8th Annual Community Service Learning (CSL) Conference

The Answer in Plain Sight:
Can Positive Deviance Uncover Solutions to Community Challenges?

April 2, 2015
UT Health Science Center San Antonio

@CMHECSL  #cslconf  /CSLCMHE
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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 health care 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 and a panel discussion.

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

Conference Objectives

To share best practices and scholarship in community service learning with a focus on using positive deviance to uncover solutions to community challenges.

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.
March 5, 2015

Ruth Berggren, MD, FACP
Director, Center for Medical Humanities & Ethics
The University of Texas Health Science Center at San Antonio

Dear Ruth:

Please allow me to extend my appreciation and wholehearted support for the 8th Annual Community Service Learning (CSL) Conference hosted by the Center for Medical Humanities & Ethics. The conference has grown into an important resource for all of our schools and campuses, our partners in the San Antonio community and our sister institutions within The University of Texas System.

In particular, I take pride in being able to offer such an opportunity to our students. The UT Health Science Center at San Antonio is dedicated to instilling not only technical excellence in our students but also compassion for individuals and commitment to community. The conference is an important call to action, encouraging community-mindedness and giving students the tools to make a difference in San Antonio or wherever they end up practicing.

This year’s conference, "The Answer in Plain Sight: Can Positive Deviance Uncover Solutions to Community Challenges?", will guide our students in becoming keen observers of the community, looking for people who succeed under difficult circumstances and helping others to emulate them.

Our Health Science Center is very much a part of the fabric of San Antonio, and we are deeply invested in making our community better. That is evident in the 25,827 hours that our students spent in service to 20,791 people in the 2013-2014 academic year. The day-long conference gives us a chance to reflect on that achievement and rededicate ourselves to our mission of community engagement.

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

Sincerely,

William L. Henrich, MD, MACP

WLH:sg
March 6, 2015

Ruth Berggren, M.D., FACP
Director, Center for Medical Humanities & Ethics
The University of Texas Health Science Center at San Antonio
7703 Floyd Curl Drive, MC 7730
San Antonio, Texas 78229-3900

Dear Ruth,

Since my arrival in San Antonio in 2011, I have been impressed by students of the UT Health Science Center San Antonio. Their dedication to serving those in need is inspiring, and I especially appreciate their work to expand access to health care. With guidance and direction from your Center for Medical Humanities & Ethics, the students’ efforts have become a valuable resource for San Antonio.

With this in mind, I enthusiastically endorse the 8th Annual Community Service Learning (CSL) Conference: “The Answer in Plain Sight: Can Positive Deviance Uncover Solutions to Community Challenges?”

Each year, the CSL Conference brings together hundreds of students, working health professionals and others committed to better health for all. The insights and relationships they gain from the conference elevate their efforts to achieve that goal. The City of San Antonio benefits from having a growing community of health professionals who have not only passion for public health and social justice but also the knowledge and skills to make a difference in those areas.

I look forward to partnering with UT Health Science Center faculty, students and graduates for the betterment of San Antonio for many years to come.

Sincerely,

Thomas L. Schlenker, M.D., M.P.H.
Director, San Antonio Metropolitan Health District
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 transform 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. Our university is the only health science center in Texas, and one of only eight health science institutions 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, measurable 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 health care providers who work to reduce disparities and enhance access to health care throughout their careers.
Campus Map

- Additional Visitor Parking (Lot 6)
- Visitor Parking (Lot 8)
- Texas Star Café (Poster Session)

Conference Location

2015: 8TH ANNUAL COMMUNITY SERVICE LEARNING (CSL) CONFERENCE
The Answer in Plain Sight: Can Positive Deviance Uncover Solutions to Community Challenges?
CSL Conference Location: UT Health Science Center School of Nursing

Level One

Main Entrance to School of Nursing

Exit to Texas Star Café (Poster Session)
## Conference Agenda

<table>
<thead>
<tr>
<th>Time</th>
<th>Event</th>
<th>Location</th>
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<tbody>
<tr>
<td>8:15 a.m.</td>
<td>Registration Begins / Visit Community Partner Tables</td>
<td>Hurd Auditorium Foyer/Room 1.102</td>
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<tr>
<td>9:00-9:15</td>
<td><strong>Welcome / Opening Remarks</strong>&lt;br&gt;  Ruth Berggren, MD, Director, Center for Medical Humanities &amp; Ethics, UT Health Science Center San Antonio (UTHSCSA)</td>
<td>Hurd Auditorium 1.104</td>
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<tr>
<td>9:15-10:30</td>
<td><strong>Keynote:</strong> <em>The Positive Deviance Way: Solving Complex Problems by Uncovering and Amplifying Wisdom that is Present but Hidden</em>&lt;br&gt;  Arvind Singhal, PhD, Marston Endowed Professor of Communication, UT El Paso, Positive Deviance Researcher and Author</td>
<td>Hurd Auditorium 1.104</td>
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<tr>
<td>10:35-11:35</td>
<td><strong>Plenary Sessions: Positive Deviance Applied</strong>&lt;br&gt; <em>Choose one session to attend</em></td>
<td>Room 1.222</td>
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<tr>
<td>9:00-9:15</td>
<td><strong>Workshop A Breakouts: Developing Skills to Apply Positive Deviance</strong>&lt;br&gt; <em>Choose one session to attend</em></td>
<td>Room 1.228</td>
</tr>
<tr>
<td>10:35-11:35</td>
<td><strong>Looking at Problems through the Positive Deviance Approach:</strong>&lt;br&gt;  From Combating Childhood Malnutrition to Overcoming Health Care Issues&lt;br&gt;  Donna Sillan, MPH, Common River; Monique Sternin, MEd, Tufts University</td>
<td>Room 1.206</td>
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<tr>
<td>10:35-11:35</td>
<td><strong>The Wicked Question Answered: Positive Deviance and the Delivery of Patient-centered Care</strong>&lt;br&gt;  Jodie Gary, PhD, RN, Texas A&amp;M</td>
<td>Room 1.228</td>
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<tr>
<td>11:40-12:00</td>
<td><strong>Visit Community Partner Tables / Networking / Pick up Lunch</strong></td>
<td>Hurd Auditorium Foyer/Room 1.102</td>
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<tr>
<td>12:00-1:00</td>
<td><strong>Lunch: Panel Presentation of Outstanding CSL Projects</strong>&lt;br&gt;  Featured student panelists with their mentors and community partners&lt;br&gt;  Moderator: Janitzio Guzmán Medina, M.D. Candidate, Class of 2016, UTHSCSA</td>
<td>Hurd Auditorium 1.104</td>
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<tr>
<td>1:00-1:10</td>
<td><strong>Break</strong></td>
<td>Room 1.230</td>
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<tr>
<td>1:10-2:40</td>
<td><strong>Workshop A Breakouts: Developing Skills to Apply Positive Deviance</strong>&lt;br&gt; <em>Choose one session to attend</em></td>
<td>Room 1.228</td>
</tr>
<tr>
<td>2:40-2:50</td>
<td><strong>Break</strong></td>
<td>Room 1.206</td>
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<tr>
<th>Time</th>
<th>Session</th>
<th>Room</th>
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<tbody>
<tr>
<td>2:50-4:10</td>
<td><strong>Workshop B Breakouts: Developing Skills to Apply Positive Deviance</strong>&lt;br&gt;<em>(Choose one session to attend)</em>&lt;br&gt;(These sessions are repeated from Workshop A)*</td>
<td>Room 1.228</td>
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<td></td>
<td><strong>How Can We Effectively Engage the Community to Develop Solutions: Examples from the Fields of Nutrition and Public Health</strong>&lt;br&gt;Jason Rosenfeld, MPH, UTHSCSA; Donna Sillan, MPH, Common River</td>
<td>Room 1.230</td>
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<td><strong>How to Identify Successful Strategies Already at Work in the Community: Examples from Obesity in HIV Patients and Children</strong>&lt;br&gt;Jordan Abel, MD, UTHSCSA; Alex Foster, MD, MPH, UTHSCSA; Barbara Taylor, MD, MS, UTHSCSA</td>
<td>Room 1.222</td>
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<td><strong>Paradoxical Challenges in Delivering Health Care: Examples from Nursing Practice and Type 2 Diabetes</strong>&lt;br&gt;Claudia Boyd, MA, UT El Paso; Jodie Gary, RN, PhD, Texas A&amp;M; Monique Sternin, MEd, Tufts University</td>
<td>Room 1.206</td>
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<td></td>
<td><strong>Steps to Design, Test and Scale a Positive Deviance Intervention: Lessons from Teen Pregnancy Prevention</strong>&lt;br&gt;Ruth Berggren, MD, UTHSCSA; Alejandra Diaz, MA; Arvind Singhal, PhD, UT El Paso</td>
<td>Hurd Auditorium 1.104</td>
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<tr>
<td>4:15-4:45</td>
<td><strong>Closing Session: Using Positive Deviance in CSL</strong>&lt;br&gt;Ruth Berggren, MD, UTHSCSA; Alex Foster, MD, MPH, UTHSCSA; Arvind Singhal, PhD, UT El Paso</td>
<td>Texas Star Café</td>
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<tr>
<td>5:00-6:30</td>
<td><strong>CSL Poster Session / Reception</strong></td>
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Lunch

School of Nursing Hurd Auditorium, Noon-1:00pm

Those who registered by March 25 will receive a boxed lunch first; any extra lunches will be available to attendees who did not register in time. Green dots on name tags indicate vegetarian lunch preference, while red dots are for non-vegetarian lunches. Pick up your lunch in the School of Nursing foyer (before noon) and then head into the Hurd Auditorium to enjoy the Panel Presentation of Outstanding CSL Projects while eating lunch.

Poster Session People’s Choice Award

Vote for the Community Service Learning (CSL) Poster that you think deserves to be recognized!

Posters will be presented at 5:00pm in the Texas Star Café.

You have five (5) tickets in your name badge holder. Use them to vote for your favorite CSL poster by placing tickets in the bag(s) belonging to the poster(s) you are voting for. You may use all of your tickets on one poster or spread them out. It’s your choice! Each ticket counts as one (1) vote.

Winners will be announced the week following the conference and will receive a monetary prize. The winning poster will be displayed at next year’s Annual Community Service Learning Conference.

Thank you for participating in our Annual People’s Choice Award!
Presentation Summaries

Opening Remarks
Presented by Ruth Berggren, MD, FACP

Ruth E. Berggren, MD, FACP, 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. The Center focuses on four areas: ethics and professionalism; global health; community service learning; and the medical humanities. The daughter of public health physicians, Dr. Berggren spent her childhood in Haiti. Dr. Berggren is the Marvin Forland, M.D., 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

The Positive Deviance Way: Solving Complex Problems by Uncovering and Amplifying Wisdom that is Present but Hidden

Speaker: Arvind Singhal, PhD

Session Description: The keynote address will introduce the positive deviance approach and discuss how it can potentially solve a myriad of intractable problems in health and health care. The premise of this keynote is that solutions to complex problems exist but often hide in plain view. Such happens because problem-solvers typically ask: “What is the problem? What is not working?” Instead, what if problem-solvers asked: “What is working? And, against all odds?” Such an inquiry takes problem-solvers into a solution space that is known as the positive deviance Way. Positive Deviants are statistical and positive outliers — those who face the highest odds, who are least likely to have solved the problem, but who have actually solved it. Once the PDs are found, their micro-practices that are making the difference can be identified and then amplified. The positive deviance Approach has been employed in over 40 countries to combat malnutrition, prevent and control hospital-acquired infections, improve newborn and maternal care, enhance psychological resilience and manage pain.

Arvind Singhal, PhD, is the Samuel Shirley and Edna Holt Marston Professor and Director of Social Justice Initiative at The University of Texas at El Paso, and appointed (since 2009) as the William J. Clinton Distinguished Fellow, Clinton School of Public Service, University of Arkansas. He teaches and conducts research in the diffusion of innovations, the positive deviance approach, organizing for social change, the entertainment-education strategy and liberating interactional structures and his research and outreach spans sectors such as health, education, sustainable development, civic participation and corporate citizenship. Singhal has authored or edited 13 books, including Inspiring Change and Saving Lives: The Positive Deviance Way (2014); Health Communication in the 21st Century (2014); Inviting Everyone: Healing Healthcare through Positive Deviance (2010); Protecting Children from Exploitation and Trafficking: Using the Positive Deviance Approach (2009); and over 175 peer-reviewed essays in leading journals of communication, public health and social change.
Plenary Session 1  
**Looking at Problems through the Positive Deviance (PD) Approach:**  
*From Combating Childhood Malnutrition to Overcoming Health Care Issues*  

**Speakers:** Donna Sillan, MPH; Monique Sternin, MEd  

**Session Description:** This session will help participants 1) to understand the PD approach and how it is applied to the problem of malnutrition, 2) to learn about this approach using experiences from the field and 3) to practice using the PD approach to address a health problem using example cases.

**Donna Sillan, MPH,** is an international public health consultant, working for large NGOs in over 40 countries for the past 32 years. Focusing on community-based nutrition based on positive deviance, she devises nutritious recipes using local foods with village women throughout Asia and Africa. In 2007, Donna decided to distill the lessons she learned during her vast NGO experience and co-founded Common River, a non-profit organization in Sidama, Ethiopia. She divides her time between Mill Valley, California, and Aleta Wondo, Ethiopia, and in various countries while doing short-term consultancies.

**Monique Sternin, MEd,** is the co-founder of the Positive Deviance Approach & Initiative, a consultant on the positive deviance initiative and adjunct associate professor at Tufts University Friedman School of Nutrition Science and Policy. Born and raised in Paris, France, she did her graduate studies at the University of Paris in American literature and civilization. She also holds a Masters Degree in Education from Harvard University and a non-degree certificate in adult education from Boston State College. She has developed the PD methodology in a variety of international public health issues. With her deceased husband, Jerry Sternin, and Richard Pascale, she co-authored the book entitled, *The Power of Positive Deviance: How Unlikely Innovators Solved Intractable Problems*, published by Harvard Business Publishers in June 2010, and has co-authored many articles on the use of the PD approach.

Plenary Session 2  
**A Novel Approach to Reducing Healthcare Associated Infections**  

**Speaker:** Pranavi Sreeramoju, MD, MPH  

**Session Description:** Healthcare-associated infections continue to be significant public health burden in spite of availability of technical solutions. In this session, we will discuss the approach of positive deviance (PD), a complex adaptive intervention as compared to standard-of-care infection control. The challenges of using a PD approach are discussed along with the successes including a sustained reduction in health care associated infections and an improved culture of safety.

**Pranavi Sreeramoju, MD, MPH,** as Associate Professor in Medicine-Infectious Diseases at UT Southwestern Medical Center and Chief of Infection Prevention at Parkland, is responsible for advancing scholarly activities in health care epidemiology and leading system-wide quality, safety and process improvement efforts related to health care-associated infections. She currently chairs the infection prevention and control committee at Parkland and serves on several national and regional quality and safety committees. She is a recipient of the Outstanding Infectious Diseases Teacher of the Year award in 2011. She was featured in the Women in Medicine series in 2014 by the Dallas Medical Journal.
Plenary Session 3
The Wicked Question Answered: Positive Deviance and the Delivery of Patient-centered Care
Speaker: Jodie Gary, PhD, RN

Session Description: The purpose of this education activity is to enhance knowledge and practice in health care quality by addressing positive deviance in an effort to improve patient care as evidenced by improvement in patient outcomes and patient satisfaction. By participating in this session, participants will be able to 1) Provide an operational definition for positive deviance in nursing; 2) Describe a model of positive deviance in nursing within the Theory of Complexity; and 3) Discuss how quality improvement programs can utilize positive deviance to advance the quality of care.

Jodie Gary, PhD, RN, is currently an Assistant Professor in the College of Nursing at Texas A&M University Health Science Center where she coordinates the RN-BSN Program. Prior to academia, Jodie earned 20 years of health care experience including field emergency medical management, clinical and laboratory research, and primary care nursing including supervisory positions in telemetry and critical care. Her primary research focus is aimed at the delivery of patient-centered care with the complexity of health care. She has published as well as presented in this area concerning the use of positive deviance by nurses.

Plenary Session 4
Small Actions that Make a Big Difference: Succeeding Despite the Odds in Health Care Education
Speaker: Lucia Dura, PhD

Session Description: Most studies and interventions in health care education focus on identifying barriers to student success, e.g., socioeconomic status, ethnic background, admissions procedures and previous educational experiences. This session proposes a 180-degree shift. It depicts the process and findings of a positive deviance inquiry on pre-medical student success against the odds at The University of Texas at El Paso. The case study will be used to anchor a dialogue with participants around health care education, the positive deviance approach and ideas for future applications.

Lucia Dura, PhD, is Assistant Professor of Rhetoric and Writing Studies in the Department of English at The University of Texas at El Paso (UTEP). Her research focuses on innovative approaches to organizational and social change, intercultural communication, risk communication and the discourses of health and medicine. Her recent work on positive deviance and intercultural communication has yielded numerous peer-reviewed presentations and publications. Her proposal on the implementation of positive deviance as an innovative approach to change in the Texas educational system won first place in the UT Arlington Distinguished Leaders Academy Public Service Awards 2009-2010 competition, and she is currently working on several positive deviance and education projects at UTEP.
Lunch

Panel Presentation of Outstanding CSL Projects
Moderated by Janitzio Guzmán Medina, MD Candidate, Class of 2016

Janitzio Guzmán Medina attended The Ohio State University as a Morrill Distinction Scholar, where he received his BS in Microbiology in 2010. Since then, he has remained extensively involved in community-oriented organizations, including service as a student leader in the UT Health Science Center San Antonio Center for Medical Humanities & Ethics and as a Trustee of the National Hispanic Institute. Janitzio, now a third year student in the School of Medicine, is particularly interested in community-based policy and practice.

Featured Panelists

Student Leader: Ken Okons, Medical and Public Health Student
Faculty Mentor: Melissa Valerio, PhD, MPH
Community Partner: Kendra Stine, MPH, MS, City of Brownsville Public Health Department
Project: CycloBia Brownsville: Impact on Public Health

Student Leader: Megan Roberts, Physician Assistant Student
Faculty Mentor: Moshtagh Farokhi, DDS, MPH
Community Partner: Father Chirstopher Robinson, St. Francis Episcopal Church
Project: Toward an Improved Patient Care Delivery System: Implementing Six Sigma LEAN Management for the San Antonio Refugee Health Clinic

Student Leader: Narine Wandrey, Medical Student
Faculty Mentor: David Henzi, EdD
Community Partner: Bert Pickell, San Antonio Walks!
Project: Salud al Pasito: Small Steps Toward Better Health
Workshop A Breakouts: Developing Skills to Apply Positive Deviance

Workshop 1: *How Can We Effectively Engage the Community to Develop Solutions: Examples from the Fields of Nutrition and Public Health*

Speakers: Jason Rosenfeld, MPH; Donna Sillan, MPH

**Session Description:** In this session, participants will discuss using the positive deviance (PD) approach applied to combat malnutrition through the HEARTH method and also discuss needs assessment approaches. Participants will also practice using the PD approach for particular problems: MRSA, medical errors, end of life, cholera, immunization, FGM, etc. using case studies while working in small groups. Each group will select a case study and develop the PD methodology.

Jason Rosenfeld, MPH, is a public health professional with over nine years of experience designing, implementing and evaluating international health and development programs, with a specific focus on community-based water, sanitation and hygiene (WASH) education programs. Since 2011, Mr. Rosenfeld has served as the Assistant Director for Global Health at the Center for Medical Humanities & Ethics, where he directs the global health program for the medical school, and mentors MD/MPH students with an interest in community-based health education and evaluation research. Since 2012, Mr. Rosenfeld has directed, through the Lakou La Sante Foundation, a partnership between the Center and the Eco-Eau et Jeunesse Haiti organization, the implementation of the first adaptation of the Community Health Club model in Haiti.

Donna Sillan (see bio on Page 12)

Workshop 2: *How to Identify Successful Strategies Already at Work in the Community: Examples from Obesity in HIV Patients and Children*

Speakers: B. Alex Foster, MD, MPH, Jordan Abel, MD and Barbara Taylor, MD, MS

**Session Description:** In this session participants will initially hear about two different projects on identifying and characterizing positive deviants — a project on childhood obesity and another on obesity in people living with HIV. In the second part of the session, participants will practice the skill set of identifying positive deviants using examples derived from their own experiences with the assistance of the moderators. The various approaches will be shared and discussed to highlight innovation and creativity.

Alex Foster, MD, MPH, is an Assistant Professor in the Department of Pediatrics, School of Medicine at the University of Texas Health Science Center at San Antonio. His current work is on applying the concept of positive deviance to the problem of early childhood obesity in the lower Rio Grande Valley of Texas, where the rates of obesity are some of the highest in the nation. He hopes to develop a model for community-based obesity treatment that begins early in childhood and uses existing practices in the community to provide sustainability by design.

Jordan Abel, MD, is a second year fellow in the Division of Infectious Diseases at the University of Texas Health Science Center in San Antonio. He graduated from the University of Texas at Austin with a Bachelor of Arts in Music and a concentration in Voice as a member of Phi Beta Kappa honor society. He then attended medical school at the University of Texas Medical Branch at Galveston and moved to San Antonio, Texas, to complete a residency in Internal Medicine at University Hospital and the South Texas Veterans Health Care System. He works closely with his research mentor, Barbara S, Taylor, MD, MS, on a variety of topics in the HIV realm, including body image perception, obesity, preventative care and quality improvement.
Barbara Taylor, MD, MS, is an Assistant Professor of Infectious Disease at the University of Texas Health Science Center San Antonio. She holds co-appointments at the University of Texas School of Public Health and the Columbia University College of Physicians and Surgeons. She conducts mixed methods research to identify barriers to care and improve outcomes for underserved people living with HIV in the U.S. and Latin America. She is particularly interested in structural barriers to HIV care, such as geographic mobility, and the intersection between HIV and other comorbidities, including diabetes, obesity and cardiovascular disease. She has ongoing research projects in New York, San Antonio and the Dominican Republic. She also teaches in the global health curriculum at UT and Columbia.

Workshop 3: Paradoxical Challenges in Delivering Healthcare: Examples from Nursing Practice and Type 2 Diabetes
Speakers: Claudia Boyd, MA, Jodie Gary, PhD, RN and Monique Sternin, MEd

Session Description: Questions engage everyone in sharper strategic thinking by revealing entangled challenges and possibilities that are not intuitively obvious. They bring to light paradoxical-yet-complementary forces that are constantly influencing behaviors and that are particularly important during change efforts. Wicked Questions make it possible to expose safely the tension between espoused strategies and on-the-ground circumstances and to discover the valuable strategies that lie deeply hidden in paradoxical waters.

Claudia Boyd, MA, is a lifelong resident of El Paso, Texas. She earned her BA and MA at the University of Texas at El Paso in communication studies. Her MA thesis was focused on the effects of communication in health outcomes of people living with diabetes. Her thesis, *The Sweet Taste of Success: A Positive Deviance Inquiry of Communicative Acts that Lead to Healthy Management of Diabetes Among Hispanics*, uncovered both interpersonal and intrapersonal acts and behaviors that lead Type 2 diabetics to successful Hba1c management with little or no drug intervention. She currently teaches introductory communication classes at UTEP and is pursuing her doctorate in health communication.

Dr. Jodie Gary and Monique Sternin (see bios on Page 13 and 12, respectively)

Workshop 4: Steps to Design, Test and Scale a Positive Deviance Intervention: Lessons from Teen Pregnancy Prevention
Speakers: Alejandra Diaz, MA; Arvind Singhal, PhD; Ruth Berggren, MD

Session Description: In this interactive session, Alejandra Diaz will briefly discuss the steps she followed to conduct a positive deviance inquiry on teenage pregnancy in El Paso County. Following her presentation, Drs. Singhal and Berggren will lead the participants in a step-by-step process of how to conduct a positive deviance inquiry in the tradition of action research, and from there how to design, test and scale a positive deviance intervention. Participants in this workshop will have a simulated experience in the various steps of the positive deviance process.

Alejandra Diaz, MA, is a Communication and Marketing specialist, with an emphasis on Crisis Communications for a nonprofit organization in the Houston area. Alejandra graduated with a Master’s Degree in Communication Theory from the University of Texas at El Paso. Alejandra’s thesis work reflected her interest in finding solutions to her community’s recurrent problems, and decided to focus her efforts on teen pregnancy using a positive deviance framework. Alejandra has been working on women’s reproductive health, implementing her research findings and collaborating with education programs.
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*Presented in Panel Presentation of Outstanding CSL Projects
Chill Spot: A HIV+ Advocacy and Wellness Group for Young People

Project Discipline: Medicine
Primary Presenter: Raghuveer Puttagunta
Other Student Team Members: Elizabeth Thoyakulathu, Sherri Bogard
Name of Mentor: Ruth S Buzi, MSW
Community Partners: Thomas Street Health Center and Baylor Teen Clinic
Project Location: Houston, Texas

Background: The incidence of HIV infection in young people (13 to 24 years old) has sharply increased, accounting for 1 in 4 new infections. These newly infected young people are at a critical juncture in the management of their chronic disease while transitioning into adulthood.

Objectives: The project aimed to equip HIV+ young people with education and skills to make empowered choices in all aspects of their life by improving health literacy, medication adherence, community engagement and self-directed goal achievement to eventually mitigate the overall health care burden by impeding the early conversion of HIV to AIDS.

Methods: After conducting two focus groups, a weekly advocacy and wellness group was established in May 2014. The typical meeting agenda encompasses a well-balanced dinner, social activities, peer-led discussion of personal challenges and a small didactic session. On a monthly basis, individual interviews and ongoing needs assessment were conducted.

Results: Over the past 25 group meetings, the attendance ranged from 1 to 5 participants, with an age range of 18 to 27 years old. All female clients have young children with active childcare issues. The group consists of individuals from multiple ethnicities and different education levels, sexual orientations and sero-concordant/discordant relationships. Of the participants, 66% have attended over 5 meetings. During the meeting, the issues discussed ranged from illness, grief, substance abuse and life skills such as interview techniques and budgeting. Education topics have included nutrition, navigating the health care system and work-life balance. Participants are now active leaders and are sharing responsibilities in group activities.

Conclusion: The wellness group has provided HIV+ young people with an opportunity to engage their peers outside the clinic, which empowers them to overcome personal obstacles, achieve career goals and be an active citizen of the community.
Background: Breastfeeding is a beneficial practice that nourishes and protects infants, while supporting the health of the new mother. However, many women, particularly young mothers, do not breastfeed due to lack of resources, education of the benefits and support. Breastfeeding Education and Support for Teenage Mothers (BEST) was implemented to address this specific community need. Specifically, Seton Home directors expressed concern that the negative attitude towards breastfeeding held by many staff members was serving as an impetus to the initiation and continuation of breastfeeding for girls at Seton Home.

Objectives: Assess the attitudes of the Seton staff toward breastfeeding. Assess whether an informational meeting and small group session impacted staff attitude towards breastfeeding.

Methods: We administered a pre-survey on attitudes towards breastfeeding at a staff meeting. We then held an informational session about the benefits of breastfeeding for baby and mom. During this meeting, the Seton Home staff was asked to split into groups and collaborate on ways they could change the behavior and culture at Seton Home to promote breastfeeding. After the meeting and small group session, a post-survey was administered.

Results: Results indicated that the initial information we received from Seton Home directors regarding staff attitudes was incongruent with the data provided by our pre-surveys. Our findings suggest the Seton Home staff is both supportive of and well-informed about breastfeeding and its benefits.

Conclusion: Based on our time spent working closely with Seton Home, we observed that negative attitudes toward breastfeeding were held mainly by the residents rather than the staff. Non-breastfeeding girls displayed largely unsupportive and oppressive peer-to-peer attitudes toward openly breastfeeding in common areas, thereby exiling breastfeeding mothers to their rooms. In the future, we need to evaluate the root of these negative attitudes and seek solutions on an interactive platform between the Seton Home residents.
Frontera de Salud: Assessing and Quantifying Community Impact

Project Disciplines: Medicine, Nursing, Physician Assistant and Public Health
Primary Presenter: Eithan Kotkowski
Other Student Team Members: Pegah Ghamasaee
Mentor: Melanie Stone, MPH, MEd
Community Partner: Various
Project Location: San Antonio, Texas

Background: Frontera de Salud is a student organization that functions at the behest of UTHSCSA’s Center for Medical Humanities & Ethics. Its community impact among underserved populations and Health Science Center (HSC) students has been growing since its inception in the early 2000s. Since receiving MHM funding, Frontera has taken part in a wide variety of health events involving education, screenings (glucose, lipid, BMI) and consultations, vaccine administration and sports physicals. Frontera has also been heavily involved in education lectures and projects within the HSC proper in which students are the main beneficiaries. Such events are comprised of CSL toolkit workshops, visiting lecturers, active learning projects such as the poverty simulation workshop and the CSL elective course itself. However, when reporting our level of impact, i.e. for the purposes of grant funding, there has been a discrepancy in how community and event impact is reported.

Objective: This project proposes a new method of categorizing Frontera de Salud events as both “service” and “teaching/learning” with a total of 5 levels of impact (subsequently defined).

Methods: We used data from the 2013 and 2014 years to estimate and define the various categories and levels that can be used to effectively report on community and event impact.

Results: We found that Frontera events have particular qualities that make them distinguishable from one another, namely services provided, and extent to which money and preparation is required. This new form of categorization splits “service” and “teaching/learning” events into two groups, each with five levels of impact. Creating these distinct, clearly defined categories will allow us to more accurately report on our event influence in the student and patient communities.

Conclusion: To be more accurate at reporting impact data, clear distinctions and definitions need to be made between the events and services provided by Frontera.
Background: It is well known that Dengue fever (DENV) and its mosquito vectors are endemic to South Texas, as such, the City of Brownsville Public Health Department has been collecting mosquito surveillance data since 2009. However, until now there have been no local resources to interpret the data or to evaluate the surveillance procedures.

Objectives: The principle objectives are to gain a better understanding of DENV vector ecology by establishing a vector surveillance database and to improve existing surveillance protocol in the city of Brownsville, Texas.

Methods: First, we created an electronic database and input existing data. The data was then used to calculate spatio-temporal and weather related associations between the vector and the environment to evaluate factors that may affect local disease transmission. To improve data quality and ensure sustainability of the project, we trained vector personnel in using the database and on current surveillance procedures. In evaluating the surveillance protocol, the principle need was the traps themselves. For improved data collection and future expansion of surveillance we increased trapping capacity by five-fold by purchasing new mosquito traps.

Results: During program evaluation we expanded the scope of surveillance beyond DENV to include the other five potentially locally acquirable arboviruses. In the process of evaluation and data analysis, we gained a better understanding of local arbovirus vector ecology. This project also facilitated partnerships with the City of Brownsville and Cameron County Health Department. It also served as the impetus to develop the South Texas Arboviral Disease Surveillance Program.

Conclusion: As a result of our activities in the city of Brownsville, future arbovirus surveillance will provide better data and a systematic approach for understanding local vector ecology. The partnerships fostered between academic and public health institutions will help increase capacity for future investigations on human and vector transmission of arboviral disease in South Texas.
**Background:** The community health clubs (CHCs) are structured programs, which use dialogue familiar to a targeted community to enact progressive changes to community behavior, while still remaining culturally appropriate for long-term adherence. The CHC model has been implemented with positive results globally for the maintenance of sanitary water. A domestic adaptation of the model in the medically underserved, primarily Hispanic Harlandale ISD of San Antonio is proposed.

**Objectives:** A CHC will be established to increase community awareness of health problems, provide a curriculum addressing specific community needs and stimulate communal action to address those needs. Interventions will focus on integrating health services and programs near the community.

**Methods:** In January 2015 a needs assessment through asset mapping with focus group discussions was initiated to identify acceptability and appropriateness of the model. A discussion with community stakeholders identified hospitals, schools, parks, grocery stores and clinics in Harlandale. Additional discussions are scheduled for April 2015 with clients utilizing services with Y-Living, Avance and Wesley Health & Wellness to identify major health concerns and receptiveness to the model. Specific education curriculum will be designed to draw potential club members based on their needs.

**Results:** Preliminary results of the map indicated that several health services were available in Harlandale, however, access to these resources is limited due to safety and transportation issues. Discussions with stakeholders revealed that these programs target services to specific groups, but are not community focused or integrated with other services.

**Conclusion:** This model strives to develop a program with active community participation, discussion and long-term self-management. A need exists for an integrated health model which focuses health education and services to the community. The model was initially well received by stakeholders and gaps exist in current health services, such as elderly care and preventive health education.
Military and Veteran Community Council Program Evaluation

**Project Disciplines:** Graduate School and Translational Science

**Primary Presenter:** Ruth Morris

**Other Student Team Members:** Grace Lee, Rosalie Aguilar, Jessica Rivera, Poornima Mensinkai, Summer Wilmoth

**Mentor:** Mary Jo Pugh, PhD, RN

**Community Partners:** Military and Veteran Community Council

**Project Location:** San Antonio, Texas

**Background:** Service members and Veterans face many challenges as they reintegrate back into civilian life. The Military and Veteran Community Council (MVCC) has two initiatives to provide the support and resources needed to optimize the transition out of military service, focusing on the areas of education, employment, housing and health; the Texas Transition Information Program (TxTIP), a quarterly workshop for active duty and the Veteran Transition Information Program (VTIP), a monthly workshop for veterans within the community. In collaboration with the MVCC, student researchers have designed and are conducting an ongoing program evaluation for the TxTIP and VTIP.

**Objectives:** The TxTIP and VTIP programs have the purpose of educating the vulnerable special population of veterans and their families to access resources and knowledge in the local community that will help eliminate or minimize the impact of the specified social determinants of health. The objective of the programs are for participants to have an increase in knowledge of the workshop topics as measured by post seminar surveys and to sustain the knowledge gained and advanced in their goals as related to workshop topics (such as obtaining employment, housing, improving family relationships, etc) as measured by follow-up surveys at three months.

**Results and Conclusion:** The project will continue to be conducted through September 2015. Afterwards, all of the surveys and post surveys administered will be tabulated. Statistical analysis of this data will be undertaken and a full report of findings will be presented at the UTHSCSA Community Service Learning Conference in April 2016. At that time, final conclusions about the project will be made as well as recommendations for the future. Additionally, the steps taken and recommendations for community collaboration will be discussed.
Background: On April 24, 2013, a tragedy struck Rana Plaza, a high rise building in Bangladesh where garments were being made for major international companies, leaving more than 1100 dead and thousands seriously injured. In this study we report on the surviving workers' physical strength, disability index and their return to work one year after the disaster.

Methods: This cross sectional study took place at Center for Rehabilitation for the Paralyzed (CRP) which provided care for 517 victims. Upper extremity strength was assessed by dynamometer hand grip (HG), while lower extremity strength was assessed using 5 time sit-to-stand test (ST S). Disability was measured using the WHODAS survey. All data were entered into Excel and then to STATA.

Results: In our preliminary findings we have found that 181 subjects were interviewed, average age was 27.8 years, 60.8% were women and 34.3% had completed primary school. A total of 179 participants were able to complete a HG test (men=61.1lbs and women=36.4lbs). Only 127 participants were able to complete ST S (men=18.7s and women=20.7s). Two patients were completely unable to perform any physical task due to injury severity. Disability mean score was 49.8 (SD 17.5), with women scoring higher than men (51.2 vs 47.7). Majority, 66.3%, claimed to be unable to work due to health conditions. However, more females (19.1%) than males (12.7%) returned to work.

Conclusion: The group falls below norm levels of HG and time to complete the 5-time ST S test. In particularly women are much weaker, reporting higher level of disability, yet women are more likely than men to return to work. There is a need to initiate programs focusing on improving workers health, safety and well-being programs for this marginalized working population who make their living making clothes for western markets.
Addressing Xerostomia in Patients with HIV/AIDS

**Project Discipline:** Dental

**Primary Presenter:** Brittany Gillard

**Other Student Team Members:** Alex Barrera

**Mentor:** Gene Stevenson, DDS, MPH, MS

**Community Partner:** Bering Omega Community Services

**Project Location:** Houston, Texas

**Background:** Studies have demonstrated that oral health care is one of the highest unmet needs for patients living with HIV/AIDS. One of the most common oral health complaints from this population is the condition of xerostomia.

**Objectives:** This project aimed to improve the quality of life of HIV/AIDS community of Houston by relieving dry mouth symptoms. It was also the aim to increase awareness of dry mouth among this community and the importance of good oral hygiene.

**Methods:** Clients were seen at the Bering Omega Dental Clinic in Houston, Texas for two 30-minute sessions. The pre-intervention session included an education session on xerostomia and oral hygiene, as well as a survey to record the baseline symptoms on a visual analog scale. The postintervention session included feedback from the client on their experience with the products, as well as a survey to record the change in symptoms.

**Results:** There were 29 patients seen for initial visits and 18 seen for follow up visits between June 2014 and November 2014. Participants ranked their symptoms of oral dryness, sensation of thirst, difficulty speaking, burning tongue, difficulty swallowing, difficulty chewing dry foods, difficulty tasting and eye dryness on a 0-100 visual analog scale. Across the board, the average change for the various symptoms was 25 and the median was 25. Oral dryness, sensation of thirst and difficulty speaking showed the greatest improvement after using the products.

**Conclusion:** The quality of life in these patients was improved because every participant gave positive feedback on at least one symptom. The future phase of this project will include sustainability and the development of a curriculum for dental professionals who treat patients with xerostomia.
Clinical Service

**Art Cart — Development of a Therapy-directed Arts Delivery Program for Inpatient Pediatrics Patients**

*Project Discipline:* Medicine, Nursing, Child Life Specialist  
*Primary Presenter:* Chris Yan  
*Other Student Team Members:* Michael Martinez, Russell Prichard, Janet Chen, Sarah Jin  
*Mentor:* Glen, Medellin, MD  
*Community Partner:* Witte Museum  
*Project Location:* San Antonio, Texas

**Background:** Hospital play activities, such as arts & crafts, have been shown to positively affect various stress modifiers (anxiety, pain, mood, sleep), especially when implemented as interactive activities. This is not commonly known in the community. Moreover, art activity programs exist in other hospitals, but few are therapy-driven.

**Objectives:** Primary goals of the Art Cart were to develop a pediatric art activity program at University Hospital utilizing art, music and reading activities, and to evaluate its effectiveness in modulating stress. A secondary goal was to assess community knowledge on the benefits of these program through the Witte Museum, whose visitors’ demographics accurately represent those of San Antonio overall.

**Methods:** Two Art Carts were developed in fall 2014. After receiving hospital training and obtaining IRB research approval, students began distributing kits (interactive arts & crafts, music and reading activities) to patients and assessing qualitative symptomatic benefits. Program development was begun at the Witte Museum for a community knowledge assessment for Spring 2015.

**Results:** 32 patients have participated in the Art Cart activities thus far, with 15 patient responses. Arts & crafts kits had greatest utilization (n=25), followed by reading kits (n=6), then music kits (n=2). Response rates were 60% (n=15), 33% (n=2) and 0%, respectively. For those who responded, the most common stress modifiers that were positively affected were anxiety (87%, n=13) and mood (73%, n=11). All respondents reported benefits.

**Conclusion:** Subjective benefits were reported from all surveys on arts & crafts or reading kits, with arts & crafts being the most popular activity. Survey collection has been challenging due to patient discharge, or lack of survey Community Service Learning (CSL) Abstract Submission Form participation. Assessment of benefits will be ongoing through March/April, but will later look at the degree of effect on the highest scoring stress modifiers. Initial data showed anxiety and mood were impacted most often.
Clinical Service

Integrating Medical Knowledge, Engineering Skill and Physician Input to Create and Optimize Effective, Low-cost Solutions for Global Health Settings

**Project Disciplines:** Medicine, Respiratory Care, Public Health and Bioengineering  
**Primary Presenter:** Rebecca Hernandez  
**Mentor:** Jason Rosenfeld, MPH  
**Community Partner:** Rice University - Beyond Traditional Borders  
**Project Location:** Blantyre, Malawi, Africa

**Background:** Many hospitals in low-resource settings lack the medical devices, tools and training necessary to provide adequate patient care, leading to millions of preventable deaths annually. Queen Elizabeth Central Hospital (QECH) in Blantyre, Malawi receives donations of medical equipment, but there are often disparities between what is needed, what is provided and what is sustainable. Beyond Traditional Borders (BTB) at Rice University works with physicians and nurses to create innovative, low-cost and effective technologies and provides the education and support to maintain the devices. Devices such as the bubble Continuous Positive Airway Pressure (bCPAP), which has been at QECH since 2007 and is used to help children in respiratory distress, work to improve mortality rates in global health settings.

**Objectives:** This project aimed to study the integration of engineering and medicine and identify how to optimize the bCPAP trial while utilizing resources properly.

**Methods:** At QECH in Blantyre, Malawi, BTB engineers work with local physicians and nurses to create and optimize global health technologies. Clinical outcomes were catalogued across Malawi to determine how the bCPAP affects mortality. Simple visual guides were created with input from the health care staff to help teach physicians how to use the bCPAP with newborn to six-month-old patients.

**Results:** The bCPAP has helped to improve the quality of care available for children in respiratory distress across Malawi. We determined that it is crucial to keep constant contact with the physicians rotating in the Pediatric Nursery to ensure that they receive the proper training and orientation.

**Conclusion:** In order to optimize situations in Global Health settings, it is imperative to provide appropriate devices, tools and education to health care providers. These steps will increase the effectiveness and operation of technologies like the bCPAP and help to improve the overall mortality rate in Blantyre, Malawi.
Partnering with a Faith-based Organization to Enhance Positive Outcomes for Home-bound Seniors

Project Discipline: Nursing
Primary Presenter: Lindsay Bohne
Other Student Team Members: Alejandro Gomez, Jesus Gomez, Jason Jeffers, Allyson Puckett, Rodrigo Resendiz, Monique Reyes-Lester, Adam Rick and Jill Robinson
Mentor: Linda Moore EdD, MSN, RN
Community Partner: Trinity Baptist Church of San Antonio
Project Location: San Antonio, Texas

Background: Trinity Baptist Church identified a need for home visits for their home-bound adult members. A partnership was initiated between Trinity Baptist Church and UT School of Nursing.

Objectives: The aims were two-fold in nature. First, nursing students learned a multitude of professional nursing and managerial skills relating to home visits. Second, aside from enhancing healthy outcomes, the senior participants developed a sense of purpose for they knew they were helping in the development of health care leaders (future Registered Nurses).

Method: With the faculty mentor in attendance, students traveled to participants’ (n=9) homes performing assessments that entailed physiological, psychosocial and environmental home safety. Part of the assessment included the utilization of the Hartford Foundation, Try this Assessment Tools. Students reviewed the findings with the senior participant, enhancing the senior’s health and safety outcomes. Additionally, students maintained a weekly reflective journal allowing an opportunity to express how the clinical experience impacted them. At the end of the clinical experience, the senior participants will complete an evaluation that will also address how this experience has impacted them.

Results: As this clinical activity is in-progress, the results will be available prior to the date of the Research Conference. Current anecdotal comments from the senior participants indicate a positive experience with the students making the home visits. All of the students have verbalized the importance of the visits to home-bound individuals.

Conclusion and Recommendation: This pilot study has demonstrated the importance of community engagement, holistically enriching the lives of both the students and homebound seniors. This model may prove beneficial in the health care industry to reduce health care costs especially for individuals who have high risk health conditions that may be reduced by having these types of home visits by students in the varying health care disciplines.
Asthma is a chronic disease that can be deadly if not managed correctly. More than 3 thousand people, nationally, died prematurely due to uncontrolled asthma in 2011. 3 million people live in Public Health Service Region 8 (PHSR8), which incorporates San Antonio. There are almost 2.6 million people in PHSR8 with asthma and more than 63 thousand of them are children. Many asthmatics are without insurance or have insurance but are unable to afford their copayments. In order for these patients to best manage their asthma, they must have access to medications and be taught how to use them correctly. These statistics, along with many others, emphasize the need for asthma clinics such as the Urban Surge Free Asthma Clinic, which is the location of our project.

Objectives:
Patients will demonstrate proper and consistent use of prescribed medications. Patients will have an increased awareness of signs and symptoms relating to an asthma exacerbation.

Methods:
FeNO and FEV1 measurements will determine the likelihood of an impending exacerbation. Asthma knowledge and asthma control surveys will also be utilized to gage the patients’ disease understanding and medication adherence.

Results:
More than 50% (15/28) of patients were Hispanic, females while 42% (12/28) of those had an education level of a high school diploma or less and did not have insurance. A vast majority of patients were very knowledgeable of their disease but had difficulty identifying their own symptom severity. More than 70% (52/73) of patients believed their asthma was not well controlled.

Conclusion:
The Urban Surge Asthma Clinic fits a niche of patients with asthma in the "gap" of no insurance or with insurance but an inability to pay copayments. Asthma is a controllable disease; this project demonstrates the importance of personalized asthma education in order to prevent unnecessary repeat emergent hospital visits.
Clinical Service

Toward an Improved Patient Care Delivery System: Implementing Six Sigma LEAN Management for the San Antonio Refugee Health Clinic*

Project Disciplines: Dental, Medicine, Nursing, Physician Assistant

Primary Presenter: Brian Iskra

Other Student Team Members: Megan Roberts, Brian Iskra, Duyen My Le, Supriya Patel, Derrick Lin, Joanna Elshazly, Stephanie Schirmer

Mentors: Moshtagh Farokhi, DDS, MPH, and Andy Muck, MD

Community Partner: St. Francis Episcopal Church

Project Location: San Antonio, Texas

Background: Since 2010, the San Antonio Refugee Health Clinic, SARHC, has functioned as an available health care resource for refugees. Managing SARHC, that includes providing holistic health care for refugee patients, connecting them with the mainstream health care delivery system while educating students at the same time, is a complex task.

Objectives: The goal of this project is to integrate the principles of Six Sigma LEAN management in hopes of enhancing the efficiency and operations of the SARHC clinic. Optimizing both tangible resources and volunteer talent, can increase patient access to high-quality encounters (value-added time), while developing an effective process flow algorithms to enhance the clinic’s mission.

Methods: Utilizing Kaizen methodology, San Antonio Institute of Healthcare Improvement consultants and student leaders reviewed existing operational protocols, recorded patient wait times, tracked health care provider movements and generated diagrams illustrating variability in patient experiences. Total patient encounter times were recorded with stopwatches indicating patient timed in-and-out for six clinic sessions. Data was compiled and spaghetti diagrams were utilized to map patient and provider movements to highlight inefficiencies.

Results: The analysis of patient data yielded to an optimal recommended patient encounter time of 70 minutes for SARHC. Each patient is now allowed 30 minutes for medical/nursing evaluation, 20 minutes for dental evaluation. The remaining 20 minutes is allocated for administrative tasks, medication dispensing and patient discharge. By adopting this protocol, patient contact time with student and faculty/health care providers has increased by 100%.

Conclusion: The environment at SARHC is now more proactive and organized. Emphasis is placed on a patient experience, respect for patients by minimizing idle time and maximizing value-added time. Additionally, UTHSCSA student volunteers now have a more enhanced opportunity to develop primary care clinical skills, experience working in interprofessional collaborative care teams, with a better understanding of community needs.

*Presented in Panel Presentation of Outstanding CSL Projects
Background: About one in five Americans will develop skin cancer; this statistic is even higher for the homeless and uninsured populations (Wilde et al, 2013). This project provided skin cancer education to the homeless, uninsured and indigent population of San Antonio. This happened at the student-run Travis Park Dermatology Clinic (TPDC). Previous projects unveiled the need for patient education regarding specific sun protection and Basal Cell Carcinoma (BCC).

Objectives: The goals of the project were to assess the health literacy level in patients at TPDC regarding BCC, sun protection, skin cancer identification and skin cancer prevention and to provide education in these areas.

Methods: Patients at TPDC were surveyed to assess demographics, including age, ethnicity, sun protection behavior, sun exposure, occupation, and they completed a "Pre-education" quiz to assess their pre-existing knowledge of BCC. Students educated patients on identifying BCC and preventative measures and supplied them with appropriate sunscreen. Afterwards, patients completed the "Post-education" quiz, identical to the "Pre-education" quiz for purposes of assessing the efficacy of our educational project.

Results: Seventy of the 71 patients included in this study answered the questionnaire. Fifty-seven of these patients (80%) had never heard of BCC. The average time spent outdoors was 2.93 hours per day, however the majority of patients (57%) reported not using any sunscreen. The average pre-education quiz score was 66.62% and the average post-education quiz score was 83.48% showing an increase of 16.86%.

Conclusion: The results indicate that the TPDC patient population’s knowledge of BCC and sun protection increased during the course of the project. A minor limitation discovered was the Spanish-English language barrier, which prevented more precise in depth education in some patients. Data indicates a need for the continuation of education regarding BCC and its prevention in the homeless and indigent population of San Antonio.
Head Safety in Youth Sports Program

**Project Disciplines:** Dental and Medicine

**Primary Presenter:** Ross-Jordon Elliott

**Other Student Team Members:** Adebayo Adesomo, Marwah Elsehety, Joseph Torres, Imran Hitto, Ken Okons, Bridget Walker, Sammy Houari, Chika Nkele, Indrajit Sehbi, Jay Patel, Luke Tibbits, Oliver Batiste, Arif Karim

**Mentor:** Linda Leary, MD

**Community Partners:** Joel C. Harris Academy and John H. Wood, Anson Jones, Whittier and Walter Krueger Middle Schools

**Project Location:** San Antonio, Texas

**Background:** Recently, many sports associations have begun actively promoting programs aimed at the prevention of head injuries (Schatz et al, 2011; Kirkwood et al, 2006). However, we believe that a significant underserved population of athletes is being excluded in this movement: youth athletes.

**Objectives:** The goal of the "Head Safety in Youth Sports" project was to not only raise awareness about head safety, but also to provide youth athletes with safer ways to participate in sports; and then to create and evaluate the effectiveness of a curriculum to meet these needs. As this project continues from last year, we also aim to determine the long-term retention of this curriculum among youth athletes.

**Methods:** We developed and administered a head safety workshop in which we addressed the importance of head safety, specific head injuries and the protocol associated with concussions. To determine its efficacy, we administered a pre- and post-test with the one-hour workshop. In Walter Krueger Middle School, we held eight separate sessions, reaching approximately 450 students. In John H. Wood Middle School, we held two sessions, reaching approximately 250 students. In Anson Jones Middle School, we held two sessions, reaching approximately 200 students. In Whittier Middle School and Harris Academy, we held one session each for 25 and 26 students respectively.

**Results:** Last year, we concluded that our presentation is an effective way to increase youth knowledge about head safety in sports due our participant 'D5s significant improvement by paired t-test (P-value < 0.0001). Currently, we do not yet have significant results as we are still analyzing our data.

**Conclusion:** Although we do not currently have our results, we believe that they will be similar to last year’s, in which the "Head Safety in Youth Sports" program effectively promoted learning regarding concussion recognition and management.
Health Education Literacy Project (HELP) for Better Health

Project Disciplines: Medicine, Occupational Therapy and Public Health

Primary Presenter: Kaley Medsger

Other Student Team Members: Danielle Debowsky, Adriana Taylor, Anum Dadwani, Jack Flores, Alban Tomaj, Sanjuana Rodriguez

Mentor: Melanie Stone, MPH, MEd

Community Partner: Providence Place

Project Location: San Antonio, Texas

Background: Young adults with intellectual disabilities are at a greater risk for experiencing poorer health outcomes, likely due to limited access to quality health care and health promotion programs (CDC & NCBDDD, 2009). Health Education Literacy Project (HELP) recognized this disparity and aimed to increase the health literacy of adults with intellectual disabilities.

Objectives: Our goal was to educate young adults with intellectual disabilities residing at Providence Place about nutrition and healthy eating through interactive group lessons. Our objective was to increase the participants’ knowledge of nutrition and show they were able to apply the concepts learned by making healthier snack choices after program completion.

Methods: The nutrition curriculum took place twice a week for 30 minutes over 7 weeks. A pretest/posttest was administered to measure improvement in health literacy. Additionally, we led two trips to HEB in which the participants were instructed to select a snack of their choice. We created a measure to determine the health value of the snacks. Nutritional categories included calories, fat, saturated fat, sodium, sugar, fiber and protein.

Results: Fifteen of twenty-five participants who completed the pretest/posttest improved their knowledge of nutrition material. Eight participants who completed the pretest/posttest also attended both trips to HEB. Five of the eight improved their snack choice in at least one category. Two participants increased their knowledge score and their snack choice. Three participants were observed looking at nutrition labels, one was seen peer teaching and five commented about snacks being healthy or unhealthy.

Conclusion: Participants’ awareness of nutrition increased as demonstrated by their observed behaviors in HEB. Though snack choices improved slightly, behavior change occurs over time and effects may not be seen immediately. In addition, written measures may not be the most appropriate method of capturing knowledge gain in this population.
Healthy Snacking, Healthy Kids

Project Disciplines: Medicine and Nursing  
Primary Presenter: Amy Skaria  
Other Student Team Members: Anh Nguyen, Selima Barlow, Brenda Perez, German Candanedo  
Mentor: Janna Lesser, PhD, RN  
Community Partner: University Health System Texas Diabetes Institute — Youth in Motion  
Project Location: San Antonio, Texas

Background: One in three children are obese today, tripling the obesity rate from three decades ago; these rates are even higher in Bexar County. With our partner, Youth In Motion (YIM), we sought to address childhood obesity locally by improving nutritional knowledge and eating habits of at-risk children and parents.

Objectives: We want to disprove that healthy snacking is out of budget or unappealing to children. We aimed to influence parents’ purchasing habits so that they are more likely to purchase healthy snacks for their children.

Methods: Each parent received a pre/post-survey assessing their snacking opinions and nutritional knowledge. During each YIM class, we provided healthy, inexpensive snacks or snack preparation demonstrations to parents and children. Parent and child feedback regarding satisfaction with the cost and taste of the snacks, as well as parents’ D5 willingness to purchase healthier snack options were assessed immediately each class. Parents went home with a card containing nutritional information, cost and where to find each snack.

Results: To date, a total of 19 parents and 22 children participated in our intervention. There was a significant dropout rate with only 5 parents and 7 children completing the program. Results from posttest surveys showed 100% of the remaining participants felt their nutrition knowledge improved. The majority of participants showed improvement in nutritional knowledge; results of pre/post-quizzes showed an increase in average scores.

Conclusion: Personalized nutrition education increases a parent’s willingness to change food-purchasing habits, when compared to traditional education through classes and pamphlets. Factors influencing this change in behavior include feedback from children and cost comparisons of healthy snacks to unhealthier alternatives. Parents attributed their increase in nutritional knowledge to both the provided snack packs/demos and corresponding nutritional education sessions. Dropout rates are of concern, as only 1/3 participants remained by the end of the course.
Education

Healy-Murphy Wellness Program

**Project Disciplines:** Dental and Nursing  
**Primary Presenter:** Melissa Aguilar  
**Mentor:** Laura Sisk, MSN, RN  
**Community Partner:** Healy-Murphy Center  
**Project Location:** San Antonio, Texas

**Background:** Texas is ranked among the ten highest states for teen pregnancy. Teen-aged mothers are less likely to receive prenatal care and are more likely to have low-birth-weight infants. Therefore, community service projects may improve outcomes for teenaged mothers. A partnership between the Healy-Murphy Center, an alternative high school for pregnant and parenting teens, and the University of Texas Health Science Center at San Antonio (UTHSCSA) integrates the mission and purpose of both facilities in serving the needs of the community.

**Objectives:** The purpose of this project is to determine how service learning can enhance the clinical experience of nursing students outside of acute care settings. The value of service learning for nursing students includes an understanding of the community’s needs, cultural awareness of diverse populations and development of skills in the areas of leadership, communication and collaboration.

**Methods:** A pre-survey questionnaire was given to the teens prior to beginning the wellness program on their topics of interest (n=8). Second semester undergraduate baccalaureate nursing students participated in implementing the wellness program at the Healy-Murphy Center (n=32). Each week a group of nursing students prepared interactive games and creative lessons to engage teen mothers in health promotion.

**Results:** Nursing students gained an appreciation of the day-to-day challenges of teen mothers, and acquired a broader understanding of their health care needs. The teens verbalized positive feedback and 62% completed the post survey and expressed further interest in fitness and nutrition.

**Conclusion:** This was a pilot project. Collaboration between UTHSCSA and the Healy-Murphy Center was limited by time and resources. However, the UTHSCSA School of Nursing will continue to partner with the Healy-Murphy Center to develop and teach the wellness program, as well as obtain ongoing assessment and a formal evaluation from the teen mothers and nursing students.
Asthma is a chronic disease that can be deadly if not managed correctly. Approximately 3000 children die annually due to uncontrolled asthma. Childhood asthma significantly impacts our community at multiple levels. Children rely on their parents to help them manage their asthma correctly, but unfortunately, families are uninsured or lack financial resources to afford insurance copays. The National Asthma Education and Prevention program guidelines outline optimal asthma management; patients must understand correct medication procedures, identify asthma triggers and determine trigger removal strategies, recognize signs and symptoms of an asthma exacerbation and to promote healthy living. Proper management of asthma requires competent health care professionals who possess skills, such as communication, teamwork and the ability to teach within an interprofessional collaborative environment.

Objectives:
1) Use an interprofessional team of health care professional students as health coaches.
2) Implement evidence-based programs, Allergy and Asthma Allergy Foundation Wee Wheezers (www.aafa.org) and Bienestar, (www.SAHRC.org), with families of children diagnosed with asthma attending an inner-city Head Start program; 3) Assess pre- and post-environmental home evaluation using the United States Environmental Protection Agency Home Checklist for Asthma (www.epa.gov).

Methods: Families with children who have asthma agreed to participate in an asthma education program using the Wee Wheezer and Bienestar curriculums over a four-week period. The families agreed to complete a pre- and post-knowledge survey and home assessment performed by interprofessional teams.

Results: Twenty families participated and the pre-survey demonstrated deficits in parents’ knowledge about asthma triggers, asthma action plan, proper use of asthma medication and spacers. Pre-survey results demonstrate satisfactory parental knowledge about healthy eating and could benefit from integrating more fruits and vegetables into the diet. The two curriculums were both learning style and level appropriate for both children and parents. This interprofessional and interuniversity project supports the need for innovative patient care.
That’s A Rap on Heart Health

Project Discipline: Nursing
Primary Presenter: Kara Shrader
Other Student Team Member: Rebekah Gold
Mentor: Jaqueline Riley Baker, RN, MSN
Community Partner: Medina Valley High School
Project Location: Castroville, Texas

Background: That’s a RAP on Health Health (TAROHH) is designed to teach health literacy and healthy lifestyle choices to high school students with the hopes of preventing the development of chronic diseases. The community partner for this project is Medina Valley High School (MVHS) in Medina Valley ISD. MVHS is a 4A high school located in Castroville, Texas. Mrs. G. Butler, Advanced Anatomy and Physiology teacher at MVHS asked about the possibility of having the UTHSCSA students teach health literacy and lifestyle choices to prevent chronic diseases.

Objectives: The program’s main focus was heart health, and the program will culminate with the teaching of the American Heart Association BLS Program and certification for each student who passes the certification exam.

Methods: The target audience was 60 high school juniors and seniors currently taking Advanced Anatomy and Physiology classes. There were six program modules, which will help explain disease processes. The goal of each module was for the students to be knowledgeable on the modifiable risk factors for each disease. The classes took place one day a week in two class periods for six weeks. The modules included musical raps by the student leaders about the upcoming content, visual aids and diagrams and collaborative competitions. CPR instruction was given one day a week to the same group of students for six consecutive weeks.

Results: Progress was measured using pre and post assessments for the learning modules and BLS certification exam for the CPR instruction.

Conclusion: Fifty eight students from MVISD attended TAROHH. The program successful in providing disease process and disease prevention information to high school seniors in a rural community. The program was met by the students with enthusiasm and willingness to learn. The pre- and post- assessments identified that learning occurred. Students completed BLS and passed the certification exam.
The benefits of Physical Activity (PA) for cancer survivors have been studied but only few survivors are physically active at public health recommended levels. Minority groups are even less active.

Objectives: The project focused on the process of implementing an educational yoga therapy program among cancer survivors aimed to increase: 1) knowledge of PA recommendations among cancer survivors and 2) well-being through a guided yoga activity.

Methods: Participants were recruited from a local non-profit wellness center for women diagnosed with cancer. Participants received a 25 minute PA educational module, a demographic/medical history and a quality of life Medical Outcomes Short Form (SF-36) Questionnaires. Descriptive statistics were performed on demographic and SF-36 measures. A paired-sample t-test determined differences at baseline and posttest for the SF-36 scores.

Results: A total of 17 women completed the baseline assessments and 13 women completed the post assessments. The majority of participants were Hispanic or Latina (52.9%). Among the participating women, 41.2% were breast cancer survivors between 60-69 years of age. Though there were no significant changes in the SF-36 aggregate scores of Physical Component Scale (pre M= 37.5 SD= 8.2, post M=35.3 SD= 4.9, p = 0.379 ) and Mental Component Scale (pre M= 43.8 SD= 11.4, post M=43.3 SD= 3.5, p = 0.915), SF-36 physical function subscale significantly improved (pre M= 36.6 SD= 9.2, post M=40.0 SD= 10.8, p = 0.030) and mental health subscale improved approaching significance (pre M= 53.7 SD= 12.4, post M=57.9 SD= 5.1, p = 0.079).

Conclusion: We attempted to implement a yoga-based exercise program for minority cancer survivors in a community center. For those participants that attended, improvements were noted. Our results support the need to continue to research methods to increase PA and exercise behaviors in minority cancer survivor communities.
Access Care, Texas!: ACT Together for Health

Project Disciplines: Medicine, Nursing, Physician Assistant, Public Health and Clinical Laboratory Science

Primary Presenter: Abigail Cain

Other Student Team Members: Brian Duffy, Karina Garcia, Anupama Kapadia, Chelsea Lehman, Zarqa Malik, Sara Noble, Rob Schonhoff, Adriana Taylor

Mentors: Melanie Stone, MPH, MEd

Community Partner: The Health Collaborative

Project Location: San Antonio, Texas

Background: Access Care, Texas!: ACT Together for Health (ACT) is a community service learning project begun in 2013 with an initial aim to educate the San Antonio public and health care professionals about the Affordable Care Act (ACA) through brochures, outreach at health fairs and small-group information sessions. First year efforts revealed that ACT should address the health literacy needs identified in the newly insured community.

Objectives: The goals of ACT are: (1) to educate the community on the ACA and the Health Insurance Marketplace; (2) to educate health care providers on the ACA and the Health Insurance Marketplace and (3) to create a culturally relevant, technology-based health insurance literacy toolkit to increase health insurance literacy.

Methods: ACT conducted a focus group to better understand the information gap of newly insured individuals in regards to accessing the Marketplace, which revealed a need for a locally relevant health insurance literacy toolkit. It was discovered that the medically underserved population in San Antonio primarily uses smartphones for Internet access. In partnership with The Health Collaborative, ACT began the process of developing a toolkit centered on a bilingual smartphone application that will allow users to better understand and utilize their health care coverage, with an accompanying website and print guide.

Results: ACT will combine data from 7 outreach events where volunteers spoke with 99 individuals ranging from 17 to 82 years old, distributed 104 English brochures, 21 Spanish brochures and 24 Enroll America commit cards to describe our population. Additional data will be collected on the health insurance literacy application once completed.

Conclusion: ACT has created an innovative technology-based health insurance literacy toolkit as a unique and relevant way to reach out to the local community. Using community resources to increase access to this toolkit will help improve the community’s health insurance literacy.
CycloBia Brownsville: Impact on Public Health*

**Project Disciplines:** Medicine and Public Health  
**Primary Presenters:** Ken Okons  
**Other Student Team Members:** Eric Duncan, Michael Hallenbeck, Uzo Ogbonnah, Ken Okons, Jaclyn Yracheta  
**Mentor:** Melissa Valerio, PhD  
**Community Partners:** City of Brownsville Public Health Department  
**Project Location:** Brownsville, Texas

**Background:** A study conducted by the CDC found obesity rates ranging from 55 to 57 percent for individuals of lower SES in Cameron County, Texas. The increasing prevalence of obesity and diabetes in Brownsville and surrounding areas presents a significant burden on the health of the community, often leading to multiple long-term complications and diseases. To combat these preventable illnesses, CycloBia Brownsville was established to engage the community in health activities and education with the hope to motivate individuals to take control of their well-being.

**Objectives:** CycloBia Brownsville attempts to increase the level of health literacy and activity of the community in hopes to diminish levels of obesity and other preventable diseases while gauging community attitudes toward health goals and hindrances against exercise in Brownsville.

**Methods:** Regular free community cycling and exercise events are organized for community members. These events involve exercise classes, boot camps, diet counseling and raffles. Medical and public health students also take time to interview participants about current attitudes regarding personal and family health in addition to how easy it is for families to exercise in Brownsville.

**Results:** Post-event surveys provided to participants show increases both in intent to use bicycles after CycloBia events and intent to increase physical activity. 52 percent of participants that have attended more than one CycloBia event reported getting more physical activity regularly. The number one exercise concern of all respondents was public safety in Brownsville (43%), followed by a lack of time (34%).

**Conclusion:** CycloBia has been effective at invigorating the people of Brownsville to take their health seriously. This program can constantly improve with regard to increasing turnout, accessible locations and frequency. With consistent guidance, leadership and continued surveying of CycloBia participants, CycloBia can reach and maintain its goal of helping Brownsville get healthy.

*Presented in Panel Presentation of Outstanding CSL Projects*
Outreach

Frontera de Salud Diabetes Health Fair
Data Analysis in Laredo, Texas

**Project Disciplines:** Medicine, Nursing, Dental and Physician’s Assistant

**Primary Presenter:** Varan Haghshenas

**Other Student Team Members:** Dia Hazra, Ethan Kotkowski

**Mentors:** Glen Medellin, MD, and Melanie Stone, MPH, MEd

**Community Partner:** Mercy Ministries of Laredo

**Project Location:** Laredo, Texas

**Background:** Frontera de Salud is a student-led organization that provides health education and free screenings for underserved populations in San Antonio and south Texas. Our project focused on serving the community in Laredo, Texas in partnership with Mercy Ministries of Laredo. In response to expressed needs, we provided flu shots, BMI measurements and screenings for blood pressure, glucose and cholesterol.

**Objectives:** We sought to compare the data collected from the previous two Diabetes Health Fairs in Laredo (November 2013, April 2014) to normal values and national rates to describe the greatest health disparities amongst the Laredo population attending our outreach activity.

**Methods:** Set up a system of stations where participants would begin with screening stations (BP, BMI etc.) followed by counseling and education stations with a native Spanish speaker who would go over their results with them and provide a plan of action.

**Results:** We observed that obesity is the main health issue affecting the citizens of Laredo who attended our health clinics (48% of participants were obese compared to the national average of 34.9%). The results of the other screening tests, including blood pressure and serum LDL levels, were actually better in Laredo residents than the national averages, though as many as 17 out of 84 participants required referrals for a diagnosis of hypertension and 12 out of 23 participants required better control of their hypertension.

**Conclusion:** Our goal is that this data can be used to better educate future volunteers by allowing them to focus more on specific health problems that seem to be more common in this patient population compared to the national average such as obesity.
Outreach

**Frontera de Salud in Eagle Pass**

**Project Discipline:** Medicine  
**Primary Presenter:** Shaoli Chaudhuri  
**Other Student Team Members:** Courtney Hobza, Kurt Keller, Bo Song Jang, Daniela Ortiz, Zachary Tran, Alek Rosenthal, Ricky Olmsted, Eithan Kotkowski  
**Mentor:** Fred Campbell, MD  
**Community Partner:** Border Hope Restorative Justice Center  
**Project Location:** Eagle Pass, Texas

**Background:** About 2.3 million adolescents pass through the juvenile justice system each year; millions more are at risk. Youth in the juvenile justice system have high rates of risky health behaviors, yet rarely seek or have access to health care. Border Hope Restorative Justice Center in Eagle Pass is a residential treatment program for boys and girls aged 10-16 years, who are remanded by the courts.

**Objectives:** We began outreach to Eagle Pass in 2013. Our goal for our partnership with Border Hope was to provide medical and dental education to at-risk youth in one of the most underserved areas in the nation. 65-70% of incarcerated youth have at least one diagnosable mental health need, so we implemented art therapy to address We also conducted wellness checks with the larger Eagle Pass community.

**Methods:** We conducted health screenings at both Border Hope and in the community. At Border Hope, we held medical (related to substance abuse, nutrition and sex ed) and dental education sessions and held an art class with the children.

**Results:** In total, we reached out to 88 Eagle Pass community members and 22 Border Hope boys and girls. Border Hope residents responded well to art therapy and dental education. However, it was difficult to maintain the older childrens’ interest during sex education and substance use sessions.

**Conclusion:** The majority of the children were eager to engage in the educational and art activities. They responded well to demos. Sexual education and substance use sessions, although explicitly requested by our contacts, were not as successful, indicating our group needs to reformat these sessions so they are less information-heavy and more interactive.
Outreach

Frontera de Salud San Antonio Trip

Project Discipline: Medicine
Primary Presenter: Michael Martinez
Other Student Team Members: Aaron Sohn
Mentor: Melanie Stone, MPH, MEd
Community Partner: Ed White Middle School and others
Project Location: San Antonio, Texas

Background: San Antonio has a very large and diverse population. With this diversity comes disparity in some parts of the community. It is from this disparity that we aim to increase both access and quality of care for those who are underserved in the San Antonio community.

Objectives: Our objectives were to screen 200 patients for blood abnormalities (blood glucose and cholesterol) and to educate at least 50 patients on making better health choices.

Methods: In order to achieve these objectives we participated in various health activities occurring in San Antonio throughout the year including Ed White Middle School Sports Physicals, Diez y Seis Cultural Event, Salud Al Pasito events, the Seton Home Fall Fit Fest and the Alamo Run Fest. We would count the number of patients we cared for and keep track of any counseling we provided.

Results: As a result of our events, we managed to screen and give counsel to 110 patients.

Conclusion: Overall, we were able to provide health screenings for many people in the community who otherwise would not have received it. In the long-term we have developed relationships with several community partners that can help Frontera de Salud set up more events in the future. We have also established a good rapport with physicians, nurse practitioners and other health care professionals in the UTHSCSA community to help oversee our various projects. By passing on these resources to the next set of Frontera de Salud leaders, we are ensuring that the relationships we have established and the health care of the underserved be continued.
Haven For Hope Skin Cancer Screening

**Project Disciplines:** Medicine and Physician’s Assistant

**Primary Presenter:** Jackie Bucher

**Other Student Team Members:** Allison Pye, Heidi Held, Sam Butler, Javi Bonilla, Faryal Siddiqui

**Mentor:** Richard Usatine, MD

**Community Partner:** Haven for Hope

**Project Location:** San Antonio, Texas

**Background:** The Haven for Hope Skin Cancer Screening and Education Project is based at the Haven for Hope, a comprehensive homeless transformation campus in San Antonio that provides social services, behavioral health, education and job training. The project is a continuation of the Haven for Hope Skin Cancer Screening from 2013-2014, during which we successfully screened, educated and provided means of sun protection through sunscreen and hats to homeless individuals at Prospects Courtyard. During this year’s project, we conducted educational sessions to enhance understanding of general risk factors for skin cancer and promote behavioral changes to prevent skin cancer.

**Objectives:** Objectives were to provide weekly skin cancer screenings to local homeless individuals, refer individuals who needed evaluation to a local, free dermatology clinic and to perform education regarding sun protection and skin cancer surveillance.

**Methods:** In order to assess the usefulness of our educational sessions we conducted pre and post test surveys regarding the participants’ baseline knowledge about skin cancer, recognition of its signs and symptoms and prevention of skin cancer. Each participant completed a pre-test, listened to the brief educational session and took a post-test survey to see assess what knowledge was retained from the experience.

**Results:** Approximately 100 homeless individuals participated in our skin cancer screening and education projection. In our four question educational pre- and post-test surveys, we saw improvements ranging from 75% to 88% on a per question basis with a mean improvement of 80.8%, demonstrating that our educational sessions were highly effective.

**Conclusion:** Our project successfully increased the local homeless population’s baseline knowledge of skin cancer as demonstrated by the results of our pre- and post-test surveys. Future efforts include: expanding the program to impact more participants and further analysis of skin cancers discovered through the screenings and referrals to the local dermatology clinic.
Outreach

Health Screening Plus Affordable Care Act Campaign at a Filipino Fiesta

**Project Disciplines:** Nursing and Dental

**Primary Presenter:** Rebeca Zuniga

**Names of Other Student Team Members:** Angélique Alonzo, Stephanie Osborne, Michele Schantz, INSA Members

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

**Community Partners:** Aguman Capamangan of San Antonio (ACOSA) and UTSA Institute of Texan Cultures

**Project Location:** San Antonio, Texas

**Background:** Diabetes is the seventh leading cause of death in the United States and the major cause of heart disease and stroke (Centers for Disease Control or CDC, 2011). While 18.8 million Americans are diagnosed with diabetes, about 7 million are undiagnosed.

**Objectives:** The main objective of this CSL project is to identify diabetes risk, promote diabetes prevention and/or management and access to health care for San Antonio and South Texas residents attending the 2014 Filipino Fiesta (FF) and 2015 Asian Festival (AF).

**Methods:** Student volunteers provided health screening and education to festival participants, including blood pressure (BP), blood glucose and/or cholesterol and body mass index (BMI). Health literacy promotion was done through the "Ask Me 3 (AM3)" campaign. At the Filipino Fiesta, information campaign about dental health and Affordable Care Act (ACA) was also available.

**Results:** A total of 124 individuals (FF=30; AF=94) with a mean age of 46 (range: 10-87), mostly female and married were screened. Asians (70%) were at the FF, while 55% Hispanics were screened at the AF. 24% was without insurance nor principal care provider (PCP, 39%). The mean (and range) health scores were: BMI = 28 (11-43); systolic BP = 122 (68-181) mmHg; diastolic BP = 78 (57-109) mmHg; blood glucose = 111 (48-284) mg/dL; blood cholesterol = 163 (110-219) mg/dL. 90.33% had no prior knowledge of the AM3; 99.2% are comfortable in using the tool. Participants rated the service 4.90/5 and learned healthy lifestyle (4.79/5). At the AF, participants (N = 20) were provided with toothbrushes and dental education. Uninsured participants were given information to sign-up for ACA.

**Conclusion:** While the overall health profile was good, some were at risk for diabetes and cardiovascular issues. The lack of insurance (24%) and PCP (39%) were also outstanding health issues that needed to be addressed.
**IMSIG Diabetes Screening and Education Program, 2014-2015**

**Project Discipline:** Medicine  
**Primary Presenter:** Katherine Dowdell  
**Other Student Team Members:** Alexa Rodin, Blair Lenhan, Ellen Johnson, Shaoli Chaudhuri  
**Mentor:** Kristy Kosub, MD  
**Community Partner:** H-E-B  
**Project Location:** San Antonio, Texas

**Background:** Diabetes remains a prominent health concern in San Antonio with rising morbidity and mortality including increased hospitalization and Years of Potential Life Lost (YPLL). It is well established that proper diet and physical activity can significantly reduce severe Diabetes-related complications. This project focused on using evidenced-based motivational interviewing to prompt individuals to create independent plans and reflect on feelings toward change.

**Objectives:** (1) Educate community members about the impact of high blood sugar on overall health. (2) Learn to perform motivational interviews as a tool to encourage lasting lifestyle change. (3) Enhance medical students’ clinical skills by interacting with the local community.

**Methods:** Five screenings were held from September 2014-March 2015 at a Bexar County HEB. Medical students were trained to check blood glucose levels and educate shoppers about their results. Individuals who screened in pre-diabetic or diabetic ranges (fasting glucose 100-125mg/dL or fasting glucose ≥126mg/dL and non-fasting glucose ≥ 200 mg/dL respectively) were offered participation in a motivational interview. By using the motivational interview model, students guided individuals to set their own goals and contemplate readiness for change. Individuals were called at a later date to assess for lifestyle changes.

**Results:** Preliminary results show 58.3% of individuals made an effort to achieve the goal set at screening and 33.3% reached out to a primary care physician. The next step in analysis is to determine if self-reported levels of motivation and confidence following an interview correlate with action.

**Conclusion:** Motivational interviewing was a new focus of the project, so call-back surveys are important feedback. Individuals who made specific goals with simple plans (i.e., "replace one sweet tea with water") excelled in implementing change. Individuals with broad goals (i.e., "eat healthy") were less likely to implement change. This data will allow us to better counsel patients on goal setting at future screenings.
Salud al Pasito: Small Steps Toward Better Health*

Project Disciplines: Medicine, Respiratory Care and Physician’s Assistant

Primary Presenter: Narine Wandrey

Other Student Team Members: Daniela Ortiz, Bradley Kapten, Tiffany Chen, Karen Lin, Alexander Constantine, David Garcia, Samuel Butler, Justin Low

Mentor: David Henzi, EdD

Community Partners: South Central Area Health Education Center (AHEC), H-E-B and San Antonio Walks!

Project Location: San Antonio, Texas

Background: San Antonio has a high prevalence of chronic diseases, and although the etiology of these diseases such as diabetes and obesity are complex, exercise and nutrition can combat these health complications. Salud al Pasito is an organization motivating the community to pursue healthier lifestyle choices to reduce the burden of these diseases.

Objectives: The goal of Salud al Pasito is to create an environment where participants can relay their health concerns so that they feel empowered to make healthier choices. This is accomplished through assessment of health literacy and through demonstration of simple exercises, such as walking, to incorporate into participants’ lives.

Methods: Our organization hosts free walking events featuring health screenings and physical activity stations, where participants are encouraged to interact with volunteers, including health care professionals. Participants’ health knowledge is assessed through surveys and the "Wall of Issues," a poster where participants indicate their top three health concerns. Participants are polled on health-related habits such as exercise and frequency of health care visits to better understand their priority health concerns.

Results: A total of 1,201 responses have been recorded on the “Wall of Issues” from September 2013 to March 2015. Most respondents were aged between 41-64 years (41.63%). For all age groups, top health concerns were diabetes (17.74%) and obesity (17.48%). Within age groups, the top concerns for those aged 0-17 years was smoking/lung disease (16.95%), obesity for 18-40 (23.95%) and diabetes for those 41-64 and over 65 (20.00% and 22.90%, respectively).

Conclusion: Salud al Pasito strives to motivate the community to become proactive about visiting health care providers and exercising to attenuate the prevalence of diseases like obesity and diabetes. In the future, we plan to involve local schools to reach out to the youth of San Antonio and their families, so that health awareness occurs at earlier ages.

*Presented in Panel Presentation of Outstanding CSL Projects
Background: The incidence of obesity is of high concern in the south Texas region of the Rio Grande Valley. According to a 2013 Gallup report and Texas Department of State Health Services survey, which evaluated resident’s BMIs from self-reported data gathered by telephone, McAllen was concluded to have the highest obesity rate among metropolitan areas in the country, at 38.5% and 35% respectively. Obesity was defined as having a BMI $\geq 33.0$.

Objective: During our annual Frontera de Salud McAllen winter trip, we gathered data to assess the prevalence of obesity in colonias with the aim of determining whether self-reported BMI is an accurate method of determining true BMI for the population living in colonias.

Methods: During the health assessment, we asked a total of 70 patients to verbally tell us their estimated height and weight, after which we recorded their true height and weight using a scale tape measurer. All four values were collected, converted to kilograms and meters in order to determine the BMI, and then compared the self-reported and the true BMI. We found that 64% of people’s true BMI was lower than their self-reported BMI.

Results: Our results showed that self-reported and true BMI for colonias in McAllen is not the same (t-score: 3.18 > t-critical: 1.99).

Conclusion: From these findings we have concluded that with the 70 individuals from McAllen’s colonia population, on average they are more likely to overestimate their BMI. Our study found that 58% of people were obese, while 57% of people would be classified as obese based on their self-report. BMI data gathering through telephone calls can thus give an accurate finding of obesity prevalence in a given region, since the difference in the number of people classified as obese between self-reported and true BMI was minimal.
8TH ANNUAL COMMUNITY SERVICE LEARNING (CSL) CONFERENCE
The Answer in Plain Sight: Can Positive Deviance Uncover Solutions to Community Challenges?

8TH Annual CSL Conference Planning Committee

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(continued)
8TH Annual CSL Conference Planning Committee (continued)

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Community Partners

Thank you to our many partners who make community service learning possible.

Aguman Capampangan of San Antonio (ACOSA)  
Alpha Home  
Anson Jones Middle School  
Baylor Teen Health Clinic  
Bering Omega Community Services  
Bexar County Community Resources  
Border Hope Restorative Justice  
Centre for the Rehabilitation for the Paralysed - Bangladesh  
Christian Senior Services  
City of Brownsville Public Health Department  
Doctors Hospital at Renaissance  
Edward White Middle School  
Faith Family Clinic  
FAME (Facilitated Acceptance to Medical Education)  
Haven for Hope  
Healthy-Murphy Center  
H-E-B  
International Valley Health Institute  
Joel C. Harris Academy  
John H. Wood Middle School  
Louise H. Batz Patient Safety Foundation  
Mayor’s Fitness Council — Active Living Council  
Medina Valley High School  
Mercy Ministries of Laredo  
Military and Veteran Community Council  
Providence Place  
Rice University - Beyond Traditional Borders  
SAMM Transitional Living and Learning Center  
San Antonio Food Bank  
San Antonio Metropolitan Health District  
San Antonio Walks!  
Seton Home  
SLEW Wellness Center  
South Central Area Health Education Center (AHEC)  
St. Francis Episcopal Church  
The Health Collaborative  
The Patient Institute  
Thomas Street Health Center  
Travis Park United Methodist Church  
Trinity Baptist Church of San Antonio  
University Health System Texas Diabetes Institute - Youth in Motion  
University of the Incarnate Word Schools of Nursing and Pharmacy  
Urban Surge  
UT Department of Developmental Dentistry  
UT Teen Health  
UTSA Institute of Texan Cultures  
Walter Krueger Middle school  
Wesley Health & Wellness Center  
Whittier Middle School  
Witte Museum

Mentors

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