other Student Team Members: Claude Hardy, Nathaniel Nevitt, Josey Richards, Jelina Castillo, Adaora Ofomata, Brittany Schall, Christopher Smith, Camille Spears, Fadi Al-Asadi, Olivia Thornton, Briette Moser

Mentor: Peter Guarnero, RN, PhD, MSc

Community Partner: Alamo Area Resource Center

Project Location: San Antonio, Texas

Background: Previous research has demonstrated that LGBTQ individuals encounter health disparities due to factors such as discrimination and social stigma. Safe-Space Training seeks to alleviate inequalities for LGBTQ individuals in the health care setting through helping health care providers develop a better understanding of the LGBTQ population.

Objectives: The goal of expanding Safe Space training is to increase the number of health care providers in San Antonio exposed to information regarding cultural and health concerns faced by the LGBTQ community.

Methods: Before subjects completed Safe-Space training, they were asked to fill out an anonymous questionnaire with their opinions regarding LGBTQ people and perception of Safe-Space training's value. A similar survey was administered following the training session to evaluate changes in their perception. The pre- and post-surveys were formatted to have participants rank the level to which they agreed or disagreed with a statement, with 1 representing "D2no", 4 representing "indifference" and 7 representing "absolutely". Through Pride Community Clinic we were able to assess if the Safe Space training was beneficial to health care providers while seeing LGBTQ patients by administering a different anonymous survey.

Results: Following training, all four categories assessed demonstrated higher averages. Comfort working with LGBTQ patients and colleagues increased from 5.96 to 6.24 and 6.43 to 6.62, respectively. Comfort discussing sexual health increased from 5.39 to 5.84. Perceived importance of Safe Space training increased from 6.24 to 6.39. Volunteers from Pride Community Clinic on average reported that the training positively impacted providing healthcare to their patients, rated as 6.83/7.

Conclusion: Participants gained a better understanding and comfort level surrounding LGBTQ issues after the completion of Safe-Space training. This training adequately satisfies the need for LGBTQ sensitivity training within the medical community and the LGBTQ population of San Antonio will benefit from expansion of this training program.

*Blue Ribbon Winner

Education

Sexual Education at Estrada Achievement Center

Project Discipline: Medicine

Primary Presenter: Marissa Emadi

Other Student Team Members: Maureen Montgomery, Blake Seeker, Marian Fagbemi, Jaswanth Kintada, Maddie Flores

Mentor: Joy Emko, MD

Community Partner: Estrada Achievement Center

Project Location: San Antonio, Texas

Background: Adolescents are often faced with choices and peer pressure that can affect their entire life. Unfortunately, many school districts fail to provide students with adequate sexual education programs that teach students how to prevent early pregnancy and STDs.

Objectives: Through the use of Big Decisions, an "abstinence plus program," we hope to teach students in San Antonio Independent School District about contraception, anatomy and STDs, healthy relationships and how to say no in difficult situations.

Methods: Surveys were conducted before and after the program to assess the students' knowledge base of sexual education and their opinion of the program. In addition, pre and post quizzes served to assess the effectiveness of each lesson. The program was taught at Estrada Achievement Center with adolescent males ages 15-18 using activities and worksheets from lessons of Big Decisions.

Results: The data indicated that 94% of students believed adolescents need sexual education courses and were comfortable talking about sexual education, which boded well for their level of participation in the program and the positive results listed below. Before the lesson, only 5% of students identified abstinence as the safest option to prevent the transmission of STDs, whereas after the program this statistic increased to 70%. Similarly, when given two options of contraception for preventing pregnancy, 54% of students scored correctly before the program and increased to 67% of students after the program.

Conclusion: The discussions held during the program revealed that despite 55% of the class having had a sexual education course previously, many still did not have a basic understanding of anatomy, STDs and contraception. After the program, the data showed notable improvements in students understanding abstinence as well as the most effective forms of contraception. Perhaps equally as important, students were given an opportunity to discuss sex and relationships with their peers in a safe environment.

Education

The Dental Guide for the Caregiver

Project Disciplines: Dental, Nursing, Public Health

Primary Presenter: Ola Ukaoma

Other Student Team Members: Kristina Orquiz

Mentor: Carolyn Pickering, PhD, RN and Maria Yefimova, PhD, RN (affiliation UCLAVA of Greater Los Angeles)

Community Partner: Alzheimer's Association of San Antonio

Project Location: San Antonio, Texas

Background: Most family caregivers feel unprepared for the daily tasks they become responsible for when they take care of a loved one with dementia.

Objectives: The goal is to understand family caregivers' level of knowledge and skills on how to provide dental care and identify methods of improvement through evidence-based trainings.

Methods: (1) Complete a needs assessment to identify caregivers' level of self-efficacy with providing oral care. (2) Develop the Dental Care Guide for the Caregiver, a hands-on skills training for caregivers to better enable them to care for their loved ones with dementia. (3) Evaluate the effectiveness of the Dental Care Guide in improving knowledge and skills of caregivers.

A needs assessment was completed by family caregivers. After identifying a need for trainings, the Dental Guide was developed using evidence-based sources to teach caregivers to: (1) understand the importance of adequate oral care, (2) recognize oral health products available, (3) demonstrate techniques for cleaning teeth and dentures, and (4) recognize when to seek professional help. The training will be delivered through short lecture, discussion and demonstrations on manikins. Caregivers will be given the opportunity to ask questions and practice the skills under supervision.

Results: In the needs assessment, 1/3 of caregivers reported not providing oral health care to their person with dementia even though they needed it. The Dental Guide training will be delivered monthly for 12 months to groups of 16 caregivers. The Dental Guide will be evaluated using surveys to identify changes in caregiver knowledge and self-efficacy of oral health and hygiene techniques to help manage people with dementia.

Conclusion: The Dental Guide provides hands-on skills training to promote proper oral health care. This guide offers an opportunity to meet the needs of both caregivers and people living with dementias to improve the quality of outcomes of these vulnerable populations.

Education

The Efficacy of San Antonio Healthy Meals Handouts in Nutritional Counseling

Project Discipline: Medicine

Primary Presenter: Michael Dybdal-Hargreaves

Other Student Team Members: Matthew Milam, Lauren Elizabeth Russell

Mentor: Sean Garcia, MD

Community Partner: Witte Museum

Project Location: San Antonio, Texas

Background: The patient population in San Antonio has high rates of type 2 diabetes, hypertension and obesity. Medical students often find it difficult to explain to patients that eating healthy can be cost effective and convenient.

Objectives: This project aims to address these issues with a nutritional handout, both as a resource for patients and as an aid for the medical students who counsel them.

Methods: The handouts, which include a recipe, nutrition facts, cost breakdowns and healthy eating tips, are designed to provide a tangible example of an inexpensive, nutritious meal. Before the Frontera de Salud event at San Antonio's "Color Me Fall Health Fair," medical student volunteers received training from the project leaders in how to use these handouts as a guide for counseling patients. The volunteers filled out pre and post surveys that assessed their own levels of confidence in advising patients on nutritional health. Patients were also given a survey after nutritional counseling to evaluate its effectiveness.

Results: In the pre-surveys, the seven medical students working at the event self-evaluated themselves as an average of 2.71 out of 5 on general comfort with nutritional counseling. The post survey showed that the medical students found the handouts to be useful for teaching, reporting an average of 4.71 out of 5 on "How useful did you find the nutritional handouts when counseling patients?" The patient survey indicated that the nutrition counseling sessions were effective, choosing an average of 4.77 out of 5 on the question "How much did you learn from nutrition counseling?" and a 4.42 out of 5 on "How likely will you make the nutrition handout meal?"

Conclusion: While both the students and the patients seemed to benefit from the use of these handouts, more surveys should be collected to measure the efficacy of these handouts.

Education

Westlawn Flu Vaccine Clinic: Combatting and Correcting Misinformation on Vaccines

Project Disciplines: Medicine, Pharmacy

Primary Presenter: Anna Pritchard

Other Student Team Members: Lauren Murphy, Rajitha Reddy, Ryan Reyes

Mentor: Glen Medellin, MD

Community Partner: Methodist Healthcare Ministries Wesley Nurses

Project Location: San Antonio, Texas

Background: Texas has one of the highest incidents of flu-like illnesses in the country and influenza is among the top 10 causes of mortality in the state for ages 1-24 years (Murphy et al, 2015). Additionally, the Bexar County Health Needs Assessment reported that 65% of Bexar County residents 65yrs and older received the flu shot in 2015.

Objectives: The goal of the Westlawn Flu Vaccine Clinic was to assess the vaccination attitudes of Bexar County residents and teach participants how vaccinations work while providing the opportunity to receive a free flu vaccine and ask any questions they may have regarding vaccinations.

Methods: Medical students developed an educational pamphlet about the influenza vaccine. These along with influenza vaccinations were taken to a health fair at Westlawn Church and were distributed to participants. Medical students were available to educate the community about the vaccination and address any concerns participants had. Vaccinations were administered by Walmart pharmacists. For each participant, a pre and post survey about general vaccination knowledge and attitudes was completed to assess the project's outcome.

Results: A total of 25 vaccines were administered and 44 surveys were completed. Results of the survey showed an increase in understanding how vaccinations work and the risks and benefits of vaccination. There was also an overall decrease in agreeableness with anti-vaccination beliefs. Among those with children, the cost of vaccination played a factor in whether or not vaccinations were completed.

Conclusion: The majority of people assessed had a positive outlook on vaccinations. The post-survey results reflect an increase of knowledge of and acceptance towards vaccinations. Of concern was that many people who indicated they knew how vaccinations work had an incorrect understanding of the process. Additional educational visits and providing more educational pamphlets to the community could help address this disparity.

NOTES

Outreach

Access Care Texas: ACT Together for Health

Project Discipline: Medicine

Primary Presenter: Yuki Yoshiyasu

Other Student Team Members: Jeff Du, Claire Harrison, Lina Mahmood

Mentor: Melanie Stone, MPH, MEd

Community Partner: The Health Collaborative

Project Location: San Antonio, Texas

Background: Access Care Texas (ACT) is a Community Service Learning project with the goal of improving South Texans' health insurance literacy. In collaboration with The Bexar County Health Collaborative, ACT has developed SA Access, a mobile application designed to facilitate health insurance enrollment and effective use of health insurance.

Objectives: (1) Evaluate the impact of SA Access in obtaining and maintaining health insurance. (2) Conduct training sessions for healthcare workers to analyze effectiveness of SA Access as an educational tool. (3) Organize an university-wide lecture on the current state of health insurance coverage in San Antonio. (4) Compare two clinic sites over six months for healthcare coverage and usage in patients who have and have not been exposed to the app. (5) Conduct four one-hour training sessions on SA Access for healthcare workers and assess their perceptions of the tool and its potential value in their practices. (6) Educate UTHSA students on updates regarding the Affordable Care Act and local access to health care.

Methods: Clinical intervention was not authorized due to administrative barriers. ACT designed a revised evaluative method where patients are introduced to SA Access and their four-month post-exposure confidence in choosing/using insurance plans is surveyed.

Results: Of the 38 healthcare workers who attended training sessions and completed the post-training survey, 97% said they will recommend SA Access to others; 78% agreed or strongly agreed they will use the app in the future and that the app will impact their practices. The Enroll America lecture was attended by 49 students and generated meaningful conversation about healthcare trainees' roles in the future of health coverage access.

Conclusion: Supported by positive feedback from training participants, SA Access has been identified as a potential tool in healthcare practices. Future directions include pursuing a clinical site for the impact evaluation and focusing future training sessions on patients to assess their app usage behaviors.

Outreach

Art Cart: Delivering Team-Based Therapy-Directed Art to the Children of the Ella Austin Community Center

Project Discipline: Medicine

Primary Presenter: Omar Akram

Other Student Team Members: Hayley Cantway, Aaron Frolichstein, Dirk Wristers

Mentor: Kamna Balhara, MD

Community Partner: Ella Austin Community Center

Project Location: San Antonio, Texas

Background: Unaddressed mental and emotional health needs in childhood may evolve into lifelong behavioral issues and worsened health outcomes. Art Cart is an initiative that develops therapeutic art projects for children with unaddressed mental and emotional health needs. It was introduced in the pediatrics unit at University Hospital in 2014 and expanded to the Ella Austin Community Center, a multisocial service agency for underserved residents of the east side of San Antonio, in 2016.

Objectives: The goal of Art Cart at Ella Austin was to assess the mental and emotional health needs of underserved children ages 5 to 9 and to implement a therapeutic art program to address those needs.

Methods: After a needs assessment was conducted with the directors of Ella Austin, an art curriculum focusing on team-based activities was designed for the children in the after-school program, culminating in the creation of a mural at the center's entrance. Weekly one-hour art sessions were held February to April 2017. Likert scale pre-surveys and post-surveys were administered to the children each session to determine changes in mood, stress, and self-confidence.

Results: On average, 23 children participated in each session. The survey data showed improvement in all measured aspects of mental and emotional health in each age group: when quantified by the Likert scale, mood improved by 10.93%, stress by 38.67%, and self-confidence by 7.97%. Furthermore, the children expressed visual and verbal enjoyment during the activities.

Conclusion: Therapeutic team-based art activities allowed noteworthy improvement in the areas of mood, stress, and self-confidence in at-risk youth ages 5 to 9. However, negative community-acquired mental and emotional health attributes usually do not manifest as strongly until an older age. The project may expand to include older age groups in the future to most effectively improve health outcomes for children with unaddressed mental and emotional health needs.

Outreach

Correlations Between Health Literacy and Risk Factors for Cardiovascular Disease in the Rio Grande Valley Area

Project Discipline: Medicine

Primary Presenter: Aliya Sharif

Other Student Team Members: Alexander Oderhowho

Mentor: Maria de Jesus Munoz, MD

Community Partner: Jeanette Groves

Project Location: McAllen, Texas

Background: Through knowledge and empowerment of their health, a community can be made aware of important lifestyle choices that are preventative of chronic diseases. Health literacy is a concern in communities that are both underserved medically and have high rates of preventable diseases. One such community with high rates of these diseases is the Rio Grande Valley area¹.

Objectives: The purpose of this study is to determine if there is a correlation between nutritional literacy and risk factors for cardiovascular disease in the Rio Grande Valley. We believe assessing possible roots of the issue is relevant to the community's needs due to high prevalence of such preventable diseases in the area.

Methods: Health screenings were conducted by trained students. Screenings included serum glucose and lipids, body mass index, and blood pressure. We used these values as proxy for risk factors of cardiovascular diseases and classified patients into high risk and low risk groups. Patients were asked to take a survey assessing nutritional literacy.

Results: In total, 93 patients were screened and 54% of patients screened participated in the surveys. Analysis of the data showed significant differences between the two groups based on stratified risk factors such as blood pressure, serum lipid, and BMI ($p < 0.0001$, respectively). No significant difference was appreciated between the two groups based on reported exercise regimens. However, patients in the low risk group scored significantly higher on assessed nutritional knowledge compared to high risk groups. Correlation analysis between scored risk and nutritional knowledge showed a significant negative correlation ($r = -0.32$, $p < 0.05$).

Conclusion: Results from this study show that an assessment of nutritional knowledge can possibly be an indicator for long term risk of poor health outcomes. This study also provides evidence that population health initiatives should include health and nutritional literary outreach in combating the burden of disease in medically underserved areas.

Outreach

Determining Practical Opportunities for Healthy Diet and Physical Activity in Adult Patients with Obesity

Project Discipline: Medicine

Primary Presenter: William "Dylan" De Muth

Mentor: Fozia Ali, MD

Community Partner: University Health System

Project Location: San Antonio, Texas

Background: Obesity is epidemic in primary care and related to many chronic conditions. In a primary care clinic serving a diverse and underserved population with high prevalence of obesity and related co-morbidities, this project aims to determine practical opportunities for healthy diet and activity (capability) in adult patients with obesity along with their readiness-to-change towards weight management.

Objectives: Increased capability towards diet and physical activity. Increased readiness-to-change towards weight management.

Methods: This is a prospective observational study design at the Family Health Center (FHC), a family medicine residency-training site in an urban, low income, Hispanic-majority area of San Antonio, Texas. Participants are patients aged 18 & older (n=100), receiving care at the FHC within the past 12 months, with BMI 30+ and with no cognitive impairment. The Capability Assessment for Diet and Activity survey will be used to assess capability towards diet and physical activity & Stages and Processes of Change Questionnaires in Weight Management (S-Weight and P-Weight) instrument to assess readiness-to-change. Basic demographics (age, gender, race, ethnicity, income, education and preferred language) will be compared to assess for association between readiness-to-change and capability towards diet and physical activity.

Results: This is a work in progress study. The preliminary results show 90% of participants (n=58) are of Hispanic ethnicity and 54% with monthly income less than 1000. Other demographics include 81% female, 19% male with mean age 52 and mean BMI of 40. 71% of participants showed readiness to change. Of the participants that showed readiness to change, 20% indicated high capability towards diet, 13% towards physical activity while 13% towards both diet and physical activity.

Conclusion: The results from this study will help to determine the practical opportunities for healthy diet and physical activity along with readiness-to-change, highlighting the need to address capability during weight management discussions.

Outreach

Disaster Relief Community Nursing

Project Discipline: Nursing

Primary Presenter: Beverly Hutzler

Other Student Team Members: Allison Stepanenko, BA, RN; Natasha Bakunda, RN, and Stephanie Lopez, RN

Mentors: Tracey Smith Page, DNP, RN, FNP-BC; Wendy Lee, DNP, RN, FNP-BC and Cindy Sickora, DNP, RN

Community Partner: Rockport Relief Camp and New Beginnings Ministries

Project Location: Rockport, Texas

Background: Hurricane Harvey made landfall in Rockport, Texas, on August 25, 2017, as a category 4 hurricane. Singers Paul Simon and Edie Brickell, having experienced the devastating effects of Hurricane Sandy, recognized the urgent need for nursing response. Their charitable contributions provided the means for a coordinated rapid response from UT Health School of Nursing faculty and students.

Objectives: Establish public-private partnerships to provide coordinated nursing interventions (primary, secondary and tertiary health promotion and illness prevention strategies) to reestablish physical, emotional, and spiritual well-being in communities affected by Hurricane Harvey.

Methods: From September to December 2017, coordination and provision of services were based on recurrent windshield surveys, key informant interviews, and community assessments. These processes were utilized to reassess the community stakeholders' needs resulting in the provision of immunizations, health education, disease specific screenings and advanced practice nursing interventions for illnesses and injuries. These interventions are supported by evidence in current health care literature.

Results: Over this four-month period, UT Health San Antonio School of Nursing students and faculty assessed 395 individuals, 3 months to 86 years old. Immunizations (88%) and targeted education (100%) were the most frequently provided interventions. Social media posts and patient statements repeatedly reflected gratitude and continued need for nursing services in the Rockport area.

Conclusion: Advanced practice nurses, nursing students, not-for-profit community and faith-based organizations collaborated to restore physical and spiritual strength in the wake of Hurricane Harvey. An acre of land, as well as a church parking lot became safe havens in the after math of a historic natural disaster. Through gestures of human kindness and nursing expertise the residents of Rockport are gaining force greater than that of a category 4 hurricane. #RockportStrong

Outreach

Don't Be Late - Vaccinate!

Project Discipline: Medicine, Nursing

Primary Presenter: Callie Marshall

Other Student Team Members: Allison Stepanenko, Natasha Bakunda, Stephanie Lopez

Mentor: Martha Martinez, MSN, RN, WHNP

Community Partner: Jireh House

Project Location: San Antonio, Texas

Background: The Jireh House, a non-profit social service agency in the Cassiano Homes affordable housing community, conducted a weekly "My Healthy Baby" class for caretakers of young children. UTHSA nursing faculty working with Jireh House initiated a project to address the need for timely immunizations as a primary prevention strategy for improving health outcomes.

Objectives: This project intended for 50% of the women participating in the class to take their under three-year-old children to receive their next set of vaccines.

Methods: The design of the project occurred in phases. A database was created for immunization and demographic data, then utilized to ensure that mothers were called when their child needed immunizations. A second strategy was designed after conducting cognitive interviews with several class participants: a calendar magnet for moms to keep track of immunization due dates. A third strategy included reminder notecards to mail to participants.

Results: By the October start date, 19 participants had submitted immunization records. Seven were involved in the Fall reminders. Using the initial strategy of phone reminders and self-reporting, immunization data is as follows: two children were already caught-up, three children had received the next vaccine by the time we called in October, and two children were caught-up by follow-up.

Conclusion: Jireh House activities have been suspended due to staffing issues, necessitating a project reevaluation. The initiative will work with the Nursing Family Partnership to distribute magnets and help women sign up for the Texas immunization registry. Jireh House provided data from the Spring 2017 Healthy Baby Class and the reminder program will continue prospectively through calls and cards. As of January, four of these women were successfully contacted, two have completed their children's immunizations, and two will make appointments. Over half of the moms had non-working phone numbers; therefore, follow-up home visits are being initiated to track immunization completion.

Outreach

Measuring the Impact of Music on Mood of Patients and Families at Christus Sister Mary Hospice Center

Project Discipline: Medicine

Primary Presenter: Tina Fleres

Other Student Team Members: Micah Je Eun Park, Ruby Gibson

Mentor: M. Rosina Finley, MD, CMD

Community Partner: Christus Sister Mary Hospice Center

Project Location: San Antonio, Texas

Background: Studies indicate that music therapy can bring peace and hope to family members of those with critical illnesses as well as decreasing pain and improving quality of life in hospice patients (Magill, Daine, et al.). Christus Sister Mary Hospice In-Patient Center staff have expressed a need for music options for its patients.

Objectives: Our goal with this quality improvement project was to implement a music therapy program at Sister Mary Hospice In-Patient Center and to measure its impact on hospice patients and their families. Our SMART objectives were as follows: 1) By February 28, 2018, 80% of in-patients will receive an admission packet regarding the hospice center music program as measured by weekly chart copies. 2) By February 28, 2018, 100% of families attending the on-site music presentation will be offered a musical performance as measured by a patient room checklist.

Methods: Three students performed monthly live musical performances. Each participant was asked to complete a 15-question Geriatric Depression scale (GDS) before and after performances. Three boom boxes and 30 CDs were made available for patients and families for bedside use. Music logs were provided to track CD usage.

Results: Of three live music sessions, 100% of patients and families were offered the program. Completed GDS scales revealed 40%;4/10, 43%;3/7, and 50%;1/2, mood score improvements. A 64% distribution rate of CD program information revealed that implementation was complex, especially in this sensitive environment under new hospice management.

Conclusion: Decreases in depression scores between pre- and post-surveys indicate a positive impact of live music performances on the moods of hospice patient families. Statements from participants also advocate for the music program's ability to give patients a sense of peace and renewal. Due to challenges incurred in distributing CD program information, a simplified system has been developed.

Outreach

Music and Art in Medicine: A Post Acute and Long Term Care Quality Improvement Project

Project Disciplines: Medicine, Inter-Professional: Administrative, Nursing, Activities, Medical

Primary Presenter: Max Feng

Other Student Team Members: Glennette Castillo, Steven Diep, Joel Pious

Mentor: M. Rosina Finley, MD, CMD

Community Partner: Sorrento Post Acute and Long Term Care Facility

Project Location: San Antonio, Texas

Background: Music and Art in Medicine (MAM) provides engaging music and art interventions to positively impact the mental health of geriatric residents. The organization extended its efforts to Sorrento Post Acute and Long Term Care Facility, which expressed a need for more activities to entertain their residents.

Objectives: The project aims to improve mood levels for post-acute and long term care residents through exposure to music and art, specifically measuring short-term effects on geriatric depression for residents at this facility.

Methods: Students went door-to-door through the facility, inviting residents to attend thirty minute music and art sessions. The events were advertised through facility-wide announcements. A voluntary, anonymous 15-item Geriatric Depression Scale, a validated geriatric tool used to measure depression, was administered to survey the moods of residents before and after each event. A score of 5 points or higher is indicative of depression, with higher scores indicating increased severity. Data was collected at 3 music and 3 art events.

Results: Out of the 10 events held, 6 were used for data collection. Of 83 residents and family who attended events, a total of 29 surveys were completed: 10 from art and 19 from music sessions. Analysis of surveys demonstrated that both music and art events had a positive impact on patients' D5 moods. Music had a greater impact on mood. Music lowered depression scale scores an average of 1.895 points/survey, while art lowered scores an average of 0.1 points/survey.

Conclusions: Bringing music and art to residents encouraged increased activity and socialization. Family members requested that students take their loved ones to the sessions. The facility was impressed with the level of resident participation and now incorporates door-to-door advertisement in their events. There are plans to continue the project, due to positive feedback from students who have participated in the project.

Outreach

Prevalence of Hypertension and Diabetes Mellitus in an Eagle Pass Community

Project Disciplines: Medicine, Public Health

Primary Presenter: Michael Bounajem

Other Student Team Members: Glennette Castillo, Steven Diep, Joel Pious

Mentor: Fred Campbell, MD

Community Partner: Ventanilla de Salud

Project Location: Eagle Pass, Texas

Background: Frontera de Salud is a student-run organization dedicated to bringing health screenings and education to south Texas communities. This project is focused on our work at the Mexican Consulate in Eagle Pass, where we partner with Ventanilla de Salud (VDS). At our events, health care students test blood glucose, lipids, BMI, and blood pressure of attendants and offer medical counseling.

Objectives: The purpose of this inquiry is to determine the prevalence of hypertension and diabetes in our Eagle Pass community.

Methods: By February 2018, I will have determined the prevalence of diabetes and hypertension in our Eagle Pass community as measured by the percentage of attendants that report pre-existing diabetes mellitus and hypertension. Additionally, I will have implemented a referral system such that all attendants with fasted glucose > 126 mg/dL or blood pressure > 140/90 mmHg will receive a referral with instructions about their condition and contact information for available clinics. VDS will conduct follow-ups by phone four weeks post-event to determine if recipients have attended their referrals. To quantify the prevalence of hypertension and diabetes in our attendants, we will administer surveys assessing their current medical conditions. Referral forms will contain the contact information of United Medical Center clinics and a description of their test results/needs.

Results: Throughout our two events in Eagle Pass, we had 86 attendants. Out of the 86, 50% had hypertension, 41.8% of which had normal blood pressure on exam. Additionally, 24.4% of the attendants had diabetes, 38.1% of which had normal glucose levels.

Conclusion: Through this study, we have improved our understanding of the true prevalence of two important diseases in our Eagle Pass community. We have also successfully implemented a referral system, giving our attendants a real opportunity for continued care. The phone follow-up system, however, will commence at the next event in February 2018.

NOTES

Kleberg Scholars

A Comparison of Challenges in Implementing Community Health Clubs Domestically Vs. Implementing Community Health Clubs in Underdeveloped Countries

Project Discipline: Medicine, Public Health

Primary Presenter: Monica Ruiz

Mentor: Jason Rosenfeld, MPH, DrPH(c)

Community Partner: South Texas Area Health Education Center (AHEC)

Project Location: Harlingen, Texas

Background: Reports of locally acquired Zika virus, endemic status of the Aedes mosquito, and lack of treatment and immunization for Zika, constitutes a need for Zika prevention in South Texas. Community health workers in South Texas, known as promotoras, use a conventional train-the-trainer (TtT) model to educate the community on public health topics. Community health clubs (CHC) are successfully implemented overseas for water sanitation and mosquito born illness prevention. This novel study will be the first ever to compare the effectiveness of utilizing promotoras within two community-based education models (CHC vs TtT) at increasing knowledge and stimulating behavioral changes to prevent Zika transmission and other mosquito borne diseases.

Objectives: A comparative analysis of the challenges of implementing a CHC in an underdeveloped country versus implementing a CHC domestically will be discussed. Based on the challenges identified, recommendations on implementing domestic CHCs that utilize promotoras will be provided.

Methods: Literature review of CHC implementation in underdeveloped countries was completed. A community needs assessment and promotora focus group was completed. Challenges identified in implementing CHCs were discussed with a lead promotora.

Results: Challenges identified in implementing a CHC in an underdeveloped country were migrating for employment, limitations in mobilization and support of village head. Challenges identified in implementing a domestic CHC were scheduling, compensation, and novelty of a new model.

Conclusion: Consider the following recommendations when domestically implementing a CHC: provide platform for discussion, appoint two promotoras to lead CHCs, provide appropriate financial and educational compensation, and do not schedule events around holidays. In initiating our study that will evaluate the effectiveness of promotora use in CHCs vs. TtTs, the information from this comparative analysis is pivotal in future efforts to implement CHCs domestically.

Kleberg Scholars

Identifying Strategies to Address Chronic Disease Prevention in Hispanic Obese Young Adult Males in Hidalgo County

Project Disciplines: Medicine, Public Health

Primary Presenter: Christian Aquino

Other Student Team Members: Everardo Ibarra

Mentor: Melissa Valerio, PhD, MPH; Carisse Orsi, MD

Community Partner: Hidalgo County Health and Human Services Department

Project Location: McAllen, Texas

Background: Hidalgo County, located on the Texas-Mexico border, has one of the highest rates of obesity and diabetes nationwide. Within this population, Hispanic young adult (18-26 years) males are a medically high-risk and underserved group. Successfully identifying and engaging this group in an intervention that is socially and culturally adapted in preventive healthcare remains a problem.

Objectives: Survey Hispanic young adult males to determine current health practices and needs for chronic disease prevention. Conduct focus group discussions to identify and characterize potential barriers and facilitators to participation in a men's weight/health management program.

Methods: We conducted a two-phase mixed-methods study to characterize the health of Hispanic young adult males in Hidalgo county. In Phase 1, participants completed a survey in one of five community settings. Survey metrics assessed participants' physical activity levels, smoking and alcohol history, insurance status, and health management resources. Anthropometrics were also measured. Phase 2 consisted of interviewing survey respondents who were classified as either overweight (BMI 25.0-29.9 kg/m²) or obese (BMI ≥ 30.0 kg/m²). Focus groups were conducted with 28 participants.

Results: A total of 244 participants completed the survey and measurements in Phase 1. The mean respondent age was 21.4 (0.1y) years. A total of 107 (43.9%) respondents were overweight and 66 (27.0%) were obese. Approximately 55% (n=136) of respondents had no form of health insurance. Phase 2 analysis points to common themes which participants perceived as facilitators to weight loss, including: a companion to help promote physical activity, direct physician intervention, and electronic forms of receiving/viewing nutritional and physical activity information.

Conclusion: The prevalence of overweight and obesity was found to be higher in this population in comparison to the national and state averages. The interviews provided information which identifies tools and strategies needed for the design of a successful intervention, tailored to address the needs of this population.

Kleberg Scholars

Promoting Suicide Prevention in Border Communities of Texas

Project Discipline: Psychology

Primary Presenter: Laura Eddy

Other Student Team Members: Feiyu Li, Lulu Wang

Mentor: David Roberts, PhD

Community Partner: Communities in Action Preventing Suicide

Project Location: San Antonio, Texas; Del Rio, Texas; Eagle Pass, Texas

Background: Suicide is the 10th leading cause of death for adults in the United States (*CDC, 2013*). Increased concerns about suicide in the Texas/Mexico border region led to the establishment of Communities in Action Preventing Suicide (CAPS), a collaboration of community stakeholders in border communities (Del Rio, Eagle Pass and Acuna).

Objectives: The aim of the current project was to collaborate with CAPS to provide citizens and healthcare professionals in these border communities with training in implementing Crisis Response Planning (CRP), an evidence-based approach to suicide prevention (Bryan et al., 2017). Our goals were to (1) provide training to at least 55 individuals, (2) evaluate effects on participant confidence in suicide prevention techniques, and (3) evaluate effects on participant attitudes toward suicide prevention.

Methods: A team from UTHSCSA provided four half-day trainings (two in English, two in Spanish) in December of 2017 in Del Rio and Eagle Pass. The training provided background information on CRP and step-by-step guidance in implementing this intervention. Before and after the training, attendees completed brief measures of confidence in implementing suicide prevention techniques and attitudes toward suicide prevention.

Results: There were 56 attendees at the English language trainings and 55 attendees at the Spanish language trainings. 23 attendees completed both pre and post questionnaires. Participants reported greater confidence after the training. Participant scores increased an average of 7.47 points (52.44 %). Further, participants demonstrated an average decrease of .87 points (2.25%) on a measure of negative attitudes toward suicide prevention. Booster meetings will occur in June of 2018. Participants will complete follow up measures of confidence and attitudes toward suicide prevention.

Conclusion: Higher than expected attendance suggests a strong community interest in suicide prevention. Attendance was associated with increases in confidence in suicide prevention techniques and decreases in negative attitudes toward suicide prevention. Implications will be discussed in greater detail.

Kleberg Scholars

Systematic Qualitative Evaluation of the Breathe Easy South Texas Program: A Community-centered Approach to Latent Tuberculosis Screening and Treatment

Project Disciplines: Medicine, Public Health

Primary Presenter: Soraya Naqvi

Mentor: Barbara Taylor, MD, MS

Community Partners: Texas Department of State Health Services Region 8, Metropolitan Health District, University Health System, United Medical Centers, Raphael Community Clinic, New Braunfels Rural Health Clinic, Vida y Salud Health Systems, Uvalde Memorial Hospital, Peterson Regional Medical Center, Hill Country Memorial Hospital, Community Health Development, Arthur Nagel Community Clinic

Project Location: San Antonio, Texas and neighboring counties

Background: The population of South Texas has a high incidence and prevalence of latent tuberculosis infection (LTBI) compared with national incidence and prevalence. The Breathe Easy South Texas (BEST) program was created to ease the burden of tuberculosis in this population. BEST works in partnership with public health institutions, federally qualified health centers, and other primary care venues in Bexar and surrounding counties to increase rates of screening, treatment initiation, and treatment adherence for LTBI.

Objectives: A program evaluation of BEST is needed to identify what project implementation factors, clinic-level factors, and patient-level factors lead to successful screening and treatment outcomes.

Methods: Semi-structured interviews were conducted with patients and clinic staff at each site. Purposive sampling was used to ensure that a variety of patient demographics and screening/treatment results were represented. Thematic analysis will be conducted on interview transcripts to identify patient, clinic, and implementation factors associated with successful outcomes.

Results: We conducted 16 patient interviews; 6 with participants in Bexar County and 10 with participants from clinic sites outside Bexar County. Among the patients, 11 were Latino/a, 4 were non-Hispanic White, and 1 was African American. Patient participant age range was 29 to 76 years, and the female to male distribution was 7 to 9. We also conducted 10 group interviews with staff and providers at sites implementing the program. These included: federally qualified health centers, community-based charitable clinics, and two regional medical centers.

Conclusion: Analysis of interview transcripts is underway. Notable barriers thus far include: medication toxicities, patient follow-up in mobile or vulnerable populations, and lack of personnel or resources to support the program. Once we have completed analysis of facilitators and barriers to successful screening and treatment, the BEST team will modify their interventions to improve programmatic outcomes.

11TH Annual CSL Conference Planning Committee

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Mentors

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CPS Energy	San Francisco Javier Hospital
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Gemini Ink	St. Francis Episcopal Church
Harlandale High School	Texas Department of State Health Services, Region 8
Haven for Hope	Travis Park United Methodist Church
The Health Collaborative	United Medical Centers
Healthy Futures of Texas	University of Texas School of Public Health
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