The mission of Health Sciences Multicultural and Community Affairs is to promote Creighton University as a recognized leader in the training and development of a multicultural health care workforce that serves to reduce health disparities in underserved and diverse communities through research, culturally proficient education, community interaction and engagements.

HS-MACA Mission Statement
Reflection

The year 2018-2019 was a successful academic year for the department of Health Science-Multicultural and Community Affairs (HS-MACA).

Our premier community outreach program, Center for Promoting Health and Health Equity- Racial and Ethnic Approaches to Community Health (CPHHE-REACH) concluded its funding from the Center for Disease Control (CDC) in September 2018. Because of Creighton University’s institution commitment, we continue to implement our sustainability plan for REACH by continuing to promote physical activities in the African American community in North West Omaha.

HS-MACA also received a three million dollars (33M) grant award from the Health Service Resource Administration (HRSA), a division of US Health and Human Service (HHS), to reestablish the Health Careers Opportunity Program (HCOP) at Creighton University. The objective of the HCOP program is to increase the number of underrepresented minorities in the health care professions of Dentistry, Medicine, Pharmacy and Health Professions and Nursing in the nation.

Our Post-Baccalaureate Pre-Medical and Pre-Dental programs remain strong with a large percentage of our students matriculating into the health science professions of their choice.

On behalf of the dedicated staff of HS-MACA, I want to thank all our constituents and advocates for their support. We remain committed to promoting diversity of our students, faculty and staff at Creighton University and we will continue to prepare all students for an increasingly diverse society and the world at large.

This report details the successes of our programs in 2018-2019.

“Intelligence plus character.....that is the goal of true education”

Martin Luther King, Jr

Thank you,

Sade Kosoko-Lasaki, MD, MSPH, MBA
Associate Vice provost and Professor.
# HS-MACA Highlights 2017-2018

**146 Students**
Since the year 2000, 146 students have successfully completed the Post-Bac Pre-Medical Program. 88% of Post-Bac graduates have matriculated into Medical School.

**$3.07 Million**
Awarded by the Health Resources and Services Administration (HRSA) for the Health Careers Opportunity Program (HCOP). Its mission is to provide students from economically or educationally disadvantaged backgrounds an opportunity to develop the skills needed to successfully compete for, enter, and graduate from health professional school.

**10 weeks**
In the Spring 2019, CPHHE partnered with the Creighton University Office of Excellence to provide the CHA program as a certificate program recognized by Creighton University. The inaugural certified training cohort yielded 6 individuals who completed the 10-week certificate program.

**11,000 Students**
HS-MACA Pipeline Programs have impacted over 11,000 students through Pipeline Programs.

**87 Participants**
Eighty-Seven Health Professionals and Community Members attend the 12th Annual Continuing Education Creighton Conference on Addressing Health Disparities: Focus on Mental/Behavioral Health.

**$1.8 Million**
NIH Endowment
Celebrated the 14th year of COPC funding by supporting the following activities through the Community Oriented Primary Care Endowment: 23 Common Ground sessions with attendance of over 600, nine (9) scholarships to Medical students totaling $17,500, and eight (4) health disparities community public health research for Medical students.

**$175,000**
Awarded funding for the Center for the operations of the Promoting Health and Health Equity (CPHHE) from LB692 Nebraska Tobacco Settlement.

**46,000 Students**
African Americans in Omaha Impacted on chronic disease awareness through promotion of physical activities.

**16 Students**
Participated HS-MACA research programs; Seven (7) undergraduate students in biomedical science research, Three (3) high-school students in community-based health disparities research, two (2) high-school students in American Chemical Society SEED biomedical research, three (3) M1 Medical Students in COPC Health Disparities Research, and one (1) M4 Students in COPC Longitudinal Health Disparities Research.

**77 Students**
Since the year 2000, 77 students have successfully completed the Post-Bac Pre-Dental Program. 96% of Post-Bac Dental graduates have matriculated into dental school.

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**85 Health Professionals and Community Members**
Attend the 12th Annual Continuing Education Creighton Conference on Addressing Health Disparities: Focus on Mental/Behavioral Health.

**676 Students**
Middle and High School students exposed to Health-Science Profession Careers through the Focus on Health Professions program.

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Middle and High School students exposed to Health-Science Profession Careers through the Focus on Health Professions program.
Recruitment efforts in the year 2018 resulted in the dissemination of information to students with an interest in Creighton’s Health Sciences Schools and programs for 2019-2020 academic year. In addition to providing information about the schools of medicine, dentistry, pharmacy and health professions and the physician assistant program, information was also disseminated about HS-MACA’s Post-Baccalaureate Programs, Summer Research Institute, Health Careers Opportunity Program (HCOP) and Mini Health Sciences’ School/Day Camp.

Recruitment and Retention

National Medical Minority Educators Conference (NAMME)
Recruitment for the 2019-2020 academic year began with recruitment at National Association of Medical Minority Educators Conference. The conference took place September 19th – 23rd in Miami, FL. At the Recruitment Fair on September 22nd, HS-MACA’s Recruitment and Retention Manager met with prospective students from Florida International University (FIU). Twelve (12) students expressed interest in Creighton University. Contact cards were completed for follow up requesting information about our health sciences programs in medicine and dentistry as well as the post-baccalaureate program and MCAT prep.

Louisiana State University (LSU)
On October 17, 2018, LSU hosted a Professional Graduate Fair. HS-MACA’s Recruitment and Retention Manager attended with a representative from Creighton University’s School of Pharmacy and Health Professions. Eighteen (18) students expressed interest in a number of health care professions to include: Occupational and Physical Therapy, Pharmacy, Physicians Assistant, dental school and medical school.

Dillard University Graduate Fair
On October 18, 2018, the Recruitment and Retention Manager attended the Graduate and Professional Fair at Dillard University, a historically black college in New Orleans, LA. The Recruitment and Retention Manager met with sophomores, juniors and seniors who expressed interests in the health sciences. Approximately twenty-five (25) students completed contact cards for follow up. Contact was also made with Dillard University faculty and staff that expressed interest in class presentations utilizing software applications.

Xavier University
On Friday, October 19, 2018 the Recruitment and Retention Manager visited the campus of Xavier University of Louisiana, a historically black college, recognized as a national leader in the sciences. Twenty (20) students were engaged. Students expressed interest in the Post-Baccalaureate Programs, Physician Assistant Program, MCAT/DAT prep, and summer research programs. Contact cards were submitted for follow up and further information.

Atlanta University Consortium (AUC)
The Recruitment and Retention Manager attended Atlanta University Consortium (AUC) held at Clark Atlanta University to recruit students from Morehouse College, Spelman and Clark Atlanta University. The AUC was held on Wednesday, October 24th, 2018. Twenty-one (21) students, ranging from freshman to senior provided their contact information for follow up.

Black Doctoral Network
On Saturday, October 27th, 2018, the Recruitment and Retention Manager attended the Black Doctoral Network Annual Conference in Charlotte, NC. The Black Doctoral Network (BDN) is an organization for individuals of African descent who are holders of, or scholars engaged in the pursuit of, undergraduate and advanced degrees from accredited institutions of higher learning worldwide. This year yielded contact with four (4) students, however, the networking was invaluable.
The Medical Minority Applicant Registry (Med-Mar), was created by AAMC to enhance admission opportunities for groups historically underrepresented in medicine. Med-MAR serves as a means of identifying and communicating the availability of applicants from groups who self-identify as underrepresented in medicine and/or as economically disadvantaged. The program’s registry distributes basic biographical information about the applicant and their MCAT exam scores to minority affairs and admission offices of AAMC-member schools and certain health-related agencies interested in increasing opportunities for students participating in the program. Access to the Med-Mar registry allowed HS-MACA to disseminate information to 1,893 prospective students eligible for enrollment into the Post-Baccalaureate Pre-Medical Program for the 2019-2020 academic year.

Pre-Med Star
Pre-Med Star is a new online recruitment strategy and tool that helps medical schools and programs recruit students by making the recruitment process easier, efficient and concise. As a hub for diversity Pre-Med Star helps to increase the depth of recruitment for Creighton University health sciences programs.

Recruitment efforts in 2018 resulted in HS-MACA receiving 115 applications from students seeking admittance into Creighton University’s Post-Baccalaureate Pre-Medical and Pre-Dental Programs for the 2019-2020 academic year.

<table>
<thead>
<tr>
<th>School/Conference</th>
<th>Date of Event</th>
<th>Location</th>
<th>Total # of Student Interactions</th>
</tr>
</thead>
<tbody>
<tr>
<td>NAMME</td>
<td>September 22, 2018</td>
<td>Miami, FL</td>
<td>12</td>
</tr>
<tr>
<td>LSU</td>
<td>October 17, 2018</td>
<td>New Orleans, LA</td>
<td>18</td>
</tr>
<tr>
<td>Dillard University</td>
<td>October 18, 2018</td>
<td>New Orleans, LA</td>
<td>25</td>
</tr>
<tr>
<td>Xavier University</td>
<td>October 19, 2018</td>
<td>New Orleans, LA</td>
<td>20</td>
</tr>
<tr>
<td>Atlanta University Consortium</td>
<td>October 24, 2018</td>
<td>Atlanta, GA</td>
<td>21</td>
</tr>
<tr>
<td>Black Doctoral Network</td>
<td>October 27, 2018</td>
<td>Charlotte, NC</td>
<td>2</td>
</tr>
</tbody>
</table>

2018 - 2019 Recruitment Tracking

![Graph showing the distribution of student interactions across different schools and events.](image-url)
Application and interest into Creighton University’s Health Sciences Schools and the Post-Baccalaureate Programs can be attributed to our academic success, word of mouth advertising, campus visits, and health science fairs. Recruitment activities have been essential in the development and building of institutional relationships and securing applications for our Pipeline Programs.

Summer Research Institute
The Summer Research Institute supported by HS-MACA and CPHHE includes the Undergraduate Biomedical Research Program, High School Community Research Program, and Project SEED which is funded by the American Chemical Society (ACS). In order to ensure a large applicant pool for both programs information was disseminated to several schools and organizations to include: Omaha South High School, Omaha North High School, Central High School, Benson High School and its Health Career Academy, Brownell Talbot, Mt. Michael Benetacite, University of Nebraska at Omaha, University of Nebraska Medical Center and Metropolitan Community College. The Creighton University community includes SNMA, MAPS, Creighton International Center, Creighton EDGE, Student Support Services, Project CUPA, TRIO/Edward Bound, Ignatian College Connection, Medical Spanish Club, African Students Association and HCOP students. Hope Center for Kids, Urban League of Nebraska, Youth for Greater Good, Partnership/3Ks and 100 Black Men of Omaha were also encouraged to promote the programs to their student populations. The Summer Research Institute was advertised through The American Association of Medical Colleges (AAMC) weekly announcements and via social media outlets like Facebook. In 2018/2019 we received sixty-five (65) Undergraduate Biomedical Research Applications and a combined twenty-five (25) application inquiries for the High School Community Research Program and SEED Programs.

Health Careers Opportunity Program (HCOP)
The Pipeline to Success Health Careers Opportunity Program (HCOP) is a federally funded grant that provides students from economically or educationally disadvantaged backgrounds an opportunity to develop the skills needed to successfully compete for, enter, and graduate from health professional schools. After receipt of the grant in August 2018, recruitment immediately began for the Fall, Spring and Summer Ambassador Programs. Information was disseminated to a number of schools in Nebraska and surrounding areas, community organizations and within Creighton University community. As a result a total of 36 students were recruited and enrolled into the 2018-2019 Ambassador Programs.

Conclusion/Future Directives
HS-MACA continues to develop relationships with students, universities, pre-health advisors, faculty/staff and administrators, and the community in order to bring awareness to our efforts to bridge the achievement gap by addressing health disparities in education, community, research, and scholarship. Moreover, with the implementation of new programs and a shift in operating practices, we are looking forward to new and innovative strategies to increase awareness and participation in our programs.

HS-MACA plans to focus on innovative ways to increase recruitment efforts for the 2020-2021 academic year by: (1) continuing to work in collaboration with Creighton’s Health Sciences Schools (School of Medicine, School of Dentistry, School of Pharmacy and Health Professions, and College of Nursing), (2) participating in more professional recruitment fairs (local, virtual), (3) introducing new marketing strategies and content (4) using technology to track and identify the total number of prospective students that have applied, interviewed and accepted an offer to Creighton University, the Post-Baccalaureate/Pre-Matriculation Programs or any health sciences programs in future recruiting reports (5) expanding community and Pipeline Programming in area schools and organizations within the local communities we represent and (4) enhancing our relationships with other health sciences schools and minority serving institutions with a focus on diversity.

Mini Health Sciences School
To promote Science, Technology, Engineering, and Mathematics, (STEM) to students in grade school to high school, HS-MACA collaborates with Creighton University’s Health Sciences Schools to conduct the Mini Health Sciences School and Day Camp. Activities include: panel discussions with healthcare professionals, dissection, hospital tours, simulation labs, participate on experimental projects and in class learning. To successful conduct a mini day camp it is important to have a strong collaboration with the several health sciences schools and departments as well as local schools and organizations like McMillan Magnet Center, St. Augustine Indian Mission School, Jesuit Academy, Partnership 4 Kids, NOAH Clinic and Creighton Preparatory School.

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Mentoring
The HS-MACA mentoring program continues to grow and benefit students, faculty, and staff at Creighton University. The mentoring program is promoted throughout the university and its larger community. The Mentoring program provides, both formal and informal, opportunities for counseling and support, making it possible for the students to succeed in their academic and professional careers.

• Open Door: During the academic year, the program director, Dr. Kosoko-Lasaki mentored an average of five (5) current and prospective students per week. This translates to one hundred and one (101) students in the academic year. In addition, she also had a one-hour mentoring class per month for all fifteen (15) Post-Baccalaureate and Pre-Matriculation students.

• Post-Baccalaureate/Pre-matriculation: All fifteen (15) students were assigned individual mentors from the upper class of the medical and dental schools. In addition, the students participated in three formal mentoring gatherings during the academic year. An external guest speaker was invited to the mentoring event.

• The HS-MACA mentoring program worked with over eighty (80) students from high school through professional school. Three group sessions offered students guidance on how to develop successful mentor/mentee relationships.

Tutoring
HS-MACA offers a tutoring program for students who need extra assistance in the Post-Baccalaureate classes, in dental and medical schools, and in the “pipeline” programs. Other health professions students are provided individual tutoring as needed. Students are referred by HS-MACA coordinators for tutoring in subject areas of biology, chemistry, physics, or math. The following services are offered:

• Individual meeting with instructor for additional assistance
• Individual- and peer-tutoring session with classmate
• Access to academic resources offered through the university
• Assignment of an individual tutor paid for by HS-MACA.

This year, HS-MACA provide one hundred eighty eight (188) hours of supplemental peer tutoring to Post-Baccalaureate and Pre-Matriculation students to 12 Post-Bac Students. In the 2018 – 2019 academic year, we trained twenty-three (23) students as Creighton Medical Students (M1) students attended supplemental instruction sessions.

Learning Lab
HS-MACA continued the operations of the learning laboratory for the 2018-2019 academic year as an extension of the Academic Success course and to enhance existing tutoring program. Under the guidance of the Assistant Director of Academic Enrichment, fifteen (15) Post-Baccalaureate students and three (3) of the SHPHT Pre-Matriculation students received over seventy (70) hours of Learning Lab experience to improve learning strategies in course content as follows: cooperative learning, content experts to provide guidance, MCAT/DAT preparation and review, and group tutoring.

Health Science Retention Activities
HS-MACA Scholarship Recipients

Dr. John T. Elder Post-Baccalaureate Award

After Dr. John T. Elder died in November 1996, one of his former students, Thomas Collins, MD, FRCS, a surgeon in Boston, donated funds to start an endowment in Dr. Elder’s name. Proceeds from the endowment have been awarded to a current medical Post-Baccalaureate alumni student. The one-time scholarship was awarded to Elizabeth England (M3) in 2018-2019.

HS-MACA Post-Baccalaureate Alumni Scholarship

In the 2017-2018 academic year Post-Baccalaureate Alumni Scholarship was extended to HS-MACA Post-bac alumni. Scholarship are awarded to two current Post-Baccalaureate students based on their financial need. In the 2018-2019 Academic Year six (6) Post-Bac students were awarded scholarship money. The students are Johnny Atencio, Albert Cohen-Sedg, Shaneeze Longboy, Anny Nguyen, Geraldine Manansala, and Alex Sasaki.

The Dr. Gbolahan & Sade Lasaki Family Award was established in 2008. This award is for $1,000 per student for two students in the current Post-Baccalaureate students who are the most improved on the Pre and post Medical and Dental (MCAT and DAT) admission test scores. For 2017-2018, the students who received the awards are Daniel Paku (Pre-Dental) and Bianca Luna (Pre-Medical).

HS-MACA Spring 2019 Mentoring Dinner
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Dr. John T. Elder Post-Baccalaureate Award

Elizabeth England
Creighton School of Medicine, M3

Amy Nguyen
Geraldine Manansala
Alex Sasaki

The Drs. Gbolahan & Sade Lasaki Family Award

Bianca Luna
Post-Bac Pre Dental

Drs. Gbolahan & Sade Lasaki Family Award

Johnny Atencio
Albert Cohen-Sedg
Shaneeze Longboy
Anny Nguyen
Geraldine Manansala
Alex Sasaki

HS-MACA Post-Baccalaureate Alumni Scholarship

Bianca Luna
Post-Bac Pre Dental

Daniel Paku
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Shaneeze Longboy
Anny Nguyen
Geraldine Manansala
Alex Sasaki

The Drs. Gbolahan & Sade Lasaki Family Award
Minority Association of Pre-Health Students (MAPS)

MAPS is an undergraduate student organization that provides opportunities for students to collaborate with other organizations on campus like the Student National Medical Association (SNMA) at local, regional, and national levels very early in their college careers. For the 2018-2019 academic year, MAPS' participation on campus and in the community was minimal. Under new leadership MAPS is looking forward to the 2019 Involvement and Recruitment Fair at Creighton University.

Student National Medical Association (SNMA)
The Student National Medical Association (SNMA), established in 1964, is the oldest and largest independent, student-run organization focused on the needs and concerns of African American medical students in the United States. It was established as a subsidiary of the National Medical Association in 1964 by medical students from Howard University and Meharry Medical College. SNMA is committed to supporting current and future underrepresented minority medical students, addressing the needs of underserved communities, and increasing the number of clinically and culturally competent physicians.

In 2018-2019 with a total of 46 registered student members, SNMA participated in a number of activities on campus, in the Omaha community and abroad. SNMA Leadership was present at the Annual Medical Education Conference (AMEC) which took place in Philadelphia, PA. Members of SNMA were also instrumental in mentoring HS-MACA "Pipeline" health sciences students logging over 150 mentoring hours. In addition SNMA volunteered time to assist with HS-MACA outreach programs, conducting health screenings for Lutheran Family Services, organizing toilet paper drives and working with refugee families.

2018-2019 SNMA Members

Student Organizations

Medicine Gender and Sexuality Alliance (MedGSA)

MedGSA members hold true to the two-prong mission: to promote and advocate for issues affecting LGBTQIA patients and healthcare workers. A safe space is provided for discussion of various topics in queer politics, socioeconomic disparities, and healthcare policies in a respectful and educational manner. During the 2018-2019 academic year, 11 students were active members of MedGSA.

Multicultural Health Sciences Student Association (MHSSA)

Multicultural Health Sciences Student Association (MHSSA) is an inter-professional organization that involves students in all health sciences schools at Creighton University. This includes the school of medicine, dentistry, pharmacy, occupational therapy, physical therapy and college of nursing. For the 2018-2019 academic year, 33 MHSSA members came together to plan a successful HIV/AIDS Awareness Week for the campus and the community. Members of MHSSA also worked closely with Benson High School’s Health Professions Academy where they mentored and tutored students interested in pursuing careers in healthcare. Students also worked in collaboration with the MCAGA to help facilitate “Pipeline” Programming through our Middle School Initiative. The students were also involved in service with the poor, the oppressed, and the marginalized in the Omaha community. These students inspire and lead others to work with them in their efforts. Finally, the students committed to the religious and ethical dimensions and values fostered at Creighton University, whatever their own religious affiliation.

Latino Multicultural Student Association (LMSA)

Latino Multicultural Student Association (LMSA) is the newest professional student organization supported by HS-MACA. The mission of the Latino Multicultural Student Association (LMSA) is to promote and advance the presence of Latino professional students in the healthcare field in order to better serve underserved patient populations. The LMSA also focuses on improving Latino cultural knowledge to allow for Creighton students to become more culturally competent healthcare professionals. Finally, the LMSA focuses on mentorship to cultivate the professional growth of individuals who will work towards better healthcare outcomes for underserved patient populations.

Ophthalmology Interest Group (OIG)

The purpose of OIG is to provide opportunities for current medical students to explore the field of ophthalmology as a career choice. OIG invites local ophthalmologists and faculty to host informational meetings, and hands-on workshop sessions as well as facilitate opportunities for students to shadow and work one-on-one with ophthalmologists and optometrists in the community. A primary focus of the OIG is eye care professions and community service.
Pre-Medical Post-Baccalaureate Program

Eight (8) Pre-Medical Post-Baccalaureate Program students, out of a pool of fifty (50) applicants, were admitted to the fee-driven Pre-Medical program for the 2018-2019 academic year. As a part of the Post-Baccalaureate Pre-Medical Program, students are engaged in year-round science coursework which includes: Biology, Chemistry, Physics, Organic Chemistry. In addition, the program offers Pre-Medical College Admission Test (MCAT) preparations, health professions exposure in primary care setting, and a summer Pre-Matriculation Program.

Five (5) students will matriculate into Creighton School of Medicine in August 2019; Four (4) students from the 2018-2019 and one student (1) from the class of 2017-2018 year. Three post-bac alums will also matriculate to Medical school outside of Creighton this fall; 1 student from 2016-2018 academic year and two students from 2017-2018 academic year. Four (4) students will take a gap year and apply to other MD and DO schools next application cycle.

Six Alum (6) students from the Pre-Medical Post-Baccalaureate Program graduated with an MD degree in May 2019, from Creighton University’s School of Medicine. The students have matched in residencies in Family Medicine, Internal Medicine, and Obstetrics-Gynecology.

Pre-Dental Post-Baccalaureate Program

Seven (7) Post-Baccalaureate students were admitted into the fee-driven Pre-Dental Program for the 2018-2019 academic year, out of an applicant pool of eighty (80) students. These students were also engaged in year-round coursework including: PAT, Biology, Math, Chemistry, and Physiology. In addition, the program offers Pre-Dental Admission Test (DAT) preparations, health professions exposure in dental clinical settings, and a Pre-Matriculation program. Students are awarded scholarships of Ten thousand dollars ($10,000) per year during their tenure in dental school based on their successful completion of the Post-Baccalaureate and Pre-Matriculation programs.

Eight (8) students will matriculate into Creighton University School of Dentistry (CUSOD) in the fall of 2019; one student (1) from the class of 2016-2017 year and seven students (7) from 2018-2019 academic year.

Five Alum (4) students from the Pre-Dental Post-Baccalaureate Program graduated with a DDS degree in May 2019 from Creighton University’s School of Dentistry.

Pre-Matriculation Program (School of Pharmacy and Health Professions, Pre-Medical and Pre-Dental Students)

In the summer of 2019, fifteen (15) students participated in the Pre-Matriculation Programs, eight (8) Pre-Medical and seven (7) Pre-Dental students; the school was both a success and challenge for the Pre-Dental, Pre-Medical Programs. Eleven (11) students have matriculated into a health professional school. The following breakout for each professional school is as follows: Seven (7) Dental, four (4) Medical.

Subjects of study in the Post-Baccalaureate/Pre-Matriculation Pre-Medical Program include Anatomy, Microbiology, Neuroscience, Micro Cell Biology, Host Defense, Pharmacology, and Academic Excellence.

The Pre-Matriculation subjects for the Pre-Matriculation Pre-Dental program are Gross Anatomy, Academic Excellence, Histology, Biochemistry, Dental Anatomy, and Dental Materials.

*No students from the School of Pharmacy and Health Professions was admitted to the Pre-Matic in 2018 or 2019.
Community Oriented Primary Care Endowment

With Funding from the National Institute of Health (Grant # 1S21MD001102-01), the Creighton University Community-Oriented Primary Care (COPC) Program’s mission is to increase the number of health professionals who are committed to addressing health disparities through their research and service in medically-underserved communities.

From October 2004 to September 2007, Creighton University, through its department of Health Sciences Multicultural and Community Affairs (HS-MACA), received an endowment of $1,875,000 in perpetuity from the National Institutes of Health (NIH) to increase Creighton’s capacity to train students in public-health research. The grant was disbursed to Creighton University at $625,000 per year for each of the three years to address health disparities among medically-underserved populations in Nebraska and Iowa. With proceeds from this funding, HS-MACA established a Community-Oriented Primary Care (COPC) Public Health Research Program to increase student involvement in public-health research and to strengthen mentoring and tutoring services. COPC is currently in its eleventh year of operation.

COPC is made up of four components: Health Disparities Research, Common Ground, Medical Student Tutoring and Medical Student Scholarships.

Health Disparities Research
Each summer, first-year medical students participate in an eight-week COPC health disparity research project. Each student is paired with a faculty researcher with expertise in public health and will present their research at Common Ground during the 2018–2019 academic year. Below is a list of the medical students with their respective research topics (for the summer of 2019) and the respective faculty mentors:

- Abigail A. Lauti - Identifying the roles of medical providers in addressing barriers to HPV vaccination rates in rural NE clinics; mentor Meera Varmen, MD
- Leah Brieger - Assessing Health Disparities in Prenatal Care and Neonatal Outcomes; Mentor Dr. Terence Zach, MD
- Abigail Scrugg - Maternal Care and Length of NICU Stay: Effects of Health Disparities; Mentor Dr. Terence Zach, MD

One fourth-year (M4) medical students concluded COPC Longitudinal Health Disparities Research. Her paper has been submitted to a peer-reviewed journal for publication.

- Juliana Kennedy (M4) - Risk Factors for Child Maltreatment Fatalities in a National Pediatric Inpatient Database; Mentors Stephen Lazoritz, MD; Vincent Palucci, MD

Common Ground
Common Ground is an inter-professional forum where all students in the health sciences meet every Friday during Spring and Fall semesters. It is an open and interactive forum in which the students learn the principles of public health and health disparities from health professionals, researchers, and community partners. We held twenty-three (23) Common Ground sessions in the 2018–2019 academic year and a total of 834 (weekly average of 38) students gathered to learn about health disparities in Nebraska and the region.

Medical School Tutoring
COPC continues to support mentoring and tutoring within the medical school. Programs offered include: Training Tutors [Train-the-Trainer method], one-on-one tutoring, and Supplemental Instruction (SI). In the 2018 – 2019 academic year, we trained twenty-three (23) students as tutors and eight-hundred (800) students attended supplemental instruction sessions. This program is offered in collaboration with the Office of Student Affairs in the School of Medicine, to improve the academic success of the medical students.

Scholarships
The COPC Scholarship is awarded to increase medical-school enrollment of students interested in participating in health disparity research. During the 2017-2018 fiscal year, COPC awarded $17,000 in scholarship money to nine (9) students: Christopher Oukenguo (M2), Chaite R Douai (M1), Elizabeth C. Englund (M3), Patrick S. Hooke (M2), Katlin Mattson (M3), Olivia E. Ochuba (M2), Thomas Reith (M3), Aakriti Shrestha (M3), and Joshua Ulanday (M3).

Since 2008, the COPC Scholarship committee has awarded a total of $264,600 in scholarships to Creighton University School of Medicine health disparity students.

Overall, COPC has had a successful 2016-2019 academic year. We look forward to future collaboration with other programs in the community and with Creighton students, faculty and staff.
Creighton University Pipeline to Success Health Careers Opportunity Program (HCOP) offers students:

- Formal and informal opportunities for counseling, mentoring, tutoring and group support.
- Academic support services, academic enrichment, and skill development.
- Reduction in cognitive or attitudinal barriers to learning through discussion of educational, personal, and/or family issues that may impact academic progress.
- Immersive educational and clinical shadowing activities.
- Training/exposure in primary care settings as well as opioid abuse, mental and behavioral health.

Creighton University’s Pipeline to Success Health Careers Opportunity Program (HCOP) is a federally funded grant awarded by the Health Resources and Services Administration (HRSA), an agency of the U.S. Department of Health and Human Services (HHS). Its mission is to provide students from economically or educationally disadvantaged backgrounds an opportunity to develop the skills needed to successfully compete for, enter, and graduate from health professional school. The overall purpose is to offer students from disadvantaged backgrounds an opportunity to develop the skills needed to successfully compete for, enter, and graduate from health professional school. The program endeavors to provide a multitude of program activities that cultivate the union of academics and interpersonal experiences within each student that will prove to be a vital tool along the journey to success.

Creighton University’s Pipeline to Success Health Careers Opportunity Program (HCOP) offers students:

- Formal and informal opportunities for counseling, mentoring, tutoring and group support.
- Academic support services, academic enrichment, and skill development.
- Reduction in cognitive or attitudinal barriers to learning through discussion of educational, personal, and/or family issues that may impact academic progress.
- Immersive educational and clinical shadowing activities.
- Training/exposure in primary care settings as well as opioid abuse, mental and behavioral health.

COMMUNITY PARTNERSHIPS

Academic and professional success of a student results from the support and commitment of dedicated individuals and organizations. Creighton University’s Pipeline to Success Health Careers Opportunity Program (HCOP) has established partnerships between several public and nonprofit private health and educational entities whom have promised to establish, enhance and expand educational programs that result in the academic and professional success of students who desire a career in health professional careers. A total of five (5) community partner organizations are currently participating in the program: Creighton University’s Health Sciences - Multicultural and Community Affairs Department, Metropolitan Community College, Omaha Public Schools, Heart Ministry Center and OneWorld Community Health Centers, Inc.

ACADEMIC SUCCESS

Creighton University’s Pipeline to Success Health Careers Opportunity Program’s (HCOP) main purpose is to ensure student success in matriculating through high school, college, and health professional school and entering the health profession of their choosing. To this end, HCOP reinforces student’s chances of succeeding academically in several ways. The Academic Success Counselor manages student progress and meets with students to form an Individualized Assessment Plan (IAP). Study skills and other dedicated enrichment courses also allow students to receive foundational knowledge in key subject areas and succeed academically in the health sciences. Finally, tutoring is coordinated for students so that any gaps in learning may be filled and barriers to success lessened.

THE INDIVIDUAL ACADEMIC PLAN (IAP) PROCESS

Each student who joins the Creighton University Pipeline to Success Health Careers Opportunity Program (HCOP), whether it be the Health Careers Ambassador Program or the Structured Summer Program, is assessed initially by the Academic Success Counselor. Then over the course of the program, counselor and student meet to discuss student goals, current academic progress, and potential barriers to success that students may be experiencing. Together, student and counselor create an Individualized Assessment Plan (IAP) based on the student’s individual goals. Not only are goals set, but each student and counselor together discuss...
strategies for achieving each goal and record those steps as well. Emphasis is placed on students creating SMART (Specific, Measurable, Attainable, Relevant, and Timely) goals. Within the IAP, the Academic Success Counselor also tracks things such as standardized test scores and grades, as well as student strengths and areas to improve. The Academic Success Counselor may identify an area in which a student would benefit from a tutor. The HCOP staff coordinates between students and tutors to ensure that tutoring takes place; in cases where students may spend dedicated time learning successful study strategies and improving their test-taking abilities. During the Health Careers Ambassador Program, study skills workshops are held to increase student knowledge of study skills, group study techniques, and ways to increase time management and organizational skills. Test preparation resources are also made available to students who participate in the academic year and summer programs, and progress is monitored. Additionally, an ACT Preparation class is held for high school students, accompanied by an online self-paced course to maximize student learning.

STUDENT SUPPORT
To help ensure all students succeed, the Creighton University Pipeline to Success Health Careers Opportunity Program employs different types of tutors to help reinforce student achievement in areas they may feel less confident in. During the course of an IAP meeting a student and the Academic Success Counselor may identify an area in which a student would benefit from a tutor. The HCOP staff coordinates between students and tutors to ensure that tutoring takes place; in cases where students may spend dedicated time learning successful study strategies and improving their test-taking abilities. During the Structured Summer Program, tutoring takes place one-on-one on an as-needed basis coordinated by the Academic Success Counselor and monitors and tracks tutoring hours spent. During the Health Careers Ambassador Program, study skills workshops are held to increase student knowledge of study skills, group study techniques, and ways to increase time management and organizational skills. Test preparation resources are also made available to students who participate in the academic year and summer programs, and progress is monitored. Additionally, an ACT Preparation class is held for high school students, accompanied by an online self-paced course to maximize student learning.

ENRICHMENT COURSES
Weekly during the Structured Summer Program, as well as during the bi-monthly sessions of the Health Careers Ambassador Program, students participate in enrichment courses and study skills workshops to improve their performance in school. During the Structured Summer Program, students are enrolled in enrichment coursework in subjects that will be foundational and crucial to their future success in the health sciences such as upper level math/science/reading/writing. The courses, taught by experts in the subject, are geared toward building solid foundational knowledge and providing students with the chance to interact with concepts in a new way to increase understanding. Coursework in academic success as well as test preparation is also available, so that students may spend dedicated time learning successful study strategies. During the Structured Summer Program, students are offered enrichment coursework in subjects that will be foundational and crucial to their future success in the health sciences such as upper level math/science/reading/writing. The courses, taught by experts in the subject, are geared toward building solid foundational knowledge and providing students with the chance to interact with concepts in a new way to increase understanding. Coursework in academic success as well as test preparation is also available, so that students may spend dedicated time learning successful study strategies. During the Structured Summer Program, students are offered enrichment coursework in subjects that will be foundational and crucial to their future success in the health sciences such as upper level math/science/reading/writing. The courses, taught by experts in the subject, are geared toward building solid foundational knowledge and providing students with the chance to interact with concepts in a new way to increase understanding. Coursework in academic success as well as test preparation is also available, so that students may spend dedicated time learning successful study strategies. During the Structured Summer Program, students are offered enrichment coursework in subjects that will be foundational and crucial to their future success in the health sciences such as upper level math/science/reading/writing.

IN A NUTSHELL…WHAT’S HAPPENED SO FAR…
In January 2019, students began the journey to success as the 1st Health Careers Ambassador Program session for students. The session which took place during the academic year (every 1st and 3rd Saturday of each month) included students currently enrolled in high school, community college, a 4-year college/university and health professional school. Over the course of five (5) months, students attended an opioid abuse and mental/behavioral health panel; took part in several financial aid workshops; sat in on health disparities sessions; participated in suicide prevention training; attended college campus tours; got trained on resume-building and personal statement development; learned the importance of study skills; shadowed health professionals at Heart Ministry Center and the NOAH Clinic; created their very own hashtag/T-shirt design and much more. As the Spring 2019 session to a close, it ended with a bang in the form of an awards and recognition luncheon to honor their success completion of the program session. HCOP staff presented each 2019 Health Careers Ambassador Program student with a Certificate of Completion and as an added bonus each health professional student received a special award acknowledging their dedicated mentorship, leadership, and guidance throughout the session!!!

As one session comes to an end another one is gaining steam – the Summer 2019 Structured Session which is a structured, six-week program that provides a plethora of academic enrichment opportunities where students partake in classroom instruction focused on upper-level mathematics/science/reading/writing, standardized test preparation, clinical shadowing, field trips, etc. began June 17, 2019 and will end July 26, 2019. The classroom instruction is geared to help students strengthen their foundation in subjects that will be integral to them as they pursue careers in the health sciences. The courses are 1 hour and 25 minutes per day, Monday through Friday. Students have the opportunity to participate in these classes on a drop-in basis and have their tutoring needs met and questions answered. Additionally, a tutor is available during high school test preparation, so that students can receive in-class help with a particular subject as they complete the correction process. During the Health Careers Ambassador Program, tutoring takes place one-on-one on an as-needed basis coordinated by the HCOP staff, and “homework support” activities are also scheduled to allow students to receive help from their peers.

IN A NUTSHELL...WHAT'S HAPPENED SO FAR...

January 26, 2019 began the journey to success as the 1st day of the 2019 Spring Health Careers Ambassador Program session for students. The session which took place during the academic

(left to right) Lieutenant Governor (Program Supervisor) Christine Jeanine, Academic Success Counselor and HCOP Program Coordinator, Isaac Aminatu Issaka and Academic Success Counselor Christina Jelinek (Academic Success Counselor) and Isaac Aminatu Issaka (Program Supervisor), "#TeamHCOP" successfully pursue health professional careers; ultimately making an impact throughout the global community. Creighton University's Pipeline to Success Health Careers Opportunity Program (HCOP) is committed to inspiring and supporting skilled, diverse students as they successfully pursue health professional careers, ultimately making an impact throughout the global community.

#TeamHCOP

Focus on Health Professions: Pipeline Program

Since its inception in 2000, the Health Sciences Multicultural and Community Affairs Office (HS-MACA) has introduced over ten thousand young individuals to careers in the Health Sciences through pipeline programs that serve area students beginning in the 4th grade and continuing through their middle school, high school, college and professional school years. The program exposes young people of diverse backgrounds to career opportunities they might not otherwise consider and helps them envision a possible profession in the Health Sciences. Mentors encourage students to establish short- and long-term educational and professional goals and make educational choices that will foster an ongoing interest in science. Pipeline programs lay the groundwork that can assist students in becoming competitive applicants to professional schools of medicine, dentistry, and other health sciences.

Focus on Health Afterschool program

The HS-MACA Focus on Health Program was created in 2009 as a sustainability program for the Health Career Opportunity Program (HCOP). Through a collaborative agreement we established a partnership with the City of Omaha’s Middle School Learning Initiative to provide STEM (Science, Technology, Engineering, and Math) programming to their after-school and summer programs. The schools partnered with were Lewis and Clark Magnet School, Mars Middle School, McMillian Middle School, Monroe Middle School, and King Science and Technology Magnet Middle School’s after school program was added this past year as well. A STEM curriculum was developed by HS-MACA, in which educational and career presentations were given in seven-week sessions during the academic school year as well as in the summer. Additional summer STEM classes were also taught at the Hope Center for Kids to students between the ages 5 and 18.

Focus on Health Professions: Pipeline Program

Two summer camps were run as an extension of the Pipeline Program. HS-MACA also partnered with Partnership 4 Kids to provide a 4-day camp for 23 high school applicants for the Mini-Health Sciences School and providing a week-long summer program as well as a school-year pharmacy lab activity on Creighton’s campus.

Pipeline Programs with the Omaha Community

HS-MACA hosted students from local schools and community organizations for Health Sciences career exposure. In June 2018 we had students come from the Jesuit Academy Middle School, and in June 2019 we received students from St. Augustine Indian Mission School, McMillian Middle School and the Noah Clinic. Over 120 students from the various school and community organizations learned about attending college from a Health Science student panel, toured Creighton’s campus, learned academic success strategies, and completed activities such as eye dissections during their visits.

Focus on Health Student Attendance

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Partnering with HS-MACA, Creighton students and community organizations provided over 1000 hours of volunteer service with Creighton undergraduate student, assisted with the programming. Twenty-seven students volunteered a combined fifty times at some point during the 2018/19 school year. This included an organized field trip by SMMA that middle school students from Mars Middle School made to Creighton University to learn about the careers in medicine, dentistry, pharmacy, and physical and occupational therapy.

King Science Healthcare Academy

During the 2018/19 academic school year the HS-MACA Pipeline Program partnered with King Science Middle School (KSMS) to launch the inaugural year of their Middle School Health Program. The program focuses on health science education and opportunities in the field of medicine, dentistry, and other health careers. The program is designed to increase awareness and interest in health science careers for area students beginning in 4th grade and continuing through their middle school years. This includes an organized field trip by SMMA that middle school students from Mars Middle School made to Creighton University to learn about the careers in medicine, dentistry, pharmacy, and physical and occupational therapy.

King Science Healthcare Academy II

During the 2019/20 academic school year the HS-MACA Pipeline Program partnered with King Science Middle School (KSMS) to launch the second year of their Middle School Health Program. The program focuses on health science education and opportunities in the field of medicine, dentistry, and other health careers. The program is designed to increase awareness and interest in health science careers for area students beginning in 4th grade and continuing through their middle school years. This includes an organized field trip by SMMA that middle school students from Mars Middle School made to Creighton University to learn about the careers in medicine, dentistry, pharmacy, and physical and occupational therapy.

King Science Healthcare Academy III

During the 2020/21 academic school year the HS-MACA Pipeline Program partnered with King Science Middle School (KSMS) to launch the third year of their Middle School Health Program. The program focuses on health science education and opportunities in the field of medicine, dentistry, and other health careers. The program is designed to increase awareness and interest in health science careers for area students beginning in 4th grade and continuing through their middle school years. This includes an organized field trip by SMMA that middle school students from Mars Middle School made to Creighton University to learn about the careers in medicine, dentistry, pharmacy, and physical and occupational therapy.

King Science Healthcare Academy IV

During the 2021/22 academic school year the HS-MACA Pipeline Program partnered with King Science Middle School (KSMS) to launch the fourth year of their Middle School Health Program. The program focuses on health science education and opportunities in the field of medicine, dentistry, and other health careers. The program is designed to increase awareness and interest in health science careers for area students beginning in 4th grade and continuing through their middle school years. This includes an organized field trip by SMMA that middle school students from Mars Middle School made to Creighton University to learn about the careers in medicine, dentistry, pharmacy, and physical and occupational therapy.

King Science Healthcare Academy V

During the 2022/23 academic school year the HS-MACA Pipeline Program partnered with King Science Middle School (KSMS) to launch the fifth year of their Middle School Health Program. The program focuses on health science education and opportunities in the field of medicine, dentistry, and other health careers. The program is designed to increase awareness and interest in health science careers for area students beginning in 4th grade and continuing through their middle school years. This includes an organized field trip by SMMA that middle school students from Mars Middle School made to Creighton University to learn about the careers in medicine, dentistry, pharmacy, and physical and occupational therapy.

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The Center for Promoting Health and Health Equity (CPHHE) was co-founded in 2008 by executive co-directors Dr. John Stone and Dr. Sade Kosoko-Lasaki. The purpose of the Center is to enhance community health through community-university collaborative research, education, and outreach in Omaha, NE and the region. The Center’s emphasis is on health improvement of communities that have worse health related to social inequalities and inequities. The goal remains to reduce health disparities and increase the health of minority populations through community-university collaborative research, education, and implementation in Omaha, Nebraska, and the surrounding region.

The Center’s formation rests on the recognition that, to foster health equality and promote health generally, Health Sciences Centers such as CPHHE should become centers-without-walls that embrace served communities as partners and collaborators. Intersectional collaboration of multiple academic disciplines and health professions is essential and community-based participatory research is the most promising model. Core issues are how social justice, respect, care, and other ethical values should flow throughout such a collaborative-partnering endeavor.

Building community-academic relationships and partnering are essential elements for effective Community-Based Participatory Research and are crucial for grant applications (institutional commitment) and for reducing disparities in the community.

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The 12th Annual Addressing Health Disparities Seminar

Focus on Mental/Behavioral Health

On Saturday, April 27, 2019, about eighty-seven (87) healthcare professionals, community leaders, university faculty and staff, interested community members and students gathered at Creighton University to explore the data, statistics, best practices, and current examples that illustrate how certain communities have been affected by various mental health conditions, policies that affect the ability to take care of or provide mental health services, and how communities, including legislature, can improve the state of mental health services provided. The purpose was to spark a candid conversation around the many issues faced in the Omaha community and how communities can learn about the state of mental/behavioral healthcare and to discuss what needs to be done from an infrastructural, policy, and community aspect to change health outcomes in terms of health disparity intervention and prevention.

The seminar objectives were to explain and differentiate the definition of the terms "Mental Health", "Behavioral Health", and the definition of "Mental Illness", to recognize the contributing factors that determine an individual's mental/behavioral health, to discuss strategies for developing, implementing, and evaluating policies regarding mental/behavioral health services capacity building, and to recognize the role of individuals and society in reducing the stigma around mental health. These goals increased collaboration between institutions and community organizations to benefit the community and explore solutions with community leaders. The seminar's objectives were carried out through presentations around the mental healthcare crisis in the Omaha Community, Legislative involvement and progression on mental health, a hands-on workshop on the biases with building relationships and communicating with patients with mental health issues, issues with Medicaid expansion to cover mental health services, the role of spirituality and mental health, mental healthcare in the Native community, and the role of violence plays in mental health. The conference also featured a panel discussion with various community organizations that are positively affecting mental health access and equity in Omaha, and the conference featured interactive workshops that divided up the participants to participate in either meditation, yoga, or a self-care workshop.

The keynote speaker was Kimberly Nelson, LAC, MPA, the Regional Administrator for Region VII (KS, IA, NE, MO) for Substance Abuse and Mental Health Service Administration (SAMHSA). Ms. Nelson presented on the overall state of mental health in the Midwest. The seminar was sponsored by Office of Health Sciences Multicultural and Community Affairs, Center for Promoting Health and Health Equity, and Creighton University Health Sciences Continuing Education.

Dr. Frank T. Peak Memorial Health Disparities Essay Award

The third annual Dr. Frank T. Peak Memorial Health Disparities Essay Award was presented by Dr. Sade Kosoko-Lasaki, Dr. John Stone, and the Peak family at the 12th Annual Addressing Health Disparities Seminar on April 27, 2019. Dr. Frank Peak was an Omaha, Nebraska, African-American native who worked diligently as an activist in the elimination of health disparities in the African-American community. Dr. Frank Peak was one of the founders of CPHE. The essay award recognizes his work in addressing health disparities at Creighton University and in Nebraska. The essay competition is open to all graduate students attending any Nebraska collegiate institution. In 2019, the students were required to choose and write on one of the following topics on health disparities:

- Analyze a core feature of current mental health inequities. Examples are mental health ideology, mental health norms, and public perceptions regarding mental health and age, dis/ability, race/ethnicity, gender, religion, socio-economic strata or occupational group.
- Argue for policy initiatives that a particular community could employ to significantly reduce mental health inequities/disparities. These policy initiatives can include building sustainable support for mental health services, enhancing communities' capacity, and/or building mental health organizations' capacity. Provide an ethical rationale/justification for the proposed policies.

Entries were reviewed by a CPHE Partnership committee to determine the winner of the award. First place was awarded to Dr. Sana Kiblinger with the essay, "Transgender in Omaha: Disparities in Mental Health Care." Dr. Kiblinger has recently completed her 4th year of medical school and earned her medical degree at the Creighton University School of Medicine.
Community Education: CPHHE

The Center for Promoting Health and Health Equality (CPHHE) entrenched its time and effort into benefiting the communities of Omaha and surrounding cities through health education and outreach activities that engage its community members and further educate them on various health topics. The goal is not to be an outsider of a community and attempt to help, but to be a part of the community so that individuals may learn in an effort to benefit the overall health of the communities within our capacity.

The Inspiring Change Program is a chronic-disease management program aimed to build awareness of causal factors and to intervene with chronic conditions such as diabetes, hypertension, heart disease, and other related conditions. The information provided is based off the needs and wants of the community. Some of the topics are action planning, nutrition, exercise, mental and emotional health, and its risk factors. In 2018-2019, there were a total of twenty-one (21) participants in the program with fifty-seven (57) contacts. The Omaha Housing Authority and Catholic Charities have been active sites, and we are looking forward to program expansion within the Omaha Housing Authority mixed housing towers, the faith-based organizations, Sudanese community, and Islamic communities for the 2019-2020 year. In May 2019, CPHHE hosted the first Inspiring Change Program Train-the-Trainer session where Community Health Advocates and CPHHE-REACH Ambassadors were invited to participate and receive training to be able to host their own Inspiring Change sessions at their church, housing sites and work sites. There were 4 participants for the first session. There will be 2 additional training sessions in the fall of 2019.

The Community Health Advocates Program: The CHA’s are lay-community members who were identified, recruited and trained to serve various communities in Omaha by providing basic health information to the community and will serve as navigators for the healthcare system. This effort was initially funded by Catholic Health Initiatives (CHI) Health and the Omaha Housing Authority. Currently, CPHHE provides support for the program. Continuous training was provided to nine (9) lay community individuals on health management related issues. In addition, the CPHHE Community Health Advocates participated in the Indigenous People Health Fair at OneWorld and the Nebraska Urban Indian Health Coalition Health Fair. Since 2014, CPHHE has trained 75 CHAs (19 CPHHE + 56 CPHHE-REACH Community Health Advocates). In the Spring 2019, CPHHE partnered with the Creighton University Office of Excellence to provide the CHA program as a certificate program recognized by Creighton University. The inaugural certified training cohort yielded 6 individuals who completed the 10-week certificate program.

The Drill Program is a physical activity program where middle school students participate in exercise routines and drills derived from collegiate football and basketball trainings. The program is currently offered at the Norris Middle School in Omaha, NE every Tuesday and Thursday afternoon during their afterschool programming. In 2018-2019 academic school year, The Drill averaged 12 participants in the fall semester per class and 11 participants per class in the spring semester. There were 26 classes offered per semester; CPHHE plans to expand the program to 1 additional school during the 2019-2020 academic school year.

The Lyrics, Life & Lessons Program is designed to stimulate critical thinking skills around the concepts of public health-related issues that affect communities, primarily minority communities, such as community or gang violence, mental health, and fatherlessness through the use of Hip-Hop music, the fastest growing music form in the United States and the world. The program uses song lyrics to promote various public health topics and attributes and helps the students engage in the discussion activities. This year, the program was presented at the North Omaha Community Care Council Youth Conference (65 students), at the Hip-Hop Literacies Conference at Ohio State University (30 participants), and the University of Nebraska Medical Center Health Professions Career Day (120 students).
The Summer Research Institute (SRI) initially began in 1992 as a summer research program for pre-doctoral and collegiate undergraduate students. The high school component was introduced in 2000. After a successful run, in 2002 the Creighton University Health Sciences – Multicultural and Community Affairs Department (HS-MACA) received a three-year funding award from the National Institute of Health to, “…increase the representation and participation of minority U.S. students (high school and college) in biomedical research through their choice of a career in the biomedical sciences.” In 2010, the summer program started its on-going collaboration with the newly-formed Center for Promoting Health and Health Equity (CPHHE). Since 2010, the Summer Research Institute introduced biomedical research for undergraduates, community-based participatory research with community partners and organizations for high school students, and biomedical research through a partnership between the American Chemical Society to provide Project SEED (Summer Experience for the Economically Disadvantaged) to high school students.

There were twelve (12) participants in SRI in 2018: seven (7) undergraduates and three (3) high school community research students and two (2) Project SEED students. Summer Research Institute:

Undergraduate Summer Biomedical Research Program
A collaborative effort between the Health Sciences Multicultural and Community Affairs (HS-MACA) and the Center for Promoting Health and Health Equity (CPHHE). The purpose of the Summer Biomedical Research in Health Disparities is to increase interest in biomedical and health sciences professions among under-represented minority groups. The specific objectives of the program are to:

- Enable students to better understand the nature and applicability of scientific methods in research,
- Instill confidence in students pursuing careers in biomedical research and other health professions
- Provide minority students exposure to opportunities inherent in research careers.

Undergraduate students are paired with a Creighton University science research faculty member who mentors the student in an ongoing research project or designs a project especially for the student. The students attend a one-hour weekly seminar series every Friday where Creighton University scientists and community health-based organizations will present their experiences, ethics of research, the importance and impact of research, health disparities, etc. The Seminar Series will stress the specific experimental approaches that are used to address fundamental problems in health and disease.

The program is an immersion into the life of a research scientist, including a closely mentored 8-week research project, regular lab meetings, seminar series, professional development, and research colloquium. Opportunities in research career training are provided for undergraduates from individuals underrepresented in science, technology, engineering and math (STEM) fields.

Requirements for participants: GNP: 3.0 or above; students must be enrolled in a university/college at time of application; complete an application and essay; send a copy of academic transcripts; and provide references. Student stipends are covered by the program.

Summer Research Institute: High School Community Research Program
Students perform research at a community-based organization for six weeks. High school students from the greater-Omaha area were selected to participate in training in research projects in local Community-Based Organizations (CBOs). The students receive training in chronic disease health disparities subjects before they are assigned research projects in the community. Students worked individually or in collaborative groups to develop surveys, examine data, conduct community mapping, and conduct interviews resulting in policy change and recommendations. The program is designed to:

- Provide enrichment to underserved minority high-school students
- Provide hands-on, community-based research
- Help CBOs participate in research

Summer Research Institute (SRI) Participants
At the end of the program, the students presented their research experiences at a colloquium in the form of a poster and oral presentations in August. The students prepare a short essay, scientific poster, and PowerPoint presentation presenting the introductory background, experimental design, results, and discussion of the research they performed during the summer.

Requirements for Participants: GPA: 3.0 or above; current high school sophomore, junior, or senior; must have their own transportation to and from the community site. Student stipend is covered by the program.

Summer Research Institute: American Chemical Society – Project SEED

In the 2018 programming year, CPHHE continued its partnership with the American Chemical Society (ACS) and hosted Project SEED (Summer Experience for the Economically Disadvantaged). This allowed two high school students to take part in chemistry-based lab research projects at Creighton University.

Requirements for Participants: Current high school sophomores and juniors must have at least a year of science education (preferably chemistry) and must meet certain financial criteria established by the American Chemical Society. This opportunity exposes high school student to laboratory conditions and while garnering professional development and career exploration prior to entering college. Student stipends are funded by the American Chemical Society.

Summer Research Institute 2018 program

<table>
<thead>
<tr>
<th>Type of Student</th>
<th>Number of Applicants</th>
<th>Number of Applicants Interviewed</th>
<th>Number of Accepted Participants</th>
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</thead>
<tbody>
<tr>
<td>High School Community Research</td>
<td>16</td>
<td>8</td>
<td>3</td>
</tr>
<tr>
<td>High School SED</td>
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<td>3</td>
<td>2</td>
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<tr>
<td>Undergraduate SRI</td>
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<td>18</td>
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Former SRI students in STEM Educational Programs and Career Fields

<table>
<thead>
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<th>Year</th>
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<tr>
<td>2015</td>
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</tr>
<tr>
<td>2016</td>
<td>7</td>
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<td>2017</td>
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<td>2018</td>
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<table>
<thead>
<tr>
<th>Name</th>
<th>Professor/ Site Mentor</th>
<th>Project Title</th>
</tr>
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<tbody>
<tr>
<td>Jude Kwesi</td>
<td>Dr. Yaping Tu</td>
<td>Androgen Receptor Resistance to TRAIL, Inducing Apoptosis in Triple Negative Breast Cancer</td>
</tr>
<tr>
<td>Marco Pena</td>
<td>Devendra Agrawal</td>
<td>Differential expression of Cathepsin L in coronary arteries of atherosclerotic swine</td>
</tr>
<tr>
<td>Zachary Klimaszewski</td>
<td>Dr. Eric Haas</td>
<td>The Normal Lipid Composition of Whole Squash Bugs Anasa tris</td>
</tr>
<tr>
<td>Elsa Ramirez</td>
<td>Ms. Blanca Mejia</td>
<td>The Social Reality of Troubled Young Adults in Juvenile Involvement</td>
</tr>
<tr>
<td>Godwin Opouso</td>
<td>Dr. Donna Polk</td>
<td>Health disparities based on Attitudes and Beliefs in Native American Culture</td>
</tr>
<tr>
<td>Audrey Keim</td>
<td>Dr. Shashank Daudel</td>
<td>Memory and behavioral analysis of glutamate delta 1 conditional knockout mice in the hippocampus and cortex</td>
</tr>
<tr>
<td>Jessica Grimmond</td>
<td>Dr. Yaping Tu</td>
<td>Upregulated miR-424 mediates TGF-β induced fibroblast differentiation in pulmonary fibrosis</td>
</tr>
<tr>
<td>Anthony Baker</td>
<td>Catherine Opere</td>
<td>Effect of L-Cystine on Cataractogenesis in Cultured Bovine Lenses</td>
</tr>
</tbody>
</table>
The Health Disparities Research Training Program (HDRTP) is a collaborative effort between the Creighton University Center for Promoting Health and Health Equality (CPHHE), the Minority Health Research Center at the University of Alabama-Birmingham, Tuskegee University, Rust College, and Morehouse School of Medicine. This two-year program for faculty includes mentoring career development, grants writing, and research training. Currently in its sixth year, ten (10) of Creighton’s faculty have successfully completed the HDRTP.

The objectives of the Health Disparities Research Training Program are to:

- Develop independent researchers in the area of health disparities research
- Provide instruction in scientific research methodology and design
- Provide training in health disparities and innovative approaches to reduce them.
- Teach scientific writing and grant-preparation skills to produce a grant submission to an external agency.

Through attendance and participation in designed, faculty-development discussions and workshops, research faculty enhances their knowledge and scientific technical skills, as well as gain expertise in health disparities research. Scholars are paired with mentors to work on selected projects that are submitted for funding during the second year of training. Examples of topics include Health Disparities Research (HDR), Research Design and Methods, HDR Program Evaluation, Biostatistics, Community-Based Research, Translational Research, Study Participant Recruitment and Retention, Models of Behavioral Change, Health Economics, Bioethics, and Manuscript and Grant Preparation.

The 2018/2019 faculty fellows:

1st Year Fellow:
Dr. Kate Nolt, PhD, MPH
Department: Interdisciplinary Studies – School of Public Health
Mentor: Dr. John Stone and Dr. Kosoko-Lasaki
Research Title: Assessment of the Prevalence of Internet Gaming Disorder (IGD) in Youth Ages 15 - 18 Living in Underserved Communities

2nd Year Fellow:
Dr. LeShaune Johnson M.S., ABD.
Department: Center for Health Policy and Ethics – School of Public Health
Mentor: Dr. Joan Lappe
Research Title: ‘Real Talk’: Black Breast Cancer Survivors Speaking from the Margins

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Creighton Prep students tour Creighton and dissect cow eyes with Bryan Benson (HS-MACA Pipeline Program Assistant).

HS-MACA in the Community

Congratulations to Ms. Sade Kosoko-Lasaki, Associate Vice Provost of Health Sciences and professor in Creighton University School of Medicine for receiving the 2018 Interdenominational Ministerial Alliance of the Metro Omaha Area (IMA) Drum Major Award for Accountability in celebration of Martin Luther King, Jr.

HS-MACA staff visit the Great Plains Black History Museum in Omaha, Nebraska.

While Omaha Nebraska continues to recover from the cold and difficult winter, the Spring and Summer seasons have arrived and people can again enjoy the outdoors. The environmental improvements created by the Racial and Ethnic Approaches to Community Health (REACH) program continue to provide opportunity to participate in healthy living.

The cooperative agreement (2014-2018) between the Center for Promoting Health and Health Equity (CPHHE) and the Centers for Disease Control and Prevention was created to eliminate health disparities among the African-American community with a primary focus on a single risk factor (physical inactivity) and how it relates to the increased incidence of cardiovascular disease. This agreement came to an end last year on October 1, 2018. Lack of physical activity along with obesity, high blood pressure and diabetes, all continue to play a major role in heart disease among the African-American population. This annual report describes the initiatives implemented during the past year designed to reduce the health disparity gap within the African-American community in Omaha, NE. Sustainability efforts continue to reduce the prevalence of cardiovascular disease in the AA community.

Community Partnerships
A total of twelve (12) faith-based organizations continue to participate in the REACH initiative. Among those twelve (12) faith-based organizations, two (2) new faith-based organizations joined the group during the final year of the program: New Beginning Community Baptist Church and St. Mark Baptist Church. The partner churches are listed here: Antioch Baptist Church, Bethesda Seventh Day Adventist Church, Clair Memorial United Methodist Church, Morning Star Baptist Church, Pleasant Green Baptist Church, Salem Baptist Church, Redeemed Christian Church of God, Zion Baptist Church and Mt. Moriah Missionary Baptist Church. Each continues to create and implement organizational policies, systems changes, and environmental (PSE) improvements that promote increased physical activity opportunities within the Omaha African-American community.

In addition, there are eleven (11) Omaha Housing Authority Towers that continue to participate in the REACH collaborative agreement where residents and staff have rallied together to increase physical activity in and around their homes - Evans Tower, Crown Tower, Jackson Tower, Park North Tower, Park South Tower, Benson Tower, Florence Tower, Underwood Tower, Pine Tower, KayJay Tower, and Highland Tower.

Two (2) non-profit organizations, Charles Drew Health Center and the Urban League of Nebraska – Omaha continue to remain REACH community partners. Charles Drew Health Center has enhanced its physical activity initiatives for employees, patients, and the community by offering Zumba classes twice a week, weight management programs and physical activity resources. The Urban League of Nebraska – Omaha has increased the usage of on-site indoor and outdoor walking trails by its leadership, employees and student population.

Health Ambassadors
Over the past 3+ years, facilitated by Creighton University's School of Medicine and the Douglas County Health Department, REACH implemented a Train-the-Trainer Physical Activity Leadership Certification Program that set out to train community members from partnering faith-based organizations, Omaha Housing Authority, Charles Drew Health Center and Urban League of Nebraska – Omaha to be Health Ambassadors promoting physical activity at their specific locations. Upon the completion of the leadership program, which includes extensive training on exercise and health education, health ambassadors were equipped with the necessary skills to implement policies, systems and environmental improvements at their respective locations. Each Health Ambassador has made the commitment to serve as liaisons within the community through the formation of partnerships, building individual and community awareness surrounding physical activity, providing social support to encourage physical activity at their respective site locations, implementing policy, system and 2019 Faith Based Fitness Challenge
environmental improvements and training others to become trainers while creating a coalition which can sustain the REACH Train-the-Trainer Physical Activity Leadership Certification Program for years to come. Currently, REACH has fifty-six (56) trained and certified Health Ambassadors encouraging physical activity in the Omaha’s African-American community.

Bicycle Trails
Since the inception of the cooperative agreement, eighty-six (86) bicycle racks were installed at community partner site locations to promote a healthy lifestyle while providing a safe place for a bicycle. These bike racks remain in place throughout the community for use by the public.

Walking Trails
Walking trails systems created at each community partner site are still present for use by organization members and the public. These trails represent infrastructure and outdoor walking paths which display the unused distances that can be completed at the site. Additionally, destination signs which represent numerous landmarks throughout the North Omaha area have been identified with signs that show the distance from point A to point B. These 86 destination signs also include QR codes which can be scanned via mobile device. Some of these destination signs include community basketball courts, parks, schools, recreation centers, grocery stores, restaurants, pharmacies, and other places of interest within the North Omaha community.

REACH Physical Activity Opportunity Maps (paper version) are still available to the community at CPCHE REACH office which identifies the REACH community partner sites, outdoor walking trails, neighborhood parks, bicycle share locations, bicycle racks, key destination points and additional physical activity opportunities.

The 33 outdoor walking trail signs, 30 indoor walking trail signs, 82 key destination signs and 86 bicycle racks continue to be available for public and private use.

Community Physical Activity Events
REACH, CPCHE (Center for Promoting Health and Equity) and Health Sciences - Multicultural and Community Affairs (HS-MACA) staff participated in several events including the Faith Based Fitness Challenge and the 12th Addressing Health Disparities Seminar.

Faith Based Fitness Challenge, consisting of the REACH partnering faith-based organizations agreed to participate in a one-day Faith Based Fitness Challenge held on Friday, April 26th, 2019 which included a golf drive, chip and putt competition; a one-mile walk/run; a basketball shooting contest; and a bowling competition.

The challenge began bright and early at Benson Championship Golf Course where participating pastors set out their best drive, chip and putt. The remaining portions of the challenge took place at Salem Baptist Church (one-mile walk/run), the North Star Foundation (basketball shooting contest) and West Lanes (bowling competition). Participating pastors were required to participate in 3 out of the 4 challenge events where scores were tallied for each individual event and later summed for an overall score. Several REACH community partners, congregation members and staff were present as cheering spectators.

The 3rd Annual Let’s Move, Let’s REACH Physical Activity Day
On Saturday, September 15, 2018, REACH held its annual Physical Activity Day (PAD) celebration called Let’s Move, Let’s REACH. This event consisted of a variety of opportunities from 0-46,000 by 2018. This was achieved with over 2000 participants from 2015-2018.

In 2015, Creighton University’s CPHHE, HS-MACA, and REACH staff conceptualized, designed, a multi-faceted Physical Activity Day (PAD) in accordance with the Centers for Disease Control and Prevention’s (CDC) Community Action Plan (CAP) of: increase the number of people with improved access to physical activity opportunities from 0-46,000 by 2018. This was achieved with over 2000 participants from 2015-2018.

On September 15, 2018, REACH held its annual Physical Activity Day (PAD) celebration called Let’s Move, Let’s REACH. This event consisted of a variety of events for children, young adults, and seniors that promote physical activity, and a healthy lifestyle. Activities include a one-mile walk/run, basketball, Zumba, dancing, bounce house, dunk tank, and much more. Approximately 1,000 people attended the PAD half day event.

Messaging (Marketing)
In 2018, REACH staff allotted a significant portion of time into the refinement and development of “new and improved” marketing outreach materials. A factsheet is still available and distributed to the community which describes REACH’s purpose, activities and achievements. To somewhat complement the factsheet, a general REACH business card sized (laminated) fact sheet was developed that contained that show the description of value in participation in physical activity continues to be a huge hit throughout the community including our REACH partners for use in their organizations. Periodic posts and updates appear on facebook, Instagram and Twitter pages.

Sustainability and Looking Toward the Future
Sustainability refers to the continued operation of a program’s initiatives, principals, and efforts to achieve desired outcomes. REACH community partner organizations along with executive leadership and REACH staff are currently participating in several discussions to identify short-term and long-term sustainability strategies that will help maintain the space at the HS-MACA Department. Efforts have focused on identifying sources of funding to sustain the program. Applications and funding proposals have been submitted to several local organizations and philanthropic communities. The Executive Director continues to attend various community partners to share ongoing messages about the value of physical activity participation. Two foundations have been contacted and two grant proposals have been written seeking support for REACH continuation.
Creighton University Preventing Glaucoma Blindness: Mission to the Dominican Republic

Introduction
Glaucoma is a group of eye diseases colloquially known as the "sneak thief of sight." Asymptomatic elevated intraocular pressure progressively damages the optic nerve in millions around the world. Classically, the disease affects peripheral vision first and progresses toward central blindness. April 2019 marked Health Sciences – Multicultural and Community Affairs’ (HS-MACA) 14th annual preventative ophthalmology trip to the Dominican Republic (DR). The annual mission is under the leadership of Dr. Sade Kosoko-Lasaki, glaucoma specialist, professor of surgery and preventive medicine at Creighton University in Omaha, Nebraska. The goal of the mission is to combat blindness from glaucoma and Vitamin A deficiency, which has been identified as a highly prevalent cause of childhood blindness in the DR by the World Health Organization. For over a decade, Dr. Kosoko-Lasaki and support staff have provided over four-thousand-two-hundred eye examinations in the Dominican Republic. This includes over one-hundred-and-thirty-five (135) surgeries at Creighton’s Institute for Latin American Concern (ILAC) in Santiago, Dominican Republic, and Dr. Sebastian Guzman’s clinic in downtown Santiago. Special thanks to Dr. Guzman and his team for their remarkable support of the mission and generous post-operative care for many of the patients.

The trip’s purpose is glaucoma management, basic ocular health education, examination of children for signs of vitamin A deficiency in the eyes and the distribution of mega-dose Vitamin A capsules. Glaucoma is the leading cause of blindness in Black and Hispanic populations, putting the Dominican population squarely at risk. In addition to glaucoma, the World Health Organization deems the Dominican Republic at risk for vitamin A deficiency. In recent years, we have added instructions on basic hand-washing, proper eye drop administration, introduction to cataract, introduction to pterygium, care of the post-surgery patient and Zika virus prevention measures to the education seminar.

In addition to ocular health examination lectures to the Cooperadores, all the 37 lecture attendees received the annual complete ocular eye exam. Basic spherical glasses were provided to many patients. Single vision glasses for distance and reading are dispensed based on the retinoscopy and spherical subjective refraction. These glasses are donated from various organizations and individuals who are recycling their old glasses. Treating individuals in a developing country who have refractive error and complicated ocular disease is a difficult task, but it is beneficial when done as a complete exam. Identifying and providing those who need glasses has added a much-needed benefit to our outreach process.

After a thirteen hour trip to Santiago on Friday April 5th, 2019, the mission began on Saturday, April 6th, 2019 with an educational seminar on ocular health for a group of thirty-seven (37) cooperadores (the primary healthcare workers of the villages). Dr. Kosoko-Lasaki, Dr. Eduardo Martinez and Optometry student Brett Briggs provided instruction on glaucoma, cataract, pterygium, handwashing and alleviating Vitamin A deficiency. Glaucoma, cataract and other eye diseases are best diagnosed with a routine eye exam. Pterygium is best prevented with UV protection and can often be managed without surgery. The cooperadores took this education and literature to share with their community. The biggest benefit is disease prevention and baseline knowledge to know when to refer.

The next five days involved eye exams, selective laser trabeculoplasty, and Vitamin-A deficiency screening and distribution of the capsules to many children (ages 6 months to 10 years of age) in the rural areas of the DR as needed. The team provided eye exams to individuals at ILAC. New and existing glaucoma patients were provided glaucoma medications or referred for surgery. If other ocular complications were found, such as cataracts or pterygium, patients were referred to Dr. Guzman for treatment and follow-up. On Wednesday, the team visited a school house near Rodéo, DR for Vitamin A megadose (50,000-200,000 IU). Vitamin A
deficiency causes night blindness, severe dry eye, conjunctival metaplasia, and in severe cases, blindness from cornea involved xerophthalmia. Vitamin A is a fat-soluble vitamin; therefore, the body is able to store it for long periods. An administered megadose can provide lasting benefits for two to three years. In addition to Vitamin A, patients were refractions and single vision glasses were distributed on an as-needed basis. Lastly, during the visit to the Rodeo, the team also administered an anti-helminthic medication, albendazole, to all the children and the adults. The administration of the albendazole was not related to the Vitamin A deficiency. The albendazole was given because of the convenience of multiple dosing of a community with medications that do not interact.

Results

Two-hundred-and-seventy (270) individuals were impacted during the six-day mission trip. A total of one-hundred-and-fifty (150) complete slit lamp ophthalmic exams were performed. These exams included registration, ocular history, risk assessment, visual acuity tests, slit-lamp biomicroscopy, posterior pole evaluation with a 780D and Goldmann tonometry. Retinoscopy, automated perimeter, dilatation, direct ophthalmoscopy and indirect ophthalmoscopy were done as needed. Patients that were on maximum medical therapy and had high IOP were referred for surgery. The children has a flash light exam for corneal signs of vitamin A deficiency. Some of the children had retinopathy to identify refractive errors prior to the dispensing of glasses.

Travel time to the Haitian border campo of Rodeo took about three hours one-way. Once there, ninety-six (96) children, ages 6 months to 10 years, were screened and received 50,000-200,000 IU of Vitamin A. Conjunctival Keratitis, ocular signs of vitamin A deficiency, was identified in twelve (12) children. All the 96 children were administered megadose Vitamin A for subclinical signs or clinical signs of xerophthalmia (Vitamin A deficiency). Vitamin A is a fat-soluble compound vital to the immune system, epithelial health and visual function. More information about Vitamin A deficiency can be found at www.sightandlife.org.

In the aforementioned ninety-six (96) children, twenty-four (24) adults were administered albendazole provided by ILAC, totaling one-hundred-twenty (120) individuals treated with anti-parasitic medication. In addition to the aforementioned ninety-six (96) children, twenty-four (24) adults were administered albendazole provided by ILAC totaling one-hundred-twenty (120) individuals treated with anti-parasitic medication.

Visual Acuity was established in each eye, with a 20-foot Snellen or illiterate-E eye chart. Once the patient’s vision was assessed with and without pinhole, either refractive lenses were used in a refractive lens tree model or retinoscopy was done to improve each eye. Spherical Lens powers ranged from -6.00D to +2.50D. All the administered glasses improved the vision in one or both eyes. Patients were given single vision eyeglasses for refractive error, including presbyopia. Special refractive lenses were used in a refractive lens tree model or retinoscopy was done to improve each eye. Spherical Lens powers ranged from -6.00D to +2.50D.

Conclusion

The children, adults, and health-care personnel in the Dominican Republic all greatly benefited from the collaborative efforts of the mission. New and existing glaucoma patients were served, and the local team members will continue follow-up to manage their disease. This project is effective, continues to be sustainable and works in conjunction with other healthcare teams which visit ILAC. The cooperators learned valuable health information that will reduce the incidence of eye infections and incidence of blindness. Using this methodology, ILAC can reach the poor and marginalized residents in the remote, underserved areas of the Dominican Republic better than any other organization.
Grants, Presentations and Publications

Academic Institutional or Community Grants, Funded

Principal Investigator

1. Nebraska Tobacco Settlement: Center for Promoting Health and Health Equality (CPHHE) 2018 – 2019, $175,395

Federal Grants, Funded

Principal Investigator

1. National Center of Minority Health Development (NCMHD)/NIH Endowment Program for Increasing Research and Training in Health Profession Schools; 2005-Perpetuity ($1,894,125).
2. Creighton University Pipeline to Success – Health Careers Opportunity Program (HCOP); $3,072,030 over 5 year

Co-Investigator


Grants, Submitted Not Funded

Principal Investigator

1. National Institute of Health (NIH) - My Heart Risk App Redesign; $335,270 over 3 years
2. Health Resources and Services Administration - Childhood Obesity Prevention and Education (CDEP) Mobile Application; $10,00 for 1 year
3. Omaha Community Foundation - CPHHE-REACH Physical Activity Day; $28,867 over 1 year
4. Blue Cross Blue Shield - CPHHE-REACH Physical Activity Day; $48,880 over 1 year

Presentations

3. Kosoko-Lasaki O. “Cultural Awareness in Community Based Participatory Research (CBPR): Center for Promoting Health and Health Equity as a Case Study”, presented in a train-the-trainer workshop for a PCORI grant award, School of Pharmacy and Health Professionals, Creighton University, Omaha, NE. January 23, 2019

Publications


National Board Membership

1. Education Commission for Foreign Medical Graduates, 2009 – 2018
Purpose: Cataracts, which refers to clouding of the lens, is the leading cause of blindness worldwide. It is well established that age is the main risk factor for cataract formation. Viewed in a broader context, the damage caused by protein deposits and oxidative injury that will elicit an inflammatory response to begin the recovery process. Therefore, it is proposed that the activation of immune cells plays a significant role in the management of cataracts.

Immune Cell Activation and Implications for Incisional Hernia

The role of activated immune cells in the pathogenesis of incisional hernia was confirmed. Sustained neutrophil accumulation is destructive towards tissue by creating oxidative stress, while sustained macrophage accumulation continues to encourage inflammation by releasing inflammatory cytokines. In addition, higher expression of M1 macrophages has been shown to slow down cataractogenesis in cultured goat lenses3. Therefore, we hypothesize that L-cysteine (LC) can prevent cataractogenesis in cultured bovine lenses.

Methods: Freshly isolated bovine lenses were cultured in a DMEM buffer solution containing as follows: Group I: Control (DMEM); Group II: H2O2 (10mM or 50 mM); Group III-XII: LC (10-6M to 10-3M; ascorbic acid (AA; 3mM & 10 mM) in presence and absence of H2O2 (10 mM or 50 mM). Lens transmittance was determined using a plate reader (Synergy H1 hybrid reader; Bio Tek Instruments, Inc) and by visual inspection every 3 hours for 6 hours, and then every 24 hours for 72 hours. Pictures of these plates were taken after a black background was used to allow for easier quantification.

Results: DMEM-cultured lenses exhibited a time dependent decrease in transmittance (420nm) and a corresponding loss of lens optical clarity up to 72 hours. Pictures of these plates were taken after a black background was used to allow for easier quantification.

Conclusions: Our data suggest that LC preserved lenses from time-dependent degradation and partially protected lenses from peroxide-induced degradation, suggesting that this amino acid could play a significant role in the management of cataracts.
The Effect of the Pathogen Serratia marcescens on The Lipid Composition in Squash bugs Anasa tristis

Jessica Grimmond

Missouri State University (Missouri, MO)

Mentor: Yaping Tu, PhD.

Department of Chemistry

The purpose of this study is to elucidate the role of lipids in the immune response of the squash bug, Anasa tristis. We are investigating the changes in lipid composition from the squash bugs when injected with nutrient broth (control), versus those injected with the microorganism, Serratia marcescens (experimental). We are ultimately looking for the compound arachidonic acid which has an immune function. When under attack, the squash bug releases Arachidonic acid from their cell membranes which has an immune function. When under attack, the squash bug releases Arachidonic acid from their cell membranes, and increased Collagen deposition. This pathway is regulated by microRNAs.

Novel object recognition (NOR) involved 3 trials recorded for 10 minutes each. The first trial was learning to approach the 1st object and then to the 2nd object. In the second trial, the 2nd object was removed and the 1st object was replaced with a different novel object. 5 CSUS conditioning took place over 7 days. Day 1 conditioned the mice with a conditioned stimulus (CS) and then a different novel object. CSUS conditioning took place over 7 days. Day 1 conditioned the mice with a conditioned stimulus (CS) and then a different novel object. In the first CSUS trial, 2 CS were presented, 5 CSUS, the mice were then reconditioned with one CS remaining. The 2nd trial was running 30 minutes after the first trial and then replaced one of the objects from trial 1 with a different novel object. 5 CSUS conditioning took place over 7 days. Day 1 conditioned the mice with a conditioned stimulus (CS) and then a different novel object. CSUS conditioning took place over 7 days. Day 1 conditioned the mice with a conditioned stimulus (CS) and then a different novel object.
Health Disparities based on Attitudes and Beliefs in Native American Culture

Godwin Djosiju
Coyotl! Preparatory High (Omaha, Nebraska)
Mentor: Dr. Donna Pulk
Nebraska Urban Indian Health Coalition

Intro - Native Americans are mainly viewed with statistics when it comes to research with no real voice. If we look at data in 2016, Native Americans made up 3.5% of the poverty rate in Nebraska ("naltalkpoverty.org"). People in poverty face health disparities simply because they can’t afford care and can’t get access to care. We looked into the areas of disparity exploration, relationships, stigma/health stigma, sexual health, domestic violence, and gang violence to find out what specifically needed care in this community. My hypothesis was that one of the causes of poverty and health disparities is the thoughts attitudes and beliefs they grow up with. We also need to expand this research further beyond and get more on the topics that we discussed. We had to focus on the following topics:

1. Career exploration
2. Relationships
3. Drug/alcohol abuse
4. Sexual health
5. Domestic violence
6. Gang violence

Results - After all we focused our research we transcribed it into text and used the significant things that the kids said to put a voice on this research. For the demographic questionnaire we sorted all the data into a chart which shows how many people answered yes, no, and n/a (for the no answers). Future directives - For the future, we need more Native American representation in the health and science departments to lead these types of research studies. We also need to expand this research further beyond and get more data to solidify the numbers concerning Native American health data.

The Normal Lipid Composition of Whole Squash Bugs Arasa tritici

Zachary Klimowicz
Eiland High North (Omaha, NE)
Mentor: Eric Haas, Ph.D
Department of Chemistry

The immune system of Ara sativus (Squash Bug) relies on the synthesis of arachidonic acid to several eicosanoids when met with the enzyme cyclooxygenase. The most prevalent of the eicosanoids in immune response in squashes and prostaglandins, which is also by the same process responsible in the act of inflammation in the human immune system. This study relied on testing the composition of lipids (including arachidonic acid) when the foreign pathogenic bacillus Serratia Marcescens was introduced in the squash bug, as well as the response when cyclooxygenase was inhibited by deuterobenzene to block prostaglandin synthesis.

Androgen Receptor Resistance to TRAIL Inducing Apoptosis in Triple Negative Breast Cancer

Jade Kouassi
Coyotl! Preparatory High (Omaha, NE)
Mentor: Yaping Tu, Ph.D
School of Pharmacology

Background: Breast cancer cells are usually classified into four different types, HER+, ER+, PR+, and TNBC (triple negative breast cancer). In the majority of cases, the TNBC cells are not being treated with chemotherapy as opposed to more targeted therapies. So we asked ourselves, if we can knock out the AR, can we then make the cells susceptible to TRAIL? To answer this question, we compared TRAIL susceptibility in MDA-MB-436 cell lines with androgen receptors (AR) manage to resist TRAIL.3 So we asked ourselves, if we can knock out the AR, can we then make the cells susceptible to TRAIL? To answer this question, we compared TRAIL susceptibility in MDA-MB-436 cells without AR and with AR. Method: For this study we used MDA-MB-436 cells and seeded them into 6-well plates. In 3 of the plates there were cells that had AR. In the other 3 we seeded cells without AR. We then added trastuzumab and incubated them for 6 hours. After six hours, we harvested the cells and performed western blot analysis to see and compare the ratio of PARP to cleaved PARP, and indicator of apoptosis. Results: Compared to control cells, MDA-MB-436/AR cells decrease TRAIL-induced PARP. Conclusion: The overexpression of AR increases resistance to TRAIL-induced apoptosis by decreasing PARP cleavage. Therefore, we believe that a inhibition of AR will increase the potency of TRAIL against Triple Negative Breast Cancer.

Appendix B - Health Disparities Conference Summary 2019

Preface

The United States' Center for Disease Control and Prevention (CDC) informs us that "mental health includes our emotional, psychological, and social well-being. It affects how we think, feel, and act. It also helps determine how we handle stress, relate to others, and make healthy choices. Mental health is important at every stage of life, from childhood and adolescence through adulthood." Mental health is influenced by external situations and internal, individual factors. “Mental illness” involves "conditions that affect a person’s thinking, feeling, mood, or behaviors such as depression, bipolar disorder, or schizophrenia. Such conditions may be occasional or long-lasting (chronic) and can affect a person’s ability to relate to others and function in daily life." (Cite source) It is imperative to reduce disparities care for mental illness and to promote mental health equity.

In the United States, the CDC reports that:

• Over 50% will of the population will be diagnosed with a mental illness or disorder during their lifetime.
• 1 in 5 Americans will experience a mental illness in a given year.
• 1 in 5 children have or have had a seriously debilitating mental illness.
• 1 in 25 Americans lives with a serious mental illness, such as schizophrenia, bipolar disorder, or major depression.

To decrease the incidence and prevalence of mental illness, we must enhance policies and systems at every level (local, state, national) and improve healthcare, promote community development, and enhance insurance coverage. Thus, promoting community mental health equity is complex. Systems should not only systematically review and revise their mental health strategies and structures, they should augment or develop community-centered approaches.

[Center for Disease Control and Prevention, https://www.cdc.gov/mentalhealth/learn/index.htm]
Health disparities are the inequalities and differences that occur in the provision of healthcare and access to healthcare across different racial, ethnic and socioeconomic groups. Health disparities can happen nation wide and within any population. However, health disparities are a well-known problem among the minority, low income population. Factors that lead to health disparities include: poverty, poor access to healthcare, and level of education. In the United States, health disparities can be observed among ethnic minorities such as: African American, Latinos, Native Americans, and Asian Americans. Most of these people cannot afford the high costs of healthcare and complain how their health is affected by having no access to a good, affordable healthcare. Mental disorders do not affect just the individual’s behavior and thinking but is associated with the family, community groups can also reduce these disparities. Providing free language assistance can be very helpful for many minority groups because they feel more comfortable explaining their mental health issue using their native language. Health providers should be well prepared and educated about different culture, beliefs, and religions. Cultural awareness can reduce the health disparities barriers. I think it is a good idea that health providers always follow up with patients and show patients how their health is very important and health providers would do anything to improve individuals’ life. As a physician or dentist, these seminars can increase your awareness about health disparities in our nation and states. By attending these types of seminars, individuals can increase their awareness about health disparities in our nation and states.

In conclusion, the seminar taught me about factors that causing health disparities and how we can reduce health disparities barriers in our community. As a future dentist, this kind of seminar can help me to improve that factors needed to improve my relation with patients.

Alex Saul
Health Disparities Seminar Response

1. Who is experiencing disparities and what kinds of mental/behavioral health disparities are there in Omaha? The nation?

Health disparities are defined as differences in health outcomes in a particular group, typically linked with social, economic, or environmental disadvantages. One group discussed during the seminar is suffering from health disparities. Survey and studies have found that between 15% to 20% of a group of transgender females had attempted suicide at least once in their lifetime, while 41% of transgender and gender-non-conforming individuals surveyed nationwide had attempted suicide at least once. The next group discussed was the Native American population, who did not seem to be discussed as much as other groups throughout the program. The third group that was discussed during the seminar as having mental health disparities was the transgender population. Surveys found that between 15% to 20% of transgender females had attempted suicide at least once in their lifetime. The reason why this is so is because of their lack of family and cultural support from their own communities, and their experiences of discrimination and marginalization. Mental/behavioral health disparities affect everyone of all ages and stages of life, especially individuals who are unable to access resources to confront these health problems. Within the Nebraska state, in 1 in 5 Nebraskans will report having or experiencing a mental illness in the year. The numbers reported are similar to the Nebraska state where in 5 individuals within the United States experiences a behavioral illness. Other individuals that were mentioned within the seminar was that 30% of the population in the United States were at risk of mental/behavioral health issues that plague community. The 1 in 5 rate could be separated into different categories. First, there are the most severe mental illnesses such as schizophrenia, bipolar disorder, posttraumatic stress disorder. Second are the anxiety disorders that include obsessive compulsive disorder, phobias, or panic attacks. Several other mental illnesses are schizophrenia, eating disorders, personality disorders, autism, and substance use

Albert Cohen Sedgh
Appendix C - Student Reflections - Health Disparity Seminar

1. How can we reduce these disparities in our nation based on lessons learnt from the seminar?

The most important solution that was discussed during the seminar sounded much like cultural competence/humility. This solution was discussed extensively during the presentation about the transgender population. One aspect of cultural competence that could reduce health disparities is the lack of health provider’s ability to break down the barriers that hinder mutual understanding. Patient provider communication can be improved through exposing health care providers to diverse patients while they are training as medical students. Furthermore, the best way to break down these barriers is by exposing these populations to the health care providers early on in their training, and the best way to do that is by enrolling these populations as medical students. Whether it is the Asian American, African American, or the Native American population, there are many statistics in her presentation that helped me gain a better understanding of just how dire the situation really is. Other thoughts? Conclusions? Any other thoughts? Conclusions?
There are certain barriers discussed within the seminar against mental health disparities. These barriers include lack of resources, lack of awareness about mental health care, cultural stigmatization, health care system distrust, and inadequate support for individuals. For certain things to help reduce these disparities, measures can be successfully implemented to overcome the problems. Mental health disorders have compounded the issues that we face with the lack of mental health care. Affected by this mostly are people who are economically disadvantaged and the poor. It is very important to me to understand the who is experiencing health disparities and what those disparities are because when I start clinic in this regard. It starts with us, we have had the privilege to educate ourselves about medicine and our dedication to improve the lives other.

Conclusion.

Throughout the seminar the focus was to really dig into what we can do as students and professionals not only to address the existing disparities but how we can personally make a difference. One of the main things that struck me right away is that those who are facing challenges in accessing proper and adequate healthcare are usually unaware of the options that the community may be able to qualify for. They are not informed and it’s not due to their own ignorance. We have to do a better job of providing proper awareness within the nation to talk and reach out to legislatures like Senator Sue Crawford.

For those who did not attend some of the recommendations I would give to those who attended the seminar to help reduce these disparities is to increase awareness within the community and professional on how to treat individuals with mental illnesses. Mental health is important because the issues associated with mental health do not discriminate when it comes to who is affected as the issues affect men, women, children of all races and ethnicities in which these disparities that are found and not just localized in one particular location. Mental health care is required by many health insurance companies.

When we look at the field of healthcare and the technological and medicinal advancements we have achieved as a nation over the last century, it is mindboggling that the existing disparities seem to be growing at an alarming rate. For someone who did not attend the seminar; I would recommend that they first ask themselves this question: What do I as a student and/or professional want to see change? How can I contribute to bringing change in the world? What barriers are preventing these disparities? What can I do to help and how can I do it? We are finally starting to ask this question and the answers are found in our communities, if we give it an effort. In Just Omaha, the disparities are not present within the city limits. There are many gaps that need to be addressed. We need to focus on how we can help reduce these disparities that we are currently faced with. Secondly, I would recommend that we must recognize that there are many individuals, many from disadvantaged communities that are not aware of the resources for them to help the get help and we must work as future professionals to address these disparities in our communities.

The Annual health disparities seminar was very insightful, not only did it speak of issues that were local here in Omaha, but it was very diverse on the races and ethnicities in which these disparities are found and not just localized in one particular location. Mental health care is required by many health insurance companies. Health care is a right that is to be provided by family physicians and increasing awareness of mental health in nonmedical resources like the family and friends. Another method is to help educate and better inform the public about mental illness and health disparities.

The twelfth annual health disparity seminar highlighted that the issue of mental health is one that is important nationally as well as in the Omaha community. This issue is important because the issue of mental health has caused a great deal of issues within the community and society. Any other thoughts? Conclusion.

Daniel Palu

The twelfth annual health disparity seminar was very insightful, not only did it speak of issues that were local here in Omaha, but it was very diverse on the races and ethnicities in which these disparities are found and not just localized in one particular location. Mental health care is required by many health insurance companies. Health care is a right that is to be provided by family physicians and increasing awareness of mental health in nonmedical resources like the family and friends. Another method is to help educate and better inform the public about mental illness and health disparities.

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Overall in order to tackle disparities we must first see and acknowledge them. We then need people to be vocal about these disparities and bring attention to them, specifically the disparities in substance abuse, mental and behavioral care. Dr. Donna Polk touched on the lack of resources and access in the Native American community and Dr. Stone discussed mental health equity.

The panel which incorporates mental and behavioral care into the primary care model. Dr. Cervantes spoke on religion and spirituality and its role in mental and behavioral health and his understanding of inter-religious differences, which I would like to see more providers attempt to help make not only Latinos as he focused, but all other races as well. Especially people of color. It is our job to advocate because we have a large refugee population and gaining a patient trust is important for optimal patient care. This is one way to address the disparities locally and nationally but there are other ways such as Medicaid expansion to increase patient access to healthcare services, addition of integrative counseling strategies, increasing resources in underserved areas, improve physician screenings, awareness of non-professional sources, educate and train medical staff to be culturally competent aware, develop culture-specific mental health education tools and lastly “reduce the health disparities among residents identified as at risk for various health outcomes by 20% while perceived by residents to have had an improvement in health.”

Attending Seminars and functions such as common ground are very beneficial, and I believe that everyone should make time to attend conferences such as these. This is my advice to anyone who may not have the time to attend these conferences. Many times we try to criminalize those we don’t understand and minimalize their suffering. It is up to us as future healthcare professionals, community leaders, and as decent human beings to change the narrative on the meaning of mental health illnesses and take it more seriously. Your health is important, self-care is important, but your mental health is important too. I will continue to acknowledge that notion in my path as a future health care provider. The best way to address these problems is through confronting these biases in other people and within yourself. Cultural humility must be an intangible that all healthcare providers possess as they deal with people with mental illness. PATIENTS ARE MUCH MORE THAN JUST A PATIENT. They are mothers, fathers, sons, daughters, people who are apprehensive about their particular problems to get help because they will know themselves and know people will understand them. On a regional level, it will protect many of our citizens who suffer from mental health disorder, especially the homeless. One in five homeless individuals suffer or have suffered from mental health illness. It is important to understand that the homeless population is a high-risk population. The biggest step we can take is to provide for mental health treatment. This will allow for those individuals to be more employed and help them to stay off the streets. Lastly, spreading education awareness can help on a national level, as it will agitate and encourage legislative officials to start allocating more funding to mental health prevention and treatment services and medical coverage for mental health issues.

All in all, I enjoyed the seminar. I was humbled and privileged to come in 2nd in the Frank T. Peak Essay Competition and give glory to a man that has done remarkable work for the Omaha community in regards to mental health. I also left the conference feeling inspired. Coming from an inattentive family who suffers from mental health illnesses, I was able to empathize with the cause that the keynote speaker portrayed. Many times we try to criminalize those we don’t understand and minimalize their suffering. It is important to understand that the homeless population is a high-risk population. The biggest step we can take is to provide for mental health treatment. This will allow for those individuals to be more employed and help them to stay off the streets. Lastly, spreading education awareness can help on a national level, as it will agitate and encourage legislative officials to start allocating more funding to mental health prevention and treatment services and medical coverage for mental health issues.
One way we can work to reduce these disparities in our nation is to be a part of the solution. We can achieve this by the solution of removing the stigmas associated with mental illnesses. As up and coming minority health care professionals, we have an advantage connecting with patients that look like us. They may be more willing to share or receive information if we make the earnest attempt to connect with them farther than just providing services. Part of being a Creighton trained health care provider is the Jesuit value “cura personalis”. We are trained to care for the whole person and that means being an advocate for our patients beyond the operatory room.

Some recommendations I have for individuals that did not attend the seminar and for individuals that will be working closely with people from all walks of life include attending to patients with mental illness and making sure to provide culturally appropriate care. By being conscious of the patient’s background, we can reduce the disparities and make sure that we are providing for our future patients. If an individual feels that they are in a safe place, they will be more open to share their communications. If we want to make a difference in ending health disparities, we have to make sure that we are addressing the stigmas and then use our space to foster an environment of non-judgment. The only way we will overcome disparities is changing the stigma and we can only do that together.

Liliana Rivas
Health Disparities Reflection Paper

The Health Disparities Seminar addressed many of the importance of mental health and how it affected those who are undergoing such challenges. The groups discussed that were mainly affected were Native Americans, Latinos, African Americans, Caucasians, and previous drug users. Preventionists discussed the difficulty the respective groups undergo when it came to obtaining care for mental health issues. Issues arise because health-care policy providers do not see the importance and impact mental health problems can provide.

Mental health has and continues to be a taboo topic. The stigma placed upon anyone who has “mental health” issues becomes so negative that those affected with mental health illnesses would hold their issues to themselves. In order to reduce these disparities, I think that just talking about such issues to the community would help in decreasing the negative outlook of the topic. I believe the more we talk about something, our society certainly accepts the humanistic part of it. An example of a topic that has been accepted as a norm would be those who consider themselves transgender decades ago they would be considered sick or mentally disturbed. Although certain parts of the world still do not accept this concept, the United States has now become more accepting than they would have been decades ago.

Another way to be a part of making mental health disparities in our nation. In addition, reaching out to the community and engaging myself in events that involve those affected with such disparities is a great way to see both sides of the spectrum.

I truly enjoyed the seminar, as I was not aware of the mental/behavioral health disparities present in my area. It was refreshing to know that there are health care policy makers that are actually trying to make a difference and help those affected. I especially enjoyed the little activity regarding self-care held during our lunch hour. I have been lately using the advice the presenter shared in my daily routine and it’s helped tremendously.

Deborah Morales
Health Disparities Reflection Paper

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Nicole McNichols

This conference helped to point out that anyone who experiences a mental/behavioral health disorder is dealing with some sort of health disparity. Part of this is due to mental and behavioral health facilities being separate from other health systems in Omaha and the nation. In the community (and often in other medical settings) those with mental illness are often seen as a negative light. The stigma that is put on those who keep people from seeking treatment because they don’t want to be treated badly, when they are already feeling badly.

In many places the types of disparities exist in the mental and behavioral health fields are not limited to a certain race, region, or region of the United States. However, individuals who are in these facilities tend to be in urban areas, meaning that if a patient needs an appointment they must take out of work and travel to the areas of the facilities. In some areas of Nebraska, the facilities that exist are not within a reasonable travel distance for patients. This makes it harder for patients to seek treatment. In certain instances, this means that patients without insurance willing to pay for these services. Those in rural areas are also less likely to have insurance. Treatment and visits to the doctor can be expensive. This is an expense that many people will find extremely difficult to pay.

Another disparity that is faced by patients is the availability of culturally aware or culturally similar physicians. The field of mental and behavioral health is a slowly shrinking field. This means that people such as immigrants (like those in Omaha) are less likely to find people who they feel they can communicate with and understand their patients. This is why educating professionals and creating an environment in which more people want to go into this field is important. It helps to create a relationship where patients will continue to seek help. By continuing the help the patient will have a better outlook on life and a continued

Another way to reduce the mental and behavioral health disparities, discussed at the seminar, was through legislation. Some of the legislation that was talked about during this seminar.

The Health Disparities Seminar addressed many problems within this nation’s healthcare system that do not have adequate solutions as of today. For example, the inequitable accessibility of medical treatment for many individuals, mainly the poor, need to be constantly reassessed. However, there is a growing number of individuals that experience mental health disorders. This is a growing problem in our society because it helps to create a relationship where patients will continue to seek help. By continuing the help the patient will have a better outlook on life and a continued

In conclusion, the Health Disparities Seminar has brought to light the many differing factors of mental health disparities across the field. Both in Omaha and around the nation, there is an increase need for mental health professionals in order to reduce the burden imposed by mental health. However, this disparity is an issue that will require innovative and forward thinking as we progress into the future. The further integration of mental health into the current system is ideal but looking forward may not become a possibility for this. For this issue to be resolved I think that there should first be mental health professionals to fulfill these duties before re-innovating the system.

Combining the mental and behavioral healthcare systems and other medical healthcare systems may also be a way to eliminate these disparities. This will help to eliminate some of the stigma surrounding the mental/behavioral system, which many do not consider an illness but rather a moral failing. It would also ensure that doctors in every area of a patient’s treatment could receive medical records and provide the best care to that patient.

The last method to reduce the disparity was to bring the healthcare to the patients. By having times where the professionals visit those areas where there is no treatment, it eliminates the need for those who will have difficulty reaching the areas with treatment to receive this treatment. This could also mean that states open more rehabilitation centers in rural areas so that more of the state has access to these facilities, and possibly reduce the waiting time to get into a facility.

I would suggest that those who did not attend the seminar attend the seminar in the future, because it was very helpful in hearing the information. I would also suggest that a person who didn’t attend the seminar go to the United States Department of Health and Human Services website, as there are many helpful aids on some of the topics discussed during the seminar. I have learned some tools that I will take with me, to help me to provide better care to my future patients, even it it is not in the same area of medicine.

Nicole McNichols

In conclusion, the Health Disparities Seminar has brought to light the many differing factors of mental health disparities across the field. Both in Omaha and around the nation, there is an increase need for mental health professionals in order to reduce the burden imposed by mental health. However, this disparity is an issue that will require innovative and forward thinking as we progress into the future. The further integration of mental health into the current system is ideal but looking forward may not become a possibility for this. For this issue to be resolved I think that there should first be mental health professionals to fulfill these duties before re-innovating the system.

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Nebraska choose not to expand Medicaid thus in 2014, it was ranked the 32nd best state for mental health care access. Recently, the state chose to expand Medicaid where its mental health care access increased from 32nd to 7th in the nation for mental health care access.

Mental health as defined by Dr. Donna Stewart, PhD of the Boys Town Behavioral Health Clinic, is the successful performance of mental function to result in productive behaviors. As future professionals we need to be part of the solution. What can we do to reduce these disparities presented at this seminar? Like everything else, it begins with an open discussion; being able to discuss strategies for developing, implementing, and evaluating policies regarding mental/behavioral health services capacity building is key to closing the gaps and reducing stigma around mental health. This last weekend we had the pleasure to listen to presentations regarding the disparities facing our community. We were exposed to the problems facing our communities, and how the system can play a role to dispelling disparities.

Some of these barriers linked to mental health disparities around the world, but especially in the Omaha area include limited access or poor mental health insurance coverage, poverty, language barriers, lack of available resources, distrust in the healthcare system and stigmas surrounding mental health care. It is up to us as future health care professionals to be part of the solution. This is my first time at a behavioral/health seminar. I thought it was enriching for me because it is common for people to recognize physical health but not mental health. It is key to hear the advice of getting enough exercise and refrain from smoking, drinking, and drugs. I am glad it is becoming more common to discuss taking care of your well-being through meditation and mental health. It is common to hear the advice of getting enough exercise and refrain from smoking, drinking, and drugs. I am glad it is becoming more common to discuss taking care of your well-being through meditation and mental health. It is common for people to recognize physical health but not mental health. It is key to hear the advice of getting enough exercise and refrain from smoking, drinking, and drugs. I am glad it is becoming more common to discuss taking care of your well-being through meditation and mental health. It is common to hear the advice of getting enough exercise and refrain from smoking, drinking, and drugs. I am glad it is becoming more common to discuss taking care of your well-being through meditation and mental health.

Dr. Roberto Cervantes spoke about community health interventions that can help to reduce mental health disparities. He discussed that faith-based solutions is a great option in some cases. He also discussed that faith can play an important role in someone’s overall well-being. Another interesting approach was brought up by Dr. Roberto Cervantes. What else can we do to reduce mental health disparities? A key approach is to address the root causes of mental health disparities. Some of these root causes are social determinants of health such as poverty, education, and access to health care. It is up to us as future health care professionals to be part of the solution. This is my first time at a behavioral/health seminar. I thought it was enriching for me because it is common for people to recognize physical health but not mental health. It is key to hear the advice of getting enough exercise and refrain from smoking, drinking, and drugs. I am glad it is becoming more common to discuss taking care of your well-being through meditation and mental health. It is common to hear the advice of getting enough exercise and refrain from smoking, drinking, and drugs. I am glad it is becoming more common to discuss taking care of your well-being through meditation and mental health. It is common to hear the advice of getting enough exercise and refrain from smoking, drinking, and drugs. I am glad it is becoming more common to discuss taking care of your well-being through meditation and mental health.