

MPH Practicum Student Abstracts Winter 2020

MPH Student Practicum Experience— Winter 2020

The Master in Public Health (MPH) Program at Wayne State University is pleased to present the Winter 2020 student practicum abstract book highlighting students' public health practice experiences. We would like to express our gratitude and appreciation to all of the organizations, agencies and businesses that hosted and supported our students and provided them with practical public health experiences. The MPH Program would like to congratulate the students for their hard work, accomplishments and contributions to the local public health community.

Sahar Yunus

SITE: The Office of Cancer Health Equity and Community Engagement at Karmanos Cancer Institute (KCI)

TITLE: Partner-based Approach to Increase in HPV and HPV Vaccination Knowledge in Detroit

INTRODUCTION: Karmanos OCHECE was awarded a grant from the National Cancer Institute (NCI) to disseminate Human Papillomavirus (HPV) and HPV Vaccine education. Using modified educational materials provided by the NCI, culturally relevant information and appropriate activities were provided to improve understanding of HPV and the HPV Vaccine. These were provided with the objective of tackling the cancer health inequalities that exist in the community and to increase vaccination rates among these families.

METHODS: Education was provided using a partner-based approach. OCHECE partnered with Detroit Parent Network (DPN) to train parent advocates to carry out education sessions among parents of the community that had children of vaccination age. Educational materials were fitted to the community that was targeted, which included majority African American families. A pre- and post-education survey will be provided to the families to assess the effectiveness of the education that is provided. To further the dissemination of knowledge and rates of vaccination, Wayne State University (WSU) student organizations were identified to reach out to and partner with to continue these education sessions.

OUTCOMES: The DPN parent advocates were trained using CITI training modules and education materials provided by NCI. I have created information sheets that include myths and frequently asked questions. Editing of educational materials is ongoing as feedback has been provided by DPN parent advocates and OCHECE facilitators. WSU student organization list and the outreach email and phone transcripts to contact them were created by me as educational efforts are still ongoing.

Justin Woo

SITE: Urban Health Resource / Urban Health Outreach

TITLE: Assessing and Improving Public Health Needs in the Minor-

ity Community

INTRODUCTION: Urban Health Resource / Urban Health Outreach (UHR) is a non-profit healthcare organization that works to educate and promote the minority community's access to various health care services that are both effective and affordable. UHR has identified that Wayne County's minority community disproportionately suffers from physical health issues such as obesity and diabetes. By developing population-based public health programs that are targeted towards these communities, UHR hopes to improve the physical health of minority communities and educate them on the importance of physical activity and healthy eating. UHR has also identified that among these communities, minority men do not take advantage of public health programs or interventions as women do. UHR is working to investigate why that is and identify possible health disparities or cultural obstacles unique to minority men.

METHODS: To improve the general physical health of Wayne County, UHR has organized a Fitness Fest event in Detroit that brings together various organizations, businesses and communities. Physical activity and cooking demonstrations will be held to showcase various ways to improve or maintain physical health. Vendors from the community will also showcase their products or services that share these public health objectives. The events goals are to educate the community on the importance of physical health and healthy eating, as well as bring together a sense of solidarity in Wayne County. To tackle the issue of minority men's health care habits, a Centers for Disease Control and Prevention developed survey will be distributed to various minority organizations. The survey will ask men of their physical activity levels, and their willingness to participate in various programs that would improve their physical health. Results from this survey will be used to develop future programs that are better targeted towards minority men and are better tuned to the wants and needs of the minority community.

OUTCOMES: The Fitness Fest is scheduled for April 9th, 2020 at the Student Center at Wayne State University. **(Event has been cancelled due to Coronavirus outbreak).** The minority men's health survey has been distributed to community groups and is currently collecting responses.

Jacinda Abdul-Mutakabbir

SITE: Wayne State University Prevention Team (W'SUP) **TITLE:** The Impact of Education on Attitudes Surrounding Birth Control Use Alone and in Combination with Gender-Affirming Hormone Therapy

INTRODUCTION:

The Wayne State University Prevention (W'SUP) Team is dedicated to positively impacting the lives of Detroit youth through providing the confidential delivery of client-centered HIV education and awareness. As the transgender (trans) community comprises a sizeable portion of the individuals serviced by the program, it is imperative that the staff of the W'SUP Team be educated on topics of question within the trans population. The objective of this study was to evaluate the impact of education on the thoughts and knowledge base of the W'SUP Team members before and after an informational session providing education on birth-control use both alone and in combination with gender-affirming hormone therapy.

METHODS:

A one-hour long lecture entitled "Help!: Birth Control and Hormones" was provided to eight members of the W'SUP Team. A 7-question survey was given to each attendee prior to the lecture to assess their knowledge base of the topic and an additional 7-question survey was given following the session to assess the knowledge gained following the presentation.

OUTCOMES: The pre-program survey revealed that 5/8 (62.5%) were unaware of recommendations concerning gender-affirming therapy, and 4/8 (50%) were unaware of available birth-control methods for members of the trans community. The post-program survey indicated that (8/8) 100% of the attendees felt as though they had received impactful education to guide their discussions regarding birth-control and gender-affirming hormone therapy use. Education on these topics is highly necessary for those individuals enlisted in assisting members of underrepresented and misguided communities.

Qing Ai

SITE: Detroit Health Department

TITLE: Analyzing the Quantitative Data from Lead Prevention and

Intervention Program

INTRODUCTION: Lead is a toxin that threatens human health, especially among children. The Detroit Health

Department Lead Prevention and Intervention Program aims to prevent childhood lead poisoning by identifying lead-poisoned children and ensuring that they receive medical and environmental interventions. The program provides case management, which includes home visits from advocates and

nurses, and education for community members and professionals. The project aim is to analyze the cases in Fiscal Year 2019.

METHODS: Using data from the initial home visit form completed by a Detroit Health Department nurse, descriptive analyses were conducted for a cohort of 217 six-month to 10-year-old children who received case management services from September 2018 to August 2019. Demographic information and lifestyle information, including house situation, physical and family history, and lifestyle habits for each child were analyzed.

OUTCOMES: Fifty-six percent of clients were male. Most (n=132) clients' lead levels measured 5>14 μ g/dl. 158 (73%) clients' siblings had previously tested positive for EBLL. More than one-third of clients were described as hyperactive. Furthermore, 45% (n=68) of client families reported that they do not remove shoes when entering the house. 114 patients were located within 2 blocks of a major roadway or industrial area. Finally, ZIP code 48204 had the most cases compared to the other 21 ZIP codes in the City of Detroit.

Sarah Vaughan

SITE: Birth Detroit

TITLE: Fund Development for Birth Detroit through the Identification of Resources and Grant Preparation

INTRODUCTION: Birth Detroit is an organization working to develop a community-based, freestanding birth center in Detroit, and through this, transform the spirit of maternal and infant care¹. Detroit has a high maternal and infant mortality rate, and birth centers have been shown to improve birth outcomes and increase patient and family satisfaction¹. Culturally conscious birth centers can reduce health disparities for people of color¹. The mission of Birth Detroit is "to improve wellbeing and birth outcomes by making womancentered, family-friendly, holistic care accessible to all birthing people - regardless of ability to pay"¹.

METHODS: Results from a previously completed community needs assessment performed by Birth Detroit were used to develop an infographic. Research was conducted in order to develop a provider information sheet to outline birth center safety, persons eligible for birth center care, and how birth centers work with hospitals, insurance companies, and public health to enhance health systems. A variety of funding opportunities were explored including grants, active giving, and passive giving.

OUTCOMES: The developed infographic highlights the results of Birth Detroit's community needs assessment and is intended for distribution to stakeholders in a wide variety of settings. It was distributed at Birth Detroit's volunteer orientation last February. The provider information sheet presents safety and regulatory information to donors and collaborators. A letter of intent was drafted and submitted to the program officer for the Goundswell Birth Justice Fund.

Ayeshah Sarfaraz

SITE: Detroit Medical Center (Sinai Grace), Family Medicine Residency Program

TITLE: Quality Improvement Process—Assessing Rates of Retesting Sexually Transmitted Diseases following Provider Education at a Federally Qualified Health Center

INTRODUCTION: The Detroit Medical Center (Sinai Grace) Family Medicine Residency program cares for an urban, sick population with medical co-morbidities and pathologies. It promotes quality medical care, education, and research while promoting health, and well-being of patients, and department members. Sexually transmitted infections (STI) are a big public health concern in the United States. According to the Centers for Disease Control and Prevention, Americans age 15-24 makeup 27% of the sexually active population, and account for 50% of the 20 million new sexually transmitted infections in U.S. each year. This project aimed to develop effective management strategies of positively tested patients for STI to lower the STI burden and provide educational awareness to providers and patients while assessing the impact of interventions implemented at the Federally Qualified Health Center.

METHODS: We used Plan-Do-Study-Act (PDSA) method to assess the quality improvement process. We implemented interventions and assessed the difference by executing didactic sessions for provider education, as well as designed educational poster about STI retesting and displayed them in patient rooms as part of intervention. I also collected survey responses, analyzed survey results using SAS, and synthesized all collected data.

OUTCOMES: We executed the 'study' and 'act' part of the PDSA cycle by identifying gaps in follow-up care for the patients who tested positive for STI by analyzing providers who completed pre-and post surveys. Incorporating the importance of documentation of follow-up and displaying educational posters for patient education can promote quality of care regarding retesting. Tracking retesting will help prevent repeat STI and improve patient outcomes.

Salwa Bajjey

SITE: The Office of Cancer Health Equity and Community Engagement at Karmanos Cancer Institute (KCI)

TITLE: Training Community Stakeholders as Research Advocates that are Representative for Local Arab Americans

INTRODUCTION: The Karmanos Cancer Institute is a National Cancer Institute (NCI) as well as the largest cancer research center and provider in the state. The objective of the Karmanos Cancer Institute (KCI)-Office of Cancer Health Equity and Community Engagement (OCHECE) is to eradicate cancer health disparities among diverse groups of people across Michigan. With research being limited among Arab-Americans, KCI will utilize its Community Research Registry, which provides an opportunity for community members to participate in research. The goal for the practicum was to assist in reaching out and training community stakeholders who represent local Arab-American communities as research advocates who enroll community members in the KCI's Community Research Registry.

METHODS: Mandatory training will be administered among community stakeholders utilizing research advocate training PowerPoint slides and a community research registry guide. Both works will be taught to stakeholders to explain the role, requirements, and responsibilities a research advocate entails. Once the training module is complete, an evaluation survey will be administered among the stakeholders.

OUTCOMES: While the training sessions are still ongoing, exhibiting culturally tailored material can help engage and enroll Arab-Americans to participate in research by building trust among communities. It is recommended to stress the importance of research being voluntary and well as acknowledging male/female authority when making key decisions in the recruitment process.

Timothy DeRosia Jr.

SITE: Michigan Antibiotic Resistance Reduction Coalition (MARR) **TITLE**: Enhancing the Impact of MARR Coalition School-Aged Programs

INTRODUCTION: Each year in the U.S., at least 2.8 million people are infected with antibiotic-resistant bacteria or fungi, and as a result more than 35,000 die from this problem. Antibiotic resistance is a public health crisis that needs intervention to stymie this trend. Many solutions are everyday habits and practices that can drastically improve the overall health in this country.

METHODS: Michigan Antibiotic Resistance Reduction Coalition (MARR) has many programs that seek to address this crisis. One of the most effective ways that they accomplish this, is by educating children at young ages about the dangers of antibiotic resistance and what they can do to combat it. They believe that the most effective way to spread this message to homes and communities is through the education of children. According to the 2010 U.S. census data, 9% of all households do not speak English as a primary language. This means that families may exhibit a lack of understanding when using the learning materials sent home with the children.

OUTCOMES: Since Spanish and Arabic were among the 2 largest languages spoken, the learning materials were translated to address this problem. In speaking to teachers and children that were in the classroom, it was found that the children desired a way to give an abbreviated version of this presentation to their families. Given this feedback, a 5-minute presentation and speaker notes were developed to be used by the children in the home. In-class speaker notes were also altered to increase comprehension in various age groups.

Shayla Patton

SITE: WSU Michigan Area Health Education (MI-AHEC) Program Offices

TITLE: Curriculum Development for Applied Public Health Skills Training

INTRODUCTION: This practicum involved the design and implementation of two curricular components for graduate public health students and health care professionals. Students must develop applied practical skills to graduate as competent professionals. These skills can be acquired in the classroom, online through multi-media educational methods, and in clinical settings. Such skill sets required by public health employers include conducting focus groups and the ability to write for grant funding. Furthermore, interdisciplinary health professions education is necessary to benefit the overall health care system and subsequent patient care.

METHODS: Course assignments were developed utilizing curricular theory design principles and interprofessional education practices. A variety of classroom and online learning activities were created. The online activities were evaluated for their applicability and accessibility for the various health care disciplines.

OUTCOMES: All curricular components are in use during the Winter 2020 semester with positive student response thus far. Online modules have been modified based on findings of broken hyperlinks and/or inadequate content for the health profession student level. Formative evaluation of focus group and grant writing assignments has been positive with modifiable changes being suggested for future course adaptations.

Sweta Naik

SITE: Henry Ford Institute on Multicultural Health

TITLE: Assessing the Benefits of Group Annual Wellness Visits for

Seniors

INTRODUCTION: Through Medicare, seniors have access to many age -specific services, one of which is the Annual Wellness Visit (AWV). Traditionally AWVs are individual patient visits with a primary care physician (PCP). Due to a growing elderly population, a shortage in PCPs, and a focus on immediate medical issues, wellness and preventive care falls by the wayside. This project aims to assess if Group Wellness Visits (GWVs) are more efficient at providing high-value preventive health information to seniors, increase patient satisfaction, and/or provide financial benefit to the institution.

METHODS: Informational interviews were conducted over the phone with four contributing staff and were subject to a limited qualitative analysis due to time restraints. The review sought out common themes among staff responses as well as overall opinions of the efficacy of the GWV. A limited literature review was conducted to review existing literature on group format healthcare delivery. The databases used were PubMed and the Cochrane Library.

OUTCOMES: The literature review and interviews confirmed the support and beneficial aspect a group format can bring to Medicare services. Staff identified several common challenges for Detroit area seniors. Seniors can share resources and peer support for several types of health issues, as illustrated by the variety of research. A group format is usually offered at no cost besides travel and provides several specialists in one place. This format is financially advantageous, efficient, and easily organized by healthcare providers.

Anna Harris

SITE: Mary Turner Center for Advocacy, Office of Senator Stepha-

nie Chang

TITLE: Public Health Initiatives in Senate District 1

INTRODUCTION: I was delegated a diverse body of work at the senator's office. Attending community meetings put me into contact with local organizations and events and allowed me to hear about the concerns of Detroit residents. I had the opportunity to work constituent cases and learn the day-to-day of office operations, I attended Green Stormwater Infrastructure training through Detroit Future City, and I helped staff move offices halfway through the summer.

METHODS: My major project was to plan, organize, and host a community baby shower event on behalf of the senator, including involving local organizations concerned with maternal and infant health as vendors and presenters as well as providing food and gifts and activities. I was charged with balancing a mission to connect and educate while creating an atmosphere of celebration – this was to be both an enjoyable day out for our new moms and moms-to-be and an opportunity to link these women with resources and valuable network-building.

OUTCOMES: My deliverables include a summary document of the planning and execution of this event, and an analysis of the survey we issued to our participants about the environment in which they are raising their families. The first piece allowed me to reflect on the strategies behind planning, promoting, and executing a large-scale community event and offer insights for future staffers who may find themselves similarly delegated. The second component generated data that reveals opportunities for advocacy and support for the participating maternal and infant health organizations and for the senator's office.

Kristen Lucas

SITE: Wayne State University Prevention Team (W'SUP)

TITLE: Assessing Recruitment Strategies for a Sexual Health Group-Level Intervention at Wayne State University Prevention (W'SUP): A Mixed Methods Approach

INTRODUCTION: Wayne State University Prevention (W'SUP) is a client-centered sexual health and HIV prevention program aimed at servicing youth and young adults in the Detroit Metropolitan Area by providing sexual health education with a focus on HIV prevention. The Detroit-based, on campus located facility offers a sexual health group-level intervention: Brothers Saving Brothers (BSB). BSB targets young gay, bisexual, and men who have sex with men of color ages 13-29, focusing on HIV risk reduction and education, stigma, healthy relationships, and ethnic and sexual identity.

METHODS: Qualitative and quantitative methods were used to inquire about recruitment strategies for BSB. Qualitative interviews were conducted with W'SUP BSB staff members to gain insight into recruitment methods for the respective interventions. Data was analyzed using content analysis. Quantitative surveys were administered to BSB participants to inquire about recruitment preferences. Data was analyzed using SPSS. Data gathered from interviews and surveys were used to develop effective recruitment methods for BSB.

OUTCOMES: BSB staff reported the most effective methods to recruit participants for BSB was through 'word of mouth' or face-to-face. Staff also believed BSB participants prefer to be recruited through these same methods. BSB participants reported they were recruited via Facebook, a campus event, or friend referral. Their preferred method of recruitment was social media. The results suggest while BSB staff prefer more face-to-face and referral-based recruitment for groups, social media is the preferred method of recruitment amongst participants. Therefore, more emphasis should be placed on social media as a recruitment approach for BSB.

Alymamah Mashrah

SITE: Wayne County Healthy Communities

TITLE: Quality Improvement Projects to Address Health Outcomes at Wayne County Healthy Communities in Hamtramck

INTRODUCTION: Wayne County Healthy Communities (WCHC) is a Federally Qualified Health Center (FQHC) that provides healthcare services including primary care, behavioral and mental health, dental care, women's health, and pediatric care in Wayne and Hamtramck, MI1. This project aims to extract and analyze patient data from WCHC's Electronic Medical Record (EMR) system to assess yearly progress of health outcomes and demographic information to assist in the development of a Uniform Data System (UDS) report. Based on findings from the UDS report, quality improvement projects will be created to improve health outcomes. To demonstrate improvements in the health outcomes of the communities served so that WCHC may be eligible for additional grants in the upcoming years.

METHODS: To develop a comprehensive data report detailing 16 clinical quality measures, I utilized e-ClinicalWorks EMR system and AZARA healthcare software to extract patient health outcomes and demographic data needed for the UDS report. I developed excel spreadsheets for each clinical measure to document and calculate percentage changes from 2018 to 2019. Based on the findings from the UDS report, I developed health education material in brochure format to improve health outcomes for colorectal cancer and cervical cancer in a culturally appropriate way.

OUTCOMES: Create health education projects that are culturally appropriate to increase patient knowledge of critical health issues and to increase patient compliance for UDS clinical measures.

Grace Mahasi

SITE: Birth Detroit

TITLE: A Model for Developing an Advocacy Agenda for Birth De-

troit

INTRODUCTION: Nationally the average infant mortality rate is 6.6 deaths per 1,000 live births. In 2018, Detroit averaged 16.7 infant deaths per 1,000 live births, a third of which were due to premature birth. Birth Detroit seeks to help change these outcomes by establishing Detroit's first Freestanding Birth Center (FBC). In order to fully take advantage of the potential improved health outcomes a birth center can provide, licensure for birth centers must come first, a position supported by the American Public Health Association. The state of Michigan does not license FBCs, and as a result they are unable to accept Medicaid, preventing a large population of those who might benefit the most from the services provided.

METHODS: Analysis of the birth center regulations of other state' regulation of freestanding birth centers and the current status of Michigan public health policy regarding birth center licensure was conducted. Identification of key components of advocacy agenda planning listed the top policy issues as licensing and reimbursement, licensing, and data that proves wellbeing.

OUTCOMES: The final product is to provide Birth Detroit with an advocacy plan to be published as their platform. This platform will include 2-4 advocating goals that will be posted on the organization's website and publications. It will be instrumental in cultivating partnerships with other birth centers in changing regulation policies for the state. Together with this platform, a template of a support or advocacy letter for legislators addressing the regulation of freestanding birth centers in Michigan will be a product of this practicum.

Anne MacNeil

SITE: Advantage Health Centers

TITLE: Provider Training on Patient Portal Functions for Efficient

Direct Line of Communication Between Patient and Provider

INTRODUCTION: Patient satisfaction surveys were collected from November 2019 through January 2020 at the Family Health Center location to evaluate current clinic services. 346 quantitative survey responses were given for the question, 'Would you recommend the services to a friend of family member?' where 324 respondents indicated 'yes', and 22 respondents answered 'no'. A further qualitative analysis of these 22 individuals who responded 'no' to recommending clinic services was conducted. Off these 22 responses, 6 individuals requested a direct line of contact with providers on site.

METHODS: On-site observations of clinic call center and with medical assistants were completed to find gaps in the communication chain. It was found that there was a patient portal in place where patients can sign on to check personal health records, make appointments, and have access to a direct messaging interface with their provider. After discussing this with site, there seems to be a lack of portal awareness by provider. After further investigation, there were approximately 50 patient messages to their provider left unread and unaddressed since the new year.

OUTCOMES: With this campaign, patients will be able to direct message medical inquiries to their provider during normal business hours. Given the patient the ability to ask direct health related questions will give the patient a since of self-responsibility in hopes of positive health outcomes.