Poster Reception 2014

Public Health Graduate Students

Springboard Grant Awards

Global Health Scholar Awards

UNIVERSITY OF MIAMI
MILLER SCHOOL of MEDICINE
The Global Health Scholar Award

This University of Miami funding opportunity is intended to encourage 1st year MD/MPH students to pursue international endeavors through global public health research, service, or capstone field experience during the summer before the 2nd year of medical school. Applicants must be enrolled in the MD/MPH program, have completed at least 9 credits of MPH coursework, and have academic performance in good standing in both MD and MPH programs. The funding level for a given project ranges from $1,000 to $3,000. Recipients of the Global Health Scholar Award will submit a final report upon completion of their travel and present a poster at the annual Department of Public Health Sciences poster reception.

The Springboard Grant

This University of Miami funding opportunity is intended to foster innovative thinking in public health research and practice, and serve as a springboard for projects that have the potential for further growth and dissemination. It helps fund the advancement of capstone projects for MPH and MD/MPH student in their efforts to address community or global public health issues. Applicants must be enrolled in the MPH, MSPH, or MD/MPH program and have completed at least 12 credits of coursework. Preference will be given to students who demonstrate that the project is taking them beyond the requirements of the program and towards a significant accomplishment in the field. The funding level for a given project ranges from $1,000 to $7,000. Recipients of the Springboard Grant Award will submit two progress reports during the course of the year and present a poster at the annual Department of Public Health Sciences poster reception.
SPRINGBOARD AND GLOBAL HEALTH SCHOLAR GRANT AWARDS

MPH and MD/MPH STUDENTS

Tuesday, February 4, 2014
5-7 pm

EVENT SCHEDULE

CRB 9th Floor, Rooms 989 and 995

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| 5:00 pm | Poster Session Exhibit and Reception  
Meet and Greet MPH and MD/MPH Students |
|       | Welcoming remarks                                                   |
| 5:15 pm | Julie Kornfeld, Ph.D., MPH  
Assistant Dean for Public Health |
| 5:20 pm | Pascal J. Goldschmidt, M.D., FACC  
Senior Vice President for Medical Affairs and Dean of the Miller School |
| 5:30 pm | José Szapocznik, Ph.D.  
Chair of the Department of Public Health Sciences |
<p>| 7:00 pm | Reception Concludes                                                 |</p>
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Sexual Health as a Legal Right: Ecuador’s Unique Model
Abstract:

Introduction: Among newly diagnosed breast cancer patients, Black women have the highest comorbidity and mortality rates (Silber, et al 2013; Tammemagi, et al 2005). Some studies show that Black women may also have poorer levels of patient-provider communication and fewer culturally-relevant educational resources, continuing a cycle of inequity that may contribute to poorer health outcomes. A review of the breast cancer intervention literature specifically targeted to Black women revealed a significant gap in resources for Black women newly diagnosed with cancer.

Purpose: Project CARE, the original study from which this project developed, was an NIH-funded R01 trial that compared a cognitive behavioral stress management to an educational intervention for Black women with breast cancer. The purpose of this follow-up project was to determine preferences and information needs of newly diagnosed low-income Black female breast cancer patients and to develop a video-based intervention.

Methods: Community-based participatory research helped develop a video-based breast cancer psycho-educational intervention. Focus groups with target audience members and interviews with community leaders provided qualitative data that informed the project and addressed the women’s needs.

Conclusion: Focus group feedback on the videos highlighted that the women liked content that was culturally relevant to Black women; content that was credible, easily understandable, and delivered by a breast cancer survivor; and content that could be shared with family members. The iterative video production process developed videos that were highly acceptable to the target audience. Future research should examine the wide-scale cultural relevance, acceptability and health effects of these videos.
Student Name: Rammy Assaf, MD/MPH Candidate Class of 2015

Project: The Overtown Health Project: A Vehicle for Local Dialogue on Health

Abstract:

Background and Objective: The viability of preventive health messages within a community is determined by message acceptability among local people. Collaboration with the community takes place across the four stages of a health promotion intervention: creation, framing, transmission, and adoption. The Overtown Health Theatre (OHT) explores the relationship between public health and cultural context by combining documentary and performance art for local dialogue on health.

Methods: Adults living in Overtown created their own filmed message on preventive health based on their experiences with chronic illness. A youth group then interpreted these stories through dance, poetry and live skits, training regularly over a period three months. These elements were framed to form an intergenerational message on preventing chronic disease during a performance in Overtown on June 15, 2013. A post-event focus group of audience members highlighted strategies for public health intervention in the community.

Results: Through a survey, audience members evaluated the acceptability, appropriateness and impact of preventive health messages embedded in the OHT performance. They identified future areas for collaborative action that encompass community health and coalition building in Overtown, including youth caregivers, housing, crime and education.

Conclusion: Health-focused theatre provides insight to understanding levels of influence that guide stakeholders as they design culturally appropriate and context-specific interventions. The OHT builds key relations in the community, between local residents concerned about health, socially minded artists, and medical/public health students.
Student Name: Courtney Avery, MPH Class of 2013

Project Title: Implementing a culturally competent mind-body awareness program: Inspired by a holistic approach to health amongst the Guna Indians

Abstract:

Background: Pressures of modern society have made an impact on the health and well-being of an indigenous population residing on the remote island Ticantiki, in the semi-autonomous Guna Yala Region of Panama. As a yoga teacher with experience teaching health education to this population, I created a culturally competent mind-body awareness program to address the stresses of living healthily as monetary dependence and a fast-paced lifestyle influence the island.

Methods: A pilot mind-body awareness program called Viva Guna was implemented amongst ten women between the ages of 19 and 50 on Ticantiki. The six-day program addressed different areas of holistic health followed by daily yoga classes for exercise.

Results: Using examples and anecdotal information the field experience I created a notebook, instructional guide, and tools to facilitate this program with people of any culture. This guides the facilitator through the six health modules, gives discussion topics, and suggests how to edit the notebook to have the most impact on your target population.

Conclusions: Teaching the principles of mind-body awareness and yoga for exercise in a holistic approach to health education has proved to be a success when taught in a culturally competent way that targets the specific audience.
Student Name: Shelly Birch, MD/MPH Candidate Class of 2016  
Project Title: Sexual & Reproductive Health in Quito, Ecuador

Abstract:  
Background: Sexual and reproductive health is a cornerstone of public health and declared a human right in Ecuador in 1998 through the Free Maternity Law. Copprende is a non-profit NGO that works to further the aims of this law to provide by improving the sexual and reproductive health of Ecuador. Their mission is to create a culture of prevention through educational campaigns, allowing Ecuadorians to lead a healthy sex life that is responsible and free from risk.

Field Experience: I completed an internship with Copprende in Quito, Ecuador June 6-July 7, 2013. I worked with the content development and research team as well as the education team to create new learning tools and give workshops. This allowed me the opportunity to improve my Spanish, work in hospitals associated with my internship, and administer a questionnaire to students in the workshops exploring sexual health knowledge and attitudes.

Outcomes & Results: In addition to gaining educational tool development and teaching skills, I was able to collect anecdotal evidence that there is a strong stigma associated with STIs in Quito and this may be having an effect on sexual health behaviors such as obtaining condoms.
Student Name: Stephanie Blankenship, MD/MPH Candidate Class of 2016
Project: CDC’s Surveillance and Control of HIV and STIs in Central America

Abstract:
Background and Objective: CDC-CAR’s Division of Global HIV/AIDS provides technical assistance for implementation of the Sentinel Surveillance and Control of HIV/STIs (VICITS) program by the Ministry of Health (MOH) in six Central American nations. VICITS is a surveillance strategy with a prevention component to improve monitoring, evaluation and statistical analysis of the comprehensive management of HIV/STIs in key populations: men who have sex with men (MSM), transgender women (TG), female sex workers (FSWs) and people living with HIV (PLHIV).

Methods: VICITS protocols were standardized as a surveillance strategy. Harmonized indicators for data analysis of HIV/STI incidence among key populations attending VICITS clinics were identified, including prevalence of HIV and syphilis in the last 12 months, drug use in the last 30 days among new patients, and new patients who self-report an STI diagnosis in the last year. Site visits provided the opportunity to conduct monitoring and evaluation through discussions of technical, diagnostic and statistical capabilities with VICITS clinic directors.

Results: Standardization of VICITS protocols promotes surveillance of VICITS sites. Integration of harmonized indicators in individual nations ensures comparability of data throughout Central America.

Conclusion: Technical assistance from CDC-CAR to MOH officials is essential to ensure VICITS’ sustainability and reduce HIV/STI incidence among Central America’s key populations.
Abstract:

**Background and Objective:** I explored public health in Managua, Nicaragua through learning about the work of Atención Primaria en Salud (APS), a non-profit community-based organization. Based on observations of meetings with community health workers, focus groups with community women, and discussions about management theory, I concluded that an area of potential improvement is the format of CHW training sessions and community education discussions. I devised three projects that MD/MPH students can conduct to standardize and increase the effectiveness of the methods of public health education employed by APS.

**Methods:** I attended focus groups with community women on the topic of prenatal care and maternal health, training sessions for CHW’s and participation in discussions about public health management based on the established APS curriculum.

**Results:** Through my time of observation, I better understand the perspective and experiences of members of the community and identified a need for both didactic and peer education between community members as well as a more formal evaluation of the effectiveness of these educational sessions.

**Conclusion:** Based on my observations, I created three project ideas for future MD/MPH students: 1) lesson plan development for CHW trainings; 2) lesson plan development for educational community chats; and 3) value stream mapping of the health care process for this community.
Student Name: Matthew Cagliostro, MD/MPH Candidate Class of 2016
Project: Comparing Healthcare Systems: Allopathic and Alternative Medicine in India

Abstract:
The Indian healthcare system integrates allopathic and alternative medical practices more than most others around the world. This is in large part due to India’s strong cultural and historical basis of alternative medicine. I chose to explore the Indian healthcare system to see this integration in practice, splitting my time between a private and a public institution. In Lucknow, I immersed myself in private Indian medicine, centered at Era’s Lucknow Medical College and Hospital. In Varanasi, I explored public Indian medicine, focused at Banaras Hindu University. At both sites, I surveyed the population in an effort to understand more about their utilization and perception of different healthcare modalities, including allopathy, Ayurveda, and Homeopathy, among others. The results of this survey were sent back to the Indian institutions for their use. This experience taught me a lot about the functioning of a very different healthcare system, and how it compares to healthcare in the USA.
Abstract:

Background: Over 36% of residents in Miami-Dade County are currently uninsured. There is a need to inform local and state organizations in how they can best utilize their resources in order to reach and educate individuals on the benefits of the Affordable Care Act and enroll them in a health insurance plan.

Methods: I attended the WE Connect Health Enrollment Information and Wellness Event held September 21, 2013 in Oakland, CA. I met with the team evaluating the effectiveness of the health fair, as well as WE Connect program staff; observed the evaluation surveys being administered; and spoke with representatives from local organizations.

Results: Approximately 100 surveys were administered. Observed challenges included language barriers, participant time, and reluctance of individuals to share data that might reflect their immigration status. Other insights gained include, clear and concise messaging, a checklist of items to bring, as well as way to protect personal data. I will be adapting their survey for implementation in South Florida.

Conclusion: Well-coordinated health fairs can be an effective way to reach thousands of people and effective marketing and communications material are essential to ensuring success. The lessons learned will be crucial to organizations to implement successful health enrollment fairs in South Florida.
Abstract:

**Background & Objectives:** This Springboard is creating a student organization with a database that will be a source of free data, feedback, and recommendations from UM-based public health work. This will help local and international organizations utilize resources efficiently, decrease repetitive community work, and increase awareness. The students’ objectives were based on my previous findings and included: observe and work in various communities to develop an understanding of the barriers to breastfeeding; learn about access to and attitude towards technology; assess female community members’ knowledge of health issues and the role of *matrons* (Haitian midwifes).

**Methods:** Variations of an IRB approved question guide were used to conduct informal focus groups and interviews with Project Medishare personnel, community health workers, community members, and other local healthcare providers.

**Results:** Main results include, but not limited to: 77% of women believe infants should sleep prone, 12% believe colostrum is unhealthy; most patients have access to cell phones with data capabilities; 61% prefer home delivery vs. clinic.

**Conclusions:** The aforementioned data, resources, and methods will be in the database to better depict the current public health climate in the Central Plateau, Haiti. By working alongside the Haitian community for public health progress, future community-based projects or inquiry can precipitate from these results.
Student Name: Madeline DePina, MPH Candidate Class of 2014

Project: Activities with the Central American Field Epidemiology Training Program (CA-FETP)

Abstract:
As an intern for the Centers for Disease Control and Prevention I worked with medical epidemiologist Dr. Reina Turcios, who divided this experience into different tasks. My first task was to attend the presentations of the Advanced-Level Training module of the Field Epidemiology Training Program (FETP). The Central America FETP is located at the University del Valle de Guatemala, which has accredited the intermediate and advanced level trainings. The country has implemented the 3-tiered FETP strategy of training at the basic, intermediate, and advanced levels. The goal of the regional CA-FETP is to build public health epidemiological capacity through training personnel to become field epidemiologists and strengthening disease surveillance. My second task was to conduct a follow up with past CA-FETP cohorts. The primary goal of this assignment was to find out if FETP graduates were working as epidemiologist after the completion of program. For my final task I got to investigate a Hepatitis A outbreak happening in San Juan, Atotenango. This experience has provided me with a better understanding of my career goals, increased my skills and knowledge in performing activities related to Epidemiology, and has provided me with the opportunity to apply theoretical concepts to the actual work environment.
Student Name: Jamie Diamond, MD/MPH Candidate Class of 2016
Project: Assessing Nutritional Status of Refugees in Israel

Abstract:
Background and Objective: Israel is currently experiencing a humanitarian crisis, with thousands of Eritrean and Sudanese refugees seeking asylum to escape violence in their home countries. Unfortunately, these immigrants do not have access to healthcare coverage in the country other than through the Ministry of Health Refugee Clinic in Tel Aviv. My field experience involved gaining an understanding of the barriers immigrant populations encounter in accessing the Israeli healthcare system. Additionally, I was interested in understanding the nutritional status of these African immigrants. My project involved distributing surveys to these immigrants that inquired about their food consumption habits and access to healthy, fresh food. The objective was to assess the population’s need in order to implement public health initiatives aimed at improving access to fresh nutritional foods as well as educational programs.

Methods: I worked collaboratively with Dr. Zohar Mor of the Ministry of Health to create an effective and culturally appropriate survey on nutritional status. Additionally, I partnered up with the Ministry of Health Refugee Clinic staff to optimize survey distribution and create partnerships that can be used to help refugees in the future.

Results: 110 surveys were collected; 50 more need to be completed prior to survey data analysis.

Insights Gained: This field experience provided me an opportunity to examine the advantages and disadvantages of Israel’s National Healthcare System and the institutional barriers that exclude immigrants that are not afforded Israeli citizenship. Furthermore, I learned the process of using an evidence-based approach to conduct population-specific surveys in the field.
Student Name: Joanne Duara, MD/MPH Candidate Class of 2016

Project: Atención Primaria en Salud (A.P.S.): Bridging the “Know-Do” Gap in the Public Health System of Nicaragua

Abstract:
Atencion Primara en Salud (A.P.S.) is a not-for-profit community-based organization founded in Nicaragua. The A.P.S. model incorporates educating and informing community health workers who reach out to community members. The goal of my project was to evaluate A.P.S. model’s success in educating women about reproductive health and prenatal care. This research will serve as an assessment of the A.P.S. model’s effectiveness promoting women’s health.

Methods: 14 total preliminary focus groups were conducted in Managua, and the Ometepe Island. Participants were either pregnant or had recently given birth. Consent was given verbally and participant anonymity was maintained during the sessions. Open-ended questions focused on the women’s beliefs and concerns about pregnancy. Participants were asked whether the A.P.S. model better informed their understanding of pre-natal care.

Results: The focus groups revealed a desire for more confidentiality in the process of reproductive care and unease in seeking care at the public hospitals. The most common points of access to care had been at the primary health center.

Conclusion: Much work needs to be done to bridge the gap between the public services available to Nicaraguan women and their ease with accessing these services. Community health workers serve as promising conduits between need and access, potentially providing support and promoting continuity of care. Analysis of the transcripts may provide insight into how to best implement the A.P.S. community health workers into this schema.
Student Name: Faheem Farooq, MD/MPH Candidate Class of 2016
Project: Examining the Role of Cadmium and Cardiovascular Disease

Abstract:

**Background & Objective:** The European Centre for Environment and Human Health (ECEHH) engages in interdisciplinary research regarding human interaction with the environment such as chronic low level exposure to heavy metals. This study compiled National Health and Nutrition Examination Survey (NHANES) data from 1999-2010 to assess the association between urinary cadmium levels and cardiovascular risk.

**Methods:** At ECEHH, I rotated with various academics and visited research labs. As for my personal project, I learned to use STATA software to analyze NHANES data. We utilized logistic regression models to examine the association between urinary cadmium levels and cardiovascular disease diagnosis. Each regression model was adjusted for gender, BMI, smoking, and urinary levels of other heavy metals.

**Results:** Data analysis revealed a statistically significant increase in odds ratios in angina, congestive heart failure, myocardial infarction, total cardiovascular disease, and peripheral artery disease based on urinary cadmium levels.

**Conclusions:** Overall, I developed a better understanding of how to conduct epidemiological research and the diverse methods researchers use to assess and address public and environmental health problems. As for my research project, we were able to perform a comprehensive analysis of the role of cadmium on CVD. Our data sheds further light on the potential hazardous effects of cadmium accumulation over time.
Student Name: Robert Fell, MD/MPH Candidate Class of 2016
Project: Torewa Project: Investigation of Leishmaniasis Incidence in a Remote River Community in Bolivia

Abstract:
Background: The Torewa Project addresses health in a remote river community of La Paz. Torewa was chosen as a community of interest due to the high number of cases of leishmaniasis observed during a recent medical mission trip organized by Cup of Cold Water Ministries/Project Helping Hands.

Objectives:
1. Define the burden of leishmaniasis on the community of Torewa
2. Assess the geographical area and general lifestyle of the community to develop an understanding of possible risk factors for leishmaniasis
3. Gain insight into the perceptions of the locals regarding leishmaniasis

Methods: Past and current cases of Leishmaniasis were documented according to the guidelines suggested by the Bolivian Ministry of Health. Scars/lesions were documented with photos.

Results:
1. The number of documented suspected cases in the last three years was high (6.2/100 persons). These numbers likely represent an underestimation of true incidence due to the broad layout of the community and time constraints of the investigation
2. Several known risk factors for leishmaniasis are present in Torewa, such as forested areas, ideal environment for sandflies, and lack of resources
3. Those interviewed in the community recognize mosquitoes as the cause of leishmaniasis. The predominant local treatment of the lesions is herbs

Conclusion:
1. There has been a high incidence of leishmaniasis in Torewa in the last three years
2. Treatment cannot be administered due to lack of access and resources
3. Though traveling to remote communities requires time and money, becoming well-acquainted with the community is essential to improving community health
Student Name: Steven Fetterhoff, MSPH Candidate Class of 2014
Project: Superfund Chemicals & Community Health

Abstract:
Background: Agricultural and industrial chemicals have been leaking into the Biscayne Aquifer for several decades. This aquifer (covering ~ 4,000 miles) is the main source of drinking water for four counties: Broward, Miami-Dade, Monroe, and Palm Beach. The southeast-flowing watershed recharges this aquifer with Canal 6 being the main drainage waterway. Heavy industries are located along the canal in Hialeah, including four Superfund sites causing environmental contamination.

Objective: This study examines concentrations of heavy metals and polychlorinated biphenyls (PCBs) in Canal 6.
Methods: Taking sediment samples from the center of the canal via canoe we collected samples at 19 locations using a pole driven 8 inches into the sediment bed. These samples were analyzed for RCRA metals and PCBs using the EPA approved methods.

Results: Our analysis suggests that heavy metals were evenly distributed throughout the canal. Chromium concentrations were highest at the beginning and end of the industrial corridor. PCBs were found within the residential area of Miami Springs at the southernmost sample locations.

Conclusions: These findings imply local contamination of both heavy metals and PCBs from industrial sources are ongoing. Contamination of the drinking water supply is highly likely.
Student Names: Juhi Goswamy, MD/MPH Candidate Class of 2016
Brian Bishop, MD/MPH Candidate Class of 2016
Project: Development of a Multimedia Intervention in Percutaneous Coronary Interventional (PCI) Procedures

Abstract:
Background & Objective: Patient education and understanding of medical procedures are important aspects of health literacy, compliance and self-management. In patients who have undergone a percutaneous coronary interventional (PCI) stenting procedure, inadequate health literacy can result in decreased adherence to post-operative medication therapy, and ultimately, recurrence of an ischemic coronary event. This project describes current methods of patient education following PCI stenting procedures and identifies how additional multimedia interventions may increase patient health literacy, compliance, and self-management.

Methods: Observation, research and physician interviewing were used to gather information regarding traditional patient education at the University of Miami Hospital. Information was then analyzed to identify additional interventional methods that may increase patient understanding.

Results: Information gathered was used to create a multimedia-based intervention that can supplement traditional patient education. This intervention will be tested for its efficacy in the cardiac catheter laboratory of the University of Miami and VA Hospitals.

Conclusion: Anecdotal information from physician interviews and direct observations from working directly with physicians were instrumental in creating an educational video intervention for patients at the University of Miami Hospital. Future data outlining the efficacy of this intervention may promote further discussion regarding the potential benefits of cost-effective multimedia patient education.
Student Name: Cyprianna Green, MPH Class of 2013

Project: Sexual Health Knowledge and Behavioral Health Needs Assessment of 4th and 5th Form Students of the Turks and Caicos Islands

Abstract:

Introduction: The Turks and Caicos Islands’ National HIV Prevention Unit (NHPU) has been working to strengthen the school-based sexual health curriculum as part of its HIV prevention goals. A gap in the curriculum is that fourth and fifth form upperclassmen (15 - 18 year-olds) do not receive sexual health education, which represents lost opportunities for HIV prevention. This assessment sought to: 1) characterize students’ HIV knowledge, risky sexual behaviors, history of sexually transmitted infections, HIV testing, and HIV stigma; and 2) examine correlates of students’ sexual risk behaviors.

Method: Assessment items were adapted from existing sexual health surveys. The assessment was administered to 281 fourth and fifth form students in all four government high schools. Descriptive statistics and logistic regression were used to analyze the data. The Centers for Disease Control’s 4-step approach to solving public health problems was used to guide this work.

Results: Approximately, one-half of students surveyed were sexually active. Of these, the mean age of first sexual encounter was 14 years, 29% had not used a condom at last sexual encounter, and 70% had more than one sexual partner in their lifetime. For the full sample, HIV knowledge was relatively high; however, misconceptions about HIV transmission exist. Only 22% of participants reported having been tested for HIV. Approximately 60% stated that they would not disclose their HIV status to their partner if positive.

Conclusions: This project provided results to the NHPU, as well as recommendations for incorporating evidence-based interventions as part of the curriculum.
Abstract:
The Global Health Scholar Award facilitated my participation in a fascinating and highly educational summer experience in Tel Aviv, Israel. In Israel, the issue of child abuse and neglect (CAN) has attracted increased attention, evident in the 120% rise from 1995 to 2006 in the number of cases treated by Child Protection Services (CPS). Due to this alarming increase in the childhood abuse issue, Tel Hashomer, a major hospital in Tel Aviv, has developed a Suspected Childhood Abuse and Neglect (SCAN) team to research the issue, develop techniques to combat the problem, and to evaluate the success of the program. I was able to obtain a full understanding of SCAN, as I saw the research aspect at the Gertner Institute and the application and evaluation of the program at Sheba Medical Center at Tel Hashomer. At Sheba Medical Center, I collaborated with an interdisciplinary team to review suspected abuse cases. We identified the cases of abuse, discussed the potential implications for the family, and developed strategies to ensure appropriate referral. Future recommendations include implementing SCAN teams at all hospitals and developing standardized training modules for all staff to identify signs and symptoms of child abuse and refer appropriately.
Student Name: Elizabeth Honeycutt, MD/MPH Candidate Class of 2016
Project: Emergency Preparedness and Disaster Response CDC-CAR

Abstract:

Background: The Center for Disease Control (CDC) has been present in Central America since the 1960s and was established in Guatemala in 2005. They work to aid the responses to emergencies throughout the Central American countries. This requires a great deal of coordinated effort and education.

Project: I worked as an intern to Luis Hernandez, Regional Emergency Preparedness and Response Coordinator to better understand how the CDC engages and educates citizens, to understand organizational partnerships, and to understand how policies are formed.

Outcomes: CDC CAR engages community members through the creation of policies that integrate community education and involvement. Key partners for this branch of CDC CAR includes PAHO/WHO, SECOMISCA, and governmental groups such as ministries of health and disaster response organizations. These partners provide a strong network and foundation of knowledge and resources to continue growth of the programs needed in each country. Each organization provides support to the others through resource sharing and integrated policy formation. Policy formation is standardized within the CDC. This format is growing in popularity outside of the CDC as the CDC introduces it in its work, and is providing a standardized platform for the countries to create policies and work together throughout the process.
Student Name: Audrey Jacobsen MD/MPH Candidate Class of 2016
Project: The Burden of Hypertension in Haiti

Abstract:

Background and Objective: Hypertension is a significant public health issue in Haiti, yet it lacks adequate surveillance efforts. To address this problem, my team and I assessed the burden of hypertension at the Hospital Bernard Mevs Project Medishare in Port-au-Prince and Marmont, Haiti.

Methods: To evaluate the burden of hypertension in Haiti my team and I conducted a chart review estimating the prevalence of hypertension, interviewed providers and patients, provided educational sessions to providers and assessed the current care delivery model at two clinics: one at the Hospital Bernard Mevs Project Medishare in the urban city of Port-au-Prince and the other at a clinic run by Project Medishare in the rural village of Marmont.

Results: The overall prevalence of hypertension was 34.4% (n=351 95% CI 31.8-37.8). Prevalence in Port au Prince was 31.6% (n=167 95% CI 27.6-35.3) and 37.6% (n=95% CI 34-40.9) in Marmont.

Both clinics lack any formal hypertension-screening program or surveillance systems. Follow up is challenging at the Bernard Mevs clinic due to high patient volume and long wait times to see a physician.

Conclusions: The data we obtained during our fieldwork will be used to create a comprehensive hypertension treatment intervention program.
Abstract:

Introduction: Hypertension is rising as a major health concern in developing nations. Lack of data on patient knowledge and perspective of chronic disease and management limit the ability of stakeholders to respond effectively. The goal of this project was to provide a description of hypertension awareness and knowledge among Haitian patients.

Methods: During June-July 2013, patient surveys were conducted at two Project Medishare sites. The patient survey addressed three areas of healthcare delivery: barriers and access to healthcare, patient knowledge on hypertension, patient treatment modalities for hypertension. A Creole version of the Rapid Estimate of Adult Literacy in Medicine (REALM) screening instrument was also administered.

Results: Common themes were found in result analysis across urban and rural patient surveys. The major barrier to seeking healthcare was lack of finances.
Regarding hypertension, the majority of patients did not know what hypertension was, 46% among the urban patients and 40% among the rural patients. Of particular interest, when patients were prescribed hypertension medications 36% and 70% of patients would stop taking their medications if their blood pressure returned to normal, urban and rural respectively.
REALM survey results also yielded low health literacy levels across the Haitian patients.

Conclusions: The patient surveys suggest there is very limited knowledge on hypertension disease and management both in the urban and rural settings. The information gained from these surveys will be used to design patient education and develop treatment programs geared towards addressing the observed knowledge gaps.
Student Name: Maryann Koussa, MPH Class of 2014

Project: Community Voice: Taking It to the People, A Community Based Approach To Reducing Racial Disparities In Black Infant Mortality In Miami- Dade County

Abstract:

Background & Objective: While the United States is the most advanced country in the world, it remains the country with the highest infant mortality rate among the world’s wealthiest nations. There is a significant need for an increase in education and risk-reduction strategies for all communities, especially among African Americans where the infant mortality rate remains two to three times higher than their White counterparts. This Springboard grant describes the implementation of Community Voice: Taking it to the People, in Miami-Dade County.

Methods: A total of 40 participants completed the curriculum, attending the minimum number of sessions (four out of five) and successfully completing the satisfaction survey and pre-/post-tests to become certified Lay Health Advisors.

Results: The majority of participants were African American (87.5%), female (82.5%), above 35 years of age (57.5%), and attended all five sessions (72%). All participants demonstrated an increase in knowledge at posttest, with the majority scoring about 85% or higher. Satisfaction survey results yielded extremely positive feedback.

Conclusions: Findings are encouraging in that they identify factors utilized for successful implementation of community-based programs. Furthermore, they suggest that all community members, irrespective of age or gender, may benefit from participation in programs that aim to teach infant mortality risk-reduction strategies.
Student Names: Larissa Lester, MD/MPH Candidate Class of 2016
Bryanna Schwartz, MD/MPH Candidate Class of 2016

Project: Preventing HIV in Homeless Women: Implementing HIV Testing and Education at a Local Shelter

Abstract:

Background and Objective: Unstably housed and homeless women are disproportionately at risk for HIV infection. As such, homeless shelters are a critical point of intervention. The goal of this project was to initiate HIV testing in a local women’s shelter to help prevent HIV transmission in a very high-risk population.

Methods: Through the Department of Health, the Lotus Wellness Center, LLC was able to become a free HIV testing site. Additionally, three questionnaires informed by Community Based Participatory Research were developed and submitted to the IRB for approval. Results: HIV testing at the Lotus Wellness Center, LLC began in July 2013. Thus far, 24 out of 65 patients seen from the Lotus House and local community have been tested. The successful implementation of a sustainable HIV testing program was greatly due to the collaboration between the students and the volunteers who work with guests of the Lotus House on a daily basis.

Conclusion: Homeless shelters represent a unique opportunity to administer testing and prevention programs to decrease the spread of HIV. The success of this project may help give other homeless shelters a model for implementing HIV testing, as well as yield important information for developing prevention programs tailored to homeless women. Future project goals include expanding testing and developing an HIV education.
Student Name: Alexandra Levitt, MD/MPH Candidate Class of 2016  
Project: Can We Bring Electronic Medical Records to Haiti’s Central Plateau?

Abstract:
**Background and Objectives:** Project Medishare is a non-profit based in Haiti’s central plateau, which offers a variety of sustainable community health services to the region. The primary aim of this project was to conduct a qualitative needs assessment to better understand how health information technology (HIT) can be used most effectively within the organization.

**Methods:** Methods included interviewing and observing Medishare employees, including central office IT workers, community health workers, pharmacists, doctors, and nurses, as well as the local population who utilize Medishare’s services; participating in clinics with student groups and Medishare staff; and interaction with NGOs in the central plateau.

**Results:** We found that Medishare currently makes only cursory use of technology at the very end of the data collection and storage process. This data is static, and used primarily to report to funding agencies. It is not available for further analysis or readily accessible by Medishare staff. HIT implementation is desired by Medishare staff.

**Conclusion:** We identified many areas in which HIT could be put into place, but focused on electronic medical records (EMR), which would address many of Medishare’s identified needs. We visited many Medishare sites and determined that the Marmont maternity clinic would be the best place to begin EMR implementation.
**Student Name:** Michael Maguire, MD/MPH Candidate Class of 2015  
**Project:** Constructing a Collaboration at Caridad Center: Designing a Student-Run Free Clinic Partnership in Palm Beach County

**Abstract:**

**Background & Objective:** In Palm Beach County (PBC) about 1 in every 5 residents live without health insurance. For over 25 years Caridad Center has been working in PBC to help increase healthcare, now with more than 25,000 visits yearly, but still fall short of helping everyone in need. In part through funding with the Springboard grant a student-run clinic partnership between University of Miami and Caridad has been proposed to extend the clinic’s hours and enable greater access. UM, through its Wolfson Department of Community Service (DOCS), already has a rich tradition of serving its surrounding community and with the new four year combined MD/MPH program, there is going to be a large student presence in PBC to sustain such a partnership with Caridad.

**Methods:** The student clinic will be modeled after UM DOCS pre-existing clinics. In addition, through surveys and focus groups, community-driven initiatives are to be constructed with a focus on public health-centered interventions.

**Results:** Preliminary needs-assessments of Caridad demonstrated a partnership to increase hours and patients-seen would be highly beneficial. Patients of Caridad would benefit from evening hours as well as increased public health, education and prevention-based programming.

**Conclusion:** Facilitated by funding through the Springboard grant, the logistics of a student-run clinic in PBC at Caridad Center with the focus on unique public health interventions are ongoing.
Student Name: Priyanka Mehrotra, MD/MPH Candidate Class of 2016
Project: Allopathic and Alternative Medicine Interplay in India: Observation and Analysis

Abstract:
Background and Objective: Alternative practices have been practiced alongside biomedicine for centuries in India. The objectives were to observe a foreign healthcare system and to understand the organization and interplay of allopathic hospitals and alternative medicine clinics in such a setup. This poster depicts observations of Era’s Lucknow Medical College and Sir Sundarlal Hospital of Banaras Hindu University in Uttar Pradesh, India.

Method: Observation and interviewing were the two means of gathering data on usage of allopathic and alternative medicine services. Basic demographics were collected from 163 patient charts in the out-patient departments of each hospital visited, and patient beliefs were collected from an oral survey in Hindi.

Results: Observation and analysis suggest that patient belief systems play a large role in the alternative medicine treatment they seek. Allopathy seems standardized amongst all religions. Anecdotal evidence suggests that patients seek allopathy for emergent care and alternative medicine for chronic and terminal conditions.

Conclusion: The interplay between allopathic and alternative medicine could increase and better services for a rapidly increasing patient population in the United States. As the numbers for chronic conditions grows in the United States, alternative medicine could be seen as a great choice of treatment for many patients, as well.
Student Name: Alison Moody, MD/MPH Candidate Class of 2016
Project: Exploring the Community Health Worker Model in South Sudan and Uganda

Abstract:
As my capstone field experience, I had the opportunity to travel to Uganda and South Sudan. The purpose of my trip was to learn about the public health work that is currently being carried out in Uganda and South Sudan and to explore whether or not the community health worker model, which we have been taught in our classes is a model that works well in resource poor settings, would in fact be useful in Kajo Keji County. In pursuit of this purpose, I spent time interacting with and learning about numerous public and private health agencies in South Sudan and Uganda. In South Sudan, I spent time at the government hospital and its public health department, which together provide the bulk of the health services in Kajo Keji. To a lesser extent, I spent time with two private health NGOs, the American Refugee Council and the International Medical Corporation, both of which are also active in health care and health education. In Uganda, I took part in a public health project and spent time working at a community clinic. Uganda is South Sudan’s more developed southern neighbor, and I was hopeful that the projects in place there might have helpful implications for future work in South Sudan.
Student Name: Christian Morris, MD/MPH Candidate Class of 2016

Project: Understanding the French Medical System: What Can We Learn?

Abstract:

Background: MICEFA is a consortium of most of the Universities of Paris and its region. It was created in 1985 to promote cultural and scientific cooperation between France and Anglophone North America. MICEFA has a Medical Exchange program, which gives participants the opportunity to experience another country’s medical system. MICEFA organizes a forum on public health with the Parisian partner universities so as to enhance collaborations between professionals on both sides of the Atlantic. The forum ended with a round table organized at La Pitié Salpètirère hospital where American visitors presented how they dealt with Emergency Public Health crises, how they treated underserved communities and drew links on medical care, public health and academia.

Experience Summary: The majority of my time was spent at the Parisian hospital “Hopital Armand Trousseau.” I worked in the Neonatal Intensive Care Unit. I observed many different aspects of their hospital floor and was given time to read public health papers that many of the doctors had published in France. For seven days between my observership weeks I attended class for two hours followed by a visit to an independent medically-related institution of some sort.
Student Name: Michelle Picon, MD/MPH Candidate Class of 2016
Project: Maternal Health Disparities in a Healthcare Systems Context: Santo Tomé, Argentina

Abstract:

**Background and Objective:** Healthcare in Argentina is provided by three distinct sectors: private, social security, and public. Further subdivisions within the sectors and a lack of cooperation between them results in a fragmented system of financing and administration, which in turn leads to unequal access to and quality of healthcare services. Santo Tomé is a rural town in Northeast Argentina, where maternal mortality rates are double the national average and both insured and uninsured residents must rely on the public health system for their healthcare. This poster demonstrates how maternal-infant health disparities are intricately linked to factors influencing the delivery and quality of public health services on a local level.

**Methods:** Participation in patient care for two weeks at a public primary care clinic, two weeks on the Ob/Gyn service at the public hospital, and various rural health expeditions provided insight into the structure, function, strengths, and shortcomings of local public health facilities. Researching Argentina’s healthcare system and observing the delivery of public health services locally elucidated their role in maternal-infant health disparities.

**Results:** Various aspects of the public health system were found to influence the delivery and quality of services on a local level, such as social welfare plans, administrative leadership, minimal record-keeping, insufficient data, and few public health interventions.

**Conclusions:** Complex positive and negative features of Argentina’s public health system structure, its local administration, and regional socioeconomic and cultural factors interact to influence maternal and child health disparities. Conditions that negatively impact maternal-infant health disparities also discourage public health initiatives to counteract them.
Student Name: Chase Socha, MD/MPH Candidate Class of 2016
Project: Nutrition Education and Children’s Health in Oaxaca, Mexico

Abstract:
Background and Objective: I partnered with a nutritionist to assist Centro de Esperanza (CE), a nonprofit organization assisting children in poverty, with their nutritional education programs. In addition, I assisted a public health promoter in a government funded community clinic during sanitation and dengue awareness campaigns.

Methods: We created a 25 question survey assessing the dietary habits, physical activity level and general health of the children at CE. Approximately 1/6 of the children of the center were to be surveyed. At the community clinic we traveled door to door providing instruction, educational brochures, and electrolyte replacement packets, as well as larvicide for water basins.

Results: On average, the children at the center had too low of a dietary intake of fruits and vegetables (average of 2 and 3 portions respectively) and ate only 2 meals per day, 1 of which was from a street vendor. Additionally, on average the children engaged in physical activities only 2.4 times/week for less than 45min/day.

Conclusion: From the data collected we constructed an interactive nutrition education class for the children to address these issues. Additionally, we created and distributed to their mothers a pamphlet containing this information. Further study is needed to assess the effectiveness of this program.
Student Name: Rachita Sood, MD/MPH Candidate Class of 2016
Project: Prevention of Type II and Gestational Diabetes in Barranquilla – Building a National Model

Abstract:

Background & Objective: Rising prevalence and incidence of non-communicable disease is a major challenge in global health. This poster describes my involvement in two diabetes prevention programs currently being implemented in Barranquilla, Colombia; a city designated by the national ministry of health as an area for demonstration of diabetes-prevention models to be adapted nationwide.

Methods: The first project, DemoJUAN, is a randomized control trial to assess the effect of physical activity and nutrition lifestyle intervention programs on preventing type II diabetes in low-income individuals with impaired-glucose tolerance. The second project, Vida Nueva, seeks to establish a system for the prevention, diagnosis, and management of gestational diabetes in the city’s public health clinics by creating an evidence-based guide for gestational diabetes diagnosis and management, sponsoring mass media awareness campaigns, and holding small-group lifestyle intervention classes for pregnant women.

Results: Both projects were in the implementation phase during my time in Barranquilla. The DemoJUAN team had enrolled approximately 700 individuals into their interventions, while the Vida Nueva team had completed their guide to gestational diabetes management and was working on the dissemination and implementation of the guide and lifestyle intervention in clinics.

Conclusions: My experience observing the DemoJUAN and Vida Nueva projects provided me with a greater insight into the causes of increasing diabetes in less developed countries, as well as the significant challenges to prevention through lifestyle intervention.
Student Name: Selina Stasi, MPH Candidate Class of 2014  
Project: Integrating Lifestyle Medicine into Medical Curricula

Abstract:

Background: Current research shows that lifestyle medicine (LM), including increasing physical activity (PA) and improving dietary choices, is successful in lowering and preventing chronic diseases. Health care providers are at the forefront of disease prevention by providing their patients with strategies to improve lifestyle habits. The opportunity to educate these health care providers begins as early as medical school.

Methods: To address the integration of LM curricula into US Medical Schools, a Think Tank, held at the University of South Carolina-Greensville, created a roadmap for curricula reform. Following the Think Tank, a summit held at the Bi-Partisan Policy Center (BPC) in Washington DC identified barriers and opportunities to expand innovative LM approaches currently in place across the country.

Results: We summarized the opinions of the Think Tank into an executive summary that was then presented at the BPC summit. The summary is being revamped into a white paper outlining the vision, focus areas, and specific strategies to equip health care providers with the necessary knowledge needed to engage patients about LM.

Conclusion: Efforts to increase LM within medical curricula have gained extensive support and momentum. Further research is needed to explore the possible pathways of integration, dissemination, and assessment of LM.
Student Name: Melissa Swain, MPH Candidate Class of 2014
Project: The University of Miami’s Medical-Legal Partnership

Abstract:
Background and Objective: The University of Miami’s Medical-Legal Partnership (MLP) has served over 1,400 patients and completed over 1,900 legal cases. The MLP represents patients in social security disability, public benefits, healthcare directives, housing, and immigration cases.

Methods: The MLP worked in collaboration with the Department of Public Health Sciences and a MPH/Biostatistics student to ensure that 2000 client paper files were retrieved to extract pertinent demographic and case information to create and implement a new database management system, “hot-spot” maps, and create new intake and closing forms for data collection.

Results: This project implemented a new database management system to handle multiple variables, new intake and closing case memos to improve data collection and capture, electronically converted, and transferred demographic and case information data for over 1,900 paper files and created “hot-spot” maps.

Conclusions: This project has greatly improved the ability and quality of data collection of the University of Miami’s MLP. The Clinic now enters all data into the database prior to closing a legal case. In the future, the MLP will need funding to evaluate the impact of the MLP on the community and whether legal interventions improve the health and quality of life of the patients, clients, and the Miami-Dade County community.
**Student Name:** Erryn Tappy, MD/MPH Candidate Class of 2016  
**Project:** Sexual Health as a Legal Right: Ecuador’s Unique Model

**Abstract:**

**Background and Objective:** Child Family Health International collaborates with International Partners to provide community-based Global Health Education Programs. The program, Sexual Health as a Human Right: Ecuador’s Unique Model, formed through collaboration with Quito based non-profit, Copprende. Program development was inspired by Ecuador’s history of high rates of maternal and fetal death, which catalyzed creation of the 1994 Free Maternity Care Law. This law guarantees sexual and reproductive rights for all citizens. Copprende supports these rights by promoting prevention and sexual responsibility through education and outreach. Program participation goals included gaining exposure to public health strategies for delivering sexual and reproductive health education, and contribution to program development.

**Methods:** Fieldwork included participation in educational program facilitation, community outreach, and use of an informal pre and post-test survey to measure educational program outcomes.

**Results:** Fieldwork identified barriers to providing sexual health education. Survey results identified both increases and declines in the correct number of responses to questions about pregnancy prevention, and additional topics of desired health knowledge.

**Conclusion:** Based on the decline of correct responses regarding risk of pregnancy, recommendations were made to standardize presentations to promote clear health messaging and equal exposure to presentation content. Additional program development recommendations included further use of data collection to measure program outcomes and identify knowledge gaps, and increased efforts toward program sustainability.
Special Thanks

To our Capstone Faculty Advisors

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To our community partners for the continuous support of our graduate public health students

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Notes:
Thank you for attending the Graduate Programs 2014 Poster Reception