

SOPHE 2020 Annual Conference Abstracts

Session Type: Poster

Session Title: Theory of Planned Behavior Path Model Predicting Latinx/Hispanic College Student Condom Use

Session Number: Poster – Wednesday - *We1

Submitting Authors: Eric Conrad

Co-Authors: Alexa Banuelos, Monica Higle

Authors Bio: I am a full time student in health promotion at California State University, Stanislaus. This project was conducted under the supervision of my professor who holds a doctorate in health education/promotion and is a Certified Health Education Specialist. I conceptualized the study, collected and analyzed the data, as well as synthesized the results.

Chosen Sub-theme: Changing Approaches: Emerging Issues in Research Translation and Implementation

Objectives: Identify factors that influence Latinx/Hispanic college students' behavioral intentions and condom use behavior

Discuss prevention strategies, based on identified correlates, to promote consistent condom use behaviors among Latinx/Hispanic college students at a Hispanic Serving Institution

Keywords: College Health, Minority Health, Sexual Health

Special Populations: Minority Populations

Full Abstract Detail: Recent epidemiologic data indicate that Latinxs and Hispanics, the largest minority groups in the U.S., are disproportionately affected by HIV and other sexually transmitted infections (STI). These disparities have continued to persist over time when compared with rates of Whites. Additionally, college-aged adults are at a substantially higher risk of contracting and transmitting STIs and also report a lack of consistent condom use behaviors. The purpose of this study was to test the capacity of the theory of planned behavior (TPB) to account for variance in condom use in Latinx/Hispanic college students at a Hispanic Serving Institution (HSI). Data were collected from Latinx/Hispanic college students using a previously validated questionnaire. A structural equation model was built to examine the effects of the TPB constructs of attitudes toward the behavior (ATT), subjective norms (SN), perceived behavioral control (PBC), and behavioral intentions (INT) on condom use behavior. A total of 435 students participated in the study ($M_{age}=21.32$; $SD=6.95$). Overall fit for the TPB model of condom use behavior was adequate ($GFI=0.993$, $AGFI=0.951$, $NFI=0.993$, $CFI=0.998$, $RMSEA=0.041$) with ATT, SN, and PBC accounting for 38% of variance in INT, while PCB and INT accounted for 55% of the variance in condom use. PBC had the greatest total effect on INT ($\beta_{total}=.341$), while INT had the greatest total effect on condom use ($\beta_{total}=.484$). This study provides support for the TPB as a theoretical framework for predicting factors hypothesized to promote condom use in Latinx/Hispanic college students at an HSI.

Session Type: Poster

Session Title: Self-Reported Mentorship Needs and Preferences of Health Education and Promotion Students

Session Number: Poster – Wednesday - *We2

Submitting Authors: Dr. Ashley V Parks

Co-Authors: Kirndeeep Cheema, Emily Elizabeth Gingrich, Bill O'Dell

Authors Bio: Ashley Parks, DrPH, MPH, MBA, MTech, MCHES, CPH, CPHQ, HACP, CSSBB, CPHRM, CHTS-IM, PMP, CS-MC, CPPS is an experienced health educator and health administrator. Dr. Parks currently works as an Assistant Professor in Public Health Sciences at California Baptist University (CBU) and healthcare quality consultant. Prior to her current role, Dr. Parks worked previously as a Director of Managed Care at the AIDS Healthcare Foundation and a Research Associate for the UCLA Center for Health Policy Research.

Bill O'Dell, MPA currently works as a Civic Engagement Professor with a passion for mentorship and community development. Bill O'Dell is a retired California Highway Patrolman and civic engagement project award winner who enjoys bringing real life experiences into the classroom.

Kirndeeep Cheema and Emily Gingrich are CBU MPH students who provided support for this project.

Chosen Sub-theme: Changing Minds: The Art and Science of Teaching in Communities and Professional Preparation

Objectives: 1. Understand the mentoring needs and preferences of health education and promotion students.

2. Discuss appropriate strategies for mentoring health education and promotion students.

Keywords: Professional Preparation, Workforce

Special Populations: New Professionals

Full Abstract Detail: As the various professions, career paths, and licensed roles become more defined within health services, there exists an opportunity for health education and promotion students and entry-level professionals to share their perspectives and perceived needs for additional training and mentorship. In addition to having to learn, master, and then educate on topic specific information, health educators and health promotion professionals have to forge relationships that help them retain the pedagogical training and information they have learned in their undergraduate and graduate education and apply it to their work being done.

This presentation explores informed recommendations in assessing, mentoring, and coaching entry level health educators. Through the surveying of a diverse population of 641 undergraduate and graduate health promotion students in California, a combined list of mentoring needs and preferences was developed. The initial Mentoring in the Health Professions survey conducted in 2017 captured the self-reported needs and preferences for mentorship of more than 2,000 health education, administration, and pre-professional health science students. The 641 health education and promotion students who

participated indicated a strong desire for mentorship (mean of 4.4 out of 5) with only 27% (173/641) reporting they had a mentor available whom they felt would reliably assist with career planning during their academic program and 19% (122/641) stating they had connected with a mentor who they believed would continue after graduation. The majority of respondent students (93%, 596/641) reported being interested in receiving consistent emotional and social support in the form of text messages and email as well as instrumental support in the form of informed recommendations regarding specific career development advice on an ongoing basis. There was a statistically significant difference in the self-reported rate of mentorship among undergraduate (52/418) vs. graduate students (121/223) ($p=0.01$).

Respondents also reported interest in receiving mentorship in the form of one on one in-person meetings with a mentor willing to provide (in ranked order), (1) career advice and resume review, (2) social and emotional support including discussion of barriers and motivation, (3) assistance with certification and exam preparation, (4) translational services to assist students in relating what they have learned in the classroom to practice.

Key recommendations include the use of social media and electronic communication to increase the student perception of consistent social and emotional support. Recommendations also include establishing formal mentorship programs at the undergraduate level which encourage faculty and professionals to engage in lasting relationships with students. The value of motivational support was clearly stated in the student comments.

Session Type: Poster

Session Title: A Program Evaluation of a Pilot Service-Learning Intervention: Improving Fruit/Vegetable Intake Among Older Adults

Session Number: Poster – Wednesday – *We3

Submitting Authors: Dr. Audra L Gollenberg

Co-Authors: Dr. Scott King, Alison Spaziani

Authors Bio: I am a trained epidemiologist with over 10 years of experience working with communities.

Chosen Sub-theme: Changing Outcomes: Health Education and the Continuum of Prevention and Care

Objectives: By the end of the session the participants will be able to determine specific ways a nutrition education intervention affected diet in older adults.

By the end of the session the participants will be able to identify ways to develop a service-learning partnership with a senior center to deliver an educational intervention.

Keywords: Nutrition and Obesity Reduction

Special Populations: Older Adults

Full Abstract Detail: Older adults are the fastest growing segment of the world's population and are at risk of developing chronic diseases, yet less attention has been focused on nutrition education interventions in this population. We sought to evaluate a pilot service-learning program conducted with undergraduate students who aimed to increase fruit/vegetable intake and nutritional knowledge among older adults ("congregates") attending a senior day center in Winchester, Virginia. Two public health students per semester delivered 30-minute nutritional workshops (4-7 sessions per semester) for four semesters, starting in 2017. Specific topics were congregante-driven but always included information on increasing fruit/vegetable intake. At the end of each of four semesters, congregates completed an anonymous evaluation indicating if and how the nutritional sessions led to a change in their diet and what they liked/didn't like about the sessions. A total of 28 congregates (79% female, 79% White) consented to participate in the study. Their ages ranged from 66 to 90 years with a mean of 78 years. Approximately 30-40% of congregates reported a definitive positive response when asked if the nutritional workshops improved their diet in some way, 10-12% reported small changes, while approximately 50% reported no change. Common positive responses included "ate more fruit/vegetables" and "portion control". Congregates reported liking aspects of the workshops including interactive activities, take-home recipes, and the engaging presentations. Lessons learned about the formation of a service-learning partnership include listening to the congregates as to their preferred topics to maintain engagement, keeping the workshops interactive, and working with staff to ensure an adaptable and mutually beneficial partnership. Future analyses will determine if self-reported fruit/vegetable intake and nutritional knowledge was impacted by the nutritional education intervention in this congregante sample.

Session Type: Poster

Session Title: Our Role in Promoting Health Education Specialists

Session Number: Poster – Wednesday - *We4

Submitting Authors: Dr. Nicolette Powe

Co-Authors: David Brown, Ms. Elaine Ricketts Hicks, MS/LIS, MPH, MCHES, Charlotte Kabore, Jasel Martin

Authors Bio: Nicolette Warren Powe, DrPH, MS, MCHES is the Assistant Professor at Youngstown State University, Department of Health Professions. Currently, Dr. Powe served as the Professional Development Board of Trustees for the Society for Public Health Education (SOPHE). Also, Dr. Powe is a consultant for Engagement for Health. Most recently, Dr. Nicolette Powe served as the Director of Health Equity at SOPHE, where her main duties were to address racial and ethnic community-based policy, systems, and environmental changes to reduce the risk factors associated with chronic diseases and lead SOPHE's additional efforts on health equity. While the Director of Health Equity, Dr. Powe served as the co-chair of the Office of Minority Health, Mid-Atlantic Regional Health Equity Council and National Commission for Health Education Credentialing, Division Board of Professional Development.

Chosen Sub-theme: Changing Systems: Policy, Advocacy, Communications

Objectives: 7.2.2. Describe at least two strategies to advance the health education profession in the field of public health.

7.4.1. Describe at least two strategies to expand the roles of health education specialists in the post–health reform era.

Keywords: Advocacy, Career Development/Professional, Continuing Education

Special Populations: Mid-Career Professionals, New Professionals, Seasoned Professionals

Full Abstract Detail: The Affordable Care Act provided a platform for public health educators to be eligible for third-party reimbursement. Many Health Education Specialists (HESs) have benefited from this professional opportunities as other health disciplines. The growing demand for interprofessional education of health care and public health professionals to improve patient-centered health outcomes is critical. When it comes to building a healthy community, the importance of health education cannot be overlooked. The need for further attention to health workforce development, training and guidelines to be considered in the health education professional framework is necessary. The Role of Health Professionals in Promoting Active Measures of Prevention document, acknowledged that “a variety of health care professionals are qualified to deliver specific preventive services, particularly those services which result in a change of life-styles to promote health and well-being and prevent disease and injury.” HESs are well positioned to assist in the transition to a health care system that rewards health outcomes over services rendered and emphasizes disease prevention and health promotion. However, public and private stakeholders must support initiatives to expand awareness about the role of health education specialists in the post–health reform era. Journal publications on the role of HESs may increase opportunities for HESs to demonstrate their competencies at the patient and population levels in health

care settings, at worksites, and in health departments, communities, and schools. These journal publications may further demonstrate how HESs apply their expertise and their voices regarding evidence-based practice. The role of HESs is particularly essential as the social determinants of health are increasingly being recognized at the federal, state, and local levels to improve health outcomes. The purpose of this presentation is to focus on promoting health education specialists as a unique profession in public health.

Session Type: Poster

Session Title: Cancer Risk Perception Predictors for Total Body Skin Examinations: A Cross Sectional Study Using HINTS 2017 Data

Session Number: Poster – Wednesday - *We5

Submitting Authors: Meghann Wheeler

Co-Authors: Dr. Hanadi Hamadi, Julie Williams Merten

Authors Bio: Meghann Wheeler is a Master of Public Health student at the University of North Florida in the epidemiology track. She is a Research Assistant in the Department of Public Health working on secondary data analysis, content analysis, and primary data collection in skin cancer prevention and emerging public health issues media coverage. She is the Managing Editor for the Florida Public Health Review and works as a Clinical Research Associate at Ascension St. Vincent's Hospital.

Chosen Sub-theme: Changing Outcomes: Health Education and the Continuum of Prevention and Care

Objectives: Identify the strongest predictor for having a skin examination by a healthcare provider.

List 3 characteristics of the people who are least likely to have a skin examination by a healthcare provider.

Keywords: Cancer, Health Behavior, Health Research

Special Populations: Older Adults, Young Adults

Full Abstract Detail: Background: Skin cancer is the most common cancer and approximately 20% of the U.S. population will develop skin cancer during their lifetime. Advancement in screening such as total body skin examinations by healthcare providers and biopsy techniques have led to an increase in early diagnosis of melanoma over the last decade. A total body skin examination is a noninvasive, fairly quick, and inexpensive examination conducted by a primary care provider or dermatologist often with the use of a dermascope magnifying glass. Despite no national screening recommendations, a skin examination may detect skin cancer earlier allowing for more effective treatment and better outcomes.

Methods: Retrospective cross-sectional analysis of a nationally representative sample of U.S. adults using the Health Information National Trends Survey (HINTS). Multivariate logistic regressions using adjusted Wald tests were performed to identify associations between having a skin examination, risk perceptions, and demographic variables.

Results: Approximately 46% of the sample reported having a skin examination. Females, college graduates, those with a history of skin cancer, people who check their skin for signs of skin cancer, those with a household income over \$75,000, and adults over the age of 45 were more likely to have a skin examination. The people least likely to be screened were those not wanting to know their chances of getting cancer.

Conclusion: The findings are consistent with other studies that people sometimes avoid cancer risk information. This is particularly true when people view cancer as unavoidable and are unsure of how to

reduce their risk of cancer. Dermatologists and primary care providers can use this information to encourage dialogue with patients who are at the highest risk for developing skin cancer. Further, an educational campaign focused on the benefits of early cancer detection would benefit people that report not wanting to know their chances of getting cancer.

Session Type: Poster

Session Title: Ring the Bell for Sickle Cell: Encouraging Advocacy in an Underserved Population

Session Number: Poster – Wednesday – We6

Submitting Authors: Ellen Bloom

Co-Authors: Kimber Blackwell, Gary A. Gibson, Kisha C. Hampton, Dr. Emily Riehm Meier

Authors Bio: Ellen Bloom earned her Master of Public Health from Indiana University in 2009, and became a Certified Health Education Specialist in 2011. She served as a Sickle Cell Program Coordinator at the Indiana Hemophilia and Thrombosis Center (IHTC) from 2013-2018, at which time she transitioned into the role of Sickle Cell Program Manager. In this capacity Ms. Bloom provides oversight for sickle cell grants and activities, as well as providing health education and care coordination for families with children with hemoglobinopathies. Ms. Bloom led the Indiana Sickle Cell Advisory Committee from 2015 until 2018, and currently leads the Sickle Cell Advocacy Planning Committee. Prior to joining IHTC, Ms. Bloom worked in environmental health and child abuse prevention.

Chosen Sub-theme: Changing Systems: Policy, Advocacy, Communications

Objectives: Evaluate the effectiveness of a grassroots advocacy effort to improve health outcomes for a disadvantaged population.

Describe three strategies used to engage stakeholders in an advocacy campaign.

Keywords: Access to Health Care, Advocacy, Health Policy

Special Populations: Disadvantaged Populations, Minority Populations

Full Abstract Detail: Background: Sickle cell disease (SCD) is an inherited hemolytic anemia that leads to end organ damage and shorted life expectancy. There are approximately 100,000 people affected by SCD in the U.S. Adults with SCD score significantly worse on quality of life scales than the general U.S. population, reflecting the complexity of this disorder and its effects on the various facets of an individual's life. Until recently, SCD was associated with childhood pain and death in young adulthood, but thanks to medical advances, people with SCD now frequently survive into middle and older adulthood. Funding and resources for adults with SCD, however, remains limited. Adults would benefit from increased access to medical care, mental health care, and workforce development programming.

Goal: To address this gap in funding, the Indiana Sickle Cell Consortium (ISCC; a group of Indiana healthcare providers and community-based organizations) collaborated with people living with SCD and their families and caregivers in order to advocate for the creation of state funding to support workforce development and access to medical care, mental health care, and alternative forms for pain management.

Methods: ISCC members identified a legislator to serve as an SCD "champion," who authored and sponsored a bill that created funding for programs for adults with SCD. Grassroots advocacy efforts included letter writing, social media posts, advocacy training for patients and families, and a Sickle Cell

Advocacy Day held at the Indiana State Capitol. Approximately 150 providers, patients, family members and community members participated in advocacy efforts.

Conclusion: This two-year campaign culminated with the passage of a bill that provides \$250,000 in funding for programming for adults with SCD. The bill also directs the Indiana State Department of Health to carry out a needs assessment for people with SCD in Indiana. While this bill represents an important first step in improving health outcomes for adults with SCD, continued efforts are needed to reduce health disparities for people with SCD.

Session Type: Poster

Session Title: Substance Use to Exercise: Are We Moving From One Addiction to Another?

Session Number: Poster – Wednesday – We7

Submitting Authors: Dr. Anita Segó, MCHES

Co-Authors: Dr Denise M Demers, Dr. Duston Morris, Lisa Ray, Sarah Ray

Authors Bio: The research team consists of two experts from the field of addiction studies, a licensed social worker, three experienced researchers from the field of public health, and an experienced researcher from the field of psychology. The entire team is actively involved in teaching and/or working with university students on a daily basis. Two members of the research team hold Master's Degrees and other four members have doctoral degrees. All members of the research team have completed previous research, projects, or work in the field of addictions or counseling/mental health.

Chosen Sub-theme: Changing Outcomes: Health Education and the Continuum of Prevention and Care

Objectives: By the end of the session the participant will be able to summarize three similarities between exercise addiction and substance abuse.

By the end of the session the participant will be able to explain the relationship between exercise volume and binge drinking in university students in the South.

Keywords: Alcohol & Substance Abuse

Special Populations: Men, Women, Young Adults

Full Abstract Detail: Very little evidence addresses the relationship between substance use and exercise addiction among college students. A phenomenon referred to as “switching addictions” or substitute addictions is the substitution of one addictive behavioral pattern for another. The purpose of this study was to determine if there is any evidence of switching addictions among college students pursuant to substance use and exercise. A total of 824 college students completed a 36-item survey regarding substance use and views of exercise. Major findings included significant correlations between drug use and exercise volume, as well as, the perceived importance of exercise to students in relation to the degree of drug use. Binge drinking was also found to be associated with increased exercise. The relationships between substance use and exercise rendered significant findings which are demonstrated in this article. Recommendations for future research is also explored.

Keywords: Addiction; Alcohol; Drugs; Substance Use; Exercise.

Session Type: Poster

Session Title: Understanding Social Support Complexities for African American Mothers to Improve Breastfeeding Outcomes

Session Number: Poster – Wednesday – We8

Submitting Authors: Dr. Nicole Peritore

Authors Bio: Nicole Peritore is an Assistant Professor of Kinesiology at Augusta University. Her educational background combines exercise science, health promotion and connecting the two with health communication. She has worked to understand barriers to healthy actions such as healthy eating, physical activity, and breastfeeding. She has worked with the CDC 1614 grant in Kentucky to provide physical activity infrastructure to rural communities through assessment selection and installation to meet each community's unique needs. Making healthy choices is complex and involves more than individual choices, Dr. Peritore work is to recognize and study those barriers in order to enlighten ways to change them.

Chosen Sub-theme: Changing Outcomes: Health Education and the Continuum of Prevention and Care

Objectives: By the end of the session the participant will be able to differentiate between emotional, tangible, and informational breastfeeding social support offered to African American mothers. By the end of the session the participant will be able to summarize the positive and negative social support related to breastfeeding experienced by African American mothers' experience.

Keywords: Maternal & Child Health, Patient Education, Social Influence

Special Populations: Maternal & Infant Health, Minority Populations, Women

Full Abstract Detail: Examining the nature of social support in regards to breastfeeding for African American mothers could inform decision making toward sustaining or not sustaining that feeding choice. Social support, whether emotional, tangible or informational, is one way a mother adjusts to the "new normal" and the social influences could either encourage breastfeeding, or it may hinder it. The examination of how social support is enacted in interpersonal conversations may help identify social-cultural antecedents to breastfeeding or barriers which inhibit the practice. This study offers foundational understanding of the social support messages received by an African American mothers and provide a social-cultural communication framework useful for improving breastfeeding outcomes. Qualitative methods permitted the focus of this study to be on breastfeeding as a choice made among many options and one which can be influenced by various factors. Through the lens of the social ecological model, one can view the multifaceted nature of social influences on breastfeeding. Purposeful and snowball sampling were applied to gain participants (Group 1, n= 5; Group 2, n = 5; Group 3, n = 6). Thematic analysis was employed to examine various aspects of social support and categorized as positive / negative interactions. Positive emotional support was found from African American mother's peers, family, healthcare providers and strangers; negative emotional support from family and strangers. Positive tangible support discussed from partners and healthcare providers; negative tangible

support from family and peers. Positive emotional support found from peers, healthcare providers, and strangers; negative informational support discussed from family and healthcare providers. For breastfeeding, the implications for not breastfeeding reaches beyond the economic and physical health of an individual or household; indeed, the impact reaches the workplace and community. The examination of the social support and experiences African American mothers' have had offers insight to additional ways to improve the lagging breastfeeding outcomes. This study offers a unique lens into social support that may be influencing initiation and sustainment of breastfeeding among African American mothers and inform ways that healthcare providers can educate mothers in defending their choice to breastfeed.

Session Type: Poster

Session Title: “How do you define risk?”: Application of Motivational Interviewing and Vocal Cues to Motivate STI and HIV Testing.

Session Number: Poster – Wednesday – We9

Submitting Authors: Dr. Malynnda Johnson

Authors Bio: For the past decade, Dr. Johnson’s research has focused on young adult’s perceptions of risk for STIs and HIV, everyday communication about risky behaviors, as well as work in the area of media as a sex educator. She has published in various journals including Qualitative Health Research and has a book published on HIV narratives on television. She is currently co-writing a book on Health Communication with an emphasis on patient advocacy, and she is a board member of the Patient Advocacy Certification Board. She currently teaches at Indiana State University in the areas of health communication, public relations, and media studies. She is the program director to Indiana State University’s summer program for Research in Community Health.

Chosen Sub-theme: Changing Outcomes: Health Education and the Continuum of Prevention and Care

Objectives: By the end of the session the participant will/be able to:

1. understand ways verbal markers can be used as indicators for readiness to change behaviors.
2. apply methods of motivational interviewing to identify vocal cues and move patients towards HIV and STI testing.

Keywords: HIV/AIDS

Special Populations: Young Adults

Full Abstract Detail: Over 1 million people in the United States are living with human immunodeficiency virus (HIV)

and although the rates of infection have declined by 19% overall between 2005 and 2014, there

has been an 87% rise in infections among gay black and Latino youth and certain states have a

much higher incidence than others (CDC, 2015). There are simple measures a person can take to decrease the possibility of acquiring HIV infection such as consistent condom use and use of a new daily oral pill that dramatically lowers risk of transmission, but unless one’s status is known such efforts cannot be maximized. An estimated 1 in 8 persons who are infected with HIV do not know it (CDC, 2015) and the likelihood of unintentional spread as well as the delay in receiving lifesaving treatments pose significant public and personal health risk.

The Centers for Disease Control and Prevention (CDC) and the United States Preventive Services

Task Force (USPSTF) concur with similar strong recommendations to healthcare providers

regarding screening for HIV (Moyer & USPSTF, 2013). The USPSTF recommendation states that adolescents, adults (ages 15- 65) as well as all pregnant women should be screened for HIV. In other words, routine opt-out testing should be the norm in all healthcare settings. Clinician compliance with this recommendation is unclear, but studies suggest that there are many missed opportunities and that clinicians may misinterpret the recommendation as risk-based rather than routine testing (Dorell, Sutton, Oster, et al. 2011; Wong, Jordan, Malebranche, DeLaitch, Abravanel, Bermudez, & Baugh, 2013;).

Interestingly, clinical provider attributes and interpersonal skills were identified as successful motivators for people to have HIV testing but in other cases, they were identified as significant barriers to testing (Leblanc, Flores, Barroso, 2016). Many health models provide frameworks for understanding health behaviors, but the Transtheoretical Model (TTM) consistently has been found to be a reliable framework for understanding the steps toward behavior change (Hogue, Dauber, & Morgenstern, 2010). One of the most important challenges for those who seek to motivate behavior change is to first identify one's readiness to change. Applying TTM, once one's readiness is understood, medical providers and counselors are able to employ a variety of established modalities to motivate the cognitive processing of information, thus encouraging the translation of information into behavior change (Prochaska, Redding, Harlow, Rossi, & Velicer, 1994). Motivational interviewing (MI) is one such modality. Behavior change with regard to sexual health includes one's willingness to undergo screening as well as the adoption of healthy practices such as consistent condom use and discussion of status between partners.

Session Type: Poster

Session Title: PEN-3 Cultural Model: Identifying Effective Cultural Adaptations for Use in Obesity Lifestyle Interventions Targeting African American Women

Session Number: Poster – Wednesday – We10

Submitting Authors: Shelly-Ann Bowen, PhD

Co-Authors: Lillian Madrigal, Samara Sterling, PhD, Bhuvana Sukumar, PhD

Authors Bio: Dr. Bowen has expertise in conducting public health research and evaluation in chronic and infectious diseases. She has more than 15 years of experience in directing crosscutting Health Education Promotion/Health-Services Research program evaluation studies in, diabetes, breast cancer, and HIV/AIDS. She has provided program evaluation leadership in quality improvement in pediatric delivery of care, diabetes prevention/control, conducted community-based participatory evaluation research, coordinated multidisciplinary research teams and developed/implemented multiple mixed-method studies.

Chosen Sub-theme: Changing Approaches: Emerging Issues in Research Translation and Implementation

Objectives: Describe the main tenets of the PEN-3 cultural model as applied to behavioral lifestyle interventions in AA women.

Describe the importance of integrating a cultural framework in standard behavioral interventions when addressing weight loss and maintenance in African American women.

Keywords: Behavior Change/Theories, Health Behavior, Obesity

Special Populations: Minority Populations

Full Abstract Detail: African American (AA) women in the United States are disproportionately burdened by obesity. They are at higher risk for obesity-related comorbidities and experience higher rates of diabetes and associated cardiovascular complications when compared to Caucasian women. Modest weight loss improves markers of obesity-related comorbidities. However, few published studies demonstrate successful weight loss strategies that are effective with AA women participating in standard behavioral obesity treatment interventions. Cultural adaptations are recommended to improve obesity treatment programs, but studies report difficulty identifying salient cultural elements that influence weight loss outcomes. This presentation discusses how the PEN-3 cultural model can be used to identify cultural domains and elements that could potentially influence the effectiveness of lifestyle intervention studies designed to promote weight loss and maintenance in AA women. Preliminary literature review findings indicate that the intrinsic motivators for dietary and other behavioral changes may be associated with personal, familial, and cultural factors. For example, some cultural motivators for dietary change specific to AA women include: (1) a diagnosis that can interfere with quality of life and/or remind them of past family experiences (2) consideration of the potential effect that their obesity-related health challenges will have on loved ones; and (3) the availability of emotional and physical support of family and/or community members. To advance research and translation of weight

loss interventions among AA, we show that the integration of the PEN-3 model can centralize culture in lifestyle interventions that target both diet and physical activity, and forms of behavioral self-management.

Session Type: Poster

Session Title: National, State, and Local Partnerships for Car Seat Education

Session Number: Poster – Wednesday – We11

Submitting Authors: Mrs. Amanda Kay Jackson

Co-Authors: Zetta Jones, Alex McKeithan

Authors Bio: Amanda Jackson is the Atlanta Regional Coordinator with the Child Occupant Safety Project at the Georgia Department of Public Health. She has been a Child Passenger Safety (CPS) Instructor since February 2017 and a CPS technician May of 2016. Amanda has certified over 200 car seat technicians in Georgia and has educated over 150 caregivers on the correct selection, installation, and harnessing of their car seats.

Amanda received her Master of Public Health in Health Behavior in December of 2015 from the University of Alabama at Birmingham. Amanda received her Bachelor of Science in Health Promotion and Behavior in May of 2013 from the University of Georgia. Amanda is also the Membership Chair for the Georgia Chapter of SOPHE. Amanda is a Certified Health Education Specialist (CHES) and is Certified Public Health (CPH).

Chosen Sub-theme: Changing Perspectives: Leveraging Sectors, Engagement and Partnerships

Objectives: By the end of the session participants will be able to explain how partners at the national, state, and local levels supported the car seat education event in Albany, Georgia.

By the end of the session participants will be able to outline the needed steps to successfully plan a large-scale car seat education event.

Keywords: Child/Adolescent Health, Injury Prevention/Safety, Maternal & Child Health

Special Populations: Children & Adolescents, Maternal & Infant Health

Full Abstract Detail: INTRODUCTION: The Georgia Department of Public Health's Child Occupant Safety Project is funded by the Governor's Office of Highway Safety. The COSP has eight regional coordinators across the state that focus on car seat initiatives in rural and for at-risk communities. The COSP coordinated with national, state, and local partners to plan a community car seat check to serve families in Albany, GA. This car seat check is unique because it started as a grassroots movement to educate the community with a large-scale impact on the importance of Child Passenger Safety. METHODS: The Program Specialist coordinated a car seat check event with the assistance from the Atlanta, Columbus, Jesup, and Macon Regional Coordinators. The Atlanta and Columbus Coordinators led a 3.5-day national CPST course to certify 15 local technicians to assist with the car seat check event. The caregivers registered at the Health Department, DFACS, Family Connections, and Head Start. The Regional Coordinators delivered the education before the distribution of car seats. The event ran for a total of seven hours, the certification class lasted a total of 28 hours, and the Program Specialist and Coordinators needed 40 hours to prepare for the CSC event. In total, 65 working hours were needed to implement the community education event. RESULTS: 11 CPST's, 5 CPST-I's and 8 volunteers assisted with the car seat check. The following agencies provided CPSTs: GA DPH, Albany PD, Albany FD,

Dougherty CO HD, and Three Guys Albany. NHTSA Region 4 provided 1 CPST and 2 others who checked for recalls on vehicles. 32 Caregivers were trained, and 55 children were assisted. The local non-profit, Three Guys Albany, provided 53 car seats to families. The materials distributed included: 53 car seats, 32 educational packets for caregivers and 30 CPS coloring pages for children. DISCUSSION: The Community Guide recommends with strong evidence that education plus distribution increases car seat use. When car seats are used correctly, it reduces the risk of fatal injury by 71% for infants and 54% for toddlers (NHTSA, 2018). The Albany, GA community car seat check is one example of the COSP leveraging partnerships at multiple levels across Georgia to ensure all children are traveling safely in their vehicles.

Session Type: Poster

Session Title: Health Communication Workforce Development in Preparedness and Safety Messaging for Hurricanes, Flooding and Similar Disasters through Virtual Training

Session Number: Poster – Wednesday – We12

Submitting Authors: Dr. Nykiconia Preacely

Co-Authors: Rebecca Noe, Sabrina Riera, Germaine Vazquez

Authors Bio: Dr. Preacely has more than 18 years of public health experience at local, state, federal, and international levels. She has served as an epidemiologist with the Centers for Disease Control and Prevention (CDC) for 11 years. She worked in Global Health supporting Field Epidemiology and Laboratory Training Programs based in Africa in epidemiology workforce development. In CDC's Division of State and Local Readiness (DSLRL) she was a Career Epidemiology Field Officer assigned to the Mississippi State Department of Health where she strengthened public health surveillance and emergency preparedness and response. She now serves as an acting team lead in DSLRL's Capacity Building Branch providing emergency preparedness and response technical assistance and training to state, and local health departments. She is certified in Public Health and is a Certified Emergency Disaster Professional.

Chosen Sub-theme: Changing Systems: Policy, Advocacy, Communications

Objectives: 1. Describe three strategies used for engaging state and local public health partners in a virtual health communications workshop.

2. Discuss the benefits of using CDC's Preparedness and Safety Messaging for Hurricanes, Flooding, and Similar Disasters Key Message Resource to respond to public health emergencies.

Keywords: Disaster & Emergency Preparedness, Technical Assistance, Workforce

Special Populations: Mid-Career Professionals, New Professionals, Seasoned Professionals

Full Abstract Detail: Hurricanes, floods, and similar disasters can have long-lasting effects. Affected communities may deal with challenging physical, mental, emotional, and environmental consequences. In response to three major hurricanes in the United States and its territories in 2017, Centers for Disease Control and Prevention (CDC) emergency preparedness subject matter experts developed a communications resource that included public health and safety key messages for all phases of a hurricane. The resource ensured all of CDC's messages were consistent and allowed for rapid messaging on a variety of hazards during the prolonged response. The resource was used extensively by CDC and was distributed to health departments and partners in the affected jurisdictions. The success of this resource in strengthening CDC's capacity to communicate health messages promptly led to the development of an expanded national preparedness resource, "Preparedness and Safety Messaging for Hurricanes, Flooding, and Similar Disasters." It includes messages on food safety, carbon monoxide poisoning, waterborne diseases and mold. Available on CDC's website in English and Spanish, this resource can help local responders quickly create and adapt health communication products for communities affected by hurricanes or extreme flooding. To bring further awareness of the document's

robust capabilities, CDC developed a virtual training workshop on how to use the resource to promptly identify and develop effective and relevant key communication messages during an emergency. Through a series of instructor-led workshops, CDC communication experts provided public information officers and other communication professionals from around the country guidance on how to use the key messages resource during preparedness, response, and recovery activities associated with hurricanes and extreme flooding. Using Zoom technology, CDC experts engaged participants in group and individual exercises to allow for practice using the preparedness resource to develop effective preparedness and response messages. Forty-six health communication professionals representing 26 states and the District of Columbia were provided technical assistance to identify and tailor key messages by topic from the resource for use within different types of media. From June 2018 to May 2019, the resource was downloaded 4,957 times from the CDC website. The workshop can help participants improve their ability to quickly develop communication products for diverse audiences and disseminate them before, during, and after a disaster. The hands-on trainings provides participants the opportunity to become familiar with using the resource, practice identifying information on different topics, and develop messaging for various communication channels. Public health and emergency management partners can use this resource to strengthen their communication plans that address hazards expected from extreme weather involving strong wind and high water.

Session Type: Poster

Session Title: African American Women's Health: Testing the multi-theory model (MTM) intervention design to increase fruits and vegetables consumption

Session Number: Poster – Wednesday – We13

Submitting Authors: LaVonne Denise Brown

Co-Authors: Dr. Mario Azevedo, Dr. Russell L Bennett, Sophia S Leggett, PhD, Dr Manoj Sharma

Authors Bio: As a Doctoral Candidate in The School of Public Health at Jackson State University, I have worked under the direction of Drs. Sharma, Leggett and Bennett. Collectively these professors have over 50 years of experience in public health in areas of Nutrition, Epidemiology, Environmental Health and Health Policy. My areas of interest include health promotion, women's health, rural health and advocacy. I have conducted a cross sectional preliminary study and interventional study utilizing the Multi-theory model (MTM) of health behavior change. I have also successfully met all academic requirements in Health Education Health Promotion while maintaining a 3.9/4.0 grade point average.

Chosen Sub-theme: Changing Outcomes: Health Education and the Continuum of Prevention and Care

Objectives: By the end of the session, the participant will be able to describe the use of the multi-theory model of health behavior change to predict fruits and vegetable consumption.

By the end of the session, the participant will be able to design a fruit and vegetable consumption intervention based on the multi-theory model of health behavior change.

Keywords: Health Behavior, Women's Health

Special Populations: Disadvantaged Populations, Minority Populations, Women

Full Abstract Detail: Lack of fruits and vegetables consumption is associated with high prevalence of chronic diseases such as cancers, heart disease and diabetes. Evidence based research has also associated a lack of fruits and vegetables consumption with medical conditions faced by women such as uterine fibroids and endometriosis. African American women suffer disproportionately from the fore-mentioned illnesses. Recognizing an increase of fruits and vegetables consumption among this priority group is essential for improving overall health and well-being of women, families and communities. In health behavior research, theoretical approaches such as knowledge-based lectures have historically driven methodological teaching strategies. Most recently, an innovative robust fourth-generation multi-theory (MTM) model of health behavior change has evolved. For this study, the MTM was utilized to conceptualize behavior modification of fruits and vegetables consumption. The MTM has proven to be an innovative, culturally adaptable robust behavior change model easily modifiable to various groups and populations. The objective of this research was to test the efficacy of an intervention utilizing the MTM to initiate and maintain fruits and vegetables consumption behavior among African American women in Mississippi. This study utilized a randomized controlled design with repeated measures at baseline, post intervention and an eight-week follow-up. The experimental group, SAVOR (Sisters Adding Vegetables+Fruits=Optimal Results) provided the MTM based intervention focused on the

initiation constructs of participatory dialogue, behavioral confidence and changes in the physical environment and the sustenance constructs of emotional transformation, practice for change and changes in the social environment. The comparison intervention (n=30) received an equivalent, first generation, knowledge-based intervention. The sample size was calculated using G*power. The samples were recruited from churches in the Central Mississippi area of Jackson, Mississippi. IRB was obtained and approved from Jackson State University. Expected results are forthcoming.

Session Type: Poster

Session Title: Using a Systematic Approach to Health Education: The CDC TB Program Managers' Course

Session Number: Poster – Wednesday – We14

Submitting Authors: Peri Hopkins

Co-Authors: Sarah Segerlind, Carissa Sera-Josef

Authors Bio: Peri Hopkins, MPH, Health Education Specialist, CDC Division of TB Elimination. Ms. Hopkins has been in this position since 2008. In addition to developing TB health education materials targeted to health care providers and persons with or at high risk for TB, she plans TB workshops, prepares reports, posters and presentations, and provides consultation on TB training, education, and communication issues.

Chosen Sub-theme: Changing Minds: The Art and Science of Teaching in Communities and Professional Preparation

Objectives: Describe course evaluation strategies

Describe strategies for ensuring a quality training

Keywords: Career Development/Professional, Workforce

Special Populations: Mid-Career Professionals, New Professionals

Full Abstract Detail: Background

For centuries, tuberculosis (TB) has had devastating health, social, and economic consequences for patients, families, and economies. In the United States, TB disproportionality affects underserved populations. The mission of the CDC Division of TB Elimination (DTBE) is to promote health and quality of life by preventing, controlling, and eventually eliminating TB in the United States.

One key strategy to eliminate TB is the education and training of professional staff. To help achieve this activity, DTBE hosts an annual 4-day training course designed to improve the planning and managerial capabilities of new TB program managers throughout the United States. Specifically, the target audience includes TB controllers, program managers, public health advisors, and nurse consultants with programmatic responsibilities.

Methods

The systematic health education process is used to develop, implement, and evaluate the course (i.e., needs assessment; development; pilot-testing; implementation; and assessing effectiveness). DTBE conducted a needs assessment in 2012 to substantially revise course content and meet the needs of the target audience.

To conduct the TB Program Managers' Course effectively, science-based adult learning principles are used to create course content and activities. Instructional methodologies consist of group discussions, lectures, and group exercises. The course covers key elements of managing a TB program, including cooperative agreements, surveillance, program evaluation, partnerships, genotyping, contact

investigation, and outbreaks. Course evaluation strategies include a pre and post-test, session evaluations, and a six-month follow-up assessment. Evaluation results determine the effectiveness of the course and identify areas for improvement. Additionally, participants are asked to identify other topics that could be included in the course. Each year, the planning team reviews evaluation results and modifies the training as needed.

Results

From 2013-2017, there were over 130 program staff who participated in the TB Program Managers' Course. Participants included individuals from 42 states and Puerto Rico, the U.S. Virgin Islands, and the U.S.-affiliated Pacific Islands. Overall, evaluations were positive and show participants were satisfied with the course. Additionally, the participants had an increase in TB knowledge as indicated from the pre and post-tests results.

Results from the six-month follow-up assessment indicate that a majority of respondents had made changes in their program and reported that the course strengthened their TB program management skills.

Conclusion

The systematic approach to health education ensures quality training of TB program staff and evaluation is a key step in this process. Overall, evaluation results indicate the course improved participants' TB knowledge and skills related to program management.

Session Type: Poster

Session Title: Lessons Learned from Delivering a Faith-Based Weight Loss Group Health Coaching Program in an Underserved Community

Session Number: Poster – Wednesday – We15

Submitting Authors: Christian B Gabarda

Co-Authors: Ms Amanda R Gabarda

Authors Bio: Mr. Christian Gabarda is one of the Lifestyle Health Coaching Supervisors for UPMC Health Plan. He currently manages daily operations in the Health Management department and call center with a primary focus on lifestyle management and triage. He has a Bachelor of Science in Kinesiology and Exercise Science from the University of Pittsburgh, a Master of Science in Exercise Science and Health Promotion from California University of Pennsylvania, and is currently working on his Master of Business Administration with a focus in Project Management from Carlow University. He currently holds certifications in Group Exercise, UPMC Project Management, Lean Six Sigma, and Certified Worksite Wellness Specialist. Mr. Gabarda has over 10 years of experience in group fitness, health coaching, and personal training.

Chosen Sub-theme: Changing Perspectives: Leveraging Sectors, Engagement and Partnerships

Objectives: Describe the benefits of church-based health promotion programs and how they can positively impact the community's health and engagement.

Discuss lessons learned from a weight loss group health coaching program paired with online peer support in a faith-based setting and the barriers and facilitators to engagement, program participation, and program completion.

Keywords: Advocacy, Behavior Change/Theories, Community Health

Special Populations: Disadvantaged Populations, Mid-Career Professionals, Seasoned Professionals

Full Abstract Detail: The past few decades have given rise to preventable chronic diseases that result from unhealthy behaviors. Over the last three decades, there has been increasing attention to the role that faith-based organizations can have in promoting health, particularly among underserved populations. Across many communities, especially in vulnerable populations, churches can serve as a hub for relevant and culturally appropriate wellness programming and resources. Church based health promotion and wellness programs have potential for increasing access and reach, reducing health disparities, and improving health outcomes. From a socioecological perspective, churches can greatly impact the congregation's behaviors at multiple levels of change, specifically individual, interpersonal, and community. Even though faith-based settings have many benefits, there can also be many barriers to successful program design and implementation. Understanding these facilitators and barriers across wellness program promotion, engagement, and retention can help public health practitioners successfully launch their campaigns and programming. The "New Hope New You" was an 8-week weight-loss health coaching group program delivered in a church setting. The program included a baseline assessment of behaviors and goals for increased awareness of habits and areas for

improvement; weekly group coaching sessions (1 hour) delivered by National Board-Certified Health Coaches; educational materials based off the Diabetes Prevention Program; and an optional on-line Facebook peer-support group. The program used the socioecological model as a theoretical foundation with tactics deployed for individual, interpersonal, and organizational levels of change. At the individual level the program helped participants to understand their health risk and develop awareness of targeted areas for change; at the interpersonal level, the program was delivered in a group setting with an option for continued support through an online group; and at the organizational level the program targeted a greater awareness and understanding of health in the congregation. Facilitators to participation included pastoral level support (and participation), being offered immediately after church, free room for sessions, volunteer facilitators, ongoing support outside group for those who opted into the peer support group, and families participating together. Barriers or limiters of program participation included a small congregation size (to recruit), transportation (carpooling), stage of change of participants (program intensity) and competing after-church events (family & church). This presentation will highlight the program, approach, and lessons learned from the promotion and execution of the program and recommendations for other public health professionals interested in offering a faith-based wellness program.

Session Type: Poster

Session Title: Institutional ethical responsibilities in addressing violence prevention: What do academics think?

Session Number: Poster – Wednesday – We16

Submitting Authors: Sely-Ann Ayiesha Headley

Co-Authors: Dr Amar S Kanekar, Shanna Livermore, MPH, MCHES®, FRSPH, Dr Jody L Vogelzang, RDN, CHES, FAND, Gayle Walter, PhD, MPH, CHES

Authors Bio: Sely-Ann Headley holds a Master's in Public Health, with an emphasis in epidemiology from Northwest Ohio consortium of public health (Bowling Green State Univ and Univ of Toledo). She is currently pursuing a Ph.D. at the Uni of Toledo. She is currently serving as co-chair of the SOPHE ethics committee and also serving on the Mass Violence Taskforce at the Univ of Toledo.

Chosen Sub-theme: Changing Approaches: Emerging Issues in Research Translation and Implementation

Objectives: Discuss assumptions of faculty and staff responsibilities in violent campus situations and Analyze safety measures in the context of privacy and autonomy.

Appraise mental health promotion strategies among perpetrators of violence and Compile a series of items needed to help witnesses and victims to violence

Keywords: Disaster & Emergency Preparedness, Violent Behavior/Violent Prevention, Worksite Safety & Health

Special Populations: Mid-Career Professionals, New Professionals, Seasoned Professionals

Full Abstract Detail: The U.S. has experienced an increase in hybrid targeted violence (HTV) in academic institutions. HTV is intentional use of force to cause physical injury or death to specifically identified population using multifaceted conventional tactics and weapons .

According to the FBI, in the U.S., between 2000 and 2013, there was an average of 11.4 active shooting incidents (ASIs) each year; 20 incidents each in 2014, 2015, and 2016; 30 in 2017; and 27 in 2018. According to the study of Global Burden of Diseases, Injuries and Risk Factors, in 2016, more than 250,000 people worldwide died as a result of firearms, and half of those deaths came from six nations, including the U.S., which ranked second. Also, between 2009 and 2018, there were 57 times as many shootings in U.S. academic institutions, compared to major industrialized nations combined.

A significant portion of ASIs in the U.S. occurred in educational institutions. Also increased bomb threats and perpetrators using conventional weapons has been documented.

Given the rise of violence in academic institutions, questions about ethical responsibilities of faculty and university administration have been raised. Specifically regarding prevention of HTVs and mental health care needed by witnesses or victims, particularly mental health promotion strategies . Scope and practicality of institution-wide training has also been called into question based on necessity and validity of trainings that often have varying content.

Several sources provide information to faculty and students on how to function in dangerous and violent situations. But several of these suggestions are unrealistic in college/university buildings built a century ago i.e. locking classrooms from inside or, new buildings full of high glass windows provide problems in attempting to implement the recommendation to cover glass or stay away from windows. The diversity of buildings on campus indicates that academic institutions should provide building specific training to maximize student safety and faculty confidence.

In addition to knowing what to do in a violent situation, academic institutions are investigating increased camera usage in buildings and offices and installing microphones with algorithms to detect stress and anger that often preceded violence. These safety measures raise ethical issues regarding privacy and autonomy.

This session's purpose is to explore existing and emerging issues regarding violence prevention, particularly at higher education institutions. We also want to discuss ethical responsibilities of institutions from a prism of ethical theories and how they delineate these issues as they surface time and again. Finally, we anticipate audience participation through brainstorming and discussion of violence prevention ideas and strategies among academics and ways of constituting core policies across various institutions which align with these ethical principles

Session Type: Poster

Session Title: Title: A Longitudinal Photovoice Exploration: Linking science to the social justice and health promotion needs of women refugees from the Democratic Republic of Congo in the U.S.

Session Number: Poster – Wednesday – We17

Submitting Authors: Dr. Shannon McMorrow

Co-Authors: Dr. Jyotika Saksena

Authors Bio: Dr. McMorrow earned her MPH in Community Health Education in 2004 and her Ph.D. in Interdisciplinary Health Sciences in 2012. She has worked as a community health education practitioner and academic for over 20 years in diverse settings including multiple U.S. states, Belize, and Uganda. Since 2012, she has been the PI or Co-PI on multiple, funded studies utilizing community-based research to improve public health education including several studies utilizing the Photovoice method.

Chosen Sub-theme: Changing Approaches: Emerging Issues in Research Translation and Implementation

Objectives: By the end of the session the participant will be able to:

1. Describe how and why Photovoice is a good method for need and capacity assessment with refugee populations
2. List the steps for conducting a Photovoice research assessment with refugee populations.
3. Discuss the findings of notable capacities and barriers for the population of study and the implications for planning effective health education for women from DRC or similar groups in the U.S.

Keywords: Global Health, Immigration Health, Women's Health

Special Populations: Global/International Populations, Minority Populations, Women

Full Abstract Detail: The health of refugees and migrants is emerging as an urgent public health issue. In particular, people fleeing conflicts in the Democratic Republic of Congo (DRC) have been a rapidly growing refugee group in the U.S. for over ten years. In 2018, DRC was the leading country of origin for all refugees resettled in the U.S. New nationality groups such as this one often experience health inequities and live on the margins of society presenting rapidly emerging challenges and opportunities for public health educators to engage in global health work “at home”. Challenges can be amplified for women refugees due to a multitude of reasons including gender inequities that sometimes underlie limited education, literacy, and access to employment.

Within this context, we conducted a longitudinal study using Photovoice with women refugees from DRC in Indiana in 2016 and 2019 to generate evidence to improve health education practice for this population in domestic settings. Sixteen women participated in a six-session Photovoice study in 2016 to assess baseline perceptions, experiences, assets, and needs related to health and healthcare. In 2019, ten of the same women participated in a two-session Photovoice study to assess the same areas and determine what, if anything, had changed. This presentation will include a brief overview of methods and findings from 2016 before centering on the methods, findings, and recommendations from data

collection in 2019. The 2019 study was a qualitative study employing multiple methods of data collection including interviewer administered questionnaires, an audio-recorded traditional focus group, and an audio-recorded focus group applying the Photovoice method, which has the dual purposes of empowering participants and offering a window into life from the participants' perspectives. Data analysis included initial thematic analysis of structured interviews, focus group transcripts, and photos conducted independently by the co-authors using a combination of inductive and deductive coding. The inductive portion included line by line, open coding to ensure the capture of brand new data that may emerge in 2019. Investigators reviewed each other's independent analyses to compare, contrast, and confirm the findings. Key findings that will be shared in this presentation include health and healthcare as a major theme encompassing ongoing barriers, notable assets and supports, and opportunities for improvements in health promotion and care for this population. Sub-themes were food and nutrition, ongoing barriers with health systems, managing pregnancy, and mental health and ongoing trauma triggers. Data suggested barriers were both structural and cultural in nature and our presentation will conclude with a discussion of recommendations for health education and advocacy to address these barriers in order to better link science to the social justice and health promotion needs of the growing numbers of women refugees from DRC.

Session Type: Poster

Session Title: Creating an Educational Pipeline to Promote Health Education/Promotion to Employers using Academic Internship Programs

Session Number: Poster – Wednesday – We18

Submitting Authors: Dr. Beth H Chaney

Co-Authors: Dr. Kadi R Bliss, Ellen Edmonds, Melissa Opp

Authors Bio: Beth H. Chaney, Ph.D., MCHES is an Associate Professor in the Department of Health Education and Promotion, at East Carolina University (ECU). Dr. Chaney received her Ph.D. in Health Education from Texas A&M University in August 2006. She currently serves as the Marketing Chair for the National Commission for Health Education Credentialing, Inc. (NCHEC). Dr. Chaney has published over 80 peer-reviewed journal articles, with funding from the U.S. Department of Education, UF's Clinical and Translational Science Institute, Pro-Change Behavior Systems, and the American Cancer Society. In addition, Dr. Chaney has presented over 100 presentations at national, state, and regional conferences.

Chosen Sub-theme: Changing Perspectives: Leveraging Sectors, Engagement and Partnerships

Objectives: Describe a partnership program with NCHEC and academic institutions to deliver information to employers.

Discuss findings from an internship coordinator pilot program to educate employers on the health education field and certification programs.

Keywords: Partnerships/Coalitions, University/College, Workforce

Special Populations: Mid-Career Professionals, New Professionals, Seasoned Professionals

Full Abstract Detail: The National Commission for Health Education Credentialing, Inc. (NCHEC) is the sole certifying agency in the field of health education and promotion. NCHEC works to enhance professional practice by certifying health education specialists, promoting professional development, and strengthening professional preparation and practice. These efforts include enhancing recognition of the field, as well as the Certified Health Education Specialist (CHES®) and Master Certified Health Education Specialist (MCHES®) credentials among a variety of populations, including employers who seek to hire in health education/promotion positions. Currently, NCHEC is implementing a pilot program with five partnering, academic institutions to create a pipeline of educational efforts regarding the certification programs to employers who hire health education specialists. The program is designed to reach employer groups through health education internship programs housed in the academic units. Internship coordinators are partnering with NCHEC to provide educational materials to supervisors at each internship site for students enrolled in their health education/promotion degree programs. Collectively, these efforts will 1) expand the reach of NCHEC's message and services to the targeted employer audience, 2) highlight the impactful work of the field to employers who have the ability to hire for health education/promotion positions, and 3) create an educational pipeline from partnering institutions to the worksites for the purpose of promoting the field and the certification programs.

Evaluation results of the pilot program will be presented during the presentation, along with specific partnership accomplishments and plans for expanding the program in the future.

Session Type: Poster

Session Title: Medication assisted treatment in the rural United States: Results from a systematic review

Session Number: Poster – Wednesday – We19

Submitting Authors: John Bresett

Co-Authors: Dr. Aaron J Diehr

Authors Bio: Obtained B.A. in Anthropology and M.S. in Community Health from the State University of New York at Potsdam. Currently Pursuing a P.hD from Southern Illinois University at Carbondale for Health Education. Background in substance abuse topics. Practiced as a substance abuse counselor in a rural setting for two years. Worked in substance abuse prevention briefly, and has a background in nutrition education. Current research interests are on the opioid epidemic, disease transmission, and harm reduction practices.

Chosen Sub-theme: Changing Outcomes: Health Education and the Continuum of Prevention and Care

Objectives: 1.By the end of the presentation, participants will be able to discuss physician-side barriers to prescribing medication assisted treatment (MAT) in rural areas.

2.By the end of the presentation, participants will be able to identify rural-specific barriers to studying MAT reach and effectiveness

Keywords: Alcohol & Substance Abuse, Rural Health, Workforce

Special Populations: Disadvantaged Populations

Full Abstract Detail: Introduction: Effects from the opioid epidemic continue to play a detrimental role in the United States, with nearly 400,000 individuals dying from overdoses of illicit and prescription opioids from 1999 to 2017 (CDC, 2018). Medication assisted treatment (MAT) is one intervention to help treat individuals diagnosed with opioid use disorder, though the extent to which it is used in rural areas remains unclear. The current systematic review examines MAT use in the rural United States (US) to identify ongoing themes when treating opioid use disorder in rural areas.

Methods: A comprehensive review of the literature was conducted In February 2019 using various combinations of the terms rural, opioid* OR opiat*, MAT, Suboxone, Methadone, buprenorphine, or opioid substitution treatment using multiple databases in EBSCOhost (e.g., Academic Search Complete, CINAHL, MEDLINE, and PsycINFO, among others). The initial search yielded a total of 1,428 articles. Studies were included if they were conducted in the US, occurred after 2004, were cross-sectional, analyzed secondary data, collected primary data, or reported results of an intervention. Studies were excluded if they were conducted outside of the US or did not report data. After reviewing titles and abstracts, 37 full-text articles were downloaded for further assessment. After utilizing inclusion/exclusion guidelines, 11 articles remained.

Results: Primary emergent themes included a continued increase in rural areas having wavered physicians, or physicians who are granted access to prescribe buprenorphine to individuals with opioid

use disorder. Themes have shown that even with increases in rural areas, access in urban areas remains greater. The studies revealed multiple physician-side barriers to prescribing, the three most frequently listed being financial, lack of support services, and client diversion. Additionally, the present review found that several wavered physicians nonetheless choose not to prescribe buprenorphine. Lastly, studies indicated that a common limitation was not being able to assess the quality or impact of MAT services in rural areas.

Conclusion: Further research should identify the quality and effectiveness of MAT practices to determine if they are yielding desired results. There is frequent emphasis on creating greater access to treatment in rural settings, but this focus is irrelevant if physicians are not carrying out MAT practices beneficially. Additionally, if multiple wavered physicians in the US do not prescribe MAT, further research is needed to better understand why they choose not to prescribe. Furthermore, while many studies utilized secondary data, few reported primary data. Lastly, the present review suggests various barriers that might affect rural practices of MAT. Further research on possible interventions that might counteract these barriers would benefit future prescribers and treatment centers and could reduce stigmas associated with treatment practices.

Session Type: Poster

Session Title: Advancing the Science of Program Adaptation for Health Promotion

Session Number: Poster – Wednesday – We20

Submitting Authors: Lillian Madrigal

Co-Authors: Cam Escoffery, Maria E Fernandez, Dr. Patricia Dolan Mullen

Authors Bio: Authors Lillian Madrigal, Dr. Cam Escoffery, Dr. Maria E. Fernandez, and Dr. Pat Mullen are public health researchers who have studied the translation and implementation of public health innovations from a number of perspectives.

Chosen Sub-theme: Changing Approaches: Emerging Issues in Research Translation and Implementation

Objectives: Define program adaptation in program planning

Describe the different dimensions of definitions of program adaptation and a conceptual model of adaptation for practice.

Propose recommendations for future directions for further research in the adaptation of evidence-based interventions.

Keywords: Dissemination & Implementation, Evaluation and Measurement, Program Planning

Special Populations: Mid-Career Professionals, New Professionals, Seasoned Professionals

Full Abstract Detail: There is a push for translation of evidence-based public health interventions (EBIs) into local communities. These EBIs are often adapted to fit local population or context. Thus, adaptation can increase the sense of ownership of EBIs by implementing public health agencies and the fit of the EBI for the community, economic and political context thereby leading to increased adoption and sustainability. From a social justice perspective the adaption process is critical to increase the uptake of EBIs within disadvantaged populations so that these interventions may work to reduce or eliminate health disparities.

However, the current state of the science and practice reveal that there is no standard language or approach to adaptation of EBIs and while implementers are adapting EBIs they are often not documented. This lack of adaptation process and reporting limits the empirical evidence available and reduces the impact of successful translation efforts. To advance understanding of adaptation, more implementation research is needed through the documentation of the adaptation process and review of products that is used by both researchers and practitioners.

This presentation will describe the different dimensions of definitions of program adaptation and a conceptual model of adaptation for practice. We will present taxonomies of selected elements of adaptation found in the published literature. These include adaptation types, adaption frameworks, reasons for adaptation, and planned vs unplanned adaptations. The conceptual model we will introduce describes the process of selection of an evidence-based intervention to adaptation through its evaluation.

Lastly, we plan to explore the current research on measurement of dimensions for program adaptation of evidence-based interventions to scale and propose recommendations for future directions for further research in this area. This session aims to contribute to the necessary theoretical and evaluation approaches required for the successful translation and implementation of evidence-based health promotion interventions within various contexts, settings, and populations.

Session Type: Poster

Session Title: How Public Libraries Help Immigrants Adjust to Life in a New Country: A Systematic Review

Session Number: Poster – Wednesday – We21

Submitting Authors: Ms Suzanne Grossman

Co-Authors: Denise E. Agosto, Dr Carolyn C Cannuscio, ScD, Nancy Epstein, Dr. Ann C. Klassen

Authors Bio: Suzanne Grossman is currently a DrPH candidate at Drexel University in the Department of Community Health and Prevention. Her research explores how public libraries help immigrants adjust to life in the United States. Prior to her doctoral studies, Ms. Grossman led medical and community-based interpreter trainings at a non-profit organization. She has taught English as a foreign language for over a decade both in the United States and abroad. She has a Master of Science degree in Cultural Studies from the University of Edinburgh and a Bachelor of Arts from Smith College in Anthropology and Theatre.

Chosen Sub-theme: Changing Perspectives: Leveraging Sectors, Engagement and Partnerships

Objectives: 1. List at least 2 ways that public libraries help immigrants adjust to life in a new country as identified in the scholarly literature.

2. Describe at least 3 limitations in the scholarly literature on this topic and areas for future research.

Keywords: Community Health, Immigration Health, Social Determinants of Health

Special Populations: Global/International Populations

Full Abstract Detail: Background: The number of immigrants throughout the world has increased in recent years. Immigrants encounter barriers accessing information when navigating daily life in unfamiliar surroundings and a new language. Public library programs and services for immigrants (e.g., language classes) encourage social participation and community ties (e.g., develop friendships). As these programs and services support immigrants in their daily lives, libraries address the social determinants of health for immigrant patrons. While the intersection of public libraries, immigrants, and health is a relevant topic there are no existing systematic literature reviews that focus on the role of public libraries in providing health-related information and services to immigrant populations.

Objectives: The purpose of this research was to review findings from empirical studies of immigrant patrons and public libraries to understand how immigrants used public libraries and how public library services related to the social determinants of health for immigrant populations. Toward this end, a systematic literature review was conducted to document and critically analyze how public libraries help immigrants adjust to life in a new country.

Methods: Keyword searches were conducted of five databases to identify research papers that met the inclusion criteria: empirical studies published in English between 2000 and 2019 and related to immigrants' use of public libraries. Thematic coding was used to identify cross-cutting themes in the articles in the sample.

Results: Thirty articles were included in the analysis. Immigrant characteristics varied greatly among between articles. Immigrants commonly used public libraries for programs (e.g., language learning), collections (e.g., borrowing books), and services (e.g., asking librarians questions). Immigrant patrons often reported satisfaction with library programs, services, and collections in the language of the host country. A frequent criticism was the relevance and accessibility of collections in their heritage language. Library staff demographics often did not align with those of immigrant patrons. Health-related benefits for immigrants associated with library use included confidence and self-esteem, cultural integration and preservation, trust and relationships (e.g., making friends), community awareness and engagement, and political integration.

Limitations: Limitations included being restricted to the articles in the search engines, which may not be reflective of publications in languages other than English or activities that exist but are not the subject of academic publication.

Conclusions and implications of key findings: Public health and library and information science professionals should partner for future research and practice to incorporate ways to help immigrants adjust to life in a new country into library programming and to engage in participatory research.

Session Type: Poster

Session Title: Expanding a Tobacco Treatment Program in Pennsylvania's State Correctional Institutions

Session Number: Poster – Wednesday – We22

Submitting Authors: Livia Greenbacker, MS

Co-Authors: Ms. Lyn Becker, Barbara Caboot, Ms. Alexandra Ernst, Jennifer D Keith

Authors Bio: Livia Greenbacker is a Senior Project Manager in Public Health Management Corporation's (PHMC) Research & Evaluation Group. She earned a Master of Science in Experimental Psychology from Saint Joseph's University in 2011. She joined PHMC in January 2013 as a Research Associate and currently leads the evaluation of several projects related to chronic disease and tobacco prevention and control. Ms. Greenbacker has led the evaluation of the Pennsylvania and Illinois quitlines since October 2013 and has presented research findings related to reach, efficacy, and impact through oral and poster presentations at a number of national conferences, such as APHA, SOPHE, NCTOH, NAQC, and NSSTP.

Chosen Sub-theme: Changing Systems: Policy, Advocacy, Communications

Objectives: Recognize the importance of establishing agreed-upon priorities, timelines, and processes with all collaborative partners.

Apply feedback from key staff in deciding upon next steps for expansion following a pilot program.

Keywords: Program Planning, Smoking & Tobacco, Social Inequity

Special Populations: Disadvantaged Populations

Full Abstract Detail: Background: The Pennsylvania (PA) Division of Tobacco Prevention and Control (DTPC) delivers local tobacco treatment services across the Commonwealth through eight Regional Primary Contractors and the PA Free Quitline. Services are free and informed by best practices, including provision of nicotine replacement therapy. The Tobacco Control Legal Consortium estimates that 70-80% of incarcerated persons use tobacco. In 2015 DTPC, PA Free Quitline vendor National Jewish Health (NJH), and the PA Department of Corrections (DOC) partnered to enact a pilot program extending treatment services to incarcerated women at one of 24 state correctional institutions (SCIs) across the state. After evaluating this pilot, DTPC assembled a team consisting of staff from DOC, NJH, the PA Department of Drug and Alcohol Programs, and external evaluators to develop a toolkit for reference when expanding the program. In March 2019, the PA Secretary of Corrections announced that all PA SCIs would enact a tobacco-free policy effective July 1, 2019.

This presentation will describe the steps taken to expand this initiative from one pilot site to 16, build a team across agencies to develop resources and processes, gain buy-in from top decision makers, and implement the program ahead of the new tobacco-free policy. Facilitators for success and strategies used to overcome challenges will also be discussed.

Method: Monthly conference calls were held with representatives from each partner throughout the development of the toolkit. DTPC and DOC staff worked closely to adapt Quitline service provision processes in the toolkit to an in-person treatment format in 16 SCIs. Evaluators adapted intake and end-

of-class forms based on guidance from the toolkit to collect feedback from SCI program participants during expansion.

Results: A total of 14 participants received treatment through the Quitline pilot program in 2015. Partners used the pilot evaluation to inform expansion of treatment to collectively address tobacco use and incarcerated individuals' health. Decisions were made by the group regarding processes for implementation, recruitment, service delivery, alternative treatment options, and additional supports to provide participants. The announcement that all PA SCIs would go tobacco-free catalyzed the implementation of the expanded initiative to provide additional support beginning May 2019. Interest in services has been high among the incarcerated population.

Conclusion: A toolkit was created for participating correctional facilities to have a step-by-step reference for implementation and troubleshooting and to outline requirements for all sites and opportunities for tailored implementation in recognition of varied site management and needs. Data from the first six months of expanded implementation will be included in this presentation. DTPC and DOC will review the findings from this expanded implementation to determine the feasibility of maintaining this program in SCIs.

Session Type: Poster

Session Title: The Impact of the HUD Smokefree Policy on PA Free Quitline and PA Local Cessation Programming among Residents in Public Housing

Session Number: Poster – Wednesday – We23

Submitting Authors: Ms. Alexandra Ernst

Co-Authors: Duane Barksdale, Ms. Lyn Becker, Barbara Caboot, Livia Greenbacker, MS Susan McLain

Authors Bio: Duane Barksdale is a Research Assistant in Public Health Management Corporation's (PHMC) Research & Evaluation Group. He earned a Bachelor's of Arts in Health & Human Biology and Africana Studies in 2017. He joined PHMC in October 2017, and currently supports the evaluation of several projects related to chronic disease and tobacco prevention and control. Mr. Barksdale has presented on PHMC's efforts in evaluating tobacco prevention and control projects at the Xavier University of Louisiana Health Disparities Conference in New Orleans, LA in 2018 and 2019.

Chosen Sub-theme: Changing Systems: Policy, Advocacy, Communications

Objectives: Examine the impact of the 2018 HUD smokefree policy on PA Free Quitline call volume and enrollment, and PA local cessation programming enrollment and effectiveness.

Describe the different combinations of service utilization of PA Free Quitline callers living in public housing.

Keywords: Program Planning, Smoking & Tobacco, Social Inequity

Special Populations: Children & Adolescents, Disadvantaged Populations, Older Adults

Full Abstract Detail: Background: In July 2018, the U.S. Department of Housing and Urban Development (HUD) required all Public Housing Agencies (PHA) to implement a smokefree policy. A 2017 study found one-third of adults living in public or assisted housing were current cigarette smokers, and are more vulnerable to smoking related outcomes and secondhand smoke (Helms, King, & Ashley, 2017). The Pennsylvania (PA) Division of Tobacco Prevention and Control (DTPC) within the PA Department of Health currently offers in-person local tobacco cessation programming and through the PA Free Quitline provides telephone-based cessation counseling and support to PA tobacco users and, when possible, nicotine replacement therapy (NRT) to adults. Since 2012 for the PA Free Quitline, and 2014 for local cessation programming, clients answer the question, "Do you currently live in public housing (sometimes called subsidized housing)?" This presentation will describe the impact of the policy on PA Free Quitline call volume and service utilization, as well as local cessation program enrollment and effectiveness among PA PHA residents.

Method: Quitline state fiscal year (SFY) intake and service use data were provided by PA Free Quitline's vendor, National Jewish Health. At six months, a third party conducted follow-up surveys with participants who completed intake to assess satisfaction and quit status. DTPC Regional Primary Contractors report local cessation program data quarterly; data are collected at intake, at the end of the program, and at 30-days and six months post-completion.

Results: To date, 14.5% of Quitline callers and 11.3% of local cessation program enrollees in SFY 2018/2019 report living in public housing. Quitline callers living in public housing are no more or less likely to enroll in services compared to all callers; however, those who enroll complete significantly more counseling calls than enrollees living elsewhere ($p < .009$), but are significantly less likely to receive NRT from the Quitline ($p < .002$). Six-month follow-up data collected from callers who completed intake in SFY 2017/2018 reveal a significantly lower proportion of callers living in public housing (26.3%) had quit successfully as compared to callers living elsewhere (31.9%, $p = .03$). Six-month follow-up data collected from local cessation program enrollees in SFY 2017/2018 show no significant difference in quit rates between those living in public housing and those living elsewhere ($p = .06$).

Conclusion: Moving forward, PA DTPC will continue outreach to PHA residents for cessation support, and continue to examine service use and outcomes. There are opportunities to maximize service delivery for clients living in public housing, specifically related to NRT delivery. This presentation will compare data trends observed in PA Free Quitline and local cessation program enrollment in services and call volume, along with outreach strategies used before and after the HUD smokefree policy went into effect.

Session Type: Poster

Session Title: The Effectiveness of the Community Navigator Model in Asian Populations of Georgia

Session Number: Poster – Wednesday – We24

Submitting Authors: Ms. Smitha Ahamed

Co-Authors: Ms. Christine So

Authors Bio: Smitha Ahamed, received her Master of Arts in non-profit organizations and a Master of Public Health—Health Policy & Management from The University of Georgia. Ms. Ahamed received her Bachelor of Science in Health Promotion from The University of Georgia. Ms. Ahamed specializes in health promotion, health policy, health and nonprofit management, program development, fundraising, grant writing, multi-sector coalition/partnership building, and public health workforce development. Ms. Ahamed has been successful in expanding access to cancer screening services, promoting primary and secondary cancer prevention interventions and survivorship activities throughout east Georgia through her work as the Executive Vice President at the East Georgia Cancer Coalition. Ms. Ahamed is committed to her work in public health and to reducing health disparities in Georgia.

Chosen Sub-theme: Changing Outcomes: Health Education and the Continuum of Prevention and Care

Objectives: 1. By the end of the session, participants will be able to describe strategies used for effectively reaching Asian populations

2. By the end of the session, participants should be able to assess the impact of the community navigator program described in the session.

Keywords: Cancer, Empowerment, Health Disparities

Special Populations: Minority Populations

Full Abstract Detail: INTRODUCTION: Cancer is the leading cause of death for men and women of Asian populations in the U.S. The cancer incidence rate among the Asian/Pacific Islander (API) population in Georgia is 258.1 per 100,000 persons. Cancer screening rates in Asians have lagged despite rapid increases of health insurance coverage. This is associated with language and cultural barriers minority populations such as Asians face when accessing and utilizing care as well as a lack of knowledge of available resources.

METHODS: East Georgia Cancer Coalition will expand the community navigator program to reach underserved Asian populations in Georgia and provide cancer prevention education. EGCC will acquire, train, and certify new community navigators on cultural competency, cancer education, and currently available low to no cost cancer resources. These navigators will deliver easy-to-understand messages about existing resources through multimedia health education materials (brochures, radio PSAs, social media posts, etc.) that are tailored to different Asian subgroups. Participants will complete baseline and follow-up surveys to measure change in knowledge of cancer screenings and change in behavior towards screenings. In order to measure the effectiveness of this expanded community navigator program and if the participants felt a sense of health literacy empowerment, we will analyze differences

in knowledge and behavior towards cancer screenings using the pre-post surveys. Additionally, we will compare the number of screenings completed before and after the implementation of the program to assess

RESULTS: Preliminary, anecdotal results have confirmed the necessity of health education, screening, and navigation in the target population. We have certified 7 community navigators over the course of a year. All ten of our educational brochures had been translated from English to Korean, Mandarin, Vietnamese, Japanese, and Hindi. Approximately 12,217 of these brochures were given out at multiple events. Two radio stations with a combined reach of 300,000 people have regularly been playing our educational PSAs. Approximately 494 people follow our social media account that regularly posts educational information. Two thousand one hundred ninety mammograms and colorectal screenings were conducted that would not have occurred without this program. This year, FIT tests provided with EGCC navigator/lay health worker follow up had a completion rate 59.95% greater than those provided without navigator/lay health worker services.

Session Type: Poster

Session Title: Hands on Smiles – Bridging the Gap between Dental Professionals and Populations with Intellectual Disabilities

Session Number: Poster – Wednesday – We25

Submitting Authors: Melissa Miller

Authors Bio: Melissa Miller is a Certified Registered Dental Hygienist, and has been an adjunct faculty member at Hillsborough Community College in Tampa, FL since 2017, where she teaches both clinical and didactic courses in the dental hygiene program. She is a recent graduate from the University of South Florida, earning her MPH in Public Health Education, as well as her CPH and CHES certification. Melissa is also a volunteer Clinical Coordinator for Special Olympics of Florida, and is passionate about providing oral health care and education to underserved populations.

Chosen Sub-theme: Changing Outcomes: Health Education and the Continuum of Prevention and Care

Objectives: By the end of the session the participant will be able to list 3 barriers that impact dental providers' abilities to provide equitable oral health care to populations with intellectual disabilities.

Keywords: Access to Health Care, Behavior Change/Theories, Oral Health

Special Populations: Disadvantaged Populations, New Professionals

Full Abstract Detail: Numerous studies report that adults living with disabilities receive less preventive medical care than those without disabilities. Despite a need for health services, health care providers lack training to specifically address the health needs of people with intellectual disabilities (ID). Unfortunately, this also includes oral health providers, as there is a self-reported lack of exposure and training concerning their skills, knowledge, and confidence in providing dental care to people with ID. In order to address this issue, the Hands on Smiles Program was developed as a health education intervention with an overarching mission to increase exposure of future dental providers to people with intellectual disabilities, and therefore increase dental professionals' confidence in working with this population. The Hands on Smiles program consists of eight, 30-minute sessions presented by dental hygiene students that provide oral health education to a group of adults with ID. The lessons follow a "tell-show-do" approach to learning that has been shown to be effective in populations with ID. The Hands on Smiles program partnered with Special Olympics of Florida, and two local dental hygiene programs for piloting and implementation. Social Cognitive Theory was used to assess existing knowledge among dental hygiene students related to interacting with and providing oral hygiene education to adults with ID, and guide the development of the behavioral and environmental program objectives. To evaluate the impact and effectiveness of the program, pre-and post-tests were used to assess increases in knowledge and skills concerning oral health behaviors among the participants with ID. The overall goal of the evaluation process was to assess how the program performed, what improvements can be made, as well as to assess the implementation, delivery, reception, and social context of the program. An online survey was utilized to collect quantitative and qualitative data pre- and post-implementation among the dental hygiene students, utilizing dichotomous and 5-point Likert-scale responses, as well as short answer responses. Student observations and intercept interviews were

also conducted for data collection. The results demonstrated an overall increase in reported self-efficacy, knowledge, and skills in working with adults with ID among the dental hygiene students, however with limited statistically significant improvement. Post-survey responses indicated that all of the students reported a positive experience participating in the program, and an increase in confidence in working with this population. The implication of this outcome is that there is potential for this program to meet a need among dental providers. Dental hygiene students are willing to treat patients with ID provided they are supplied with skills and knowledge on how to communicate with this population, all of which could impact oral health disparities in populations with ID.

Session Type: Poster

Session Title: Effects of a brief educational program on knowledge about emergency preparedness, chronic disease recognition and prevention among Latinos in Immokalee, Florida.

Session Number: Poster – Wednesday – We26

Submitting Authors: Dr Payal Kahar

Co-Authors: Dr Lirio K Negroni

Authors Bio: Having a doctorate in Health education, my research interests are working with underserved populations including rural and minority populations and I have published small scale projects assessing knowledge levels pertaining to oral health and other health related topics in the past.

Chosen Sub-theme: Changing Outcomes: Health Education and the Continuum of Prevention and Care

Objectives: By the end of the session, the participant will be able to:

1. examine the differences between pre and post test health knowledge levels among Latino/as
2. discuss the importance of findings to promote more structured and tailored educational intervention among minority population

Keywords: Chronic Disease Prevention, Communication & Treatment, Disaster & Emergency Preparedness, Minority Health

Special Populations: Disadvantaged Populations

Full Abstract Detail: Background: Immokalee in Collier County, Florida is home to about 72% Latinos and 46% foreign-born. Hispanics are 1.2 times likely to be obese and almost twice as likely to be diagnosed with diabetes by a physician as compared to non-Hispanic Whites. Compounding the risk for chronic diseases is the fact that more than half of the minority population in the United States is classified as functionally or marginally illiterate. Illiteracy may affect health through lack of access and utilization of healthcare services and inability to comply with medical advice or instructions. Increasing health knowledge and health literacy is important to improve Latino/as' access to and utilization of health services, fostering healthy lifestyles, and managing chronic conditions.

Methods: The cross-sectional study comprising of brief health education sessions were conducted in Immokalee, Florida during August-October 2018. Five trained research assistants conducted the health education sessions that lasted 25-30 minutes using materials from Florida Literacy Coalition. There were six health education events alternating topics. Latinos 18 years and above were eligible for participation in the study: 145 pre-post tests were completed in the health education events, 79 of the 145 attended emergency preparedness/chronic diseases presentation and 72 attended nutrition/staying healthy. For assessments of the knowledge levels, participants had to answer 10 multiple-choice questions covering that day's topic prior to and after the presentation. T test was used to determine the changes in knowledge levels before and after health education program.

Results: Sixty four percent of the participants did not know about the warning signs of asthma, 75% not were not aware about how many days' worth of supply of food and water should be kept in an emergency. Additionally, 61% did not know food source rich in carbohydrates, 69% could not answer ways of coping with stress and 69.8% could not respond about recommended intake of water in a day accurately. Participants with college degree had higher pre-post test scores than those with no formal or less than high school education and the differences in scores were statistically significant (F statistic 2.56, p .041). The knowledge levels based on 10 questions increased by 1.43 (0.42) after the educational sessions and the increase was statistically significant (T test -6.38 p.000). Participants could answer an average of 6.74 (2.4) questions correctly after participating in health education program.

Conclusion: Participants had limited understanding of what constituted chronic diseases, differences among different chronic conditions and lacked basic knowledge on preparing for hurricanes and reliable news sources for emergency updates but the results of the brief educational program were encouraging. The results have implications in setting up structured educational interventions in health clinics and migrant education programs.

Session Type: Poster

Session Title: Contraceptive Usage Among Women Utilizing a Free Medical Clinic: Opportunities for Health Education

Session Number: Poster – Wednesday We27

Submitting Authors: Dr. Audra L Gollenberg

Co-Authors: Dr. Kim Fendley, Jessica Gardiner

Authors Bio: I am a trained reproductive epidemiologist with over 10 years of experience working with diverse groups of women.

Chosen Sub-theme: Changing Outcomes: Health Education and the Continuum of Prevention and Care

Objectives: By the end of the session the participant will be able to identify sub-groups of women who are high-risk for unintended pregnancy and identify opportunities for health education.

Keywords: Minority Health, Reproductive Health, Women's Health

Special Populations: Women, Young Adults

Full Abstract Detail: Reducing unintended pregnancies is a national family planning goal of Healthy People 2020. Unintended pregnancies are comparatively higher among minority women and those of lower socioeconomic status. We sought to assess contraceptive usage among a diverse population of women of low socioeconomic status as a means to better understand disparities in unintended pregnancies among women with less access to healthcare.

Methods: Bilingual interviewers recruited and interviewed women of reproductive age (18-40 years) in either English or Spanish at three agencies that serve a low-income population in Winchester, VA during Jan-April 2017. Women were asked about reproductive history, contraceptive usage, and sociodemographics. Qualitative data were transcribed and analyzed thematically and categorized by type of contraception. Results: N=173 women participated in the study. Most were non-Hispanic White (42%) or Hispanic (43%) and did not have health insurance (54%). The mean age was 28.8 years. N=55 (32%) did not currently use any form of contraception. Long-acting reversible contraceptives (17%) and hormonal methods (16%) were the most common methods followed by sterilization (male/female; 14%), while 16% collectively reported a less reliable form of contraception (i.e., barrier methods). Choice of contraceptive method differed by language preference ($p=0.025$), age ($p=0.03$) and marginally by health insurance status ($p=0.06$) but did not differ significantly by race, ethnicity, health status, marital status or educational attainment in this sample. Conclusions: Women utilizing a free medical clinic represent an underserved population for reproductive healthcare who may benefit from health education. It is important to consider the contraceptive usage of women who are high-risk of unintended pregnancy to better offer opportunities for health education related to reproductive healthcare services and family planning where needed.

Session Type: Poster

Session Title: PrEP knowledge, attitudes, and intentions of Black college students in the South

Session Number: Poster – Wednesday – We28

Submitting Authors: Samuella Ware

Co-Authors: Dr. Yarneccia Dyson

Authors Bio: I am a fourth year PhD candidate in Public Health. I worked for several years in a practical setting with people living with HIV before I began research in the field of HIV/AIDS. Since then I've been a sexual health educator and HIV prevention researcher working with young Black men and women in the South.

Chosen Sub-theme: Changing Approaches: Emerging Issues in Research Translation and Implementation

Objectives: By the end of the session the participant will/be able to:

Explain the practical guidelines for PrEP use among Black youth

Assess the need for PrEP use among Black youth

Outline PrEP knowledge, attitudes, and intention among the population described in the study

Examine the social justice issue with PrEP usage in the United States

Keywords: Child/Adolescent Health, HIV/AIDS, Social Inequity

Special Populations: Minority Populations, Young Adults

Full Abstract Detail: Black youth have the highest percentage (52%) of those between the ages of 15-25 newly diagnosed with HIV (CDC, 2017); 52% in the southern region of the United States (U.S.). In 2012, Pre-exposure prophylaxis (PrEP), a daily HIV infection prevention pill, was approved by the Food and Drug Administration in the U.S. (CDC, 2018a). PrEP use and uptake have been slow, especially among Black men and women (Kwakwa et al., 2016), with only 1% of individuals who can benefit from this prevention tool receiving it (CDC, 2018b). PrEP has become a social justice concern with the most vulnerable populations not using PrEP. This further decreases health equity and access for Black youth at risk for HIV. Accordingly, this study aims to examine PrEP knowledge, attitudes, and intentions of Black college students in the South.

Methods: This study is part of a larger concurrent mixed methods study that examined the sexual health needs of Black college students enrolled at three Historically Black Colleges and Universities (HBCU) or Minority Serving Institutions in the South (N=187). This study was taken from the quantitative portion which included a 70-item online survey. Only students who answered questions about PrEP were included (N=137). Students were asked about their knowledge of PrEP, attitudes of PrEP as a prevention strategy, and intentions to use PrEP if they had access. Univariate, bivariate, and multivariate analyses were conducted.

Results: Majority of our sample had never heard of PrEP (64%), however, 60% thought PrEP was a good prevention strategy, and 54% said they would use PrEP if available. Within the past 3 months, on average students engaged in condomless vaginal sex 8 times and condomless anal sex twice. In a bivariate analysis, results showed that PrEP knowledge was associated with age, year in school, and sexual orientation. PrEP attitudes were significantly correlated to number of sexual partners in the last 3 months and PrEP intentions were significantly associated with sexual orientation. In regression models, number of sexual partners was positively associated with PrEP attitudes. Intentions to use protective behaviors (ie. limiting partners or using condoms) was significantly positively associated with PrEP attitudes and PrEP use intentions.

Discussion: Although, PrEP has been proven as an effective protective tool for HIV among vulnerable populations such as Black college students, uptake among this population has been slow. Most of our sample were unaware of PrEP, even though most engaged in risky sex. Our results showed that those that had higher positive intentions of engaging in protective behaviors also saw PrEP as a good preventive strategy and would likely use PrEP. This shows that Black college students consider PrEP an element to their prevention toolbox but are not being informed of PrEP. Health educators and providers must work to increase access and knowledge of PrEP to populations that need it most.

Session Type: Poster

Session Title: A trauma-informed stress management intervention for a medical unit of US Army Reservists

Session Number: Poster – Wednesday – We29

Submitting Authors: Kristen Welker

Co-Authors: Hailee Fay Baer, Carol Cox, Shelby Nicole Duessel, tessa gisi

Authors Bio: Kristen Welker is an Assistant Professor in Health Science at Truman State University in Kirksville, MO. She is a CHES and has her PhD in Health Promotion and Education.

Chosen Sub-theme: Changing Minds: The Art and Science of Teaching in Communities and Professional Preparation

Objectives: By the end of the session the participant will determine the effect of a trauma-informed stress management intervention on stress response/resilience skills of a group of US Army Reservists from a medical unit as evaluated by oral quiz.

Keywords: Mental Health Communications

Special Populations: Seasoned Professionals

Full Abstract Detail: Today's Army, including Reservists, may be exposed to significant stressors due to unpredictable deployments, isolation from families, and potential combat environments. Reservists returning to civilian life and careers are especially vulnerable to mental health issues such as post-traumatic stress disorder. Because both their civilian and Army occupations are extremely stressful for Reservists in medical units, and combat deployments may also be traumatic events; the purpose of this study was to determine the effect of a trauma-informed stress management intervention on stress response/resilience skills of a group of US Army Reservists from a medical unit. A pre-test/post-test control group design was used in this study. In the experimental group, 17 Reservists, seasoned professionals, participated over two drill weekends in an intervention following the T-Care Model, four skills to effective trauma-informed care. The two-hour-long, active-learning interventions, presented by trained public health educators, focused on the stress response system. In the first session, management skills were described and practiced with presenter guidance. Participants were instructed to use the skills during and after stressful life events. The next drill weekend, recognizing alarm triggers and defining goals were covered and practiced. Pre-post intervention, experimental and control groups completed the Response to Stressful Experiences Scale, validated with active-duty and reserve military personnel, to determine differences in cognitive, affective, and behavioral stress responses.

There were no statistically significant differences in the experimental group between pre- and post-intervention. However, there were several practical improvements. Reservists indicated being better able to do the following as part of their stress management following this intervention: take action to fix things, find opportunity for growth, calm and comfort myself, see it as a challenge that will make me better, look at the problem in a number of ways, be good at determining which situations are changeable and which are not, find meaning from experience, find strength in the meaning, purpose, or

mission of my life, know that I will bounce back, expect that I can handle it, learn important and useful life lessons, understand that bad things can happen to anyone, not just me, and practice ways to handle it better next time. Pre-test data was collected from the control, and post-test data will be collected late summer, 2019. This presentation will include any group differences between experimental and control groups at this second time point to determine additional possible intervention effects. Despite the lack of statistically significant results reported in the experimental group thus far, additional data is to be analyzed, practical improvements exist and the Reservists have reported feeling the program was effective in improving many stress management and goal setting skills.

Session Type: Poster

Session Title: (Re)designing Health Communications on Campus: Testing a Design Thinking Approach to Developing Health Campaigns

Session Number: Poster – Wednesday – We30

Submitting Authors: Julia Mary Alber

Co-Authors: David Askay, Christine Nelson, James Ramirez, Reagan Sytsma

Authors Bio: I have published in peer-reviewed journals and presented at national conference on health communication research involving young adults.

Chosen Sub-theme: Changing Systems: Policy, Advocacy, Communications

Objectives: By the end of the session, the participant will be able to assess the feasibility and efficacy of using the Design Thinking Approach to develop a university self-care campaign.

Keywords: Community Health, Social Marketing/Health

Special Populations: Young Adults

Full Abstract Detail: Traditional methods for developing and testing health campaigns require a large investment of resources. The Design Thinking Approach (DTA) could be used to create materials in a less expensive, quicker manner than traditional communication development. DTA is an iterative process for generating and testing ideas to solve issues in conjunction with stakeholders. The purpose of this study was to test the feasibility and efficacy of using DTA to create a health campaign (Self-care Campaign) in a university health promotion program. A group of university peer health educators attended a 5-session DTA workshop, where they learned how to apply the DTA to create and conduct preliminary ideas for a Self-care Campaign. The workshops included facilitating intercept interviews with students to receive immediate feedback. After the workshops, the peer evaluators created communication materials for a Self-care Campaign on campus. A week-long, DTA-informed campaign was launch that included social media messages, stickers/handouts, and a boothing event on multiple days. To assess the feasibility of using the DTA, the peer health educators and the health education staff from the university health education and promotion program examined the acceptability and practicality of the DTA. To examine the efficacy of the approach, two methods were applied: 1) reach of the DTA-informed campaign was compared to an existing mental health campaign where social media metrics and number of visitors to the boothing event, and 2) an online survey was used to evaluate the logo created from the DTA-informed campaign and to compare the perceived message effectiveness of the campaign messages to an existing self-care campaign from a national, non-profit organization. Feasibility analysis results indicated that the participants overall responded well to the approach and found it to be a creative way to develop and test ideas rapidly. Results from the efficacy methods revealed that the DTA-informed campaign had greater number of boothing event attendees compared to the existing mental health campaign, however, the reach on social media was similar, but slightly higher, for the existing mental health campaign. There was no significant difference in average perceived effectiveness score between the DTA informed messages vs. a national organization's self-care messages. Results indicated that the DTA approach was overall feasible and produced comparable results in terms of perceived message

effectiveness to a national, well-established campaign. In addition, it had similar reach in terms of social media and the boothing event to an existing mental health campaign that had been run for several years. Future research is needed to understand the long-term impact of using the DTA approach for creating public health campaigns.

Session Type: Poster

Session Title: English-as-a-Second Language Health Literacy Program: The Process of Engaging Diverse Stakeholders for a Social Practice

Session Number: Poster – Wednesday – We32

Submitting Authors: Bonnie McIntosh

Co-Authors: Emily Feuerherm

Authors Bio: I have a University of Michigan (UofM) - Flint Master of Business Administration degree, a West Chester University (WCU) Master of Public Health degree, and a Brock University Honors Bachelor of Arts degree in Community Health. I have experience with health literacy, community engagement, research, and business. I worked as a Graduate Assistant for the Office of Institutional Research at WCU, a Researcher for the University of British Columbia (UBC), and British Columbia Children's Hospital (BCCH), and as a Program Manager for BCCH. I work as a Principal for ACE Community Health (community engagement practice), and as a Health Lecturer for UofM. I reviewed abstracts for the UBC Medical Journal, and the Canadian Agency for Drugs and Technologies in Health. I am a member of the Business Honor Society, the American Evaluation Association, and Delta Omega Public Health Honorary Society.

Chosen Sub-theme: Changing Perspectives: Leveraging Sectors, Engagement and Partnerships

Objectives: 1. Within the first half of the workshop, introduce participants to the role and importance of diverse partnerships and collaborations.

2. Within the second half of the workshop, introduce participants to key steps taken to identify diverse stakeholders for partnerships and collaborations and key steps for establishing sustainable partnerships and collaborations.

Keywords: Community-Based Participatory Research, Environmental Health, Health Literacy

Special Populations: Disadvantaged Populations, Older Adults, Young Adults

Full Abstract Detail: Health literacy is a broad field of practice and research that is a matter of social justice. Health literacy involves having a variety of literacy, numeracy, and communicative skills (e.g., social, personal, and cognitive) that are necessary to navigating one's way through a health system (e.g., health information seeking, decision making, problem solving, critical thinking, and communication). Health literacy is dependent on individual and systemic factors. In large, research has treated health literacy as a functional skill, rather than treating health literacy as a social practice. A community-based participatory research (CBPR) approach is fundamental to leveraging sectors to address health literacy as a social practice.

English as a Second Language (ESL) Hispanic adult learners are a disproportionately disadvantaged population with health literacy. The public health crisis in Flint, Michigan exposed people in the city to elevated levels of drinking water lead; therefore, following this public health crisis, a CBPR ESL Health Literacy program was developed to prevent further drinking water lead exposure among ESL Hispanic adult learners. The purpose of this CBPR ESL Health Literacy program aligns with goals set by the 2010

National Action Plan to Improve Health literacy. The process of engaging diverse stakeholders for a social practice to develop a CBPR ESL Health Literacy program is described. This process involved leveraging the collective partnerships, collaborations, and efforts of community, health, research, and education stakeholders to empower ESL adult learners to identify and modify their lead exposure behaviors. In particular: (1) the role and importance of diverse partnerships and collaborations will be explained; and (2) key steps taken to identify diverse stakeholders for partnerships and collaborations followed by key steps taken to establish sustainable partnerships and collaborations are described.

Session Type: Poster

Session Title: Factors influencing implementation and evaluation of a rural health equity initiative

Session Number: Poster – Wednesday – We33

Submitting Authors: April Hermstad, MPH

Co-Authors: Dr. Kimberly J Arriola, Regine Haardoerfer, Michelle Kegler, Shade Owolabi

Authors Bio: Dr. Michelle Kegler is a Professor in the Department of Behavioral Sciences and Health Education and Director of the Emory Prevention Research Center in the Rollins School of Public Health, Emory University. She directs the evaluation of The Two Georgias Initiative and has published extensively on evaluations of community-engaged health promotion programs.

Chosen Sub-theme: Changing Perspectives: Leveraging Sectors, Engagement and Partnerships

Objectives: 1. describe at least 3 factors that help and/or hinder the implementation of rural health equity initiatives.

2. explain the approach to incorporating equity into the evaluation design.

Keywords: Evaluation and Measurement, Health Disparities, Partnerships/Coalitions

Special Populations: Disadvantaged Populations, Minority Populations

Full Abstract Detail: Health equity initiatives in public health are increasingly common, yet there are few best practices for defining and measuring equity, particularly in rural communities. The Emory Prevention Research Center (EPRC) is conducting an equity-focused evaluation of The Two Georgias Initiative, a 5-year effort to address health disparities in rural Georgia communities. Funded by Healthcare Georgia Foundation, 11 multi-sectoral community coalitions in rural Georgia developed and are currently implementing community health improvement plans to address inequities. The Foundation's vision is "Health equity in Georgia – where all people attain their fullest potential for health and well-being." Initiative goals are to achieve health equity among rural populations; improve health and healthcare for rural Georgians; build healthier rural communities; improve social conditions that impact health of rural populations; and build community, organizational, and individual leadership capacity in rural Georgia.

This presentation describes how the evaluation is assessing progress toward achieving health equity and identifying factors that help and hinder implementation of a rural health equity initiative. The mixed methods evaluation includes equity-oriented process and outcome indicators assessed through repeated coalition member surveys (n=236) and community resident surveys (n=2600), annual key informant interviews (n=46), and a community change tracking tool (n=11).

Equity indicators of coalition functioning and structure include diversity of member demographics, composition of governance structures, approaches for framing the equity discussion locally, use of data to identify disparities, and priority population influence in decision-making. The evaluation looks at how local intervention strategies are implemented to address health equity. With respect to outcome equity indicators, change is assessed through 1) community readiness to address health equity (the degree to

which the community is willing and prepared to take action); 2) community capacity to address health equity (e.g., skills, leadership opportunities, distribution of power, critical reflection on health equity); and 3) organizational capacity to address health equity among partner organizations such as institutional commitments to address health equity, hiring practices, expansion in thinking about disparities, and institutional support for funding related to equity issues. Finally, changes in social determinants of health include health behaviors, health outcomes and the extent to which disparities between prioritized groups and the overall population are lessened by the Initiative's end.

Session Type: Poster

Session Title: Using Data for Quality Improvement and Enhancing Implementation

Session Number: Poster – Wednesday – We34

Submitting Authors: Phyllis Ottley

Co-Authors: Shannon Biello, Brenton Guy, Laura Rusiecki, Linda Vo

Authors Bio: Phyllis Ottley, PhD is a Behavioral Scientist at CDC's Division of Violence Prevention. Phyllis has extensive experience designing and conducting evaluations of prevention efforts in states and local communities to promote the health of children and adults. She leads initiative evaluation of child abuse and neglect and youth violence initiatives, and a supplement to build evaluation capacity to improve state functions and capacities to monitor state-level indicators. Prior to CDC, Phyllis worked at ICF as a senior manager where she directed the evaluations of community-based efforts to prevent obesity-related chronic diseases, including Communities Putting Prevention to Work and the Racial and Ethnic Approaches to Community Health. Phyllis' work involves evaluation training and technical assistance, performance monitoring, surveillance, data analysis and dissemination.

Chosen Sub-theme: Changing Approaches: Emerging Issues in Research Translation and Implementation

Objectives: 1. By the end of the session, participants will be able to plan for feedback loops to improve implementation quality

2. By the end of the session, participants will be able to understand the use of implementation data to improve program delivery and adaptation.

Keywords: Dissemination & Implementation, Program Planning, Violent Behavior/Violent Prevention

Special Populations: Mid-Career Professionals, New Professionals, Seasoned Professionals

Full Abstract Detail: Centers for Disease Control and Prevention (CDC) funds five local health departments (LHD) to implement at least two evidence-based strategies—one at the individual or relationship level and the second at the community level to prevent teen dating violence and youth violence. The funding opportunity requires recipients to use a multifaceted primary prevention approach that encompasses comprehensive, cross-cutting and complementary strategies to address shared risk and protective factors. This integrated approach allows recipients to examine and plan their efforts strategically and evaluate their collective efforts while implementing specific prevention efforts in the larger community.

CDC uses a variety of methods to evaluate the quality of implementation and the extent to which the implemented approaches are appropriate for the context of each community. Rapid feedback evaluation is one method CDC uses to obtain timely, reliable, and actionable data by leveraging existing or newly collected program data to improve and adjust implementation within a short turnaround and at various points of a program lifecycle. CDC also tracks various implementation measures, including the number of implementation cycles, number of implementers and amount (dose) delivered with each implementation cycle. Recipients track implementation to improve delivery, assess gaps in reach, and

identify implementer training needs. In collaboration with recipients, these methods support prevention efforts and help recipients to address identified needs within the community through quality implementation.

We describe examples from LHDs who are using data to adapt implemented evidence-based strategies in an effort to address the unique needs of the populations they serve and to prevent violence and reduce health disparities. These adaptations ensure appropriate fit within the population's neighborhood and larger community. Some examples include engaging difficult to reach populations (e.g., LGBTQ) and adapting school-based strategies to a non-traditional setting (e.g., church youth groups). LHDs use data for maintaining fidelity, ensuring feasibility, and for continuous quality improvement. One important way data have been used for continuous quality improvement includes changing the way youth interact with implementers. Data suggest that using peer mentors who have a strong rapport and trust with youth have improved relationships with other youth and adults. LHDs have also partnered with other agencies, such as law enforcement, to share data about the community.

This presentation focuses on the use of data for quality improvement and example methods to enhance implementation to ensure appropriate fit for the populations served. The presenters will share methods for enhancing implementation quality, and discuss ways to systematically collect and analyze data to assess essential elements of prevention strategies and the potential impact of adaptations on outcomes.

Session Type: Poster

Session Title: Using Technology as a Statewide Engagement Tool

Session Number: Poster – Wednesday – We35

Submitting Authors: Molly Pisciotano

Co-Authors: Chaste Truman Barclay, Maya Gutierrez, Allison Kannam, Jennifer D Keith

Authors Bio: I have been managing Pennsylvania's youth tobacco prevention program through the American Lung Association for the past year and a half and I coordinated the redesign project of TRU's new website.

Chosen Sub-theme: Changing Systems: Policy, Advocacy, Communications

Objectives: Describe the benefits of conducting key informant interviews and evaluations to inform online tools. List resource and engagement examples from the new TRU website that can be applied to other online resources.

Keywords: Quality Improvement, Technology

Special Populations: Children & Adolescents, Older Adults, Young Adults

Full Abstract Detail: The Tobacco Resistance Unit (TRU) is Pennsylvania's statewide youth tobacco prevention program funded through the Pennsylvania Department of Health and operated through the American Lung Association. TRU is a program that consists of youth ages 12-18 who are passionate about leading tobacco-free lifestyles. In FY18, TRU had over 2,600 members within 97 groups and 73 adult advisors. To better engage and empower the TRU advisors and students in both advocacy efforts and to enhance health education and promotion, qualitative key informant (KI) interviews were performed to determine how the TRU website could be improved; the results of the KI interviews were used to assist in the upgrade of the new TRU website. Thanks to the upgrade of this technological resource, engagement within TRU has significantly increased.

To inform a redesign of the TRU website, seven advisors were interviewed about their impressions of the website, including organization, design, and how it serves their needs. After the 10-month redesign of TRUinPA.org, promotions were completed by e-mail and social media to TRU groups one week prior to the official release of the new site (March 2019) to enhance knowledge and promotion of the new online tool. To offer ample time to review the website, an evaluation was completed one month after the release and the survey was available for two weeks. The survey collected 16 total responses from TRU advisors, service providers, and TRU youth.

All interviewees had used the TRU website prior to the interview and reported using it anywhere from once a week to every other month. It was found that TRU adult advisors were the primary users of the website and that reorganization was required to optimize ease of navigation for intended audiences, including access to information on starting and registering a new TRU group, planning tobacco-free activities, along with promotional and educational resources. Advisors requested that it be cleaner, more uniform, include more photos, and be more engaging. TRUinPA.org was redesigned over the course of ten months to increase ease of access to advisor resources while maintaining a youthful

appearance. The new website now includes a variety of engaging tools such as an interactive TRU group map, an advocacy toolkit, and access to both promotional and educational materials and teen smoking/vaping cessation resources. Respondents to the post-release evaluation survey felt very positively about the new website. Key highlights include: all thought the new website was better than the original; respondents mentioned the best features of the new website include the visual appeal, ease of navigation, and the availability of resources; forty percent of respondents intend to use the new website more often than the original, and the remaining 60 percent intend to use it just as often. Overall, there has been increased advisor and youth engagement as a result of the new TRU website.

Session Type: Poster

Session Title: The Relationship Between Tobacco Use and State Political Affiliation

Session Number: Poster – Wednesday – We36

Submitting Authors: Ruben Juarez

Authors Bio: Ruben Juarez completed his undergraduate degree at Grand Valley State University, receiving a B.S. in Health Professions. He is currently a graduate student at Central Michigan University's Master of Public Health program, where he is also a Graduate Assistant. Areas of interests include policy, tobacco use and prevention, environmental health, and health disparities. Planning to graduate in Spring 2020, he plans to pursue a Ph.D. in health policy or biostatistics.

Chosen Sub-theme: Changing Perspectives: Leveraging Sectors, Engagement and Partnerships

Objectives: 1. Articulate how political behavior is related to health outcomes and behaviors, in particular the association between state political affiliation and tobacco use.
2. Summarize how a region's political affiliation can provide insight for health promotion strategies.

Keywords: Community Health, Health Research, Social Ecology

Special Populations: Young Adults

Full Abstract Detail: Despite decades of tobacco use reduction in the United States, tobacco remains the main cause of preventable deaths in the nation, representing 20% of all mortality annually (CDC, 2019). Tobacco products also cause and contribute negatively to millions who suffer from chronic diseases. Cigarettes are the most commonly used form of tobacco, but many other tobacco products are available for purchase, including cigars, electronic cigarettes (e-cigarettes or vaping products), smokeless tobacco, dissolvable tobacco, hookah, and numerous more products which are managed by the Food and Drug Administration (FDA) nationwide (Phillips et al., 2017). For a complete understanding of this issue, all possible factors associated with tobacco use should be investigated, whether they be proximal or distal in nature. One factor that plays an important role in American life and has been linked to a number of health outcomes and behaviors is political behavior. In the past, political behavior has been associated with vaccination rates, obesity rates, mortality rates, and more.

This study aimed to investigate the relationship between state political affiliation and tobacco use. Data will come from the 2016 Behavioral Risk Factor Surveillance System (BRFSS), which is overseen by the Centers for Disease and Prevention (CDC, 2018). The main outcome of interest was current cigarette, e-cigarette, or smokeless tobacco use. Each participant's state of residence was then used to assign a political affiliation, calculating a Partisan Voting Index (PVI) for each state. This measure was developed by the Cook Political Report in 1997 as a way of gauging a state or district's political leaning relative to the nation as a whole ("Introducing the 2017 Cook Political Report," 2017). Presidential election results for 2012 and 2016 were retrieved from the Federal Election Commission to calculate states' PVI. To assess an association between tobacco use and available variables, as well as calculated state PVI, Chi-Squared tests were performed using IBM SPSS Statistics 25 at alpha level 0.05 to test for statistically significant relationships (IBM). Univariate and multivariate analysis were subsequently performed to

determine the contribution of each variable and to test the predictive effect of state political affiliation on overall tobacco use.

Being aware of the dynamics between politics and health can provide insight to public health professionals. This information can be used in the for educational purposes, to tailor messages which emphasize the most salient values associated with political affiliation in order to create successful interventions. In addition, this can provide health professionals with a road map by which to engage with political leaders, inform them about their constituent's health priorities, and understand how to optimize those partnerships for the benefit of a community's health.

Session Type: Poster

Session Title: Community Engagement as a Board Member: Lessons Learned from a Health Education Specialist

Session Number: Poster – Wednesday - 37

Submitting Authors: Dr. Frederick W Schulze

Authors Bio: Dr. Frederick Schulze serves as Chairperson, Board of Directors, AIDS Resource, Inc., a community-based organization with offices in Williamsport and State College, Pennsylvania. In 2018, he was given the Community Vanguard Award from AIDS Resource for his work in advocacy, board development and fund-raising. He is a Master Certified Health Education Specialist and earned his graduate degrees in health education from The Pennsylvania State University. He is a professor of health science at Lock Haven University of PA and teaches undergraduate courses in a community and public health education program.

Chosen Sub-theme: Changing Perspectives: Leveraging Sectors, Engagement and Partnerships

Objectives: By the end of the session, participants will recognize the transferrable skills from a Health Education Specialist to a position on a board of directors.

By the end of the session, participants will understand the benefits and challenges associated with serving as a volunteer on a board of directors.

Keywords: Community Health

Special Populations: Disadvantaged Populations, Mid-Career Professionals, New Professionals

Full Abstract Detail: Health Education Specialists are often recruited to serve in volunteer leadership capacities for community-based agencies and coalitions. The health education specialist will review his recruitment by a rural, community-based AIDS organization to serve as a board member. Challenges facing the organization included developing a comprehensive health communication strategy, promoting collaborative relationships, examining long term trends in chronic disease case management, hiring highly qualified employees, maintaining prevention programs based upon health education theory and reducing burn-out among organization executives. Unique issues will be examined including how select board members encountered resistance in rural counties because the organization served people living with HIV and AIDS. Finally, the health education specialist will describe helping the board develop and implement self assessments, a recruitment strategy, annual executive evaluation, personal continuing education plans and assess prevention curricula. Health education specialists possess many transferrable skills for serving on a board of directors.

Session Type: Poster

Session Title: Examining the Readiness of Rural African American Barbershop Patrons for Barbershop-Based HIV Prevention Programs

Session Number: Poster – Wednesday – We38

Submitting Authors: Dr. Antonio Gardner

Co-Authors: Christine Little, Angelia M. Paschal

Authors Bio: I am an Assistant Professor of Health Promotion whose research focuses on health disparities among rural and African American populations.

Chosen Sub-theme: Changing Outcomes: Health Education and the Continuum of Prevention and Care

Objectives: Discuss the importance of conducting needs assessments before developing barbershop-based programs for rural African American men.

Keywords: HIV/AIDS, Men's Health, Quantitative Methods

Special Populations: Disadvantaged Populations, Men

Full Abstract Detail: Background: One in 16 African American men are expected to contract HIV in their lifetime, and trends for the disease, in general, are increasing in the rural South. The black barbershop has been identified as a lucrative site for health promotion efforts tailored specifically for African American men. However, thorough needs assessments must be conducted before developing any programs at these sites, especially on sensitive topics such as HIV. The purpose of this study was to quantitatively assess the readiness of rural African American males to participate in barbershop-based HIV prevention programs. Methods: Approximately 175 individuals who self-identified as 1) African American, 2) male, 3) residents of Mississippi, and 4) 18 years of age or older were recruited from four rural barbershops to complete a paper and pencil survey, which assessed their HIV knowledge, attitudes towards condoms, engagement in risky sexual behaviors, and readiness for barbershop-based HIV prevention programs. Results: Exactly 144 men completed the survey. Three-fifths (61%) agreed that their barbers would be trustworthy sources of health information, half (50%) felt comfortable with their barbers communicating sexual health information, half (47%) agreed that the barbershop would be an appropriate venue to share sexual health information, and half (49%) agreed that they would be willing to participate in barbershop-based HIV prevention programs. Conclusion: The results of this study provide evidence that thorough needs assessments are necessary before developing barbershop-based HIV prevention programs in populations that may need prevention programming but may not necessarily be completely receptive to the idea of such programming. Future research should qualitatively assess why rural African American have neutral attitudes toward using barbershops to communicate HIV prevention information, and explore alternative venues for disseminating culturally tailored and appropriate HIV prevention information to this priority population.

Session Type: Poster

Session Title: “Know it, Control it”: Outcomes of a Culturally-customized Hypertension Awareness and Management Education Program for Bhutanese Refugees

Session Number: Poster – Wednesday – We39

Submitting Authors: Sharon Morrison

Co-Authors: Yasmine Sinkhada

Authors Bio: Sharon Morrison is an Associate Professor of Public Health Education at the University of North Carolina Greensboro. Her area of interest is refugee and immigrant health.

Chosen Sub-theme: Changing Outcomes: Health Education and the Continuum of Prevention and Care

Objectives: Describe the Bhutanese refugee population

Articulate key outcomes of "Know it, Control it"

Keywords: Chronic Disease Prevention, Communication & Treatment, Health Behavior, Immigration Health

Special Populations: Disadvantaged Populations, Global/International Populations, Minority Populations

Full Abstract Detail: Greensboro, NC is home to about 1600+ Nepali-speaking Bhutanese refugees, with a majority having spent a significant time in refugee camps prior to U.S. arrival. Data from the 2014 NHANES shows a 25% hypertension prevalence rate among Asian-Americans which may include Bhutanese as a sub-group. This raises important concerns about chronic disease outcomes as they integrate to U.S. life and creates an opportunity for primary prevention through health education outreach. In 2018, a team of students working in partnership with a grassroots group, the Glen Haven Mothers’ Group, implemented a culturally customized version of the American Heart Association’s “Know it, Control it” program for hypertension prevention and control. The curriculum was delivered in seven 60-minute workshop lessons over two months to a sample of ten Nepali-speaking Bhutanese adults. The team used small group/peer-peer learning and interactive techniques with culturally appropriate adjustments (i.e. use of pictures with South Asians and text translated into Nepali). The lessons covered personal health and “high BP”, BP measurement and monitoring, the importance of diet, exercise and tobacco use cessation, medication management and mental health promotion. Participants completed pre- and post- assessment forms that correlated with each lesson. The team collected pre/post health and hypertension knowledge and perceptions, food choices and dietary intake, exercise, stress and BP level measurements. All sessions included a 15-minute practice opportunity to focus on learning new skills (e.g. using low cost BP monitors) that can be used towards daily healthy life. The team conducted 2 follow-up focus groups to gather feedback on participant experiences with the program. This presentation provides baseline findings. Most participants were initially unaware of the links between stress, diet, physical activity and high BP. They also had limited understanding of effective practices to reduce these stressors, and limited experience with BP machine

usage – all of which aid in the prevention and management of Hypertension. However, by the end of the program, participants' knowledge of health behaviors that impact hypertension had increased (i.e. they identified consuming more whole grains/fruits/vegetables. They also recognized that increasing their physical activity levels (e.g. outdoor gardening, walking as a group) as a key factor in avoiding hypertension) and displayed proper usage of a BP machine. These participants were empowered as lay educators, who are able to use the new-found knowledge and skills for educational outreach to neighbors and for BP monitoring in households.

Session Type: Poster

Session Title: Using Human Centered Design Methods in Public Health to Fully Engage Others: Empathy Maps and Journey Mapping

Session Number: Poster – Wednesday – We40

Submitting Authors: Ms Amanda R Gabarda

Co-Authors: Christian B Gabarda

Authors Bio: Dr. Gabarda is the Director of Clinical Training & Development at UPMC Health Plan where she is responsible for designing, scaling, and evaluating evidence-based health coach training, quality assurance, and health coaching interventions. She is passionate about combining coaching and behavior change science to empower individuals to live their best and healthiest lives. Dr. Gabarda also has interests in addressing health equity believes we can achieve the attainment of the highest level of health for all people. She enjoys working in the community alongside organizations that serve socially disadvantaged populations to address the preventable differences to achieve optimal health. Her current research focuses on an experiential training “The Poverty Simulation” and improvements in understanding of and attitudes towards poverty in healthcare providers.

Chosen Sub-theme: Changing Perspectives: Leveraging Sectors, Engagement and Partnerships

Objectives: (1) Understand the fundamentals of human centered design and how it can be useful in putting individuals, communities, and society at the center of public health solutions

(2) Apply human-centered design methods in the creation of empathy maps and journey maps

Keywords: Community Health Workers, Community Health, Health Equity

Special Populations: Mid-Career Professionals, New Professionals, Seasoned Professionals

Full Abstract Detail: Public health challenges require the creation of innovative solutions and new framing of problems which put individuals, communities, and society at the center. This also requires public health professionals to move out of their comfort zones by understanding perspectives on the path to fully engaging the community to produce a sustained change. Human-centered design is a design framework that focuses on solutions to problems by using a human perspective in all steps of the problem-solving process. It supports scaling a culture of innovation by basing design of solutions on the people and systems they are meant to support. By making the people being served at the backbone of the work, public health professionals can build empathy, generate creative ideas, prototype, and produce new resolutions. When designing programs, services, and solutions for people, the team must understand what the experience is like for the people being served. Empathy maps and journey maps are two human-centered design tools that can support public health professionals ensure that they understand their target populations before moving right into solutions. All too often organizations and individuals start with solutions without ever exploring the problem. Empathy and journey maps are tools that can be used in partnering with the community, understanding populations, designing interventions, improving health outcomes, and more. Empathy mapping is a powerful way to understand a person’s experiences and communicate that experience to others. It provides an opportunity to consider and

explore all of the details big and small that make up a person or community and their experiences, enabling public health professionals to draw insights that may not have been at the surface. Empathy mapping can be done in small or large groups and don't require a lot of time and materials for success. Another tactic in understanding the individual at the center of public health solutions is journey mapping. User journey mapping is a way to deconstruct an individual's journey with a product or service as a series of steps and themes. This can be a powerful tool because it can encourage stakeholders to think about user needs effectively. Through the journey mapping process, the stakeholders can work through identifying pain points and opportunities in a systematic and straightforward way. Journey maps can be valuable in both a retrospective and prospective capacity and provide a look into what actually happens from the user's perspective. It allows elimination of all assumptions and an opportunity to gain insights that may not otherwise be seen or understood from a design perspective. This presentation will provide an overview of human-centered design and the benefits of use in public health practice. Attendees will explore the use of empathy maps and journey maps and how to apply the use in public health practice.

Session Type: Poster

Session Title: Cannabidiol (CBD) in 2020: An opportunity for meaningful health education intervention

Session Number: Poster – Wednesday – We41

Submitting Authors: Meghann Wheeler

Co-Authors: Dr. Benjamin Gordon, Julie Williams Merten, Carmen Smotherman

Authors Bio: Meghann Wheeler is a Master of Public Health student at the University of North Florida in the epidemiology track. She is a Research Assistant in the Department of Public Health working on secondary data analysis, content analysis, and primary data collection in skin cancer prevention and emerging public health issues media coverage. She is also the Managing Editor for the Florida Public Health Review and works as a Clinical Research Associate at St. Vincent's Hospital.

Chosen Sub-theme: Changing Outcomes: Health Education and the Continuum of Prevention and Care

Objectives: List three conditions that CBD is used as a treatment method for.

Explain how health educators can develop interventions that address alternatives to CBD use.

Keywords: Health Behavior, Health Research, Mental Health Communications

Special Populations: Older Adults, Young Adults

Full Abstract Detail: Background: Cannabidiol (CBD), a non-psychoactive component of cannabis is marketed as a treatment for many conditions and widely available to purchase as a dietary supplement. In 2020, sales of CBD are expected to exceed 1.9 billion dollars despite many unconfirmed health claims, murky legality, and limited product efficacy and safety testing.

Methods: This cross-sectional study examined the CBD knowledge, attitudes, and use among adults via an anonymous online survey distributed via social media.

Results: Of the 388 respondents 169 (43.6%) reported use of CBD products. Most commonly used products were tinctures (48.9%), edibles (46.1%), and vape (32.7%). CBD products were primarily bought on the Internet (26.7%) or vape store (21.3%) and nearly half (43.6%) learned about CBD from a friend or family member. The top reasons for use were stress relief (53.6%), relaxation (45.5%), and pain relief (33.2%). Among respondents who used CBD at least once, 45.7% had experienced at least one unexpected side effect. Nearly 30% of respondents used CBD products instead of marijuana with 43.2% reporting that CBD is a healthier alternative to marijuana. Nearly 78% reported that CBD products are legal to use, more than half of users were unsure if CBD use would show up on a drug test, 27.6% believe the product is regulated by the FDA, and 34.74% incorrectly identified the DEA classification.

Conclusions: Adults are using CBD products to alleviate stress and mental health related issues. With the limited research on CBD efficacy and potential side effects, health educators have an opportunity to offer more established and scientifically supported alternate stress and anxiety management strategies,

discuss potential side effects and drug interactions, and inform users of the nuances of legality and regulation.

Session Type: Poster

Session Title: Human Subjects Research Protections: Training, Evaluation and Implementation

Session Number: Poster – Wednesday – We42

Submitting Authors: Marinda Logan

Co-Authors: Alicia May, Kory Trott

Authors Bio: I am currently a Health Scientist at the Centers for Disease Control and Prevention. I received my MPH in Behavioral Science/Health Education from Emory University (Health Education focus). I was the Team Lead that created the training plan and curriculum for CDC staff. I also participated in the evaluation activities.

Chosen Sub-theme: Changing Approaches: Emerging Issues in Research Translation and Implementation

Objectives: By the end of the session, participants will be able to identify evaluation methodologies to assess knowledge uptake in trainings.

Keywords: Career Development/Professional, Evaluation and Measurement, Workforce

Special Populations: Mid-Career Professionals, New Professionals, Seasoned Professionals

Full Abstract Detail: Background

In January 2019, the revised Department of Health and Human Services Policy for the Protection of Human Subjects (45 CFR 46) also known as the Common Rule, took effect. In preparation for this change, the Centers for Disease Control and Prevention (CDC) developed an internal training program to prepare investigators to conduct human subjects research under the revised Common Rule.

Methodology/Description

The trainings focused on 5 areas where the Common Rule changed the most significantly: informed consent, definition of public health surveillance, regulatory applicability, Institutional Review Board (IRB) review requirements and exemptions. The effectiveness of the training series was assessed using a self-report post-course survey focused on knowledge change. In addition to collecting information about the structure and content of the series, attendees were asked to identify their knowledge of the learning objectives before and after the training. The data were collected via paper survey and survey monkey and analyzed using SPSS.

Results

A paired samples t-test was conducted to evaluate the impact of the training. Information about informed consent was assessed in a before and after self-reported knowledge uptake. The mean knowledge before the training was 2.71 and after training was 4.16 ($p < 0.001$). Initial knowledge about human subjects research was increased from what was known about informed consent, however there was still a large effect found due to the training (Knowledge before: 3.43 Knowledge after 4.25, $p < 0.05$).

Discussion

Being able to document institutional knowledge and understanding of emerging policy issues that create changes to regulatory translation and implementation is an important part of maintaining an informed and responsible public health workforce. CDC's recent efforts to capture data on the effectiveness of internal staff training will allow the agency to better plan for and respond to emerging issues that might create confusion and noncompliance within the organization.

Next Steps

Based on the results of the initial post-course survey data, the 2019 course offerings have been designed to address areas in which staff knowledge could be improved. For example, the training series has been expanded beyond changes to human subjects research related to the revised Common Rule, because the survey results identified a need to better train staff on emerging policy issues related to Privacy and Confidentiality, and the Office of Management and Budget's Paper Work Reduction Act.

Session Type: Poster

Session Title: Exploring the Impact of Storytelling on Storytellers in a Hepatitis B Health Communication Context

Session Number: Poster – Thursday - *Th1

Submitting Authors: Julia Mary Alber

Co-Authors: Rebeca Almeida, Dr Chari Cohen, Catherine Freeland, Sanam Ghazvini

Authors Bio: I have been a principal investigator and CO-PI on funded grants that have focused on communication strategies for addressing hepatitis B disparities. I have also published and presented at national conferences on communication strategies related to hepatitis B.

Chosen Sub-theme: Changing Systems: Policy, Advocacy, Communications

Objectives: 1. By the end of the session, the participant will be able to explain two potential impacts of storytelling on a storyteller participating in a public health campaign.

2. By the end of the session, the participant will be able to outline two implications for future storytelling research.

Keywords: Cancer, Social Marketing/Health

Special Populations: Global/International Populations, Minority Populations

Full Abstract Detail: Chronic hepatitis B, caused by the hepatitis B virus, is a disease that can lead to severe health consequences (e.g., liver cancer, premature death). Several factors, including stigma, have contributed to low screening rates among high-risk populations (e.g., Asian Americans, Pacific Islanders, immigrants from certain countries in Africa). Storytelling/narrative theory can be applied to develop culturally-relevant interventions to reach hard-to-reach and minority populations. In order to increase awareness around hepatitis B and address this stigma, a storytelling campaign with individuals impacted by hepatitis B was developed. While storytelling campaigns have been evaluated in terms of the effects on the audience, little research has examined the impact on the storytellers themselves. Given the stigma associated with hepatitis B, it is critical to understand whether the storytelling process has a positive impact on both the audience and storyteller. As such, this study aimed to understand the experiences of the individuals sharing their stories. Semi-structured interviews were conducted by trained researchers with individuals who had participated in a storytelling campaign regarding hepatitis B. A total of 23 participants completed 1-hour interviews, which asked them to describe why they participated in the campaign, share feedback about the storytelling workshop they attended and any ongoing campaign activities they are involved in, and discuss the impact the process had on them and others. A thematic analysis of the interview data yielded four themes: 1) outreach, 2) emotion, 3) education, and 4) stigma. Results indicated that, overall, participants found the process to be positive and to allow them to connect emotionally and educate others. Many participants reported feeling comfortable or even valued when sharing their story. In addition, some participants described how storytelling allowed them, in some part, to protect others and to receive support while living with the disease. Participants also identified the need to increase outreach and address stigma related to

hepatitis B. Furthermore, participants described the need for hepatitis B communication and programs that are more inclusive of different cultures and languages, hence promoting trust and inclusivity. More research is needed to understand the long-term impact of storytelling on storytellers.

Session Type: Poster

Session Title: Campus Readiness: Preventing and Responding to an Active Threat

Session Number: Poster – Thursday - *Th2

Submitting Authors: Sely-Ann Ayiesha Headley

Co-Authors: Brian Fink, Dr. Lisa Pescara Kovach, Sergeant Douglas J Perry, Paul Rega

Authors Bio: Sely-Ann Headley holds a Master’s in Public Health, with an emphasis in epidemiology from Northwest Ohio consortium of public health (Bowling Green State University and University of Toledo). She is currently pursuing a Ph.D. in Health Education at the University of Toledo where she also serves on the Mass Violence Taskforce.

Chosen Sub-theme: Changing Approaches: Emerging Issues in Research Translation and Implementation

Objectives: Discuss the role education and training has on increased confidence during a violent attack on campus.

Compile strategies to weave violence prevention and mitigation training into routine campus training for departments that have high contact with students.

Keywords: Disaster & Emergency Preparedness, Injury Prevention/Safety, Worksite Safety & Health

Special Populations: Mid-Career Professionals, New Professionals, Seasoned Professionals

Full Abstract Detail: Background: There has been an increased number of violent attacks at academic institutions over the last five years. Personnel who daily engage with students are seen as resources during violent attacks, and also have the potential to identify some warning signs and can help mitigate violent attacks if given proper training. Additionally, tourniquets and bleeding control techniques can help save lives as medical personnel cannot enter a scene until law enforcement clears it (this can take several hours). Campus Readiness was designed to offer graduate students who teach an overview of best practice suggestions to help mitigate an active threat. Training provided (1) an introduction to best practices in behavioral threat detection, assessment and case management, (2) ALICE training, and (3) tourniquet and wound-packing instructions.

Results: Most attendees did not have ALICE (13), or other active shooter training (15), and none (18) had self-defense training within the last academic year.

Paired sample t-test revealed a statistically significant difference between Pre and Posttest, indicating an increase in attendee’s confidence level at performing specific tasks during a violent attack.

Attendees explained that “This information will allow me to act as a leader should a violent situation occur” , “will help me guide my students in an active shooter situation. [and ...] help identify potential violent situations,” and “It gives me more information to help my students survive.”

Critical departments that have high contact with disgruntled students and personnel, such as admissions, Counseling Center and Medical Center should receive training. This pilot training provided

vital information to plan larger trainings as we see increased violence at academic institutions. Equipped with knowledge from these sessions, we can (1) help identify at-risk personnel/students and refer them to appropriate resources for help, (2) develop a plan for acting in case of a violent attack, and (3) give guidance to students who look to faculty for direction.

Critical departments that have high contact with disgruntled students and personnel, such as admissions, Counseling Center and Medical Center should receive training. This pilot training provided vital information to plan larger trainings as we see increased violence at academic institutions. Equipped with knowledge from these sessions, we can (1) help identify at-risk personnel/students and refer them to appropriate resources for help, (2) develop a plan for acting in case of a violent attack, and (3) give guidance to students who look to faculty for direction.

Session Type: Poster

Session Title: Using Windshield Surveys as an Assessment Tool: Assessing Neighborhood Risks and Protective Factors for Violence

Session Number: Poster – Thursday - *Th3

Submitting Authors: Erica Payton

Co-Authors: Dr. Jocelyn R. Smith Lee, Ph.D.

Authors Bio: I am a practitioner and scholar in public health education and violence prevention. I have published 8 articles in peer reviewed journals on the topic of gun violence and I have presented my findings at national health conferences including the American Public Health Association (APHA) and the Society for Public Health Education (SOPHE).

Chosen Sub-theme: Changing Systems: Policy, Advocacy, Communications

Objectives: By the end of the session the participants will be able to identify environmental risk and protective factors for community violence.

Keywords: Injury Prevention/Safety, Policy, Systems & Environmental Change, Violent Behavior/Violent Prevention

Special Populations: Children & Adolescents, Disadvantaged Populations, Minority Populations

Full Abstract Detail: DeCou and Lynch describes community violence as “ubiquitous exposure to public acts of violence via threatened, witnessed, or completed victimization over time that is not perpetrated by an intimate partner or family member.” Research indicates that factors such as residential segregation, poverty, educational inequalities, unemployment, racism, and a constellation of social and structural conditions (e.g. urban decay) combine to increase the propensity for community violence. A local spike in violent crime, including shootings and deaths in Greensboro, a mid-size city in North Carolina has led to raised levels of community concern. While some community efforts have been mobilized, little has been done to formally assess and address the rippling consequences of community violence. Windshield surveys are systematic observations made from a moving vehicle. Windshield surveys are useful in community assessments and can be used to assess general community needs. The primary objective of this study was to conduct a windshield survey of Greensboro to enhance our contextual analysis of environmental factors that may promote or reduce community violence. Windshield surveys were conducted in 28 neighborhoods in North, South, East and West Greensboro. A research team of 4 members conducted the windshield survey for each neighborhood. A route for each neighborhood was created to establish neighborhood boundaries. Additionally, an observation form was created and used to record observations of the physical and social environmental characteristics of each neighborhood. Several themes emerged from our assessment and strongly suggested that inequity in access to services and resources promotes community violence. Our presentation will include a discussion on the identified community strengths and challenges in Greensboro as well as strategies to reducing community violence. We will also highlight how the findings from the windshield survey will be used to inform and guide us in the next steps of our systematic assessment of the aftermath of violence, which uses the Assessment- Oriented Community Diagnosis approach.

Session Type: Poster

Session Title: Examining College Students' Use, Perceptions, and Knowledge of Marijuana and Marijuana Laws

Session Number: Poster – Thursday - *Th4

Submitting Authors: Meghan E Burroughs

Co-Authors: David A. Birch, PhD, MCHES, Dr. Brian C Gordon, James Leeper, PhD, Angelia M. Paschal

Authors Bio: Dr. Meghan Burroughs is an Assistant Professor of Health Education at Bradley University. She recently completed her doctoral degree at The University of Alabama. Her research interest is focused on college student substance abuse and motivations for use.

Chosen Sub-theme: Changing Systems: Policy, Advocacy, Communications

Objectives: Explain the various marijuana laws in the United States.

Describe the association between marijuana laws and college student marijuana use in a state with a limited medical marijuana law.

Keywords: Alcohol & Substance Abuse, University/College

Special Populations: Young Adults

Full Abstract Detail: Marijuana is a highly utilized drug on college campuses that has a variety of adverse health effects. Since the 1970s, state marijuana laws have been consistently evolving throughout the United States, increasing accessibility and normalizing marijuana use, especially among college students. Therefore, the purpose of this study was to examine the association that state marijuana laws have had on undergraduate students at one university in a southeastern state that only has a limited medical marijuana law, specifically in terms of use, perceptions of risk, diversion of marijuana, and marijuana law knowledge. A quantitative, cross-sectional design was utilized through the administration of paper and pen surveys from a convenience sample of 391 undergraduate students. No significant relationships were found between the type of marijuana law from students' state of permanent residence and college student marijuana use, perceptions of risk, or diversion of marijuana. Additionally, no significant relationships were found between marijuana law knowledge and student marijuana use during the past 12 months or 30 days. Although the results of this study did not find much significance between the variables, students did report high levels of marijuana use, low perceptions of risk, and endorsed several diversion behaviors within a state with a limited medical marijuana law. Public health education researchers and practitioners should continue to explore the influence of diverse marijuana laws on marijuana use among college students.

Session Type: Poster

Session Title: The Connection between Religious Involvement & Performance of Health Promoting Behaviors among African American Men: Findings from the Healthy Eating Activity Rest Together (HEART) Matters Study

Session Number: Poster – Thursday - *Th5

Submitting Authors: Dr. Larrell L. Wilkinson

Authors Bio: Dr. Larrell Wilkinson is an Associate Professor of Community Health & Human Services within the Department of Human Studies at the University of Alabama at Birmingham (UAB). Dr. Wilkinson has a Masters of Health Promotion and Education and a Ph.D. in Health Services Policy & Management from the University of South Carolina Arnold School of Public Health. Dr. Wilkinson has published works discussing psychological distress among vulnerable populations and chronic diseases among older adults. In addition, Dr. Wilkinson is the PI of two research grants focused on the well-being of African Americans through secondary data analysis (NIH Supplement) and health coaching intervention (HEART Matters).

Chosen Sub-theme: Changing Outcomes: Health Education and the Continuum of Prevention and Care

Objectives: By the end of the session the participant will be able to report on the importance of religious involvement among African American men.

By the end of the session the participant will be able to explain the association of religious involvement to health promoting behaviors among African American men.

Keywords: Behavior Change/Theories, Men's Health, Minority Health

Special Populations: Men, Minority Populations

Full Abstract Detail: Background: Prevalence of chronic disease and associated risk factors are high among African American (AA) men. According to the American Heart Association (2017), 46% of AA men have some form of cardiovascular disease (CVD). Modifiable risk factors to CVD include health-promoting behaviors (HPBs) such as engaging in recommended amounts of physical activity, eating adequate amounts of fruits and vegetables, and sleeping at least 7 hours nightly.

Methods: Data from the Healthy Eating Activity Rest Together (HEART) Matters Study were analyzed (n = 60). Employing constructs from the Theory of Planned Behavior, Health Belief Model, and the Duke Religion (DUREL) Index: analysis will examine the association between religious involvement and performance of HPBs among AA men.

Results: Preliminary analysis suggest that religious involvement is a significant aspect of life to AA men, particularly older men. Findings among older men demonstrate a relationship with key constructs of the DUREL with performance of PA and Sleep behaviors ($p < 0.10$).

Implications: Several studies recommend the integration of health education outreach within faith-based settings. Findings from this study suggest the integration of health information in faith-based messaging and activities may be important to improving the health of AA men.

Session Type: Poster - ESG

Session Title: A Plan for Addressing Food Deserts in Kalamazoo

Session Number: Poster – Thursday – Th6

Submitting Authors: Rebekah Bensley

Co-Authors: Robert J Bensley, Siarah Cole, Kimi Goodson, Jessica Graber Holly Young

Authors Bio: Robert Bensley has over 2225 funded projects associate with food access and parent-child feeding behaviors. His public health program planning course at Western Michigan University, of which all additional co-authors were enrolled, conducted the research for this project.

Chosen Sub-theme: Changing Systems: Policy, Advocacy, Communications

Objectives: Identify PRECEDE model constructs that influence health outcomes associated food deserts in an urban area.

Explain three best practice interventions to address negative health outcomes associated with food deserts.

Keywords: Nutrition and Obesity Reduction

Special Populations: Disadvantaged Populations

Full Abstract Detail: Background: Food deserts exist in urban or rural areas that have low-access to full functioning grocery stores. These areas have little access to fresh and affordable food options. Food deserts are far more prevalent in low-income areas. The purpose of this project was to assess factors related to food deserts and propose intervention strategies to help address negative outcomes for those living in food deserts in the city of Kalamazoo, MI.

Methods: A literature search for factors associated with food deserts was conducted based on constructs identified in the PRECEDE model. GIS Mapping was utilized to identify food access establishments within census block areas in Kalamazoo.

Results: The behavior and environmental factors included eating behaviors, parent-child feeding behaviors, shopping behaviors, public transportation issues, demographic factors, and infrastructure location. Fourteen predisposing, reinforcing, and enabling factors were identified as factors that influence behavior and environment. Community mapping discovered a lack of full functioning grocery stores within lower-income areas of Kalamazoo. Geographically, food deserts are located in the center of Kalamazoo. The neighborhoods located at the center of Kalamazoo have the highest poverty rates and lowest access to fresh foods. Five best-practice programs were identified to address food access issues.

Conclusion: Food deserts are an important public health issue. Addressing this within in the Kalamazoo community could impact the prevalence of costly health issues and increase quality of life. Increasing knowledge and assistance could greatly improve the amount of fresh, healthy meals in which the community has access.

Session Type: Poster

Session Title: College Student Mentors: Improving Mental Health of Children who are Refugees

Session Number: Poster – Thursday – Th7

Submitting Authors: Laura Nabors

Authors Bio: Laura Nabors is a professor at the University of Cincinnati in the Health Promotion and Education Program. She has authored over 100 articles in peer-reviewed journals. One of her areas of focus is college student mentors delivering health education programming and she also has expertise in mental health promotion for children. Dr. Nabors has authored several books and delivered over 100 presentations at national conferences, including several presentations at national SOPHE conferences. She has a long history of teaching Global Health and conducting service learning programs for children, and this wealth of information would be showcased in this presentation.

Chosen Sub-theme: Changing Outcomes: Health Education and the Continuum of Prevention and Care

Objectives: By the end of the session the participant will be able to:

- 1) identify needs for emotional support in elementary school-age children who are refugees and understand role of college student tutors in implementing activities to promote resilience
- 2) implement positive mental health activities to improve resilience in children

Keywords: Immigration Health

Special Populations: Children & Adolescents

Full Abstract Detail: This presentation will showcase mental health prevention activities for children who were refugees attending an after-school program. The mental health prevention activities were developed and delivered by college students in health promotion and education as an elective service activity for their Global Health course. College students mentored children to promote their resilience and provide positive emotional support during an after-school program. Activities included engaging art activities to build self-esteem, such as a "dynamite dinosaur" where children and their mentors identified children's positive strengths and skills on the scales of a dinosaur. Children and their mentors also made "I am special bags" where they wrote information about how children and they themselves were special on pieces of paper, which they could keep in their bags and look at whenever they needed to feel positive about themselves. Similarly, children and their mentors made shields of strength, where they listed things that were good about them. They learned how shields protect us and that our positive traits can also help us feel strong, even when we are having a bad day. Children and their mentors also developed positive cartoon's and stories where they told positive stories about children's lives. The mentors and children also learned to trade complements in a "complement circle" after playing a game of telephone. Children benefited from play with their mentors, as they were not always able to engage in play at home. Mentors completed reflection journals where they commented on the value of the experience and completed guided reflection questions to learn about the experience of children in refugee camps. Mentors stated that participating in the experience added value to their Global Health

Course and brought the material "to life." They also believed that participating in this experience would enable them to be more competitive in the job market. Furthermore, they wrote that working with children and thinking about mental health, especially working with children who might be experiencing inter-generational trauma, provided them with new insights that were not as meaningful when they read the material. Seeing the children and hearing from their teachers about how they were helping the children, engaged the college student mentors and encouraged them, so that several said they would be involved in future community service. College students were invaluable as mentors, because they were individuals that children admired and listened to, as near peers. The college students easily engaged the children and they worked diligently, via text messaging and in class, to develop weekly activities, which were then approved by the teachers supervising the after-school program. The teachers felt that the college students brought new material and provided an "uplift" that would otherwise not have been available for the children.

Session Type: Poster

Session Title: A Qualitative Exploration of Perceived Factors Leading to College Weight Gain

Session Number: Poster – Thursday – Th8

Submitting Authors: Dr. Retta R. Evans

Co-Authors: Dr Donna O Burnett, Dr. Retta R. Evans

Authors Bio: Dr Evans has served as a professor and researcher in health education and promotion for over 23 years. Her research and resulting presentations and publications have focused primarily on health, nutrition and physical activity in youth and young adults. She is proficient in the use of several statistical software packages, including NVivo qualitative software to analyze data from focus groups and key informant interviews. She has worked with a number of public schools and colleges over the past fifteen years to implement healthier policies and practices.

Chosen Sub-theme: Changing Approaches: Emerging Issues in Research Translation and Implementation

Objectives: By the end of the session the participants will be able to determine three common personal and environmental factors that may lead to weight gain in college students.

By the end of the session the participants will be able to explain a minimum of two strategies for targeted interventions for this at-risk group in the prevention of college weight gain.

Keywords: Health Behavior

Special Populations: Young Adults

Full Abstract Detail: This study investigated perceived factors that may lead to weight gain in college students attending a mid-sized university in the southeastern United States.

American adults gain weight at a rate of ~2 lbs per year. However, young adults attending college appear to gain weight more rapidly than the general population. The transition from adolescence into young adulthood is an important period for excess weight gain. This transition period represents challenges adjusting to new environments and workloads, changes to sleep, activity, and eating patterns, and a new and often overwhelming freedom. Although young adulthood is considered to be a time of optimal health and well-being, this transition period is gaining recognition as an important time for health promotion and disease prevention. Researchers studying college students over the past 10 years have demonstrated that a majority of students gain weight in their college years and call for programs to be developed aimed at prevention

Much of the research on this population has focused on the freshman student while changes in body weight beyond the first year have largely been ignored. The behaviors that lead to college weight gain may be highly influenced by social and environmental means, therefore the researchers of this study utilized SCT to examine the relationships of the social environment to the college student and their behavior as it relates to this topic.

Following collection of demographic information, focus groups were held to assess student perception of factors related to weight-gain (n = 97). Focus group data were analyzed using NVivo software to determine salient themes. Subjects comprised full-time undergraduate students aged 18-25, living both on and off campus.

Themes from focus groups were developed under the constructs of reciprocal determinism. Eleven themes were identified under the environmental construct of reciprocal determinism. Examples included unlimited access to dining hall food, peer influence and lack of supervision. Nine themes were identified under the personal construct of reciprocal determinism. Examples included behavioral cues, food preference and outcome expectations. Lastly, eleven themes were identified under the behavioral construct. Examples included decreased physical activity, eating out and meal management.

Findings suggest that college students are at-risk for college weight gain from multiple social and environmental influences. This study underscored some unique factors in the environment that may call for assessment at the university level when considering program planning for intervention. Targeted research focusing on these influences are needed.

Session Type: Poster

Session Title: Do those who attend together get fit together? Assessing the differential impact of an exercise and nutrition education intervention on those who attend alone verses those who attend with close others

Session Number: Poster – Thursday – Th9

Submitting Authors: Christina Lynn Jones

Co-Authors: Dr Shannon Powers

Authors Bio: Christina Jones, PhD, is a tenure-track Assistant Professor in the Department of Nutrition and Health Science in the College of Health at Ball State University. Dr. Jones' expertise and accompanying research program in health disparities and health advocacy in vulnerable populations spans across chronic disease prevention, social justice and health, and health behavior theory, using both qualitative and quantitative methodologies. She has published manuscripts related to sex education, health campaign evaluation (statewide flu vaccination and campus motorcycle safety), cancer communication and health technology, rural health disparities, culture-centered heart health promotion, and social organization to address food insecurity, represented in notable journals such as Health Education and Behavior, the Journal of Health Communication, and the Journal of Communication.

Chosen Sub-theme: Changing Approaches: Emerging Issues in Research Translation and Implementation

Objectives: By the end of the session, participants will be able to explain the potential impact that program attendance with close authors has on the impact of physical activity and nutrition education interventions within low income audiences.

Keywords: Community Health, Nutrition and Obesity Reduction, Obesity

Special Populations: Disadvantaged Populations, Women

Full Abstract Detail: The prevalence of obesity remains a major public health issue in the United States. Community-based interventions for the prevention of obesity or overweight in low-income adults, adolescents, and children have been widely implemented and evaluated (Wang et al., 2008). We also understand that exercise behavior can be interdependent, based upon the shared attitudes and behaviors of one's family and close friends (Schofield et al., 2007) or the shared resources that are available when units choose to attend together (for instance, sharing rides to/from a class). However, there is a paucity of data evaluating community-based interventions that provide exercise and nutrition education for all family members simultaneously, especially those that encourage family or friend units to attend conjunctively. Similarly, evaluations assessing the impact of comprehensive programs on the outcomes of social units, compared to those who attend such programs alone, are lacking. Since its inception in August 2017, the Cardinal Zumba program has provided all-age, cost-free physical fitness and nutrition education. Cardinal Zumba is a novel model of obesity treatment, grounded in Social Cognitive Theory, which combines individual or group obesity management consultations with exercise and nutrition classes. The program heavily encourages participants to attend with close authors – across

families, friend groups, and work colleagues. Those who attend with others are recorded as a social unit during each program attendance. Every participant is evaluated at baseline and a three-month follow up on a number of biometric and psychosocial markers. To date, a total of 150 participants have completed all require research assessments across a six month attendance period, with almost half having attended the program with at least one close other. The accompanying presentation will discuss the level of impact that program attendance with close others has on the previously noted biometric and psychographic outcomes across a variety of attendance frames, when compared to the impact of the intervention on those who have attended alone. Our results indicate that the impact of the program on biometric outcomes (including body mass index) is significant for those who choose to attend with close others. While this result is shared across perceptions of social support for dietary decisions, one's level of nutrition literacy and diet self-efficacy were not impacted by the decision to attend the program with close others (i.e., there was not a significant different in these outcomes across those who attend alone verses with others). Nonetheless, the broader success of the program across all participants, regardless of choice to attend with others, speaks to the potential that group exercise and wellness instruction may have on building within-program social support networks for improving health, even amongst those who do not bring others to the program each visit.

Session Type: Poster

Session Title: The Evolution of an Undergraduate Public Health Capstone Course for Students Concentrating in Community Health Education and Global Health: Lessons Learned

Session Number: Poster – Thursday – Th10

Submitting Authors: Hannah Priest Catalano

Co-Authors: Mrs. Elisabeth Baynard, Dr. Jorge L Figueroa

Authors Bio: Hannah Catalano, Ph.D., MCHES®, is Assistant Professor and Interim Program Coordinator of Public Health at University of North Carolina Wilmington. She also serves as the Internship Coordinator for the Program and teaches the Internship in Public Health course. Within these roles, Dr. Catalano works very closely with the Capstone in Public Health course instructors to review and refine the course. The Capstone course is designed to be taken concurrently with the Internship in Public Health course, so that students have the opportunity to conduct a comprehensive applied project at their internship site. Dr. Catalano earned her MAED in Health Education from East Carolina University and PhD in Health Education/Promotion from The University of Alabama. She has taught a variety of health education courses since 2010.

Chosen Sub-theme: Changing Minds: The Art and Science of Teaching in Communities and Professional Preparation

Objectives: 1. List two examples of high-impact educational practices that can be integrated into an undergraduate public health education capstone course.

2. Delineate three recommendations for an undergraduate public health education capstone course.

Keywords: Professional Preparation, Program Planning, University/College

Special Populations: New Professionals, Young Adults

Full Abstract Detail: In 2016, the B.S. in Public Health (PBH) program at University of North Carolina Wilmington was accredited as one of the first four standalone baccalaureate programs by the Council on Education for Public Health (CEPH). CEPH accreditation requires students to complete cumulative and experiential activities, and to engage in activities that require students to integrate, synthesize, and apply knowledge. Further, program faculty must encourage exposure to local-level professionals and agencies. The UNCW Capstone in Public Health (CPH) course was designed to integrate and synthesize the content and skills that have been addressed in the curriculum, and provide a culminating learning experience. This course fully addresses each aspect of the cumulative and experiential activities accreditation criterion. CEPH recognized the course innovation and invited program faculty to participate in a CEPH technical assistance panel presentation at the APHA 2018 Annual Meeting. Beyond CEPH accreditation requirements, the CPH applies three high-impact educational practices: community-based learning, e-portfolios, and capstone projects (Association of American Colleges & Universities, 2018). Further, CPH is intended to be taken concurrently with the internship course, which provides students with natural opportunities for applied projects. Students enrolled in CPH are required to: complete a culminating experience project; provide an oral presentation of the cumulative project;

prepare a resume; and submit an acceptable cumulative experience electronic portfolio. The purpose of the electronic portfolio is to showcase student work in an organized electronic format that documents requisite knowledge skills developed via the program. For the culminating experience project, students have the option of completing one or more of the following: (a) conducting a comprehensive review of the literature on a public health topic of the student's choosing, (b) developing and implementing a public health education program in a community, company, or organization, and/or (c) evaluating a public health education program in one of those settings. Each core PBH course has required artifacts that cover specific CEPH public health domains (PHDs) and NCHEC CHES Competencies. These artifacts, when returned to students, are to be revised if necessary and submitted to an electronic portfolio via Taskstream. Students are encouraged to purchase a Taskstream account during their first semester in the program. Significant program growth combined with instructor insight gained through multiple iterations of the course has resulted in a natural evolution of the course. The purpose of this session is to present an overview of the CPH course and lessons learned. Presenters will discuss how AACU high-impact educational practices and CEPH requirements have been integrated within the course. Lastly, recommendations for the development and refinement of similar courses will be presented.

Session Type: Poster

Session Title: Improving Diabetes Literacy through Service Learning in Health Education/Promotion

Session Number: Poster – Thursday – Th11

Submitting Authors: Jen Nickelson

Co-Authors: Dr. Paige Turner Johnson, Dr. Michele Montgomery

Authors Bio: Dr. Jen Nickelson is an Associate Professor of Health Science at The University of Alabama in Tuscaloosa. She has practiced as a Registered Dietitian since 1995. Wanting to take a preventative approach to disease management, in 2008 she earned a PhD in Public Health from the University of South Florida. Drawing on this foundation, she applies community-based participatory research approaches to identify and address communities' expressed needs. Jen leads the Health Lab, a partnership of community members and UA students, formed to address the needs of an underserved community in Tuscaloosa. The Health Lab is currently focusing on diabetes management and health literacy while providing students with applied community health experience. She is currently the PI on a small grant designed to explore the impact of student-led diabetes classes on student and community member outcomes.

Chosen Sub-theme: Changing Minds: The Art and Science of Teaching in Communities and Professional Preparation

Objectives: 1. describe community participants' changes in diabetes-related outcomes
2. describe students' changes in diabetes health literacy

Keywords: Career Development/Professional, Community Health, Diabetes

Special Populations: Disadvantaged Populations, Minority Populations, Older Adults

Full Abstract Detail: Background: Type 2 diabetes disproportionately affects people living in the southeastern region of the country known as the diabetes belt. Per guidelines, "all people with diabetes (should) participate in diabetes self-management education" (DSME). DSME can be an effective way to control diabetes and reduce risk of mortality, yet over 40% of people with diabetes never obtain DSME. Only 5.7% of people with diabetes living in the south took part in DSME within 12 months of diagnosis. The barriers to participating in DSME include financial cost, transportation, and trouble reading. To address some of these barriers, we offered free student-led diabetes classes in a low-income southern community as part of a university service-learning (SL) course in health education/promotion. In class students learned about health literacy, health education strategies for low-literacy and adult populations, and diabetes pathophysiology/treatment. Later they provided supervised community diabetes education. The impact of SL programs on student education is well documented. The impact on students of leading community diabetes classes are less clear. The purpose of this study was to examine change in outcomes among our community diabetes class participants (CPs) as well as the students participating in the SL course (SPs). Methods: CP outcomes were assessed at baseline and at program's end and included diabetes-specific health literacy (DSHL, including knowledge and self-efficacy), global health literacy, behavior, body mass index (BMI), and blood pressure (BP). Hemoglobin A1C (A1C) was

assessed at baseline and at a 6-month follow-up. CP satisfaction with the program also was assessed at program's end. SP outcomes included DSHL [assessed at baseline (T1), at the end of the in-class portion of the class (T2), and at semester's end (T3)] and SP perceptions of SL benefits, assessed at T1 and T3. Results: We recruited 9 CPs and 9 SPs in the first 2 semesters of the SL course. We saw small, non-significant improvement in all CP outcomes except BMI and BP. Follow-up A1C has been obtained from only 1 CP so far, with essentially no change. CPs were very satisfied with the program. Among SPs, mean diabetes knowledge was significantly ($p < .001$) higher at T2 (9.9) and T3 (11.0) than at T1 (3.6), although T3 scores were not significantly higher than T2 scores. SP mean diabetes self-efficacy scores were significantly ($p < .001$) higher at T2 (41.9) and T3 (48.9) than at T1 (26.9), and scores were significantly higher at T3 than T2. Average SL benefits perceptions increased from T1 to T3, but not significantly. Conclusions: The findings suggest that a SL course is an effective pedagogical strategy for improving student diabetes knowledge and self-efficacy, although the study was limited by a non-experimental design. Though changes in CP outcomes were non-significant, we were limited by a small sample size. We will discuss suggestions to further improve the SL course and CP outcomes.

Session Type: Poster

Session Title: Public Health Workforce Training Gaps: Differences in Self-Reported Skills across Educational Categories in the Public Health Workforce

Session Number: Poster – Thursday – Th12

Submitting Authors: Dr. Ashley V Parks

Co-Authors: Nicole Brown

Authors Bio: Ashley Parks, DrPH, MPH, MBA, MTech, MCHES, CPH, CPHQ, HACP, CSSBB, CPHRM, CHTS-IM, PMP, CS-MC, CPPS is an experienced health educator and health administrator. Dr. Parks currently works as an Assistant Professor at California Baptist University and works as a healthcare quality and process improvement consultant. Prior to her current role, Dr. Parks worked previously as a Director of Managed Care and a Research Associate for the UCLA Center for Health Policy Research.

Nicole Brown, MPH is a program manager at Sandals Church and has experience working on a variety of health education initiatives. Nicole has 5 years' experience working in a non-profit organizations managing programs that develop leaders and empower residents to make environmental/policy changes. Nicole is passionate about developing effective leaders.

Chosen Sub-theme: Changing Minds: The Art and Science of Teaching in Communities and Professional Preparation

Objectives: 1. Understand the differences in self-reported confidence in performing public health skills between those who do and those who do not have a graduate public health degree.

2. Discuss appropriate strategies for training and empowering public health workers from diverse educational and experience backgrounds.

Keywords: Professional Preparation, Workforce

Special Populations: Mid-Career Professionals, New Professionals, Seasoned Professionals

Full Abstract Detail: In 2010, the public health workforce was identified as one of the six public health areas that urgently need quality improvement by the Department of Health and Human Services Office of the Assistant Secretary of Health. In 2014, the Public Health Workforce Interests and Needs Survey (PH WINS) surveyed over 10,000 public health workers on perceived confidence in performing 18 skills based on the core competencies of public health professionals. A capable and qualified public health workforce is a workforce that cannot only perform the 10 essential public health services but also the public health core competencies. The public health competencies, developed by the COL, cover eight domains and three tiers that represent foundational skills professionals at various levels need for public health education, practice, and research. The purpose of this study was to identify perceived skill gaps between those with a public health degree and non-public health degree and years in the workforce based on a sampling of responses from the PH WINS. Of all participants sampled (n = 1,374), very few (n = 155) had either a Master of Public Health (MPH) or Doctorate of Public Health (DrPH). The majority of the sample were females (72.5%) between the ages of 41 and 60 (60%) and non-Hispanic White (70.2%). Independent samples t-tests were performed to illustrate that of the 18 public health skills listed in the

questionnaire, those with a public health degree were significantly more confident in performing 17 of the skills than those with a non-public health degree. This study identified areas in need of strengthening in the workforce. A competent workforce is important to ensuring success in public health initiatives and programming. This study's findings are helpful in demonstrating the importance of developing public health workforce training programs specific to those who do not have a public health degree. Training programs catering to this audience should heavily emphasize policy development, budgeting, finding evidence on public health efforts that work, and applying evidence-based approaches to solve public health issues.

Session Type: Poster

Session Title: Challenging but important conversations: Introducing diversity and inclusion into a major's introductory class

Session Number: Poster – Thursday – Th13

Submitting Authors: Stephanie Baller

Co-Authors: Ms. Lesley Lemons, Dr. Katherine Ott Walter, R. Theresa Prodoehl

Authors Bio: Stephanie L. Baller is an Associate Professor of Health Sciences at James Madison University. She received her PhD from the University of Alabama in Health Education and Promotion. Her research interests include materialism, physical activity, and scholarship of teaching and learning.

Chosen Sub-theme: Changing Minds: The Art and Science of Teaching in Communities and Professional Preparation

Objectives: 1. Participants will be able to summarize the three components of a diversity and inclusion framework that can be integrated into an introductory course in a health-related major.

2. Participants will be able to reflect on aspects of one model of diversity and inclusion education as they relate to the needs of students on their campus.

Keywords: Career Development/Professional, Cultural Competence

Special Populations: Mid-Career Professionals, New Professionals, Young Adults

Full Abstract Detail: This project describes the development of diversity and inclusion modules for use in a Health Sciences major introductory course. The project was conducted at a large mid-atlantic university with a predominantly Caucasian (78%, Fall 2019), female (60%, Fall 2017) heterosexual enrollment and similarly predominantly Caucasian instructional faculty (79%, 51% male; Fall 2017). Diversity literature suggests integrating diversity and inclusion throughout the curriculum, however very few descriptions of processes have been published addressing how to introduce the topic to undergraduate health majors. In spite of the curriculum including several courses where issues of diversity are likely to be covered there was still a need to address diversity directly, intentionally, and early in the curriculum providing a basis for subsequent discussions. The major is large and continuing to grow (declared majors >1,650) and diversify across multiple dimensions. A departmental goal is to improve student knowledge, attitudes, and cultural humility in three important ways: 1. Improve student knowledge about diversity and inclusion terminology and language 2. Improve student awareness of their own biases, and 3. Improve student to student interactions as the major continues to diversify. To address these aims the authors compiled a list of important topics and hosted four student focus groups with an emphasis on including underrepresented groups to hear their experiences and perceptions about what content is most needed within the major. The authors developed eight modules covering the following topics: Introduction to basic terminology; race, culture, and ethnicity; age and ageism; sexual orientation, gender identity and expression; socioeconomic status and class; ability and disability; religion and beliefs; and intersectionality. Every module contains three parts introducing students to the basic terminology of the area, how it presents within the healthcare system, and how

the topic may impact their interactions with their peers currently. The modules were then edited, recorded, and produced as short dynamic videos at the media services center. Brief videos increase the likelihood of project fidelity and that each section of the course can easily integrate identical content.

Session Type: Poster

Session Title: E-Cigarettes and Conventional Cigarettes: Perceived Risks and Benefits among College Students

Session Number: Poster – Thursday – Th14

Submitting Authors: Evi Addoh

Co-Authors: Dr. Ovuokerie Addoh, Dr. Marie Barnard, Dr. Martha Bass, Dr. Allison Ford-Wade

Authors Bio: I am Evi Addoh, a graduate student of Health Promotion at The University of Mississippi. I obtained a Bachelor of Dental Surgery degree at The University of Port Harcourt, Nigeria. While in dental school, my involvement in organizing oral health outreaches stimulated my interest in the health promotion field. I hope to gain skills necessary to improve oral health outcomes and quality of life especially among disadvantaged communities. As a health promotion student, I have learned about health behavior theories that explain or predict health behaviors; the Health Belief Model suggests that perceptions influence behavior. This study aims to examine the association between perceptions and the use of electronic cigarettes and conventional cigarettes.

Chosen Sub-theme: Changing Outcomes: Health Education and the Continuum of Prevention and Care

Objectives: Understand how the current literature on e-cigarettes/cigarettes is interpreted among college students

Understand the role of health education professionals in curbing the rising rates of e-cigarette use especially among never-smokers

Keywords: Behavior Change/Theories, Smoking & Tobacco, University/College

Special Populations: Young Adults

Full Abstract Detail: Background: Accompanying the decline in cigarette smoking rates has been a rise in prevalence of e-cigarette use. The ongoing investigations on the health impact of e-cigarettes have been accompanied by mixed messages and a lack of consensus, which may lead college students to rely on their own perceptions of risk and benefits in deciding whether to use e-cigarettes.

Purpose: The purpose of this study was to evaluate the association between perceived risks/ benefits and e-cigarette/cigarette use among college students. Knowledge on the relationship between risk and benefit perceptions and e-cigarette/cigarette use will provide a foundation for health-related professionals and programs to understand how the current literature on e-cigarettes is interpreted among college students and inform intervention strategies.

Methods: Using a cross-sectional study design, the association between the independent variables (perceived risks and benefits) and the dependent variables (e-cigarette use and cigarette use) were assessed using logistic regression models. Perceptions of overall harm of e-cigarettes were grouped into quartiles (Q 1-4) ranging from lowest to highest and the perception of overall harm of cigarettes were

classified into two groups (Group 1- perception scores <100 and Group 2- perception scores= 100). Statistical significance was set at $\alpha=.05$.

Results: Among 1011 participants in this study, 63.9% had used an e-cigarette at least once and 34.8% were current users of e-cigarettes. About half (50.6%) of the participants in this study had used a cigarette at least once while 16.1% of the participants were current cigarette smokers. Compared to Q4, participants in Q1 had 8.29 times the odds (OR 8.29, 95% CI 4.69-14.64, $p<.001$) and Q2 had 2.18 times the odds (OR 2.18, 95% CI 1.38-3.43, $p<.01$) of e-cigarette ever-use. Compared to participants who rated their perceived overall harm of cigarettes as 100, those who had ratings of less than 100 had almost a 2-fold increase in odds for ever-use of cigarettes (OR 1.97, 95% CI 1.43-2.70, $p<.001$).

Conclusion: Considering the significant association of perceived risks/benefits with e-cigarette and cigarette use, this study yields some findings that show the importance of appropriately addressing perceptions. It is paramount to keep the public updated on pertinent research findings on e-cigarettes as this could influence the development of well-guided perceptions. Approximately half of the participants gave the maximum rating for the perceived overall harm of cigarettes highlighting that the adverse effects of cigarettes have been well disseminated. On the other hand, the more widespread distribution for perceptions on e-cigarettes mirrors the mixed messages regarding e-cigarettes. It is imperative for health professionals to have a clear message regarding the absolute safety of e-cigarettes.

Session Type: Poster

Session Title: Developing and Testing a Transactional eHealth Literacy Instrument

Session Number: Poster – Thursday – Th15

Submitting Authors: Dr. Samantha R Paige

Co-Authors: Charkarra Anderson-Lewis, JeeWon Cheong, Dr. Janice L. Krieger, Dr. M. David Miller

Authors Bio: The presenting author is a Postdoctoral Fellow who examines the social influence of technology on health decision-making among adults who are at-risk or living with tobacco-associated lung diseases. She has published several manuscripts related to advancing the concept of eHealth literacy, and she has presented on measurement properties of existing eHealth literacy measures.

Chosen Sub-theme: Changing Outcomes: Health Education and the Continuum of Prevention and Care

Objectives: By the end of the session the participant will be able to describe the three (3) phases of an evidence-based test construction process that employed eHealth experts and end-users from the community;

By the end of the session, the participant will be able to compare the purpose of the four (4) scales included in the Transactional eHealth Literacy Instrument.

Keywords: Computer-Mediated Health Promotion, Evaluation and Measurement, Health Literacy

Special Populations: Older Adults

Full Abstract Detail: Background: Electronic health (eHealth) literacy is associated with patients' access to high-quality and actionable health education, which has significant implications for the public's health across the care continuum. The eHealth Literacy Scale (eHEALS) is the most widely cited measure of eHealth literacy, yet researchers over the past decade have questioned its content validity to represent the social affordances that have evolved alongside advancements in eHealth technologies. For example, the eHEALS does not include items to capture abilities to selectively self-disclose and share narratives among users with varying credibility. In response, the Transactional Model of eHealth Literacy (TMeHL) posits that eHealth literacy is a multi-dimensional, intrapersonal skillset that enables a user to negotiate online exchanges among diverse sources and apply information learned for health promotion. This skillset is comprised of four hierarchical dimensions (functional, communicative, critical, translational), where "functional" includes basic text-based message construction and "translational" consists of planning and applying online knowledge to the offline sphere. An instrument that assesses these four dimensions could help practitioners develop, implement, and disseminate eHealth programs tailored to patients' skills and needs.

Objective: To describe the development and testing of the Transactional eHealth Literacy Instrument.

Methods: eHealth experts (N=5) and users/patients (N=25) identified operational behaviors of each dimension related to the TMeHL. Next, users/patients (N=10) participated in think-aloud interviews to provide feedback and co-revise the items. Finally, a field test was conducted with a random sample of

patients (M=65 years old; SD=10.49 years) from a university-based research registry (N=283). Factor analyses and Rasch procedures examined the internal structure of each scale. Pearson r correlations examined how scores from each scale were associated with information seeking styles and perceived usefulness of eHealth.

Results: The instrument comprised four reliable ($\omega=.92-.96$) and correlated ($r=.44-.64$) factors, with adequate item and model fit (RMSEA=.07, 90% CI=.06-.08; $\chi^2=308.71$, $p<.05$; CFI=.95; TLI=.94). The factors are described as functional (4-items), communicative (5-items), critical (5-items), and translational (4-items) eHealth literacy scales. Scores with each scale were positively associated with perceived usefulness of eHealth and negatively associated with perceived challenges in online health information seeking. Communicative eHealth literacy scores had strong, positive associations with interactive ($r=.52$, $p<.001$) and active ($r=.43$, $p<.001$) online information seeking.

Discussion: Health education specialists can use this brief, reliable instrument to assess functional, communicative, critical, and translational eHealth literacies of a priority population.

Session Type: Poster

Session Title: Evaluation of Kognito to Increase Mental Health Literacy Among University Faculty and Staff

Session Number: Poster – Thursday – Th17

Submitting Authors: Concha Prieto

Co-Authors: Dr. Jennifer Bleck, Dr. Rita DeBate, Amy Gatto,

Authors Bio: Concha Prieto is a second-year Master of Public Health candidate at the University of South Florida with a concentration in Epidemiology and Global Health Practice and earned a Bachelor's of Science degree in Public Health. Serving as a Graduate Research Assistant in the evaluation of the Early Childhood Comprehensive Systems impact project, she has gained experience conducting community-based participatory research, and early childhood developmental systems in Florida. Furthermore, as a research assistant for the Center for Transdisciplinary Research in College Health and Well-Being, she has furthered her knowledge on mental health and data analysis.

Chosen Sub-theme: Changing Approaches: Emerging Issues in Research Translation and Implementation

Objectives: Identify the constructs and associated sub-constructs of mental health literacy.

Recognize their impact on help-seeking behaviors among college students.

Describe differences in faculty and staff before and after completing an online mental health literacy program.

Keywords: College Health, Evaluation and Measurement, Mental Health Communications

Special Populations: Young Adults

Full Abstract Detail: Background: In the last decade, mental health disorders have become extremely prevalent on college and university campuses; however, the utilization of support services is low. Research has found that the low utilization of services is due to low mental health literacy (MHL) which limits a person's ability to recognize, manage, and treat their mental health issues and eventually leads to a negative impact on academic success and social relationships. As people who have constant contact and an established relationship with these students, faculty and staff at these campuses, can serve as gatekeepers to support services. However, in order for them to serve as this role, faculty and staff must be equipped with the appropriate MHL needed to provide support for students and address this growing public health issue. To do this, the University of South Florida has implemented an interactive online module, called Kognito, for students, faculty, and staff to increase their MHL. This study aims to evaluate the effectiveness of Kognito at increasing overall MHL.

Methods: During the 2018-2019 Kognito was piloted among select faculty and staff groups (e.g., residential education, student conduct, etc.) with the intention to have full implementation across campus during the 2019-2020 academic year. Before completing the program and immediately following, participants complete a questionnaire assessing their MHL. The survey consists of a 24-item

Likert scale, ranging from strongly disagree to strongly agree, that measures the MHL constructs. Components included in the scale include: knowledge of mental health signs and symptoms, beliefs about mental illness, knowledge of available resources, behavioral intentions, and self-efficacy. The possible range of scores is from 24 to 120 with higher scores indicating higher levels of MHL.

Results: Currently, further data is being collected and analysis is ongoing regarding benefits towards faculty and staff being trained through Kognito. Data collected will compare changes in MHL from pre- and post- tests, compare differences among faculty and staff as well as differences when taking demographic information into account, and overall analyze any significant changes in MHL scores.

Conclusions: Findings from this study will provide information on whether Kognito is capable of equipping faculty and staff with the necessary MHL to identify students with mental health disorders and refer students to appropriate services in a timely manner. Faculty and staff, such as professors, teaching assistants, and advisors would benefit from this training due to their interaction with students allowing them to serve as a link to professional help.

Session Type: Poster

Session Title: Diabetes self-care: A comparative analysis of commercial diabetic applications against AADE recommended behaviors for self-management of diabetes

Session Number: Poster – Thursday – Th18

Submitting Authors: Dr. Joy L Rodgers, MCHES

Authors Bio: Joy L. Rodgers (author) is a Master Certified Health Education Specialists (MCHES) who holds a Ph.D. in mass communications with an emphasis in digital health communication. She teaches undergraduate and graduate health communication and patient health education courses at the University of Florida.

Chosen Sub-theme: Changing Systems: Policy, Advocacy, Communications

Objectives: By the end of the session the participant will be able to: (1) Summarize what AADE recommended behaviors are built into commercial diabetes applications, based on evidence-based research as described in the session and (2) Assess how well commercial diabetes applications compare to AADE self-care behaviors, based on evidence-based research as described in the session.

Keywords: Diabetes, Health Communications & Technology, Patient Education

Special Populations: Disadvantaged Populations, Minority Populations, Older Adults

Full Abstract Detail: This abstract submission outlines a health communications and technology study that will be initiated in the fall of 2019 and completed in early 2020. Specifically, the study entails a comparative analysis of commercial diabetes applications against the seven American Association of Diabetes Educators (AADE) recommended behaviors for self-management of diabetes. The research questions the study will aim to answer are (1) What AADE behaviors are built into commercial diabetes applications? (2) How many AADE behaviors are built in commercial applications? (3) Do Google Play rankings correlate with the number of behaviors built into commercial applications? (4) How do commercial applications compare to self-care behaviors? The thesis statement for this study is that the commercial application that incorporates most of the seven AADE behaviors will have the highest ranking.

A systematic literature review (method) will be used to develop comparative charts – one for the seven AADE behaviors and one for the identified commercial applications. The behaviors chart will answer the following questions: (1) What is the effect of the behaviors on health? (2) What happens if all seven behaviors aren't followed, e.g., they are split? (3) Can the behaviors be ranked in order of importance to health? (4) Are there combinations of behaviors that work well? (5) What is the significance of the behaviors in self-care management? Questions to be answered in the comparative commercial applications chart are: (1) What behaviors are inherent in the applications? (2) How do the applications work? (3) How effective are the applications? (4) How are the applications ranked (from customer reviews in Google Play)? (5) How many behaviors are built into each of the applications? (6) What behaviors are built into the applications?

Findings from this comparative analysis of commercial diabetes applications with the seven AADE recommended behaviors for diabetes self-care management may be used to improve patient education in management and self-care of diabetes.

Session Type: Poster

Session Title: Fostering Health Education as a Catalyst for Social Justice: Pedagogical Practices for Pre-Professional Programs

Session Number: Poster – Thursday – Th19

Submitting Authors: Bonni C Hodges, Ph.D

Co-Authors: Dr. Donna M Videto, MCHES

Authors Bio: Both presenters have taught in school and community health pre-professional programs for over 25 years. They currently work at a college with a Carnegie Civic Engagement designation. Dr. Hodges has worked on health equity initiatives for the past 30 years and Dr. Videto serves as the Director of the Faculty Development Center at SUNY Cortland. Both have designed and implemented multiple pedagogical workshops.

Chosen Sub-theme: Changing Minds: The Art and Science of Teaching in Communities and Professional Preparation

Objectives: Objective 1: identify and help pre-professionals identify the impact of social justice issues on health

Objective 2: apply principles of cultural competence in selecting and/or designing strategies to achieve at least 1 social justice student-learning outcome

Keywords: Health Equity, Professional Preparation, Social Inequity

Special Populations: Mid-Career Professionals, New Professionals, Seasoned Professionals

Full Abstract Detail: Mayhew and Fernandez (2007) suggest that building students' commitment to social justice outcomes requires not just learning about social justice issues and their causes, but requires opportunities to practice integrating and applying this knowledge to professional practice. A necessary intermediate step between knowledge and application being self-reflection. This work and others' (e.g. Mitchell, Donahue, & Young-Law, 2012) point to the need for courses to use a societal social-determinant perspective, not just a personal perspective, to achieve social justice-related student-learning outcomes. Many higher education institutions and programs have instituted civic engagement practices and requirements such as service learning (CUEI, 2019) in part to foster social justice issue awareness and outcomes but some urge caution as service learning can be a "pedagogy of whiteness" (Mitchell, Donahue, & Young-Law, 2012).

This session will explore and share best practices in social justice and culturally relevant pedagogy and challenges to employing social justice pedagogy through the lens of an 18-year evolution in community health and school health programs at a comprehensive college in the northeast. Participants will learn at least one new pedagogical practice that will facilitate social justice student-learning outcomes and engage in discussions around addressing the issues with and challenges to infusing social justice pedagogical practices.

Session Type: Poster

Session Title: Health Promotion Student Association: History, Opportunities, and Vision of an inclusive, interdisciplinary health promotion student organization at a Hispanic Serving Institute – UT El Paso

Session Number: Poster – Thursday – Th20

Submitting Authors: Karen Del Rio

Co-Authors: Juan Aguilera, Jeannie Concha, Paola Guillen, Holly Mata

Authors Bio: Karen Del Rio is enrolled in the Master’s in Leadership Studies at UT-El Paso. She holds a bachelor’s degree in Health Promotion with minors in Community Health and Nutrition. Also, she is a Research Coordinator in the Dept of Public Health. She is known for her contributions as founder and current President of the Health Promotion Student Association. She has coordinated and organized health promotion and philanthropy events in the community and at UTEP. This past spring, the “Food Distribution and Health Fair” distributed 35,000 pounds of food among UTEP students. Additionally, she hosted with her research team several health fairs during the Nacional Public Health Week; UTEP students received diabetes prevention information, healthy eating recommendations and free health screenings. She also served as Health Sciences Collegiate Senator, Karen created student engagement opportunities.

Chosen Sub-theme: Changing Perspectives: Leveraging Sectors, Engagement and Partnerships

Objectives: Objective 1: By the end of the session participants will be able to identify the benefits of participating in inclusive interdisciplinary health promotion student organizations.

Keywords: College Health

Special Populations: Disadvantaged Populations

Full Abstract Detail: The Health Promotion Student Association (HPSA) is a student organization that was approved in 2017 at the University of Texas at El Paso (UTEP). HPSA promotes the development of health professionals through hands-on experience aimed to improve the health status of the El Paso TX community. Intended as an organization for health promotion students, HPSA opened membership to students from other departments because of their interest in reach events. Membership now includes students from physical therapy, psychology, interdisciplinary health, biology, nursing, engineering, and computer science.

The HPSA has become a leading voice at UTEP for those who lack access to health. Low-income residents (including UTEP students) are in great need of health services. We provide health information and collaborate with health screening programs within the city and in outlying rural areas and colonias. For many, this is a unique opportunity since they had not visited a clinic/doctor in the past few years. Often, participants weren’t aware they needed medical help.

In 2018, we participated in more than 40 health screening and health education events. The diversity, experience, and willingness of the HPSA members has expanded our reach and increased the amount of

events offered this year. We are planning to maintain this trend many more years. These events teach our members to engage with community members and gain valuable experience in health advocacy.

HPSA provides members the opportunity to network and collaborate with many organizations working in the community. Our collaborative events amplify the work that individual organizations do, and increase our community capacity to serve our community.

HPSA members are current leaders in their respective fields, many recent graduates quickly gained job offers or are continuing their education. Our partners benefit from the contact with the community and the students, but also, we make contacts for future events and agencies add HPSA to their contact list for volunteering opportunities and jobs when members graduate!

We also highlight how we engage in scholastic opportunities. Many of our members have presented abstracts related to their research at local, regional, and national conferences. In 2019, we attended the SOPHE Annual Meeting for the first time. We raised over \$3,000 to cover travel expenses to Salt Lake City. This was an amazing experience and as an organization it opens our door to new heights. Our next step is to make ourselves known at the national level and engage with other SOPHE students interested in interdisciplinary health promotion activities.

Session Type: Poster

Session Title: What's Change Got to Do with It? Developing Trainings to Build Resilience for Turbulent Times

Session Number: Poster – Thursday – Th21

Submitting Authors: Dr. Melissa Alperin

Co-Authors: Mary Joyce Bacon, Mrs. Michelle L Carvalho, Laura M Lloyd, Hilary Merlin, MEd

Authors Bio: Melissa (Moose) Alperin is the PI of the Region IV Public Health Training Center (PHTC), a HRSA-funded training center that provides field placement opportunities for public health students and trainings for the public health workforce in the eight southeastern states (AL, FL, GA, KY, MS, NC, SC, TN) that make up HHS's Region IV. Additionally, she holds a faculty appointment in the Department of Behavioral Sciences and Health Education at the Rollins School of Public Health at Emory University.

Chosen Sub-theme: Changing Systems: Policy, Advocacy, Communications

Objectives: Discuss the Region IV Public Health Training Center (R-IV PHTC) findings from the competency mapping and environmental scan of trainings related to change management.

Access training resources about change and resilience addressing individual, team, and organizational levels of the public health workforce.

Keywords: Workforce

Special Populations: Mid-Career Professionals, New Professionals, Seasoned Professionals

Full Abstract Detail: The Region-IV Public Health Training Center (R-IV PHTC), which serves 8 states in the southeast, is funded by the Health Resources and Services Administration (HRSA) along with nine other regional PHTCs to provide training to the governmental public health workforce (new, mid-career, and seasoned professionals) in the strategic skill areas identified in the National Consortium for Public Health Workforce Development's 2017 "Building Skills for a More Strategic Public Health Workforce: A Call to Action" report. Towards that end, the R-IV PHTC worked with several regional PHTCs and the National Network for Public Health Institutes to map competencies in three priority strategic skills areas (change management, systems thinking, persuasive communication) and conduct an environmental scan of existing trainings. The R-IV PHTC focused on defining what change management means for the PH workforce.

Working with a certified change management consultant, the R-IV PHTC identified change management competencies needed by the PH workforce using a two-pronged approach. First, competency models from change management and healthcare executive professional organizations were reviewed for relevance to the PH profession. Next, PH practice and academic competencies related to change management were identified. In the end, 53 change management competencies needed by PH professionals were identified; 20 of which were thought to be high-priority for inclusion in training development. An environmental scan of existing trainings was also conducted.

Simultaneously, the R-IV PHTC began developing training around change management and looked to several SMEs in change management and organizational resilience. The R-IV PHTC has used different modalities to offer change management training (e.g., webinars, on-demand webinars, Interactive Online Workshops [IOW], in-person trainings). Live and on-demand webinars engage learners in content about personal roles in the change process, including building resilience, increasing readiness for change, and incorporating change management into organizational strategy. The IOWs, an online skills-based training using a hybrid of asynchronous pre-session work and a 2-hour synchronous session, take a deeper dive to help leaders assess their own initial responses to change, exercise flexibility in leadership, and apply an iterative approach to leadership. Additionally, the R-IV PHTC's skill-based, in-person change management training is designed to help participants understand the fundamental elements of successful change, plan actions to increase change effectiveness, overcome common change-related challenges, and increase personal change readiness.

This session will share an overview of the competency mapping initiative as well as describe R-IV PHTC change management workforce development trainings designed to help professionals build resilience and flexibility to quickly address emerging PH needs and priorities.

Session Type: Poster

Session Title: Collaborative Student Led Walking Program: Quality Improvement Data for 1 Year Partnership between an Immigrant Resource Center and a Health Sciences University

Session Number: Poster – Thursday – Th22

Submitting Authors: Kaitlyn Todd

Co-Authors: Ariel Katz, Emily Stone, Charlotte van Schooten

Authors Bio: Kaitlyn Todd, Emily Stone, and Charlotte van Schooten are medical students at Chicago Medical School, Rosalind Franklin University of Medicine and Science. Kaitlyn received her B.A. in Psychology and M.S. in Modern Human Anatomy from the University of Colorado. Emily received her B.S. in Biology from the University of Illinois in Chicago. Charlotte received her B.S. in Biology from the University of the Pacific in Stockton, CA.

Dr. Ariel Katz is an Associate Professor and the Education Director of Clinical Skills at Chicago Medical School, Rosalind Franklin University. Dr. Katz is a board certified Internal Medicine and Preventive Medicine physician with an MPH in Epidemiology from UIC School of Public Health.

Chosen Sub-theme: Changing Perspectives: Leveraging Sectors, Engagement and Partnerships

Objectives: Define the roles of a University and their community partner when creating an outreach walking program.

Discuss various barriers to community participation and how to overcome them.

Keywords: Minority Health, Partnerships/Coalitions, Quality Improvement

Special Populations: Disadvantaged Populations, Minority Populations

Full Abstract Detail: Issues: The National Health and Nutrition Examination Survey reports that 65% of Hispanic men and 74% of Hispanic women do not participate in leisure-time physical activity. Our University offers screening services for chronic diseases, but offers no programs aimed at empowering patients to make behavioral change. We have partnered with a local immigrant resource center to create a student led walking program to address this disparity

Description: This is a quality improvement study of a pilot walking program. The program involves a 15 minute talk by a health-professional followed by a 45 minute walk. At each walking event the number of participants and student volunteers, weather, and qualitative feedback from participants and community partners are recorded.

Challenges: Barriers to program implementation included: student recruitment, community participation, and weather.

Lessons Learned: Community participation increased by over 100% when our community partner advertised for events compared to student-led advertising. We expect participant retention to continue increasing as the weather improves, awareness increases, and as the program is further tailored to our

participants. Student participation remained at the same level throughout the year until the end of the spring semester when the number of volunteers decreased, which we attribute to final exams.

Session Type: Poster

Session Title: A Social Marketing Approach to Increase Utilization of an Online Self-Help Program among Male University Students

Session Number: Poster – Thursday – Th23

Submitting Authors: Amy Gatto

Co-Authors: Dr. Rita DeBate, Kaitlyn French

Authors Bio: Amy Gatto, MPH is a Research and Evaluation Specialist for Health and Wellness and a doctoral candidate in the Department of Health Policy and Management at the University of South Florida. She coordinates multiple projects in the Center for Transdisciplinary Research in College Student Health and Wellbeing at USF. Her research interests include adolescent and young adult health, specifically perinatal HIV and college student wellbeing, policy and program development, implementation, and enforcement, and alcohol and other drug prevention.

Chosen Sub-theme: Changing Approaches: Emerging Issues in Research Translation and Implementation

Objectives: Identify the constructs of mental health literacy and their relationship to professional help-seeking behaviors

Apply a social marketing framework for mental health concerns

Keywords: College Health, Men's Health, Mental Health Communications

Special Populations: Men, Young Adults

Full Abstract Detail: Background: Mental Health Literacy (MHL) described as knowledge and beliefs about mental disorders which aid their recognition, management, or prevention has been connected with mental health service utilization. Greater MHL has been shown to increase college students' attitudes toward seeking professional services and adherence to care. College males have been noted with low MHL and current research indicates males adopting negative coping mechanisms as opposed to seeking care. The purpose of this study was to develop, implement, and evaluate a social marketing campaign to increase the utilization of an online self-help program by male university students.

Methods: During the 2018-2019 academic year messages and images were identified and tested among male undergraduate students related to professional help-seeking behaviors for mental health concerns. The highest rated messages and images were selected for a social marketing campaign to promote an online self-help program for this population and a QR code linking to the program was added to the image. During Summer 2019 the finalized campaign was implemented in male restrooms in target locations (e.g., student recreation building, student center, etc.) with a total of 33 sign locations. The materials were updates weekly to ensure each image would be viewed by male students during the implementation period. The following information was tracked throughout the campaign to determine reach and utilization: location and date of posting; number of students who clicked on online self-help program, signed up for the program, took the anonymous screen, completed the screen, and started the

online self-help modules by date; and overall program completion including any change in scores from initial screen to completion. Student usage was tracked throughout.

Results: Data collection is currently occurring and should be complete in August 2019. To date, 401 students have enrolled in the online self-help program, with 64 participants having logged in with the QR code provided on in the social marketing campaign.

Implications for Practice: Social marketing campaigns addressing MHL among male college students have the potential to help male students connect to mental health resources before or when they need help. By involving male undergraduate students in the development of the campaign the information resonates with this population. Male students are likely to relate to the materials thus engaging in the call to action of signing up for the online self-help program. Findings from this study will inform the use of this campaign in additional campus locations or revisions to improve the campaign to encourage the use of the online self-help program.

Session Type: Poster

Session Title: Using a Peer Education Approach to Create an Educated Culture of Friends

Session Number: Poster – Thursday – Th24

Submitting Authors: Grace Turner

Co-Authors: Eric Conrad, Kelly Corrine Hall, Elisabeth Harrington,

Authors Bio: Elisabeth Harrington (first author) is the Graduate Assistant for Prevention Education at the University of Northern Colorado, and is the student who created and implemented the program "Creating an Educated Culture of Friends". Grace Turner (second author) is the Prevention Coordinator for Prevention Education and contributed to the development of the CCEF program.

Chosen Sub-theme: Changing Perspectives: Leveraging Sectors, Engagement and Partnerships

Objectives: Understand the importance of peer to peer interventions on college

Prompt campus partners to utilize student tragedy, vulnerability and passion through peer education to create and empower sustainable change within a university setting

Keywords: Alcohol & Substance Abuse, Behavior Change/Theories, College Health

Special Populations: Young Adults

Full Abstract Detail: According to a national survey, nearly 60% of college students aged 18-22 drank alcohol in the last month. Furthermore, two out of three college students reported binge drinking within the last month. To ensure the safety among college students, it is imperative that campuses implement high quality, evidence-based practices to address alcohol misuse. Due to a personal tragedy surrounding the loss of a friend from college hazing, Creating a Culture of Educated Friends (CCEF) was developed by a senior undergraduate student at a mid-sized urban university. CCEF was designed to increase student efficacy by identifying the signs and symptoms of alcohol poisoning as well as other negative consequences associated with alcohol misuse. The intended outcome of CCEF is to decrease the student stigma associated with college students contacting emergency responders regarding alcohol misuse. CCEF was developed from current best practices on peer to peer education (peer educators) and used the theory of planned behavior as a conceptual framework. A peer educators' role is to deliver accurate information and guidance to their fellow college students that can hopefully reduce future alcohol misuse among college students. Peer educators have been shown to be useful catalysts for change amid underage drinking due to their relevant knowledge, behaviors, and similar age. CCEF was presented as a 60-minute interactive training to over 400 college students. This session will focus on university wide collaboration for curriculum design, the importance of implementing peer to peer education, and creating sustainable programming targeting social change among college student's drinking behaviors.

Session Type: Poster - ESG

Session Title: The Effects of Stigma on College Student Sex Workers

Session Number: Poster – Thursday – Th25

Submitting Authors: Heather Tillewein

Authors Bio: I am a Doctoral Candidate in Health Education at Southern Illinois University. My research focuses on sexual health, mental health, women's health, and LGBTQ+ health. I have presented two of my research projects at APHA and one at a regional conference. I have a background in public health focusing on disadvantaged populations.

Chosen Sub-theme: Changing Systems: Policy, Advocacy, Communications

Objectives: Analyze the impact stigma has on college student sex workers and describe changes in policy in academia for college student sex worker. Identify how sex work impacts various aspects of college student sex workers' lives.

Keywords: Advocacy, College Health, University/College

Special Populations: Disadvantaged Populations, New Professionals, Young Adults

Full Abstract Detail: Background: Reasons that students choose sex work are multifactorial, with many studies having concluded that situational factors or economic necessity dictates the desire for students to become exotic dancers. Students have identified that participating in sex work provides financial security and flexible work hours, thus allowing them adequate time to focus on academics and providing them financial support for education. While individuals have noted positive aspects to working in the sex industry, there are negative aspects as well. Student sex workers have reported keeping their work a secret from family, professors, and other students in fear of judgment. There are six dimensions of stigma that can be related to students who participate in sex work and the impact sex work can have on the individual.

Methods: This qualitative study used a phenomenological and multiple case-study approach to investigate experiences and perceptions of college student exotic dancers. Interviews were transcribed and coded, before being arranged into overarching thematic schemes.

Results: Participants discussed common stigma-related themes related to student sex workers. Specifically, participants reported that stigma creates a violent work environment, inhibits future employment, and negatively impacts family relationships and intimate relationships. Participants discussed how exotic dancing impacts their student-teacher relationships and their relationships with college peers. Another theme that developed was how being a sex worker has inhibited participants from participating in (extra)curricular activities, registered student organizations, and internships. Lastly, many participants expressed the perception that the university environment and policy was not supportive of student sex workers.

Discussion: Student sex workers face stigma due to their profession. This study shows how the stigma of being a sex worker can impact students' academic careers negatively. There is a need for change in university policy and environment to acknowledge student sex workers and provide them with public health resources.

Session Type: Poster - ESG

Session Title: Gun Policies on Michigan University Campuses

Session Number: Poster – Thursday – Th26

Submitting Authors: Robert J Bensley

Co-Authors: Dr Amos O Aduroja, Janie Shipman, Mary Smith, Cassandra Welborn

Authors Bio: Dr Aduroja, Mary Smith, Grace Wood, Janie Shipman and Cassandra Welborn attended the 2018 SOPHE Advocacy Summit where the focus was on advocating for gun policy and control. Dr. Aduroja teaches the Advocating for Public Health Policies course and Dr. Bensley coordinates the public health program at Western Michigan University.

Chosen Sub-theme: Changing Systems: Policy, Advocacy, Communications

Objectives: By the end of this session the participant will be able to:

Describe gun policy prevalence on Michigan campuses.

Compare and contrast the difference between Michigan gun policy for campuses with actual policies being employed.

Keywords: Health Policy

Special Populations: Young Adults

Full Abstract Detail: Background: Gun policy on university campuses is a current controversial topic, initially dating back to Thomas Jefferson and James Madison who agreed that no student should keep or use weapons of any kind. The state of Michigan is 1 of only 4 states to restrict concealed carry on college and university campuses, although they do allow individual colleges and universities to exercise their own rights in regulating open carry policies.

Methods: A convenient sample consisting of 8 out of the 15 public universities in Michigan were selected for this study based on a variety of characteristics, including student size, urban vs. rural, and geographic location. Universities included: Central Michigan University, Eastern Michigan University, Michigan State University, Michigan Technological University, Northern Michigan University, University of Michigan, Wayne State University and Western Michigan University. A data collection procedure was constructed using existing data from university web pages. Data were then studied and the university policies compared.

Results: Nearly all (7) universities in the sample prohibit guns on campus. One university allows students to register a firearm if the firearm is unloaded and in the possession of the university. Five universities have policies where violators of gun policies will be expelled or fired, one of which includes that violators will face criminal prosecution.

Conclusion: Gun policies on college campuses are different from the gun policies of the state. Even though Michigan restricts concealed carrying on college and university campuses they do not ban open carrying on public or private universities. The state does give universities the option to choose their own

open carrying laws. College campus gun policies vary by each university, where it was found the universities in this study do have policies that either restrict guns or if registered have in the possession of the university.

Session Type: Poster - ESG

Session Title: Concealed Gun Policy and Student Perceptions in Michigan College Campuses

Session Number: Poster – Thursday – Th27

Submitting Authors: Robert J Bensley

Co-Authors: Dr Amos O Aduroja, Rebecca Doering, Makenzie Hayes, Kaleigh Storey

Authors Bio: Dr. Aduroja, Rebecca Doering, Makenzie Hayes, Kaleigh Storey and Maria Young attended the 2018 SOPHE Advocacy Summit focused on advocating for gun control and policies. Dr. Aduroja teaches the Advocating for Public Health Policies course and Dr. Bensley is the coordinator of the public health program at Western Michigan University.

Chosen Sub-theme: Changing Systems: Policy, Advocacy, Communications

Objectives: Describe student perceptions about concealed gun carry policies in Michigan universities.

Explain how concealed carry gun policies are being employed at Michigan universities.

Keywords: University/College

Special Populations: Young Adults

Full Abstract Detail: Background: Many college administrators and law enforcement officials have voiced serious concerns regarding gun violence on college campuses. Those who oppose the change often cite a lack of evidence that shows students carrying weapons would reduce campus violence. In addition, a 2013 survey of 15 Midwestern colleges and universities found a vast majority of college students do not want concealed handguns on their campuses. The purpose of this study was to examine gun perceptions and practices among college students in the state of Michigan.

Methods: All 15 public universities in Michigan were selected for this study. Data collection was conducted using literature searches on student perceptions and practices related to concealed weapons on publicly funded college campuses in Michigan, as well as university websites.

Results: Findings indicate universities in Michigan are attending to concealed carry gun concerns. The majority of universities in the state of Michigan have a chapter of Students for Concealed Carry, the concealed gun policy in Michigan does address the perceptions and practices among students, and students would feel safest if guns were not permitted.

Conclusion: Findings have shown students are concerned about gun policies and would feel safest on college campuses if guns were not permitted. Better education about gun control can address any lack of knowledge surrounding gun laws on campuses.

Session Type: Poster - ESG

Session Title: Examining College Women's Hookup Behaviors and Condom Negotiation Strategies Used with Their Online and Offline Partners

Session Number: Poster – Thursday – Th28

Submitting Authors: Dr. Jennifer L. Evans

Co-Authors: David A. Birch, PhD, MCHES, Dr. Jeff M Housman, James Leeper, PhD, Angelia M. Paschal

Authors Bio: Dr. Jennifer L. Evans is a Clinical Assistant Professor at Texas A&M University. She earned her PhD from The University of Alabama in Health Education and Promotion. Dr. Evans' research interests include women's health and human sexuality. She is particularly interested in condom negotiation and condom use resistance tactics and hookup behaviors among college-age students.

Chosen Sub-theme: Changing Approaches: Emerging Issues in Research Translation and Implementation

Objectives: By the end of the session the participant will be able to identify the four common types of condom negotiation strategies

By the end of the session the participant will be able to describe what online and offline hookup partners are

Keywords: Sexual Health, University/College, Women's Health

Special Populations: Women, Young Adults

Full Abstract Detail: Introduction: Approximately 60-80% of college students report engaging in a hookup at some point during their college career. College students find hookup partners through traditional meeting contexts, but dating apps and social media have become a new resource to identify potential sexual partners. Because males are the ones who physically wear condoms, safer sex efforts may require the female to possess condom negotiation skills to persuade her male partners to use a condom. Previous research has not investigated the use of condom negotiation strategies with partners identified online or offline. The primary purpose of this study was to identify differences between the mode in which college women seek male hookup partners (online, offline, and both online and offline) and the condom negotiation strategies used with these partners. A secondary purpose of the study was to utilize the constructs of the Theory of Planned Behavior (TPB) to predict and identify differences in condom negotiation intention with male hookup partners met online, offline, and both online and offline.

Methods: The present study utilized a quantitative, cross-sectional design paper and pen survey administered to a convenience sample of 296 undergraduate women enrolled in select courses at one Southeastern University.

Results: Of the 296 undergraduate women who completed the survey, 155 (52.4%) reported engaging in hookups over the previous six months. One-way ANOVAs and General Linear Model analysis were conducted. No significant differences were found between where college women identified their

hookup partners and the constructs of the TPB. Nonverbal indirect condom negotiation strategies ($F(2, 151, 3.55, p < 0.05)$) were significant among those who found partners offline ($M = 13.38, sd = 4.59, p = 0.048$). Perceived behavioral control ($p = 0.043$) had a significant effect with behavioral intention when examining the TPB constructs by where college women identified their hookup partners.

Conclusions: Based on the findings of this study, public health educators should continue to explore condom negotiation strategies employed among those individuals who engage in hookups utilizing the TPB. Additionally, interventions are needed that incorporate information about the different types of condom negotiation strategies and to educate college women on how to negotiate condom use with their hookup partners.

Session Type: Poster - ESG

Session Title: “You Know Me...”: Reasons Women Give For Having an Abortion

Session Number: Poster – Thursday – Th29

Submitting Authors: Dr. Jennifer L. Evans

Co-Authors: Meghan E Burroughs, Sally Klimek, Rebecca Rich, MA

Authors Bio: Dr. Jennifer L. Evans is a Clinical Assistant Professor at Texas A&M University. She earned her PhD from The University of Alabama in Health Education and Promotion. Dr. Evans' research interests include women's health and human sexuality.

Chosen Sub-theme: Changing Systems: Policy, Advocacy, Communications

Objectives: By the end of the session, the participant will be able to list 3 reasons why women have abortions

By the end of the session, the participant will be able to discuss different methods that can help reduce the number of abortions

Keywords: Access to Health Care, Reproductive Health, Women's Health

Special Populations: Women

Full Abstract Detail: Introduction: Previous research has explored reasons women provide for having an abortion; however, research on this topic among women, especially US women, has been limited. Recently, legislation sweeping the nation, has restricted access to abortion in several states or has banned abortion completely, as seen in Alabama. This new legislation has been met with criticism by some. One way in which individuals are expressing their concern and experiences is through social media activism which has emerged on Twitter in recent years. Following reports of abortion access being restricted in Georgia and Alabama, the actor Busy Phillips, shared her abortion story with the hashtag #YouKnowMe. This has led to many other women sharing stories of why they chose to have an abortion. Because research has been limited on this topic and due to the recent legislation restricting access, reasons in which women have abortions should be further explored. Therefore, the purpose of this study was to identify reasons women give for having an abortion via tweets using the hashtag #YouKnowMe.

Methods: Using the Twitter Advanced Search Tool, tweets containing the hashtag #YouKnowMe were extracted. Quantitative and qualitative methodology were employed to investigate and identify themes for the reasons why women have abortions.

Results: Tweets that did not share stories or experiences of having an abortion were not included in the analysis; thus, the final sample of Tweets analyzed were 38. The results of the analysis indicated that there were four overall themes: relationship issues/rape, did not want to be a mother, the impact of motherhood, and mental health/health issues.

Conclusions: The findings from this study have broader implications other than increasing access to abortion. The results from this study provide implications to the health education field such as the need for education and increased access for contraception, especially emergency contraception. Access to emergency contraception could lead to a reduction in unintended pregnancies and potentially reduce the number of women who have to seek abortions.

Session Type: Poster - ESG

Session Title: Needs Assessment of Student Financial Loan Stress and Program at WMU

Session Number: Poster – Thursday – Th30

Submitting Authors: Dr Amos O Aduroja

Authors Bio: With over 35 years in the field of Public Health, Dr. Amos Aduroja has a Ph.D. in the field of Public Health with an emphasis in evaluation from the University of Michigan. He teaches Public Health courses at Western Michigan University Public Health Program. Dr. Robert Bensley has over 25 years of experience in Public Health. He also has a Ph.D. in Community Health Education. He is the Director of the Public Health Program at Western Michigan University, Kalamazoo. He also teaches Public Health Courses in the program. Grace Wood is an excellent graduating senior in Public Health with the highest GPA in the program this year.

Chosen Sub-theme: Changing Outcomes: Health Education and the Continuum of Prevention and Care

Objectives: 1. By the end of the session, the participant will be able to comprehend the need for assessment of problems (in this case student loan financial stress) before the development of programs to intervene in the problem

2. By the end of the session, participants will be able to develop an appreciation for the magnitude of stress associated with student financial loan

3. By the end of the session, participants will comprehend the need for developing skills in assessment, planning and program development

Keywords: Behavior Change/Theories, Health Behavior, Minority Health

Special Populations: Disadvantaged Populations, Minority Populations, Young Adults

Full Abstract Detail: Student loan debt makes up the largest portion of US non-housing debt, more than credit cards and auto loans. The price of college is increasing almost eight times faster than wages. Meanwhile, the college has become a basic requirement for most professional careers. The disconnect between the cost of college and wages combined with increased pressure to go to college leaves many students with no other option than to take out student loans.

In order to conduct an assessment into the nature and magnitude of this problem, quantitative data were obtained through a college questionnaire about financial stress, with focus related to the Self Efficacy theory.

Method: A questionnaire was designed to measure the level of Student financial loan stress using the Self-Efficacy theory and financial optimism. The questionnaire was administered online to a cohort of 30 students.

Analysis and Results: Using a one-way ANOVA analysis, it was found that there is a significant relationship between student financial loan stress magnitude and self-efficacy ($p=.004$). Those with student loans, who did not know the dollar amount of their loans, reporting the highest self-efficacy.

With students who are aware of the dollar amount of their loans had lower self-efficacy, and participants without student loans had the least self-efficacy. No significant relationship existed between student loan status and financial optimism ($p=.763$) Gender and self-efficacy ($p=.492$), gender and financial optimism ($p=.924$) financial status and self-efficacy ($p=.225$) and financial aid status and financial optimism ($p=.668$)

Proposed Program and Evaluation: These findings among others were used to design a stress management program tailored to a cohort of this sample. Evaluation designed for this program consisted of process, impact and outcome method

Session Type: Poster - ESG

Session Title: Evaluation of collection and advertisement methods of Eta Sigma Gamma student-led holiday food drives

Session Number: Poster – Thursday – Th31

Submitting Authors: Ms. Colleen Elizabeth Cook

Co-Authors: Dr. Jeff M Housman, 2108724507 Whitney Mack, Dr. Mary Odum, Sara Ashley Smith

Authors Bio: Colleen Cook received a BS in Family and Consumer Sciences in 2013 from Texas State University in with a focus on Nutrition and Foods. She is currently pursuing a Master of Science in Public Health Education and Promotion from Texas State University. Colleen is an Environmental Health and Safety Specialist at Texas State University, currently working on a variety of different projects geared toward improving environmental health and wellness. In addition to environmental health, Colleen enjoys studying overall community health and wellness, including nutrition and food access in low-income populations. Colleen is also the President of the Eta Sigma Gamma Delta Chi Chapter at Texas State.

Chosen Sub-theme: Changing Outcomes: Health Education and the Continuum of Prevention and Care

Objectives: 1. Discuss and compare the collection and advertisement methods of the 2017 and 2018 food drives as a method to address short-term food security during the winter holiday season.

2. Evaluate the collection and advertisement methods of the 2017 and 2018 food drives as a method to address short-term food security during the winter holiday season.

Keywords: Evaluation and Measurement, Nutrition and Obesity Reduction, Program Planning

Special Populations: Disadvantaged Populations, Maternal & Infant Health, Women

Full Abstract Detail: Background: A Hays County, Texas community health needs assessment found low-income families qualifying for Special Supplemental Nutrition Program for Women, Infants, and Children experience difficulty accessing healthy foods. Based on this needs assessment, and in collaboration with the San Marcos Housing Authority (SMHA), the Delta Chi chapter of Eta Sigma Gamma (ESG) planned, implemented, and evaluated a food drive in fall 2017 and fall 2018. This presentation will discuss, compare, and evaluate the methods of collection and advertisement between both years.

Methods: The overall project goal was to improve short-term food security among SMHA families in need during the winter holiday season with a food drive. An additional goal of the 2018 food drive was to increase the number of donations from the previous year. During both years, student officers of ESG created four project objectives: determine the need for the food drive; create advertisements and collection boxes; advertise and promote the food drive; and, distribute donations. To meet these objectives, student leaders created activity logs, assembled and decorated donation boxes, and advertised the food drive to faculty, staff, and students within the Health and Human Performance department.

In 2018, student leaders restructured collection and advertising methods in an effort to increase donations from the previous year (2017). Student leaders worked with faculty and advertised the food drive during their class time. Some faculty members also agreed to offer extra credit on assignments for students who brought donation items. Specific advertising efforts were expanded to non-classroom settings, including departmental meetings and events. Student leaders collected donations of canned goods and other shelf-stable holiday food items from students, staff, and faculty between November 27 and December 10, 2018. To identify the most effective donation strategies, a student leader recorded collection information on a tracking spreadsheet, including date, time, location, number and types of food items, and whether the donor received extra credit. Prior to delivery, project leaders counted and photographed donated food items.

Results: In 2017, ESG members and officers collected 243 shelf-stable food items for donation to the San Marcos Housing Authority. In 2018, ESG members and officers collected 1,106 shelf-stable food items for donation to the San Marcos Housing Authority.

Discussion: By restructuring methods of collection and advertising to different populations, student members and officers were successful in their goal of increasing the total number of donations from 2017 to 2018. For future events, student leaders will utilize activity logs and Excel spreadsheets created for this project. Additionally, based on donor feedback, the student members suggest initiating a competition between academic disciplines to encourage an increase in donations in future food drives.

Session Type: Poster - ESG

Session Title: Confetti assessment initiative for campus environmental health: An Eta Sigma Gamma and What Goes Here Flows Here partnership

Session Number: Poster – Thursday – Th32

Submitting Authors: Ms. Colleen Elizabeth Cook

Co-Authors: Dr. Jeff M Housman, Ashley Khanhkham, M.Ed., CHES®, Dr. Mary Odum, Dr. Ronald D Williams, Jr.

Authors Bio: Colleen Cook received a BS in Family and Consumer Sciences in 2013 from Texas State University with a focus on Nutrition and Foods. She is currently pursuing a Master of Science in Public Health Education and Promotion from Texas State University. Colleen is an Environmental Health and Safety Specialist at Texas State University, currently working on a variety of different projects geared toward improving environmental health and wellness. In addition to environmental health, Colleen enjoys studying overall community health and wellness, including nutrition and food access in low-income populations. Colleen is also the President of the Eta Sigma Gamma Delta Chi Chapter at Texas State.

Chosen Sub-theme: Changing Approaches: Emerging Issues in Research Translation and Implementation

Objectives: 1. Discuss the current trend of confetti use and its impact on environmental health of the university campus.

2. Identify methods to assess impact of confetti use across a university campus.

Keywords: Advocacy, Environmental Health, Evaluation and Measurement

Special Populations: Young Adults

Full Abstract Detail: Background: Each year, over 7,000 students graduate from Texas State University. Recent social media trends indicate that graduating students are using confetti in outdoor graduation photoshoots as a method to enhance their photos. Confetti used during photoshoots that is not cleaned up can be blown away or washed into storm drains, which lead directly to creeks and rivers and can impact aquatic life as a result. The spring-fed San Marcos River, which flows through campus, serves the community as a resource for recreation, in addition to providing habitat for several federally and state-protected species, including the Texas Blind Salamander and Texas Wild Rice. The overall health of the San Marcos River and its inhabitants depends upon pollution prevention and environmental protection practices. As part of the anti-confetti campaign developed by the What Goes Here Flows Here stormwater awareness program, members of the Delta Chi chapter of Eta Sigma Gamma (ESG) and members of the Environmental Conservation Organization (ECO) assessed the confetti issue in different areas of campus in an effort to determine if this trend was posing an environmental pollution hazard. This presentation will discuss findings and evaluate next steps to address this issue.

Methods: The overall project goal was to assess the presence of confetti in specific areas of campus that are popular for graduation photos. Student officers of ESG created three project objectives: determine

the need for the anti-confetti campaign; create observation parameters; perform observations and document findings. To meet these objectives, student leaders created activity logs to track specific observation details, including date, location, recent weather conditions, presence of confetti, and any other information deemed pertinent by the investigator.

Results: Members of ECO and ESG performed 24 observations between April and May 2019. Observations indicated that different types of confetti (e.g. aluminum, plastic, paper) were being used for graduation photos. Moreover, confetti was documented in many different areas of campus, but the area most impacted by confetti (in 46% of observations) was in front of the Undergraduate Academic Center (UAC) Archway, a main entry port to the center of campus and a campus landmark which serves as marketable image for the university.

Discussion: Based on observations performed by ESG members, assessments confirm that confetti use is an issue in many different areas of campus, but a select few areas appear to be used the most for photoshoots. For future efforts geared toward addressing this issue, advertising and marketing materials should be developed and strategically placed in areas of campus that were most frequently documented in the observations. Student health advocacy groups, such as Eta Sigma Gamma, can assist the university by developing awareness and educational campaigns highlighting the environmental impact of confetti use for photos.

Session Type: Poster - ESG

Session Title: A Time Management and Stress Study Among Health Professional Students at Western Michigan University

Session Number: Poster – Thursday – Th33

Submitting Authors: Dr Amos O Aduroja

Authors Bio: With over 35 years of practice in the field of Public Health, Dr. Amos Aduroja received his Ph.D. in Public Health Evaluation. He teaches Public Health courses at WMU. Dr. Robert Bensley also adds over 25 years of professional practice and college teaching at the University level. Rebecca Doering is a graduating senior in Public Health Education at WMU.

Chosen Sub-theme: Changing Outcomes: Health Education and the Continuum of Prevention and Care

Objectives: 1. By the end of the session, participants will be able to familiarize with the subject of college stress among health professionals in training.

2. By the end of the session, participants will be able to demonstrate an understanding of quantitative data collection among students

3. By the end of the session, participants will be able to appreciate the use of assessment and a preliminary study in the creation of a stress reduction program

Keywords: Behavior Change/Theories, College Health, Health Behavior

Special Populations: Disadvantaged Populations, New Professionals, Young Adults

Full Abstract Detail: Mental health disorder is one of the top leading health indicators in the U.S., contributing both to diseases and disabilities. Among college students, 38% reported stress has negatively impacted them and 41.6% stated anxiety is among their top health concerns. In trying to read all of the homework assigned chapters, finish assignments, meet deadlines, and participate in extracurricular activities many college students find themselves overwhelmed with their workloads.

Often times poor time management behaviors have been frequently discussed as a source of stress and poor academic performance. Failing to manage time effectively can have undesirable consequences, such as missed deadlines, inefficient work flow, poor quality of work, and higher stress and anxiety levels. In particular, stress levels may be higher among health professional students, with a high prevalence of stress ranging from 14.3 % to 56% of study participants

Method: The purpose of this study was to examine the relationship between stress levels and time management use among health professional students at Western Michigan University. A convenience sample included students who worked at the front desk/Dean's Office as well as random students of the College of Health and Human Services. Quantitative data collection was used for the purpose of this project. A 21-item questionnaire was developed and derived using the K-A-P Model. The first five questions of the questionnaire related to the demographics of subjects. The remainder of the questions

were designed to measure the knowledge, attitudes and practices related to time management skills and stress levels related to academics. A total of 31 students completed the questionnaire.

Findings: Results indicate 25.8% of subjects responded they “always” use time management tools in managing their time, whereas 32.3% “never” or “rarely” use these skills. More than half (54.9%) of subjects responded they felt nervous or stressed “most of the time” or “always”, while only 6.5% responded “never” or “rarely”. Pearson correlation analysis found a significant relationship between average stress and average time management use ($p < 0.001$) at all levels. Further, a one-way ANOVA analysis found no significance ($p = 0.097$) between or within health professional programs and time management use. Similarly, no significant difference ($p = 0.460$) existed between stress levels and health professional programs.

Discussion: No major analytical significances found between various health professional programs at WMU. However, the levels of stress and nervousness among all health professional student participants do exist and were significantly high. It is proposed that comprehensive stress reducing intervention be delivered to health professional majors at Western Michigan University with a focus on time management techniques and skills.

Session Type: Poster - ESG BACKUP

Session Title: Prohibition - A look at a policy from a century ago and how it has Influenced health education

Session Number: Poster – Thursday – Th34

Submitting Authors: Dr. Alan J Sofalvi

Authors Bio: I have a variety of experience in examining historical initiatives related to health education. My historical research endeavors include an examination of the Office of the Surgeon General, a review of changes in the health care system, a look at health education films from the silent movie era, and a description of the Venereal Disease Radio Project, a federal initiative of the mid-20th century.

Chosen Sub-theme: Changing Systems: Policy, Advocacy, Communications

Objectives: By the end of the session the participant will explain the connection between early temperance education and drug education in the 21st century.

By the end of the session the participant will describe resources used to educate people and to advocate for prohibition during the late 19th and early 20th century.

Keywords: Alcohol & Substance Abuse

Special Populations: New Professionals

Full Abstract Detail: One of the major policy initiatives of the 20th century, despite being relatively short-lived, was Prohibition. The purpose of this presentation is to review educational and advocacy initiatives and materials leading to Prohibition and the continuation of these efforts from 1920-1933, the federal Prohibition era. Health promotion efforts of groups such as the Women’s Christian Temperance Union and the Anti-Saloon League will be described and will be compared to present-day efforts. Items will include posters, song lyrics, pamphlets and booklets used as educational materials. A white ribbon was used as a symbol by supporters of prohibition; ribbons of different colors are commonly used in awareness efforts of today. Specific days designed to be devoted to a particular health topic may have started with Temperance Days of the late 19th/early 20th century, and temperance education efforts have been said to have laid the foundation for later drug education programs.

Advocacy was also an important function of groups such as the Women’s Christian Temperance Union, the Band of Hope and the Anti-Saloon League, as their advocacy efforts were crucial to the ultimate approval of Prohibition. Examples of initiatives used by groups to raise awareness and encourage the implementation of prohibition that have become commonplace today include letters to the editor and contacting legislators: specific examples advocating prohibition laws and temperance education will be provided. The role of key individuals in advocacy, educational and legislative efforts, such as Mary Hunt, Senator Morris Sheppard of Texas, Wayne B. Wheeler and Frances Willard, will be featured. In addition, how the repeal of Prohibition might relate to current efforts to change present-day drug laws and

policies will be discussed. This presentation will demonstrate the importance of historical awareness to upcoming professionals.

Session Type: Poster - ESG BACKUP

Session Title: Assessing the Multicultural Competency of Future Health Care Professionals

Session Number: Poster – Thursday – Th35

Submitting Authors: Bridget Lally

Co-Authors: Dr. Jodi Brookins-Fisher, Professor

Authors Bio: Bridget Lally is a senior studying Community Health Education and Spanish at Central Michigan University. She has been an Eta Sigma Gamma member for 2 years and is currently serving as the treasurer of the Eta chapter. She is presenting her Honors Capstone project on multicultural competency, which is a subject that combines her two majors. Her main interest in research is diversity in the health professions and how the education of health professionals can be changed to improve diversity among health care professionals and how health professionals work with patients of different cultures. She has previously presented a systematic review on childhood mental health in urban elementary schools at Central Michigan University's Student Research and Creative Endeavors Exhibition. This is her first national presentation.

Chosen Sub-theme: Changing Minds: The Art and Science of Teaching in Communities and Professional Preparation

Objectives: By the end of the session the participant will be able to understand what may influence an undergraduate student's level of cultural competency and what can be done to increase the cultural competency of undergraduate students.

Keywords: Cultural Competence, Minority Health, Professional Preparation

Special Populations: Global/International Populations, Minority Populations, Young Adults

Full Abstract Detail: Multicultural competency is an important quality in any professional field, especially the health professions. Health professionals interact with clients and patients in a way that ensures compliance with medical orders and comfort seeking out medical services. It is imperative that health education materials are culturally-based, so that these health education materials are accessible and understood by all. A developmental foundation for multicultural competence can be established at the undergraduate level. Undergraduate multicultural competency training presents a unique opportunity to ensure that the next generation of health care professionals are able to interact with an increasingly diverse population in the United States. Experiences like study abroad and clinical experiences at the undergraduate level can be very important to the development of multicultural competency as well. This project assessed the multicultural competency of undergraduate health professions students at a large Midwestern university. An anonymous online survey collected responses from a representative sample of undergraduate students in the health professions college. The survey included items regarding demographics, career paths, past coursework, related experiences and different forms of cultural competencies. Comparisons were made between different pre-professional programs to show the extent and efficacy of multicultural education in these programs. Results also showed differences in multicultural competency based on academic program, coursework, demographics and experiential learning opportunities.

Session Type: Poster

Session Title: The Community Action Poverty Simulation: A Powerful Learning Experience in Public Health to Improve Understanding of and Attitudes Towards Poverty

Session Number: Poster – Friday – *Fr1

Submitting Authors: Ms Amanda R Gabarda

Co-Authors: Dr. Laura Fennimore, DNP, RN, NEA-BC, Sharon Ross

Authors Bio: Dr. Gabarda is the Director of Clinical Training & Development at UPMC Health Plan where she is responsible for designing, scaling, and evaluating evidence-based health coaching interventions and preparing health coaches for board certification. She has a Bachelor and Master of Science in Exercise Science from Slippery Rock University, A Master of Public Health from Walden University, and a Doctorate of Education from the University of Pittsburgh. Dr. Gabarda also has a deep passion for addressing health equity, social justice, and the elimination of health disparities among underserved and at-risk populations. Her current research focuses on an experiential training “The Poverty Simulation” and improvements in understanding of and attitudes towards poverty in healthcare providers.

Chosen Sub-theme: Changing Outcomes: Health Education and the Continuum of Prevention and Care

Objectives: (1) Describe the impact of poverty in the United States and the need for public health professionals to understand the challenges faced by individuals living in poverty

(2) Recognize the Poverty Simulation as an experiential teaching and learning opportunity and recall outcomes in health coaches who have attended The Community Action Poverty Simulation©

Keywords: Advocacy, Continuing Education, Cultural Competence

Special Populations: Disadvantaged Populations, Mid-Career Professionals, Seasoned Professionals

Full Abstract Detail: More than 39 million (12.3%) people in the U.S. live in poverty. The Community Action Poverty Simulation© (CAPS) is a learning tool created to help people understand the realities of living in poverty. During the simulation, participants role-play the lives of low-income families for one month over a several-hour training period. The purpose of this study was to evaluate health coaches’ pre/post levels of understanding of and attitudes towards poverty, and confidence working with individuals experiencing poverty. The study design was a needs assessment with a single group, pre /post design including 24 health coaches in a health plan setting. The purpose of this quantitative study was to evaluate health coaches’ pre/post levels of understanding of and attitudes towards poverty, and confidence working with individuals experiencing poverty. Pre-and-post simulation surveys were completed online and downloaded into Microsoft Excel. All statistical analyses were calculated using SPSS version 25 (IBM, Armonk, NY). Baseline participant characteristics, understanding of poverty, attitudes towards poverty, and confidence were summarized. A paired samples t-test was used to compare health coach pre-post levels of understanding of poverty, attitudes towards poverty, and confidence. Statistical significance was set at $p < 0.05$ for all analyses. Overall, health coaches

demonstrated improvements in their understanding, attitudes, and confidence after participating in the CAPS training. The results of this study may inform health plans or organizations that employ health coaches and public health practitioners. Specifically, this study provides initial evidence of how participating in a poverty simulation has the potential to increase coaches' understanding of poverty, improve attitudes towards those living in poverty, and inspire action in the own community to help those living in poverty.

Session Type: Poster

Session Title: Preparing the next generation: Strategies to include students with disabilities in health education and implications for the field

Session Number: Poster – Friday - *Fr2

Submitting Authors: Tara Lutz

Co-Authors: Mary Beth Bruder

Authors Bio: Tara M. Lutz, Ph.D., M.P.H., CHES is an assistant professor of Community Medicine and Health Care at the University of Connecticut (UConn) School of Medicine and is the training director at the UConn Center for Excellence in Developmental Disabilities. Her areas of research interests include health promotion for people with disabilities and including disability in public health education. She and the other co-author have expertise in disability-related research.

Chosen Sub-theme: Changing Minds: The Art and Science of Teaching in Communities and Professional Preparation

Objectives: 1. describe two strategies for adapting health education curriculum that were utilized by participants to include students with disabilities in health education

2. summarize the reported pre-service and in-service learning opportunities that certified health teachers reported as participating in to include students with disabilities in health education

Keywords: Career Development/Professional, Physical Disabilities, School Health

Special Populations: Children & Adolescents, Disadvantaged Populations, New Professionals

Full Abstract Detail: People with disabilities are less likely to be involved in health promotion programs and activities and are more likely to engage in unhealthy behaviors compared to people without disabilities. According to the Individuals with Disabilities Education Act of 2004 all students including children with disabilities have a right to education. Children with disabilities can receive special education services if determined eligible according to criteria set forth in the IDEA or Section 504 of the Rehabilitation Act of 1973.

Data from Connecticut State Department of Education (CSDE) indicate that for the 2017-2018 school year, 14.5% (n=74,708) of CT students in grades K-12 have a disability according to federal law and are receiving special education services. CSDE subscribes to the Whole School, Whole Community, Whole Child approach for a planned, sequential PK-12 school health program [that] “addresses the physical mental, emotional and social dimensions of health and enables children and youth to establish and practice health-enhancing behaviors over a lifetime and become healthy and productive citizens.”

The purposes of this needs assessment of CT certified health teachers are

1) to better understand the inclusion of students who receive special education services in health education classrooms; and

2) to better understand the curriculum adaptations made for students who receive special education services in health education classrooms.

This needs assessment will gather data from CT certified health teachers for the 2018-2019 school year. All CT certified health teachers for the 2018-2019 school year, according to Connecticut State Department of Education Educator Data System, were invited to participate in this needs assessment via email. The final sample (n=64) was majority female (73.4%), had been teaching more than 10 years (79.4%), and had been teaching in their current district for more than 10 years (67.7%).

Findings will add to the growing body of literature about providing education, including health education, to all students, including students who receive special education services. Results will help provide a picture of health education for students in special education including if they are receiving it, the decisions around their attendance, and any adaptations used to better serve them and their needs. Results will help facilitate future research and may be used to draw attention to support and resources for districts and certified health teachers in CT which can include pre-service academic training and in-service professional development opportunities for health teachers and school personnel to better serve their students.

Session Type: Poster

Session Title: Improving access to evidence-based diabetes self-management practices at a Student-run Free Clinic: Results from a six month study

Session Number: Poster – Friday - *Fr3

Submitting Authors: Nadia E Quainoo

Co-Authors: Ali Al-Humaid, Megan Bingaman, Sherry Grone, Philip Welch

Authors Bio: Nadia Quainoo is a recent Master of Public Health Graduate from the University of Toledo with a concentration in Epidemiology in Health Administration. Nadia is a native of Ghana, West Africa. She received her Bachelor's degree in biological sciences with a minor in Psychology and Chemistry from Missouri Valley College, Missouri in 2014. Nadia developed a love for analytics after her involvement with the Health Disparities Research Collaborative. This experience gave her a deep appreciation of research, analyzing data to observe trends and how this drives several initiatives in public health. When Nadia is not consumed by her work, she enjoys binge watching her favorite TV shows on CBS all access but otherwise can be found hiking, traveling to new places, going on road trips and sampling ethnic cuisines.

Chosen Sub-theme: Changing Outcomes: Health Education and the Continuum of Prevention and Care

Objectives: List five challenges to helping under-served populations manage type 2 diabetes.

List two smartphone apps that can be used to help resource poor patients better self-manage their type 2 diabetes.

Keywords: Access to Health Care, Diabetes, Health Disparities

Special Populations: Disadvantaged Populations

Full Abstract Detail: Background

Diabetes prevalence has tripled since 1990 and is now the seventh leading cause of death in the U.S. This chronic condition requires constant self-management to avoid serious health complications. Disadvantaged populations are at increased risk for type 2 diabetes and have limited access to A1c blood glucose testing, nutrition counseling, and behavior tracking. Smartphone apps demonstrably aid diabetes outcomes in resource-rich populations. The present study gauges the utility of a free, type 2 diabetes app in a resource-poor population at a student-run free medical clinic.

Methods

Twenty-one low income patients with diagnosed type 2 diabetes joined the study during October and November 2018. Participants were alternately assigned to control or intervention groups and followed for six months. The intervention group received nutrition counseling and a free diabetes management app. Controls received nutrition counseling and a free happiness-related smartphone app. Baseline measures included A1c blood glucose level, height, weight, waist, BMI, overall health rating, medication history, diabetes distress score (DDS17), and self-care behaviors (foot, dental, eye exams and blood

sugar monitoring). Intervention participants tracked and submitted monthly diabetes-related health behaviors. Controls tracked and submitted happiness levels. DDS17 and biological measures and were repeated at six-month follow-up in April and May 2019. Gift card incentives were used to promote participation.

Results

Participants were primarily non-Hispanic (85%), male (52%), and 86% had a high school diploma or equivalent. Most (57%) lived in households earning less than \$25,000 per year and 19% had Medicaid insurance. White (62%), Black (19%), Asian (9.5%), and Other (9.5%) races were represented. Sixty-two percent of participants had never taken a diabetes education class and 81% were currently taking medication for diabetes. Participants who returned for six-month follow-up (n=15; 29% attrition rate) lost an average of 1.2 pounds. A1c levels decreased significantly from 9.1% to 7.7% in controls ($t(6) = 2.8$; $p = 0.032$) and non-significantly from 8.3% to 7.4% in intervention participants ($t(7) = 1.8$; $p=0.121$). DDS17 scores decreased in 75% of intervention participants and 71% of controls.

Conclusion

Diabetes is a long-term illness requiring vigilant self-management to prevent health complications. Smartphone apps show promise for lowering both A1c values and diabetes distress in resource-poor populations. However, substantial functional improvements are needed in the diabetes management apps that are available for free. Never having diabetes education could cause disadvantaged persons to feel less confident in diabetes self-management skills which increases distress in an already vulnerable population. Findings from this study can help health educators understand useful tools and potential challenges to helping under-served populations manage type 2 diabetes.

Session Type: Poster

Session Title: Implementation of Sexual Health Education in Elementary Grade Levels Leads to Higher Knowledge of STI/HIV Prevention and Contraception Use in Young Adulthood

Session Number: Poster – Friday – *Fr4

Submitting Authors: Dr. Ronald D Williams, Jr.

Co-Authors: Samantha Ortega

Authors Bio: Ronald Williams, Jr., PhD., CHES® is an Associate Professor of Public Health in the Department of Health and Human Performance at Texas State University. He has secured \$2.3 million in research funding and published over 60 peer-reviewed studies primarily focusing on substance abuse and other health risks of adolescents and young adults.

Chosen Sub-theme: Changing Outcomes: Health Education and the Continuum of Prevention and Care

Objectives: Describe the differences in STI/HIV prevention and contraception knowledge among young adults who received initial sexual health education during elementary grade levels vs. those who received education at later grade levels.

Identify how type of curriculum and intensity of sexual health education lessons impacts STI/HIV prevention and contraception knowledge among young adults.

Keywords: Child/Adolescent Health, School Health, Sexual Health

Special Populations: Children & Adolescents, Young Adults

Full Abstract Detail: Early implementation of sexual health education curricula is often a controversial topic for local communities and school districts. This study explored the relationship of current sexual health knowledge to the initial exposure period of sexual health education among a sample of young adults. In spring 2019, a sample of 632 college students completed a web-based survey measuring STI/HIV prevention and contraception knowledge, as well as grade-level, frequency, and intensity of exposure to sexual health education. Results indicated mean knowledge scores on STI/HIV prevention was higher among participants who received initial exposure to formal sexual health education during elementary school ($M = 6.39 \pm 2.94$; $p \leq .001$) than those who received initial education in middle school ($M = 5.54 \pm 2.92$), high school/college (5.51 ± 3.06), and no formal education (2.15 ± 3.13). Similarly, contraception knowledge was higher among participants who received initial exposure to formal sexual health education during elementary school ($M = 5.16 \pm 3.04$; $p \leq .001$) than those who received initial education in middle school ($M = 4.52 \pm 2.99$), high school/college (4.59 ± 2.89), and no formal education (2.08 ± 2.85). A statistically significant relationship was also observed between current STI/HIV and contraception knowledge levels and the frequency, intensity, and type of sexual health education received. Participants who received comprehensive sexual health education, as opposed to abstinence-only education, were more likely to report having increased intensity of lessons compared and higher knowledge levels ($p \leq .001$). Results of this study suggest early and consistent implementation of comprehensive sexual health education may have an impact on knowledge of sexual health through

young adulthood. Health educators should advocate for the implementation of age-appropriate comprehensive health education beginning in elementary grade-levels.

Session Type: Poster

Session Title: Exploring How Characteristics Associated with Perinatal Community Health Shape Method of Delivery Outcomes in New York State Neighborhoods

Session Number: Poster – Friday - *Fr5

Submitting Authors: Ms. Christina Ventura-DiPersia

Co-Authors: Dr. Mary Huynh, Dr. Glen Johnson, Dr. Elizabeth A. Kelvin, PhD, MPH, Dr. Diana Romero

Authors Bio: Christina Ventura-DiPersia has been an epidemiologist who has researched topics in maternal and child health, as well as other relevant public health topics, for over twelve years. She will be completing her doctoral degree in the summer of 2019 with her DrPH in epidemiology and a concentration in maternal, child, reproductive, and sexual health. She has published on numerous public health topics, and has completed her dissertation on the multilevel influences of Cesarean delivery in New York State. Currently, she is the full-time research coordinator and an assistant professor for the Hofstra University Physician Assistant program in Hempstead (Long Island), NY.

Chosen Sub-theme: Changing Outcomes: Health Education and the Continuum of Prevention and Care

Objectives: Assess how factors associated with the health of communities impacts aggregate method of delivery outcomes

Keywords: Health Disparities, Maternal & Child Health, Women's Health

Special Populations: Disadvantaged Populations, Maternal & Infant Health, Women

Full Abstract Detail: Introduction: Cesarean (surgical) delivery is a costlier and riskier method of childbirth than vaginal delivery, and can put women at risk for complications in future pregnancies. Cesarean delivery rates have varied widely by community across the US for years, and some traditionally disparate populations (e.g., black/African-American) are at higher risk for birth by Cesarean. There is a dearth of information, however, about how characteristics of communities where women give birth influence Cesarean delivery rates.

Methods: This study combined data from multiple publicly available sources associated with the characteristics and practices of hospitals, as well as the sociodemographic and perinatal profile of communities, to explore variation in ecological Cesarean delivery incidence across ZIP codes in New York State (NYS). We used negative binomial regression with GEE using the autoregressive first-order correlation structure to account for clustering.

Results: The incidence of Cesarean delivery was higher among urban communities (IRR: 1.637; $p < 0.001$) and among communities with higher percent of births that were low birthweight (IRR: 1.071; $p = 0.001$); of residents who were black (IRR: 1.289; $p < 0.001$); and, of residents who had some college as their highest education (IRR: 1.087; $p < 0.001$). Conversely, communities with higher rates of births with late or no prenatal care (IRR: 0.932; $p = 0.010$) and higher median household income (IRR: 0.836; $p < 0.001$) were associated with decreased Cesarean delivery incidence.

Conclusions: Evidence suggests that upstream factors within communities may shape method of delivery outcomes in women across NYS. While not directly linked to individual-level outcomes, it posits that these characteristics play a role in aggregate birth outcomes. In order to minimize adverse birth outcomes, perinatal health educators should consider the role of these distal factors in shaping perspectives of pregnant women about childbirth, particular those from disparate populations. Ultimately, health educators may benefit from partnering with community stakeholders to help empower pregnant women to play a deciding role in their own birth process.

Session Type: Poster

Session Title: Quasi-Experimental Project to Determine Effectiveness of Driving Simulator and Distracted Driving Videos Impacting Texting and Driving Attitudes and Behaviors

Session Number: Poster – Friday – Fr7

Submitting Authors: Dr. Theresa Enyeart Smith

Co-Authors: Dr. Maria T Wessel, CHES

Authors Bio: Dr. Enyeart Smith (CHES certified since 2003) is a Professor at James Madison University and has been a health educator for 20 years. She has published manuscripts and presented at national/state conferences and is the current faculty advisor for the ESG Sigma Chapter. She was Section Councilor for the SHES Section of APHA and Past Chair for the Research Section, General Division of VAHPERD.

Dr. Wessel (CHES certified since 1989) is a professor at James Madison University and has been a health educator for 37 years. She has published manuscripts, a textbook, conference proceeding, curriculum materials, and has secured 24 external grants. She has presented at local/state/national and international conferences. Dr. Wessel was Chair of the SHES section of APHA and a member of the Board of Directors for AAHE and National Coalition for Health Education Organizations Task Force on Ethics.

Chosen Sub-theme: Changing Outcomes: Health Education and the Continuum of Prevention and Care

Objectives: 1. Identify attitudes and behaviors related to distracted driving among the sample prior to and after participation in the study.

2. Determine at least two differences between the types of distracted driving prevention techniques assessed.

Keywords: College Health, Health Behavior, Health Communications & Technology

Special Populations: Children & Adolescents, Young Adults

Full Abstract Detail: Many who have had phones since their preteen years consider them a crucial part of their daily lives; however, they can be deadly distractions. In 2017 alone, 13,166 lives were claimed due to distracted driving (DD), with 297 deaths related to teen DD.

The purpose of this study was to identify effectiveness of different strategies used to impact attitudes and behaviors related to DD, particularly texting and driving, before and after participation in the study.

A sample of 98 student participants completed the “No Excuses” project. Participants were randomly assigned to three groups: control, distracted driving simulator group, or the video viewing group. All three groups completed a pretest. One experimental group used the simulator to test texting while driving and driving proficiency; the other experimental group viewed DD videos that had emotional appeal. Only the two experimental groups completed the posttest, which measured the immediate perceptions of the videos or simulator. Participants in all three groups completed the post posttest approximately 30 days later, which measured attitudes and behaviors related to DD.

The sample consisted of primarily females (86.9%), ages 20-21 (70.3%), junior or senior status (84.5%) with a majority reporting driving daily (77.6%). Results indicated students continue to drive distracted in spite of acknowledged risk. Most participants (85.7%) reported sending texts and 89.8% reported reading texts while driving. Additional data were collected on texting and driving behavior including frequencies, location, and time of day.

Posttest results indicated that both viewing videos and use of a driving simulator positively impacted awareness (90.8%) and perception of risk (98.5%) related to texting and driving. Participants reported conflicting views of effectiveness of videos or the driving simulator to change texting and driving behaviors of others. Unfortunately, post posttest results indicated erosion of desired perceptions about distracted driving.

Health Belief Model (HBM) constructs verify high perception of susceptibility and severity to negative consequences of DD, high perception of benefits to not texting and driving to reduce negative consequences, and low perceptions of self-efficacy to safely text and drive. Considering results indicated students continue to drive distracted despite acknowledged risk, a step to reduce the number of distracted driving accidents and deaths is to incorporate the results and the HBM as a theoretical framework to plan and implement health education strategies to change DD behaviors.

Although texting and driving has become a behavioral norm proving difficult to change, pivotal factors related to changing this norm are being identified. This may allow for continued adjustment, improvement, and implementation of prevention and awareness strategies as we move forward in reducing the occurrences of DD incidents.

Session Type: Poster

Session Title: Assessing the Effectiveness of a Technology-Mediated Course Module to Improve School Health Advocacy Intentions

Session Number: Poster – Friday – Fr8

Submitting Authors: Eric Conrad

Co-Authors: Alexxa Banuelos

Authors Bio: I hold a doctorate in health education/promotion and am a Certified Health Education Specialist. I have authored 10 peer-review publications and am certified in Quality Online Teaching by the California State University System. I conceptualized the study, developed the inclusion criteria, as well as collected and synthesized the data.

Chosen Sub-theme: Changing Minds: The Art and Science of Teaching in Communities and Professional Preparation

Objectives: Describe the needs, barriers, and supports for authentic advocacy opportunities in an online environment within professional preparation programs

Describe technology-mediated strategies to promote collaboration, communication, and improve student outcomes in an online environment.

Keywords: Advocacy, Professional Preparation, School Health

Special Populations: New Professionals

Full Abstract Detail: Advocacy is a professional responsibility for health professionals necessitating the inclusion of advocacy skill development as part of professional preparation programs. Additionally, with the proliferation of online learning in higher education it is necessary to develop strategies to convert and evaluate advocacy training in an online learning environment. The purpose of this study was to develop and evaluate the effectiveness of an online, technology-mediated advocacy module for pre-service school health professionals.

The two-arm, parallel group intervention included college students enrolled in a school health course (exp; n=87) and a non-school health comparison group (cnt; n=114). Students in the exp group completed a school health advocacy module that incorporated asynchronous and synchronous tools as well as social media to promote online collaborative work and to communicate with school and health professionals. Tools utilized included Google Docs, Voxer, and Zoom as well as social media platforms such as Facebook, Twitter, and Instagram. The module culminated in group advocacy projects based on identified local school health needs. Outcome variables were measured using a previously validated instrument based on the theory of planned behavior (TPB) at baseline, posttest, and 6-month follow-up. TPB construct main effects and interactions were analyzed using a series of repeated-measures analysis of variance models. Change score analysis was conducted to determine the extent to which changes in participants' attitudes (ATT), subjective norms (SN), and perceived behavioral control (PCB) predicted their intentions (INT) to advocate for school health education. Change scores were calculated between

each of the three time points of measurement. Perceptions of module effectiveness were also obtained and perceived advocacy skills from baseline to posttest were measured using a paired samples t-test.

There was a statistically significant group-by-time interaction for ATT ($p > .001$, partial $\eta^2 = .26$), SN ($p > .001$, partial $\eta^2 = .22$), PBC ($p > .001$, partial $\eta^2 = .36$), and INT ($p > .001$, partial $\eta^2 = .27$). Significant increases in the constructs occurred from baseline to posttest and small, yet significant decreases occurred from posttest to follow-up. PCB did not significantly decrease from posttest to follow-up. The most predictive change score analysis indicated ATT, SN, and PBC accounted for 61% of the variance in INT from baseline to posttest ($p > .001$). Participants in the exp group also perceived the lesson to be effective in building advocacy skills and paired samples t-test revealed a significant increase in perceived advocacy skills from baseline to posttest ($t[86] = 13.80$, $p < .001$).

Study implications suggest this online, technology-mediated advocacy module can help increase and sustain pre-service school health professionals' perceived abilities to effectively advocate and increase intentions to advocate for school health education.

Session Type: Poster

Session Title: Librarian Collaboration with Patient Educators to Create Training Guides for Consumer Health Resources

Session Number: Poster – Friday – Fr9

Submitting Authors: Ms. Lindsay E Blake

Co-Authors: Alice Jean Jagers

Authors Bio: Lindsay Blake, MLIS, AHIP, is a Clinical Services Librarian working primarily in the hospital wards and clinics. She works with Family Medicine, Internal Medicine, Nursing Administration and other departments as needed to find evidence-based information for patient care and policy development.

Alice Jagers, MSLS, is the Outreach Coordinator for the University of Arkansas for Medical Sciences Library with a Level II Consumer Health Information Specialization. She works with the community to increase awareness of reliable resources, evaluation of materials, and improving health literacy.

Chosen Sub-theme: Changing Outcomes: Health Education and the Continuum of Prevention and Care

Objectives: By the end of the session the participant will understand three or more advantages of interdisciplinary collaboration when creating online health education materials.

By the end of the session the participant will be able to discuss four or more specific difficulties which can arise during collaborative outreach projects and the possible solutions.

Keywords: Consumer Health, Partnerships/Coalitions, Patient Education

Special Populations: Mid-Career Professionals, New Professionals, Seasoned Professionals

Full Abstract Detail: The goal of this project was to work with patient educators and other healthcare professionals to create a course featuring online and freely available patient education materials with an accompanying online guide. The Clinical Services Librarian and Outreach Coordinator at an academic health sciences center proposed a plan to educate the patient educators and nurses in area hospitals on reliable, freely available, and online consumer health resources. Partnerships were formed within the institution with patient and nurse educators, patient advocates, and patient- and family-centered care. Librarians created a course in which they presented general consumer health resources from the National Library of Medicine (NLM) as well as other reliable websites. The course features major resources in the areas of general health, drugs and supplements, genetics, complementary medicine, and reviewing online resources. Continuing education credit for certified health education specialists (CHES), nurses, and dieticians was secured.

Parallel with the course, an online resource was developed using LibGuides software. The guide provides a central location for educators to access online patient education resources. The guide is also available for use by patients for consumer health purposes. Librarians worked closely with patient educators to target areas of highest need, collect resources, review the online guide, and pilot the course. Patient Educators also helped with providing continuing materials and suggestions on expansion of the guide.

Expanded area include sections on women's, veteran's and children's health, as well as a section for Spanish speakers.

The online guide was completed in July 2018 and the CE course was piloted with the hospital patient educators in October. The course and guide were well received. Librarians received grant funding to teach the class in hospitals locally and around the state. Results from pre- to post-tests showed an average increase of 20% in knowledge of websites presented. Evaluations of the course and instructors were consistently ranked average or above average including: having a better understanding of subject materials and ability to identify, navigate, and analyze resources. Future plans include continued expansion of the online guide and continued presentation of the course and guide.

Session Type: Poster

Session Title: Resilience and physical activity among women living with chronic pain

Session Number: Poster – Friday – Fr10

Submitting Authors: Lauren Sue Davis

Co-Authors: Danielle Brittain, Miranda A. Cary, Nancy C. Gyurcsik, Erin Moser

Authors Bio: Lauren Davis is a Master of Public Health student, Department of Community Health Education, Colorado School of Public Health at the University of Northern Colorado (UNC). She currently holds a Bachelor of Science in Health Promotion from Texas A&M University-Commerce. She has presented at the 2018 Public Health in the Rockies conference in Colorado and at the 2019 UNC Research Day. Lauren has been a practicing health promotion professional in the field of corporate wellness since 2011, specifically consulting organizations on the development, implementation and execution of corporate wellness programs to their employee populations.

Chosen Sub-theme: Changing Outcomes: Health Education and the Continuum of Prevention and Care

Objectives: By the end of the session, participants should be able to:

1. Explain different modifiable psychosocial factors, including adaptive coping factors, that impact an individual's physical activity while living with chronic pain.
2. Identify a need for further examination of relationships between resilience, adaptive coping, and physical activity in order to promote better chronic pain self-management among women living with chronic pain.

Keywords: Health Disparities, Physical Activity/Exercise, Women's Health

Special Populations: Women

Full Abstract Detail: Objectives. Chronic pain is a public health issue affecting 50 million Americans, of which 34% are women. Progressing from light physical activity to the recommended 150+ minutes of moderate-vigorous physical activity each week is an effective non-pharmacological strategy for chronic pain self-management and quality of life enhancement. Since women living with chronic pain struggle to be active, identifying modifiable psychosocial factors contributing to participation is needed. Resilience, involving adapting well to adverse events (e.g., chronic pain), may help women cope and engage in physical activity. This study investigated whether women reporting higher or lower resilience differed in pain intensity, adaptive coping factors (pain acceptance; self-regulatory efficacy beliefs to overcome pain and related barriers as well as to schedule/plan activity) and physical activity (light; moderate-vigorous).

Methods. Women identified as 18 years or older, English-speaking, experiencing chronic pain for 6 months or more and had attempted physical activity since the onset of chronic pain (N = 269) completed a 20-minute online survey assessing the study variables. The survey captured information on demographic characteristics, physical activity levels, and Likert scales were used to measure participants

on resilience, pain intensity, pain acceptance, self-regulatory efficacy to overcome pain and related barriers, and self-efficacy to schedule and plan physical activity.

Results. A between-groups MANCOVA comparing groups with higher (n = 131) or lower (n = 138) resilience, after controlling for age, was significant ($P < .0001$). Compared to the lower resilience group, the higher resilience group reported significantly higher pain acceptance, were more confident to schedule and plan physical activity, possessed more self-regulatory efficacy to overcome barriers, and reported more moderate-vigorous activity (P 's $\leq .04$). Light activity and pain intensity did not differ between the resilience groups.

Conclusion. Women living with chronic pain have reported experiencing greater health disparities and inequities when attempting to manage their pain. Physical activity is a recommended non-pharmacological pain self-management strategy that can be used to improve the lives of women living with chronic pain. In this study, women with more resilience reported the most favorable pattern of adaptive coping and the recommended activity of moderate-vigorous intensities, despite having similar pain levels as women with lower resilience. If a resilience fostering community-based program can improve adaptive coping and maintenance of moderate-vigorous activity, outcomes of program adoption may include: (1) improved quality of life among women living with chronic pain and (2) a reduction in reliance on health care and pharmacological aids for chronic pain self-management.

Session Type: Poster

Session Title: Identification of Structural Interventions for HIV Prevention: A Systematic Review

Session Number: Poster – Friday – Fr11

Submitting Authors: Terrika Barham

Co-Authors: Theresa Sipe

Authors Bio: Terrika Barham is passionate about public health. She has over 10 years of public health experience working on various research topics, including HIV prevention, diabetes management, and lupus awareness and management. Terrika currently works as a Behavioral Scientist for the Prevention Research Branch in the Division of HIV/AIDS Prevention, National Center for HIV/AIDS, Viral Hepatitis, STD and TB Prevention, Centers for Disease Control and Prevention, conducting ongoing systematic reviews to identify efficacious HIV behavioral interventions that reduce sex and drug risk behaviors, and improve HIV care continuum outcome. She is an Atlanta native and attended Emory University, where she obtained a BA in Psychology and MPH in Behavioral Science. Terrika currently attends Georgia State University, where she is a PhD Candidate in Public Health, with a concentration in Epidemiology.

Chosen Sub-theme: Changing Approaches: Emerging Issues in Research Translation and Implementation

Objectives: Understand how to identify interventions for HIV prevention, using a systematic process

Identify and interpret structural approaches that can be used to enhance the effectiveness of HIV prevention interventions

Keywords: Health Research, HIV/AIDS

Special Populations: Disadvantaged Populations, Minority Populations

Full Abstract Detail: Background: Biomedical and behavioral approaches have been effective in mitigating the impact of HIV; however, such approaches do not address underlying social, economic, legal, and political structures that might shape HIV risk and vulnerability. Structural HIV prevention interventions (i.e., those that work outside of the control of the individual to alter the environment or choice structure) have the potential to influence multiple health conditions, and may be key in preventing new infections to end the HIV epidemic. The purpose of this review was to identify evidence-based (EBI) and evidence-informed (EI) structural interventions (SI) in HIV prevention and summarize characteristics of the interventions.

Methods: We searched the CDC's HIV/AIDS Prevention Research Synthesis (PRS) project's cumulative database containing annual and electronic manual searches of numerous databases (e.g., MEDLINE, CINAHL, EMBASE) for studies published between 2015-2018 that reported HIV-relevant outcomes (e.g., HIV testing, HIV stigma), and met the definition of a SI. Each eligible intervention was evaluated against established criteria on the quality of study design, implementation, analysis, and strength of findings. Interventions meeting criteria were categorized as EBIs (i.e., interventions tested with a comparison group and rigorously evaluated) or EIs (i.e., interventions without a comparison group, and considered promising strategies). An established taxonomy (i.e., Access, Policy/Procedure, Physical Structure,

Capacity Building, Mass Media, Community Mobilization, and Social Determinants of Health) was used to classify each SI.

Results: Sixty-six interventions were eligible for review, from which 19 SIs were identified. Seven studies met EBI criteria, and 12 studies met EI criteria. Ten SIs were based in the U.S. and 9 in international settings, including Southern Africa (n=4), and East Africa (n=3). SI studies targeted various populations, including persons with HIV (n=10), men who have sex with men (MSM) (n=2), and youth and young adults (n=2). Most (n=17, 89%) SIs reported HIV care continuum outcomes (e.g., HIV testing, linkage to care). Fourteen (77%) SIs were classified as Access, i.e., interventions that made products or services more readily available (e.g., mobile HIV testing services). Twelve (68%) SIs were classified as either Policy/Procedure or Physical Structure for integrating HIV testing or linkage to care policies (e.g., routine opt-out testing, appointment scheduling) in clinics and emergency departments.

Conclusions/Implications: SIs can have a major role in HIV prevention to end the HIV epidemic. Many SIs addressed HIV care continuum outcomes (e.g., HIV testing, linkage to and retention in HIV care) by increasing access to services or implementing policies. Research gaps include efficacious SIs that target high-risk populations, especially among MSM, and youth and young adults.

Session Type: Poster

Session Title: A campus campaign to reduce e-cigarette use

Session Number: Poster – Friday – Fr12

Submitting Authors: Dr. Lydia J Burak

Co-Authors: Ms. Patti Frazee, Ms. Amber Riggs

Authors Bio: A professor of public health, health promotion and health education at Bridgewater State University, I have been preparing health education professionals for more than two decades. Prior to entering academia I worked as a public health practitioner in the fields of domestic and international community health and community development. My research interests are broad based; I generally test the applicability of social psychology theories and models in predicting health-related behaviors. My work has appeared in a variety of publications and venues.

Chosen Sub-theme: Changing Minds: The Art and Science of Teaching in Communities and Professional Preparation

Objectives: Describe a high-impact, best practice that integrates research into professional preparation;

Describe the methods and results of an educational campaign to reduce use of e-cigarettes.

Keywords: College Health

Special Populations: New Professionals

Full Abstract Detail: Electronic cigarettes are nicotine delivery devices that heat liquids to high temperatures and produce aerosols that can be inhaled. Use of e-cigarettes has increased in recent years, particularly among young adults and high school youth; e-cigarettes are currently the most commonly used nicotine products among young people. Many users are unaware that e-cigarettes contain nicotine and have a high potential for addiction, or that there are many potentially harmful chemical compounds in e-cigarettes. Although the health risks of using e-cigarettes are fewer than those incurred by smoking combustible cigarette and cigars, the National Academies of Sciences, Engineering, and Medicine reported that there is substantial evidence that e-cigarette use increases the likelihood that users will use regular combustible cigarettes. The purpose of this course-embedded project in a Health Promotion Strategies class was to determine if an education and awareness campaign would increase university students' awareness of the dangers of e-cigarette use, and ultimately result in a reduction in use. The campaign employed a pre-test, intervention, post-test design. Students participated in all aspects of the project – survey design, administration and coding; intervention design and implementation; data analysis and reporting. Surveys were administered in residence halls, dining halls, the campus center, labs, library, fitness center, and academic buildings. The intervention consisted of posters, flyers, table tents, student announcements, informational display tables/games around campus, and social media: Facebook, Instagram, Twitter. Surveys were administered to more than 600 students in both pre and posttest conditions. Approximately 20% of the survey respondents used e-cigarettes. Nearly 25% of the non-users had used e-cigarettes in the past,

most of them just trying them a few times. Users were significantly more likely to agree that e-cigarette use should be allowed on campus, while a majority of non-users were neutral about on-campus use. Users were significantly more knowledgeable than non-users about the negative effects of e-cigarettes: addiction, chemicals, and nicotine levels. Post campaign results indicated a significant increase in knowledge among non-users. The intervention element that had the most significant impact on knowledge was the posters that were hung in and around all campus buildings. Post test results also indicated a significant reduction in the number of students who believed e-cigarettes should be allowed on campus. The social media elements were the least accessed and the least impactful. Embedding research and projects into a course curriculum constitutes a high-impact, best practice that exposes students to and engages them in the entire research process: developing questions and hypotheses, survey development, gathering and analyzing data, intervention development and implementation, assessing impacts and reporting results.

Session Type: Poster

Session Title: The Association Between Self-Efficacy, Outcome Expectations, and Selected Socio-Demographic Variables and Patients' Self-Management of Chronic Kidney Disease

Session Number: Poster – Friday – Fr13

Submitting Authors: Mrs. Amy Joanna Wotring

Co-Authors: Holly Hoagland-Fojtik, Dr. Timothy R Jordan, Monita Karmakar-Saraf, John Matkovic

Authors Bio: I am qualified to be an abstract author on this abstract submission for several reasons. Over the last ten years, I have been heavily involved with teaching, research, and community work in regards to public health/health education. I am a doctoral student working on my Ph.D. in Health Education, and I have my Master's Degree and Bachelor's Degree in Public Health. More particularly, I have been a program evaluator for the Kidney Foundation of Northwest Ohio, where we have implanted programs for patients with CKD and evaluated programs to better serve this population. I am very knowledgeable about this research project for I have assisted in survey development, data collection, data analysis, and manuscript preparation.

Chosen Sub-theme: Changing Outcomes: Health Education and the Continuum of Prevention and Care

Objectives: 1. By the end of the session, the participant will be able to describe the key constructs of the Social Cognitive Theory and how it relates to Chronic Kidney Disease (CKD).

2. By the end of the session, the participant will be able to discuss potential options to disease management for CKD.

Keywords: Behavior Change/Theories, Chronic Disease Prevention, Communication & Treatment

Special Populations: Disadvantaged Populations, Older Adults

Full Abstract Detail: Background: Each year in the US, kidney disease kills more people than breast or prostate cancer. Approximately 15% of adults in the US (1 in 7) have kidney disease. Chronic kidney disease (CKD) typically gets worse over time and often results in End Stage Renal Disease (ESRD). To improve their quality of life, patients with ESRD must receive dialysis and carefully manage their disease. Patients' outcome expectations (OE) and self-efficacy (SE), two variables within the Social Cognitive Theory (SCT), may influence their ability to manage CKD.

Purpose: To determine if the Social Cognitive Theory and selected socio-demographic variables predicted and/or explained ESRD patients' self-reported disease management.

Method: The study was observational, randomized, and cross-sectional featuring best practices survey research. Using mixed-methods, we developed a valid and reliable survey. Telephone interviews and a 4-wave, postal mailing were used to collect original data from patients with CKD enrolled in a local patient services program.

Results: The return rate was 50% (182/367). Respondents were > 50 years old (75%); Caucasian (50%), and male (48.9%). Slightly more than a third (35%) were African American. All patients were enrolled in Medicaid. 90% of patients were on dialysis; 29% had been on dialysis for at least 6 years. A range of 70.3% to 79.7% of patients believed that engaging in specific health behaviors (e.g. medication and dialysis adherence) lead to better disease management. Similarly, a range of 66.5% to 83.0% of patients were “Confident” to “Very Confident” to perform these behaviors. Bivariate linear regression tests showed that self-efficacy ($r = 0.47$, $SE = +/-0.07$, $P < 0.05$) and having some college education ($r = -3.64$, $SE = +/-1.54$, $p < 0.05$) were significantly associated with outcome expectation. Multivariate linear regression showed that the association between patients’ outcome expectations and self-efficacy ($r = 0.37$, $SE = +/-0.11$, $P < 0.05$) and college education ($r = -3.82$, $SE = +/-1.56$, $p < 0.05$) remained statistically significant. The results of multivariate linear regression tests also showed that there was statistically significant relationship between patients’ self-efficacy and outcome expectations ($r = 0.44$, $SE = +/-0.12$, $P < 0.05$) and self-reported successful disease management ($r = 1.27$, $SE = +/-0.63$, $p < 0.05$).

Conclusion: Constructs of the Social Cognitive Theory may be useful predictors of patients’ ability to manage ESRD.

Session Type: Poster

Session Title: Increasing Healthy Lifestyle Behaviors Among Medicare Beneficiaries through a Healthy Church Challenge

Session Number: Poster – Friday – Fr14

Submitting Authors: Dr. Camille Clarke-Smith

Authors Bio: Dr. Camille Clarke-Smith is the owner of Camille Clarke LLC, a health coaching and personal training business which focuses on mental and physical health, where the motto is “Mental Health. Physical Fitness. Individual Success.” Dr. Smith is also the founder of T.H.A.W. Inc. (Transforming the Health of African American women), which is a non-profit organization where the mission is “to improve the health and quality of life for African American Women and the communities they live.” Dr. Smith is also a Senior Strategy Analyst in the Medicare Stars Department at UPMC Health Plan. Dr. Smith received her B.S. in Psychology and Sociology, M.S. in Exercise Science, and her EdD in Health and Physical Activity from the University of Pittsburgh.

Chosen Sub-theme: Changing Perspectives: Leveraging Sectors, Engagement and Partnerships

Objectives: 1) Understand the benefits of offering wellness programming using Faith-Based Organizations (FBO).

2) Describe the 12-week Medicare Healthy Church Challenge program and its effectiveness in increasing participation in preventative health screenings and health behaviors among Medicare beneficiaries who participated in the challenge, offered by an integrated financing and delivery healthcare system.

Keywords: Health Behavior, Physical Activity/Exercise, Religion & Health

Special Populations: Older Adults

Full Abstract Detail: Research has shown that collaborations with Faith-Based Organizations (FBO) are effective and important alliances in the efforts to provide preventative health and social services to at-risk populations. FBO’s have access to and can build trusting relationships with populations often not easily reached by formal health care and public health care systems; making FBO important partners in the mission to improving the health of individuals and communities. Dellaven et al., (2014) found that FBO’s health programs significantly increase knowledge, improve screening behaviors and readiness to change, and reduces the risk associated with disease and disease symptoms. Almost 40% of adults ages 50-64 and 48% of adults 65+ attended church on a weekly basis, and over 70% of elders attend church throughout the year. The Medicare Healthy Church Challenge pilot program was established by an integrated financing and delivery healthcare system to foster relationships with churches to engage community members where they live and worship, deliver preventative health messages, and provide resources needed to live healthier lifestyles. Program metrics included increase in preventative screening participation, engagement with health plan and physicians, and improvement in mental and physical health. Each church had to choose a designated church contact person who would be the point of contact with the program coordinator.

The challenge started with a “Kick Off” event which included biometric measures of Body Mass Index, Weight, and Blood Pressure. This event was filled with fun activities: 2 mi community walk, senior line dancing, and senior yoga. A group fitness instructor was contracted to teach one class per week, during the 12-weeks of the challenge, at churches that did not have a senior activity program. Designated church contact persons received a weekly list of preventive health messages to present during Sunday services and were responsible for collecting participants weekly activity reports and delivering to the program coordinator.

Weekly, church teams and individual leaders were recognized through email and received a \$25 target gift card. At the end of the program, participants are provided an opportunity to attend a “Celebratory Event” where they are recognized and post biometric screenings are collected. This presentation will share the program approach, evaluation strategies, outcomes, and lessons learned.

Session Type: Poster

Session Title: Moving from Knowledge Translation to Implementation: Developing Online Resources to Support the Implementation of Comprehensive Violence Prevention Efforts

Session Number: Poster – Friday – Fr15

Submitting Authors: Lindsey Barranco

Co-Authors: Kimberley E Freire, Gayle Payne, Sarah Roby

Authors Bio: The authors all work at the Division of Violence Prevention (both within the Prevention Practice and Translation Branch and the Communications Team) and have expertise both in Violence Prevention, Implementation Science, Knowledge Translation, and Health Education. All of the authors were heavily involved in leading the development of the online resource from the very beginning (conceptualization) to development to dissemination.

Chosen Sub-theme: Changing Approaches: Emerging Issues in Research Translation and Implementation

Objectives: Describe the Division of Violence Prevention's resources on VetoViolence related to implementation of the best available evidence;

Articulate how understanding the process by which the Division of Violence Prevention developed online resources to support implementation apply to their work in translating evidence into practice.

Keywords: Resource Development, Technical Assistance, Violent Behavior/Violent Prevention

Special Populations: Mid-Career Professionals, New Professionals, Seasoned Professionals

Full Abstract Detail: Centers for Disease Control's Division of Violence Prevention recently developed a series of technical packages that translated the best available evidence from the field in a way that was accessible to state and local health departments and partners. However, simply focusing on knowledge translation of the evidence - or what to implement – without integrating implementation science on how to deliver effective public health strategies, leaves a gap in application of best available evidence. To support implementation of the strategies in the technical packages, DVP integrated theories and practices from knowledge translation, implementation science and health education and communication to develop Violence Prevention in Practice (VPP). VPP is an online resource focused on helping state and local health departments and their partners weave together a comprehensive plan to prevent violence by strategically selecting, implementing, adapting, and evaluating evidence informed approaches. The resource was seamlessly integrated into VetoViolence, a website developed by DVP using adult learning principles and best practices for user experience to facilitate the translation and transfer of evidence-based research findings into evidence-based practices. VPP moves beyond specific program implementation to a focus on supporting communities in implementing a select group of strategies and approaches and ways to advance them across multiple levels of the social ecology. Many of the approaches in the technical packages relate to community and societal level changes such as creating protective environments and communities, strengthening economic supports, and changing social norms. This required VPP to address implementation of a wide range of programs, practices and

policies – in a way that translated the best available evidence while allowing for local adaptation. The resource also incorporates concrete action steps for addressing health equity within all aspects of violence prevention. Over the past year, DVP has also been developing additional tools to enhance the content on VPP including an Adaptation tool, a searchable Sexual Violence Indicators database, and a capacity tool. Presenters will describe the development process for VPP as well as the process for incorporating feedback from stakeholders to continually improve our efforts to translate and disseminate the best available evidence in the field. Understanding how communities have been able to use VPP assists CDC and other communities in identifying ways to improve the implementation of violence prevention approaches based on the best available evidence. As the field of violence prevention strives to increase the implementation of community and societal level strategies that have the greatest potential for broad public health impact, health education and communication have a critical role to play.

Session Type: Poster

Session Title: The impact of SNAP-Ed in Georgia

Session Number: Poster – Friday – Fr16

Submitting Authors: Ms. Latresh Davenport

Co-Authors: Amy DeLisio, Dr. Suzanne Ryan-Ibarra

Authors Bio: Latresh Davenport is the SNAP Nutrition Education Program Coordinator at the Georgia Division of Family and Children Services where she provides leadership and manages the SNAP Nutrition Education program for the state of Georgia. She has 7 years of progressive experience in nutrition education and obesity prevention at the South Carolina Department of Health and Environmental Control, the Georgia Coalition for Physical Activity and Nutrition, and the DeKalb County Board of Health. She received her Bachelor of Science from Emory University and a Masters of Public Health from the University of South Carolina.

Chosen Sub-theme: Changing Systems: Policy, Advocacy, Communications

Objectives: 1. By the end of the session, participants will be able to summarize the impact of the SNAP Nutrition Education program in Georgia between 2017-2019

2. By the end of the session, participants will be able to explain how to aggregate data from three different survey instruments in a statewide setting.

Keywords: Evaluation and Measurement, Nutrition and Obesity Reduction, Policy, Systems & Environmental Change

Special Populations: Disadvantaged Populations

Full Abstract Detail: The goal of the SNAP Nutrition Education and Obesity Prevention Grant program, also known as SNAP-Ed, is to improve the likelihood that persons eligible for SNAP will make healthy food choices within a limited budget and choose physically active lifestyles consistent with the current Dietary Guidelines for Americans and the United State Department of Agriculture’s food guidance. This federally funded grant program administered by the SNAP State Agency, the Georgia Division of Family and Children Services funds four agencies to deliver health education related to healthy eating and active living, as well as to implement policy, systems, and environmental changes in low-income communities throughout Georgia. In 2017, the Georgia Division of Family and Children Services decided to aggregate Healthy Eating, Food Resource Management and Nutrition Policy, System and Environmental (PSE) change data from each of SNAP-Ed funded agencies at the state level to better understand the reach, outcomes, and identify opportunities for improvement for Georgia SNAP-Ed. Methods Data were collected using pre- and post-tests for 13 healthy eating and food resource management behavior indicators (n=11,087 pre-test, n=9,124 post-test). The primary indicators for this study were related to fruit and vegetable consumption. Because the agencies used various instruments to collect information about the 13 indicators, the responses were recoded by the agencies using guidelines based on meeting the Dietary Guidelines for Americans or recommendations for positive outcomes related to food resource management behaviors. To adjust for clustering by site, multilevel

linear or logistic regression models (depending on whether an outcome is continuous or binary) were used. PSE changes were measured for nutrition using direct observation, interviews with key informants, repeated assessments or surveys, and photographic evidence, as recommended by the SNAP-Ed Evaluation Framework. Agencies submitted data using a standardized Excel template with drop-down menus for PSE changes and promotional efforts, using the lists provided in the SNAP-Ed Evaluation Framework. Counts were computed for all PSE types (policy, systems, environmental) as well as promotional efforts for PSE for nutrition supports and physical activity and reduced sedentary behavior supports. A sum was computed for reach. Outcomes-After participating in SNAP-Ed programs in Georgia, adult participants were significantly more likely to eat more than one kind of fruit (Odds Ratio 3.64, 95% Confidence Interval 2.80- 4.72, p-value <.0001) and eat more than one kind of vegetable (Odds Ratio 2.13, 95% Confidence Interval 1.68- 2.71, p-value <.0001) after participating in SNAP-Ed, compared to before. A total of 223 PSE changes reached 113,363 people. The highest number of PSE changes were systems changes (n=80), followed by environmental changes (n=50), and policy changes (n=34).

Session Type: Poster

Session Title: Beyond Freezer Meals: Modeling Women's Reported Challenges during and Proposed Solutions for the Postpartum Period

Session Number: Poster – Friday – Fr17

Submitting Authors: Dr. Susan Roberts-Dobie

Co-Authors: Dr. Disa Cornish

Authors Bio: Drs Roberts-Dobie and Cornish have completed several studies focused on maternal and infant health and social support. They have each presented at SOPHE multiple times in the past.

Chosen Sub-theme: Changing Systems: Policy, Advocacy, Communications

Objectives: By the end of the session the participant will/be able to: 1) map at least 10 challenges women face during the postpartum period and 10 solutions they identify to meet those challenges onto the Social Ecological Model and 2) identify at least 5 "upstream" solutions that would move the onus of the solution off the woman and onto the institutions, community, and policy makers.

Keywords: Environmental & System Change, Maternal & Child Health, Qualitative Methods

Special Populations: Maternal & Infant Health, Women

Full Abstract Detail: Individuals in the postpartum period face many challenges including infant care, self-care, fatigue, breastfeeding, and maternal and family adaptation, to name a few, all of which take place in an environment altered by the addition of a newborn. Social support from varied sources may ease the transition experienced when bringing a new baby home. To determine the type of challenges postpartum women experience and what supports they feel would help most, we conducted semi-structured interviews with 22 women at 1 month and 3 months postpartum. As systems models locate a person's behaviors in the context of various social, physical, and cultural environments, we then matched each challenge and support mentioned to the appropriate level of the Social Ecological Model (SEM).

Participants identified 183 distinct, separate challenges, including exhaustion and a lack of confidence in parenting (intrapersonal level challenges), struggles with family adjustment, illness of the baby, and disconnection from partners and friends (interpersonal), pressure to be "super mom" (community), and short or no parental leave (public policy). In questions related to solutions, participants suggested 189 distinct, separate solutions, such as making freezer meals in advance and asking for and accepting help (intrapersonal level solutions), support groups (interpersonal), the ability to text a health care provider and grocery delivery (institutional), and parental leave policies for both parents and home visits from nurses (public policy).

Analysis indicated that while postpartum women experience challenges across all levels of the SEM, they report the most challenges at the intra- and interpersonal levels (n=82 and 69). And while their solutions also cross all levels of the SEM, they are primarily focused on solutions at the intra- and interpersonal levels (n=62 and 91), rather than focusing on how institutions (n=29), the community (n=2), or public policy (n=5) could alleviate their challenges.

The analysis of these interviews through the theoretical lens of the SEM allows us to plan interventions helping to address challenges during the postpartum period by looking upstream to how they can be prevented. Programs wanting to support individuals in the postpartum period should advocate for solutions that add social support such as paid parental leave, paid doula support, and home visits from nurses. They should also work to change institutions that can support women such as better postpartum access to nurses/ lactations consultants and flexibility from employers. A change in cultural norms reducing the belief that they should be able to do everything by themselves could also increase social support during this crucial time. People often say “It takes a village to raise a child”; moms need Public Health to help them better activate that village to improve the postpartum period.

Session Type: Poster

Session Title: Talking about Adolescent Health Risks: It's Complicated!

Session Number: Poster – Friday – Fr18

Submitting Authors: Rachael Picard, MPH

Co-Authors: Alejandra Brackett, M.P.H., CHES, Tracy Ingraham, Everly Macario, Sc.D., M.S., Ed.M., Rebecca Payne, M.P.H.

Authors Bio: Rachael Picard, MPH, is a skilled professional with more than half a decade of experience with research and health communication. At IQ Solutions, Rachael serves as a Health Communications Analyst leading health communications and formative research projects for federal agencies, including the Centers for Disease Control and Prevention (CDC). She supported a year-long research effort that involved planning for, conducting, analyzing, and reporting on 30 in-person focus groups in eight U.S. cities to test health messaging about adolescent health and tuberculosis. In addition, Rachael leads activities at the intersection of research and communications practice, including support for the National Institute on Drug Abuse and the Food and Drug Administration. Rachael received her MPH in health promotion from George Washington University's School of Public Health.

Chosen Sub-theme: Changing Systems: Policy, Advocacy, Communications

Objectives: Apply research findings to develop and tailor messages about sexual health, substance use, violence, and mental health among youth.

Explain why and how message testing can be used to develop health information and calls-to-action for multiple target audiences.

Keywords: Qualitative Methods, School Health, Sexual Health

Special Populations: Children & Adolescents, LGBTQ+, Minority Populations

Full Abstract Detail: Background: Centers for Disease Control and Prevention (CDC) Division of Adolescent and School Health (DASH) Youth Risk Behavior Survey (YRBS) data reveal ways youth are exposed to health risks and experiences across four domains—sexual activity, high-risk substance use, violence victimization, and mental health. Individual and community-level risk factors across the four domains impact youth, especially LGBTQ youth, raising their risk for STDs and unintended pregnancy. Data indicate that health risks co-occur and many youth experience multiple, interrelated risks across domains. The four domains also share protective factors. Given the data and complex relationship between health topics, information about these risks and experiences must be presented clearly and persuasively. Methods: CDC/DASH conducted 15 focus groups in five cities to explore attitudes toward adolescent health and assess reactions to messages for clarity, persuasiveness, audience-appropriateness, and consistency in interpretation across stakeholders (state and local education agencies; youth-serving organizations; health organizations; policymaking organizations; parents). The moderator sought feedback on trends in adolescent/ school health; messages about co-occurring risks, CDC-recommend strategies to address those risks, the impact of CDC's work, and related communication materials. Results: Focus group participants had mixed reactions to messages on the co-

occurrence of risks across the four domains. Evolving conversations about equity, inclusion, and the connection of stigma to certain language shaped reactions to messages about health risks faced by LGBTQ youth. Participants across focus groups reflected on connotations of certain terms used to describe health risks—sharing the ways nuanced differences in terminology could be interpreted by target audiences (peers, educators, health professionals, parents, youth). Focus groups also identified regional differences in attitudes toward, and language used to discuss, sexual health education. Participants preferred language that empowers youth and looks beyond a singular focus on risk factors to account for the effect of one’s environment and other social determinants of health. Implications for Practice: Public health professionals face the challenge of translating risk-related data into messages for intermediaries and target audiences. Optimal health information reflects language at the intersection of data and how the audience speaks day-to-day. Focus groups revealed complications when communicating about intersecting (co-occurring) risks, timely and serious health topics being discussed broadly in communities and schools. Message testing allows for audience-informed, systematic crafting of language that is clear, motivating, audience-resonant, and interpreted as intended. Attendees will gain insight to develop clearer and more accessible messages about sexual health, substance use, violence, and mental health among youth.

Session Type: Poster

Session Title: Collaborating Across Sectors: The Second Annual Tribal Opioid Summit Program Evaluation

Session Number: Poster – Friday – Fr19

Submitting Authors: Ms. Maggie E. Magoon, Ph.D.

Co-Authors: Jeff Inungu, M.D., Dr.P.H., Patrick Shannon, JD, EdD, MPH

Authors Bio: Maggie E. Magoon completed her B.A. in Psychology from Purdue University-Indianapolis, M.S. in Counseling Psychology from Indiana University-Indianapolis, Ph.D. in Educational Psychology/Adolescent & Human Development from Indiana University-Bloomington, Post-Doctoral Fellowship from McGill University, and is currently completing her MPH at Central Michigan University (CMU). She is currently the TRIO SSS Grant Coordinator at Mid Michigan College. Her background working in health, human development, and program development and evaluation reinforced this multi-organization partnership.

Chosen Sub-theme: Changing Perspectives: Leveraging Sectors, Engagement and Partnerships

Objectives: Apply the Saginaw Chippewa Indian Tribe/Central Michigan University evaluation model to potential partner institutions through collaborative procedures.

Design their own evaluation tools relevant to similar health education professional development partnerships and events.

Keywords: Alcohol & Substance Abuse, Career Development/Professional, Evaluation and Measurement

Special Populations: Disadvantaged Populations, Minority Populations, Seasoned Professionals

Full Abstract Detail: With the overarching SOPHE conference vision of, “Linking Science and Social Justice: Health Education as a Catalyst for Change” and chosen subtheme of, “Changing Perspectives: Leveraging Sectors, Engagement and Partnerships,” the collaboration between the Saginaw Chippewa Indian Tribe (SCIT) and Central Michigan University (CMU) addresses the need for sound evaluation of health education programs and events to create change. In Michigan, opioid-related deaths are nearly twice as high among the disadvantaged, minority population of tribal members compared to other demographics. In 2018, the Healing to Wellness program for the SCIT Tribal Court identified this public health need in the region and developed the first annual SCIT Opioid Summit. Based on SCIT’s commitment to continuous quality improvement, planning and evaluation expanded in 2019. CMU, SCIT members, and other community members contributed to the Planning Committee. The collaboration of primarily seasoned professionals across sectors developed a career development/professional preparation opportunity on substance abuse through the Second Annual Opioid Summit. The objective of the conference was to effectively educate the community in terms of best practices for addiction prevention/intervention, criminal justice, and treatment/recovery methods. The purpose of this evaluation is to examine the effectiveness of the Summit in meeting its objectives, assessing its effects on community needs, and discussing the lessons learned to inform the next steps. In addition, participants’ satisfaction level was determined regarding topics covered, summit organization, logistics,

and setting. The Summit has become one of the most highly attended and coordinated efforts to address opioids in the area. Therefore, the Planning Committee is committed to gathering data and feedback, provided by a formal evaluation process and partnership with CMU and other cross-sector community members, to continue to offer rigorous professional development opportunities to the community.

Evaluation measures included: electronic survey questionnaires utilizing open-ended questions; Likert-type scales; and qualitative input from Thought Walls and "Conversation Catchers." The latter was developed to incorporate the oral tradition of storytelling within the Native American culture. Groups from multiple sectors were surveyed: Conversation Catchers, vendors/exhibitors, presenters, Planning Committee members, and conference attendees. Statistical analysis includes: Quantitative data analyses (descriptive data) and qualitative data analyses (content analyses of text to uncover concepts and emergent themes generating thematic concept maps to show relationships of themes and concepts). Evaluation results will be presented to the SCIT Planning Committee to inform future conferences based on the above analyses.

Session Type: Poster

Session Title: Examining beliefs and attitudes towards the HPV vaccine among adults aged 18-45 years old

Session Number: Poster – Friday – Fr20

Submitting Authors: Julia Mary Alber

Co-Authors: David Askay, Sanam Ghazvini, Lauren Kolodziejski

Authors Bio: I have published peer-reviewed articles and presented at national conference on cancer prevention and health communication research. I have also received funding to conduct cancer-related research.

Chosen Sub-theme: Changing Outcomes: Health Education and the Continuum of Prevention and Care

Objectives: By the end of the session, the participant will be able to summarize two beliefs related to HPV vaccine among a sample of adults aged 18-45 years old.

By the end of the session, the participant will be able to compare HPV vaccine rates and knowledge among adults by different demographics (e.g., sex).

Keywords: Cancer, Health Behavior, Immunization

Special Populations: Women, Young Adults

Full Abstract Detail: Human papillomaviruses (HPV) are known to contribute to over 42,000 new diagnoses of anal, cervical, oropharyngeal, vaginal, and vulvar cancers each year, with over one billion dollars spent annually for treatment of these cancers in the U.S. In 2018, the Food and Drug Administration (FDA) approved the HPV vaccine (Gardasil) for men and women aged 27-45, which was previously approved only for ages 9 to 26 years old. Given this recent change, it is critical to understand the beliefs and attitudes towards the HPV vaccine among adults in order to promote HPV vaccination among this age group. An online survey (n=420) with a sample of adults (18-45 years old) living in the U.S. was used to examine HPV vaccine-related beliefs, attitudes, and uptake. Items were based on the Integrated Behavioral Model and examined attitudes towards the vaccine, perceived control of obtaining the vaccine, and normative beliefs about the vaccine. Demographics of the sample were comparable to the U.S. population with 50.7% (n=213) identifying as women, 65.7% (n=276) identifying as white, 15.2% (n=64) identifying as Black/African American, and 17.1% (n=72) identifying as Hispanic, Latinx, or Spanish origin. Results indicated that only 26.4% (n=111) had received at least one injection of the HPV vaccine and only 19.5% (n=82) had received the full series with higher rates from women compared to men. Only 29.8% (n=125) reported having a healthcare provider recommend the HPV vaccine to them. Furthermore, only 45.2% (n=190) knew the vaccine was approved for adults 18-26 years old and even less (n=134, 31.9%) knew it was approved for ages 27-45 years old. Many participants believe that HPV vaccine is effective in the prevention of HPV infection (n=249, 59.3%) and cervical cancer (n=214, 50.9%). Roughly half of the participants (n=221, 52.6%) agreed or strongly agreed that most people who are important to them would approve of them receiving the HPV vaccine.

Interestingly, many participants (n=255, 60.7%) agreed or strongly agreed that if a healthcare provider recommended it, they would get the HPV vaccine. There were some negative beliefs towards the vaccination. For example, 24.5% (n=103) agreed or strongly agreed the HPV vaccine could cause health problems. While much of past research has focused on increasing vaccination rates among children, results indicate that there is a need to increase awareness among adults and that many adults may be open to receiving a vaccine if it was recommended by a provider. Results from this survey can help explain lower HPV vaccine uptake rates among adults. In addition, findings from this study can be used to inform further health education and communication regarding the HPV vaccine.

Session Type: Poster

Session Title: Utilizing Discipline-Based Service Learning as a High-Impact Practice to Increase Student Understanding of NCHEC Responsibilities and Competencies

Session Number: Poster – Friday – Fr21

Submitting Authors: Charity Bishop

Authors Bio: Charity Bishop, CHES, is a Lecturer and the Program Director for the BSPH in Community Health at the Richard M. Fairbanks School of Public Health at Indiana University in Indianapolis (IUPUI). She has practiced in the field for over 20 years, including work in community organizing and capacity building, community assessment, nonprofit management, healthy aging, and worksite health promotion. She teaches courses in program assessment, planning, implementation, and evaluation; community organizing and building, and career preparation in public health. She currently serves as the Indiana delegate to the SOPHE House of Delegates, and on the SOPHE Advocacy and Professional Preparation Committees. She is a member of the Top 10 Steering Committee, and the InSOPHE Board of Directors.

Chosen Sub-theme: Changing Minds: The Art and Science of Teaching in Communities and Professional Preparation

Objectives: By the end of the session, the participant will be able to apply service learning experiences to undergraduate coursework to increase students' civic-mindedness.

By the end of the session, the participant will be able to understand how service learning can be applied within their own curricular structures to increase student mastery of NCHEC's Responsibilities and Competencies for Health Education Specialists.

Keywords: Career Development/Professional

Special Populations: New Professionals

Full Abstract Detail: The Association of American Colleges & Universities' identified service learning as one of numerous evidence-based high-impact practices (HIPs) in higher education. Service learning refers to a pedagogy that engages students in experiential learning while benefiting others in the community. In a 300-level Community Health course, students participate in a Discipline-Based Service Learning Model, in which each student is required to volunteer at one community-based organization for a minimum of 20 hours and at a one-time event, such as a 5k walk/run, for a minimum of 3 hours. Students engage in critical reflection multiple times throughout the semester through mid-term and final reports, in-class and group discussion, and course readings. A group of selected community organizations is identified for the 20-hour SLE by the course instructor and Service Learning Assistant (SLA). The course SLA coordinates with volunteer management at each organization to determine logistics for the service learning experiences. Students are expected to schedule their own service hours at the organization. Students self-select their one-time event experiences.

Initial research of the SLE measured changes in students' civic-mindedness before and after the SLE. Using the Mann-Whitney test, a statistically significant increase was found in "Knowledge of Volunteer Opportunities" (p-value=0.012) and "Knowledge of Academic and Technical Skills" (p-value=0.043).

Findings were applied to make improvements in future sections of the course, and the SLE critical reflections were adjusted and directly linked to NCHEC's Areas of Responsibility. Most recent qualitative findings show that while the service aspect of service learning is valuable in providing students' experience working with community health agencies, the critical reflection is where students build competence in the NCHEC Areas of Responsibility.

Future iterations of reflection will focus on targeting more Areas of Responsibility and specific subcompetencies. For this course, service learning has been an effective tool in helping students gain competence in NCHEC's areas of responsibility.

Session Type: Poster

Session Title: Consumer Knowledge and Behavior During Grocery Shopping: A National Observational Study

Session Number: Poster – Friday – Fr22

Submitting Authors: Ms. Lulu Almutairi

Authors Bio: Lulu Almutairi is a research specialist at Saudi Food and Drug Authority since 2017, and has a bachelor degree in Community Health Education from Minnesota State University. Lulu has participated in couple conferences and workshops as well as being one of the Scientific committee members of The Annual SFDA International Conference. Lulu have been the Principle investigator of a Consumer Behavior Surveillance System, that's includes two different researches as well as being included in other research projects in the research department. Lulu currently is working in a project that masseur the effectiveness of calorie labeling regulation in Saudi Arabia as well as planning an advocacy training course In cooperation with SFDA.

Chosen Sub-theme: Changing Outcomes: Health Education and the Continuum of Prevention and Care

Objectives: By the end pf this session, participants will be able to create an educational program that focus on the main nutritional terms that consumer face difficulties to understands them and they way they can read them.

By the end of this session, participants should be able to identify some of the main factors that consumers relay on when choosing a food product as well as the main food label they review before buying a product.

Keywords: Community Health, Consumer Health, Health Behavior

Special Populations: Men, Older Adults, Women

Full Abstract Detail: Background

Obesity is a major public health problem and one of the main causes of different chronic diseases. Worldwide, eating habits, lack of exercises and other factors are associated with the increased level of obesity. Improving healthy grocery shopping behaviors among consumers can help increasing overall health of the community as well as decreasing the level of obesity by controlling the amount of daily-consumed calorie.

Aim:

This research attempts to gain an insight about consumer's behavior during grocery shopping, and evaluate the level of knowledge of fundamental dietary information amongst Saudi community along with effect of health claims on purchasing behavior.

Methods

Data for this study were collected using different data collection methods which is observational and cross-sectional of a convenience sample of adults aged 16 and older (n=7546). Participants were observed and surveyed at different supermarkets in all 13 main regions of Saudi Arabia. Observational method was specifically designed to see whether the consumers interact with the products they aimed to buy or not. On the other side, questionnaires used to assess the frequency of nutrition label use and to investigate the specific nutrient information consumers commonly check, plus level of nutrition knowledge. Descriptive data were generated for all variables, and comparative analyses were conducted to identify possible differences between variables. Regression analysis was used to predict whether consumers' behavior and demographics were related to participants' nutrition knowledge

Results

The study found that about 65% of consumers check the food product before purchasing it, while 35% did not interact with the product at all. Over half of those who checked the product indicated that they reviewed expiry date 47.5% while 19.2% only reviewed nutrition facts. Moreover, the three most important factors that influence consumers buying decisions are price (48.3%), brand name (35.3%), and taste (26.6%). Furthermore, there was a moderate level of dietary knowledge among consumers, around average of the participants reported the right definition of the product's labels. In addition, those who checked nutrient facts were more likely to report the right definition of the product labels than those who did not check the product at all. Furthermore, no significant differences in knowledge between socio-demographic groups were found.

Session Type: Poster

Session Title: Implementation of a Sexual and Reproductive Health Education in Sub-Saharan Africa

Session Number: Poster – Friday – Fr23

Submitting Authors: Dr. Joanne Chopak-Foss

Co-Authors: Jeffrey Carithers, MD, Bradlie Nabours, John Peden, PhD

Authors Bio: Dr. Chopak-Foss has over 25 years of experience in an academic setting. She has been on the forefront of curriculum development for undergraduate education in public health. Her research interests have focused on improving health literacy among children and adolescents, maternal and child health issues, including breastfeeding, safe sleep for newborns, antecedents for adolescent pregnancy and early pubertal timing eating disorders among athletes and, health and sexual health curriculum development for K-12.

Dr. Chopak-Foss's professional affiliations include The Society for Public Health Education, the Georgia Chapter of the Society for Public Health Education, and Eta Sigma Gamma, National Professional Health Science honorary.

Chosen Sub-theme: Changing Perspectives: Leveraging Sectors, Engagement and Partnerships

Objectives: To describe need for more comprehensive sexuality educational programs and interventions particularly in rural communities, where teen pregnancy and sexual assault are prevalent.

To describe the development and implementation of a school-based reproductive health and relationships program in rural Tanzania.

To report the results of the pilot testing of the knowledge and attitudes of students on reproductive health and relationships.

Keywords: Global Health, School Health, Sexual Health

Special Populations: Children & Adolescents, Global/International Populations

Full Abstract Detail: Sexual and reproductive health for youth in sub-Saharan Africa has primarily focused on reducing HIV infection. However, population increases in adolescents and young adults in the region has increased the need for more comprehensive sexuality educational programs and interventions particularly in rural communities, where teen pregnancy and sexual assault are prevalent. Reproductive health and healthy relationship education gives young people access to explore the interrelated implications of sex, and to allow for the opportunity to make informed decisions concerning sexual behavior. Access to sexual health education can also advocate for improved gender equality that may lead to reduced rates of unintended pregnancy, sexually transmitted diseases and delay the onset of sexual activity. Empower Tanzania, a non-profit organization working in the Same District of Tanzania, have partnered with rural Tanzanians to improve their quality of life. In early 2018, led by the efforts of the health programs director, a curriculum focusing on reproductive health and relationships including videos in both English and Swahili, and a series of lessons covering reproductive anatomy, pubertal development, healthy relationships and sexual assault prevention were developed. Teacher

training and the selection of which schools in Same district would receive the curriculum took place during the month of September 2018. Implementation of the curriculum began in January 2019 and will continue through December 2019. A pilot test of the knowledge and attitudes of reproductive health and relationship survey that will be used in the pre-test and post-test of curriculum effectiveness was conducted in December 2018 at a school that would not be receiving the curriculum. The pilot test assesses comprehension of the questions prior to pretest assessment and to establish content validity for the survey instrument. The knowledge and attitudes survey was piloted to 110 students in two classrooms. Out of the 110 students, 37% of the students were male (N=41) and 63% were female (N=69). Over 70% of students reported they had been taught about sexuality education but not relationships; Knowledge questions about reproductive health functions for females yielded mixed results with a range from 46 to 94% of the students answering questions correctly. The pilot test of the instrument informed the revision of questions prior to pre-test implementation and revealed that the questions were understood along with areas where students are already knowledgeable. The session will describe the rationale for developing a comprehensive reproductive health and relationship program in rural Tanzania, the process of creating the curriculum through teacher training and implementation, and the results of the pilot test of the knowledge and attitudes survey.

Session Type: Poster

Session Title: Poverty Simulation as a Pedagogical Strategy for Students, Employees, and Community Members

Session Number: Poster – Friday – Fr24

Submitting Authors: Dr. Patsy Barrington, MCHES

Co-Authors: Stephen Jones, Ms. Jordan Potje, MS

Authors Bio: Dr. Barrington has been a faculty member with Health Promotion at the University of West Florida (UWF) since 2003. Before UWF, she was the Regional Director of the American Lung Association, working with many local health programs. She received her bachelor degree in Psychology from Bradley University, Master degree in Community Health Education and doctoral degree in Health Promotion from UWF. She holds several leadership positions including: state representative for the Florida Tobacco Advisory Council, President of Florida SOPHE; Chair of Healthy Environments Are Tobacco-free Partnership, and President of the Board of Directors for CDAC Behavioral Health. She is committed to supporting the next generation of health educators by providing students with opportunities to gain valuable experience through high-impact practices in the classroom that translate to the health profession.

Chosen Sub-theme: Changing Minds: The Art and Science of Teaching in Communities and Professional Preparation

Objectives: By the end of the session, the participant will be able to explain the purpose of a poverty simulation workshop.

By the end of the session, the participant will be able to identify 2 ways that a poverty simulation workshop can contribute to improved knowledge, skills, behaviors and competencies

Keywords: Cultural Competence, Health Equity, Health Literacy

Special Populations: Disadvantaged Populations, Minority Populations, New Professionals

Full Abstract Detail: Through the CDC's Comprehensive Cancer Control program, a network of six regional collaboratives were established in Florida. The Northwest Florida Cancer Control Collaborative covers 18 counties in the Florida panhandle with the objectives of examining cancer disparity-related data specific to the region, incorporating cultural competency techniques in practice, and using evidence-based practices to address cancer related health issues and outcomes. To address cultural competency at its roots, a poverty simulation was conducted for collaborative members and community partners. There were 60 participants from a variety of community agencies including health departments, school districts, and non-profit organizations. After the workshop, participants discussed how the three-hour simulation gave them a new perspective on poverty related issues and concrete ways the simulation will have an impact on how they perform their jobs. The workshop was found to be "Extremely Beneficial" or "Very Beneficial" by 78% of the participants and 95% would be "Very Likely" or "Likely" to recommend the workshop to a colleague. Following the success and impact of the poverty simulation provided to the cancer collaborative members, the poverty simulation will be offered to the

campus community at the University of West Florida (UWF). The target audience for one simulation will be UWF students. The simulation will be open to all students. Additional follow up with student participants will further examine the impact of the simulation as it relates to their field of study. Discussions with students in the Nursing and Health Promotion program will be held to explore the impact of the simulation on their future role as a health professional. The other audience for the poverty simulation will be UWF employees as part of the worksite wellness program. Faculty and staff from all university departments will be encouraged to attend and the workshop will be considered professional development. Discussion after the simulation will include the impact on knowledge, skills, behaviors, and competencies in their position with the university. By offering the poverty simulation to a variety of audiences—students, employees, and community members—the project addresses innovative practices in schools, communities and priority populations, which is the focus of sub-theme Changing Minds: The Art & Science of Teaching in Communities & Professional Preparation. Each poverty simulation can accommodate up to 100 participants. With the support of faculty from the College of Health, attendance for the student simulation is expected to be high. By incorporating the simulation into the worksite wellness program, employee participation is also anticipated to be positive. In addition, graduate students will be involved in the process of planning, implementing, and evaluating the simulation, providing a high-impact learning experience that will contribute to valuable professional preparation.

Session Type: Poster

Session Title: Safe-Sex curriculum is more effective than Abstinence Only in adolescents at reducing sexually transmitted infections.

Session Number: Poster – Friday – Fr25

Submitting Authors: Dr. Rebecca M Toland

Authors Bio: Researcher is an assistant professor of a Health Science program and has taught various courses in public health and healthcare policy. She has been teaching in the field for over ten years and currently teaches college students in human sexuality. Every semester she offers vital sex health information to incoming freshmen.

Her degrees include a BS in Health Science, Masters of Clinical Social Work, Masters of Public Administration and Doctorate of Health Education. Additionally, researcher has CHES designation and certified in HIV/AIDs prevention and education.

Researcher has gained professional knowledge working in behavioral health at a local mental health clinic She also worked within the local health department in the adult health clinic HIV prevention department.

Chosen Sub-theme: Changing Outcomes: Health Education and the Continuum of Prevention and Care

Objectives: By the end of this session participants will be able to use the Transtheretical Model in a safe-sex education program and gain an understanding of student-centered learning.

Keywords: Behavior Change/Theories, Health Behavior, Sexual Health

Special Populations: Children & Adolescents

Full Abstract Detail: The purpose of the study was to determine if offering a safe-sex prevention program to adolescents would initiate a reduction in their risky sexual behavior and increase the knowledge of safe-sex practices including condom use. The prevention offered information on safe-sex methods, male and female sex anatomy, relationships, sexually transmitted diseases, and community resource information. Methodology: The population under consideration consisted of male and female adolescents aged 15-17. Participants resided in the same community where abstinence only curriculum is offered in the public school system. Participants were assigned various tools to complete for the program: Surveys were provided at the beginning and end of the intervention, pre and posttest questions and participant interviews were offered to the subjects to analyze educational attainment and behavior modification skills. Each participant was given a random numerical number for identification purposes. Data obtained by the researcher was entered into a data analysis program (SPSS) for storage and analyzing. A letter of consent was provided to subjects prior to survey implementation and intervention participation. The intervention took place for four hours in a classroom setting at Columbus State University. Researcher provided pertinent information on the topic via lecture, role-playing, discussions, handouts, and games. Results: The research documented a positive behavioral change towards risky sexual behaviors of participants (N=32). It was evident that a positive change was

occurring when participants scored better on the posttest than the pretest by 58%. It was also evident in the results of the summative survey where 95% strongly agreed that they gained a significant amount of information about risky sexual behavior and 85% strongly agreed that they are more likely to practice safe sex. Recommendations: Future and continuous research is required due to the nature of the topic and the changes that inevitably take place in adolescent behavior, increase of antibiotic resistance infections, and the development of new STI prevention programs.

Session Type: Poster

Session Title: The development and evaluation of a school climate videogame intervention

Session Number: Poster – Friday – Fr26

Submitting Authors: Claudia-Santi Fernandes

Co-Authors: Marc A. Brackett, Lynn Fiellin, Kimberly Hieftje, Jessica Hoffmann

Authors Bio: Claudia-Santi F. Fernandes, Ed.D., LPC, MCHES, NCC is an adolescent mental health and wellness expert with experience in public schools, clinical settings, and research institutions. Dr. Fernandes started her career as a teacher and bilingual school counselor where she developed a compelling interest in school-based support services. She also served on the leadership team as Director of Student Activities in opening a Bard High School Early College in Newark, New Jersey where she organized school-wide initiatives that concentrated on school climate. After 15 years in the field, she realized that most of her students played videogames, and decided to “meet them where they are at” by joining the play2PREVENT Lab. Currently, she is an associate director of the play2PREVENT Lab at the Yale Center for Health & Learning Games and an associate research scientist at the Yale School of Medicine.

Chosen Sub-theme: Changing Minds: The Art and Science of Teaching in Communities and Professional Preparation

Objectives: By the end of the session, attendees will be able to: 1) identify the key steps in an adapted thought record modeled throughout 5 mini-games of the videogame intervention, Think It Through, 2) apply the steps of this videogame intervention, Think It Through, and “wise intervention” to one’s own personal context.

Keywords: Empowerment, Mental Health Communications, Technology

Special Populations: Children & Adolescents

Full Abstract Detail: School climate is a complex construct. Prior research links school climate to students’ self-esteem, academic achievement, and bullying. Therefore, creating a positive school climate is necessary for healthy youth development and learning. The purpose of this project was to develop an engaging and interactive videogame intervention. Embedded in the videogame is an assessment tool that collects data from adolescents about their school climate.

For this presentation, we will focus on the videogame intervention, Think It Through, that was threaded throughout 5 mini-games of the videogame. Categories in the mini-games were determined by the National School Climate Center and are the following: 1) relationships; 2) support for learning; 3) environment; 4) safety; and, 5) social media. Through formative research with input from our target audience of adolescents on content and the intervention, we created mini-games that provide relevant and relatable stories for participants to navigate through challenging situations. The goal of the mini-games was: 1) to teach adolescents skills in restructuring negative automatic thoughts through an adapted thought record (a technique used in cognitive behavioral therapy to improve mood) by modeling the process throughout each mini-game, and 2) to then empower adolescents to take action in

a real-life activity to, ideally, improve one's school climate. These real-life activities were informed by "wise interventions," which use theory- and research-based techniques to alter the meanings people make about themselves, others, or social situations. These meanings can be altered with brief exercises and have a lasting impact.

Our team will evaluate the videogame intervention with adolescents, aged 14-18 (N=100) in Fall 2019. The stages of design and development were informed by formative research with our target audience (i.e., adolescents). Our team will evaluate the acceptability and efficacy of the videogame intervention with adolescents, aged 14-18 (N=100) in Fall 2019. We will evaluate completion rates and uptake as well as the impact on self-efficacy, emotional self-efficacy, and cognitive reappraisal. We plan to present on the development and evaluation of our videogame in March 2020. Findings from this evaluation will inform next steps in building out the videogame on a larger scale with more adolescents across the United States.

Session Type: Poster

Session Title: Educating Youth for Healthy Eating with Cooking Matters

Session Number: Poster – Friday – Fr27

Submitting Authors: Mike Metzler

Co-Authors: Dasia Harmon, Ashley Rouse

Authors Bio: Mike Metzler, Ph.D., is the SNAP-Ed Grant Evaluator for HealthMPowers, an implementing agency. He also serves as External Evaluator for the Out of School Time sector in the SNAP-Ed grant.

Ashley Rouse is the Sector Director for Out of School Time in the HealthMPowers SNAP-Ed grant. She provides direct education through the Cooking Matters program.

Dasia Harmon is the Lead Educator in the Out of School Time sector, with primary responsibilities in the delivery of Cooking matters units.

Chosen Sub-theme: Changing Perspectives: Leveraging Sectors, Engagement and Partnerships

Objectives: By the end of this session the participants will know the main content and pedagogy used in the Cooking Matters curriculum.

By the end of this session, participants will understand the factors that contribute to effective Cooking Matters programming and offer suggestions for improvement.

Keywords: Nutrition and Obesity Reduction

Special Populations: Children & Adolescents

Full Abstract Detail: HealthMPowers' Out of School Time sector partners with Boys and Girls Clubs of Metro Atlanta to provide programming for youth and families through a year-round comprehensive program that includes nutrition direct education. The partnership also provides trainings designed to empower OST teams to implement the HealthMPowers program and provide training on the NAA HEPA Standards. Cooking Matters teaches participants to shop smarter, use nutrition information to make healthier choices and cook delicious, affordable meals. The hands on cooking classes and lesson provide youth with the information needed to understand the importance of eating fruits and vegetables.

39 Cooking matters units were taught by HealthMPowers educators at 20 Boys and Girls Clubs in the Metro Atlanta area in school year 2018-2019. Units enrolled from 4-28 students (Mean = 14.0). Participants' ages ranged from 6 to 17. Participants completed a short questionnaire on overall health, eating, and use of the club's garden before and after each Cooking Matters unit. Only participants who attended all classes in a unit and completed both the pre- and post- questionnaires were included in this analysis (n = 140). 30% of the completers were boys, 70% were girls.

When asked, "How much do you know about healthy eating?" 45.7% responded "I know a lot" before the Cooking Matters unit, while 53.6% responded similarly after the unit. One-day food recall questions were used to measure fruit and vegetable consumption. Prior to the Cooking Matters units, 72.9% met the SNAP-Ed goal of consuming fruit 2 or more times; 74.6% met that goal at the end. Prior to the

Cooking Matters units, 34.7% met the SNAP-Ed goal of consuming vegetables 3 or more times; 35.0% met that goal at the end.

Participants' perceptions of their overall health improved in the Cooking Matters units. 45.0% reported their health as "Very Good" or "Excellent" at the start, while 58.1% responded similarly at the end.

It is clear that the Cooking Matters units contributed to improved perceptions of participants' health knowledge and overall health. Positive but decidedly minimal changes were reported on the behavioral questions related to daily fruit and vegetable consumption.

By design, Cooking Matters is a brief introductory educational program for children and youth who wish to learn about the benefits of healthy cooking and eating. In this study, the short-term positive effects were increased perceptions of healthy eating knowledge and overall health. However, essentially no behavior changes were reported by participants. It is hoped that these results, presented as a poster at the SOPHE Conference, will stimulate the discussion of strategies for making Cooking Matters a more effective program for positive and healthy eating behavior changes in children and youth.

Session Type: Poster

Session Title: The “Healthy Moms, Healthy Communities” Immersive Learning Project: Conducting Qualitative Interviews to Inform a Photo Voice Intervention in an Undergraduate Health Promotion Planning and Anthropology Course

Session Number: Poster – Friday – Fr28

Submitting Authors: Dr. Jean Marie S. Place

Co-Authors: Dr. Caitlyn Placek, Dr. Jennifer Wies

Authors Bio: Dr. Jean Marie Place is a maternal and child health researcher. She began teaching at Ball State University in 2014 and studies adverse experiences in a woman’s reproductive life, particularly issues in the perinatal period such as infertility, postpartum depression, opioid use disorder, and infant mortality. She is qualified to present on this abstract given her research on maternal opioid use disorder in Delaware County, Indiana. She and her team have obtained two external grants to evaluate outcomes for a maternal substance abuse program, as well as generate multi-scalar data across multiple local health systems on how best to address maternal opioid use disorder. She and her team have made purposeful effort to bring these research experiences to the classroom in order to better prepare students to understand and be change-agents in these and other issues.

Chosen Sub-theme: Changing Minds: The Art and Science of Teaching in Communities and Professional Preparation

Objectives: By the end of the session, the participant will be able to discuss three ways that the methodological approach of “Photo Voice” can be adapted for a semester-long classroom environment.

Keywords: Alcohol & Substance Abuse, Maternal & Child Health, Program Planning

Special Populations: Maternal & Infant Health, Young Adults

Full Abstract Detail: We will discuss an internally-funded “immersive learning” project. “Immersive learning” is an evidence-based, high-impact learning experience characterized by an interdisciplinary group of students creating a specific outcome for a community partner with the oversight and guidance of the course instructor(s). In our immersive learning project, we team-taught a course that was comprised of anthropology and health science undergraduate students and created a Photo Voice awareness campaign on maternal substance use disorder, as requested by our community partner. Photo Voice is a process for people to represent certain themes in their community through photographs. It enables people to reflect on their community’s areas of strength or concern, promotes dialogue and knowledge among those who view and discuss the photos, and finally, it aims to reach policymakers to make them aware of community needs and assets and effect change (Catalani & Minkler, 2010). In our class, we sought to accomplish those aims, while also leveraging the Photo Voice methodology to meet the learning objectives of our class. In our presentation, we will discuss how we used Photo Voice to teach students the fundamentals of 1) writing mission statements, goals, and objectives; 2) creating itemized budgets; 3) understanding implementation approaches; and 3) designing process and summative evaluations. We will also discuss how we modified the methodology in order to adapt it to a classroom environment. These modifications included teaching students to conduct semi-

structured, in-depth interviews with community professionals involved in substance use disorder and qualitatively and thematically coding those transcripts. Based on the themes identified, students captured pictures that illustrated those themes and wrote brief narratives to elicit conversation with the public and advocate for the health problem. They elaborated on the qualitative themes in a student-driven, awareness-based website and professionally-designed informational pamphlets that were distributed at community venues. In our presentation, we will discuss the research process that informed the selection of photos, discuss the themes identified, and detail the specific implementation process the students organized and led. Finally, we will share data on how this “immersive learning” project changed student and public perceptions on maternal substance use disorder. For students (n=32), we analyzed student learning data that was collected through course reflection papers at two times throughout the semester. A content analysis indicated students felt less stigma toward this population and increased knowledge of substance use disorder. For the public (n=54), we administered a survey among those who visited the Photo Voice display. Descriptive statistics show significant gains in knowledge of substance use disorder.

Session Type: Poster

Session Title: Support for nutrition standards for foods available for children and adults where they live, work, learn, and play from a 2018 National Survey of US Adults

Session Number: Poster – Friday – Fr29

Submitting Authors: Seung Hee Lee

Co-Authors: Diane Harris, Steve Onufrak, Sohyun Park, Christopher Thomas

Authors Bio: Epidemiologist at the Center for the Disease Control and Prevention, with a PhD in Human Nutrition from the Johns Hopkins Bloomberg School of Public Health.

Chosen Sub-theme: Changing Systems: Policy, Advocacy, Communications

Objectives: Identify at least one sociodemographic characteristic associated with supporting nutrition standards.

Keywords: Chronic Disease Prevention, Communication & Treatment

Special Populations: Minority Populations

Full Abstract Detail: Most American adults do not adhere to Dietary Guidelines for Americans. This puts them at increased risk for chronic diseases. One strategy is to increase the availability of healthy foods where people live, work, and go to school. We examined public support among US adults for the availability of healthy foods in vending machines, worksites, and communities, and for nutrition standards in early care and education (ECE) settings and afterschool/recreation programs.

We used nationally weighted data from a 2018 national panel of US adults. Outcome variables were support for healthy foods in vending machines, worksites, communities, and nutrition standards in ECE and afterschool/recreation programs. Responses ranged from strongly agree to strongly disagree, but we dichotomized as “agree” or “not agree” due to small cell sizes. Covariates were sociodemographics and weight status. Chi-square tests were used to examine associations between 5 outcome variables and covariates. Five independent multivariable logistic regression analyses were used to estimate adjusted odds ratios (OR) and 95% confidence intervals (CI) for general support for healthy food and nutrition standards associated with covariates.

Overall, 64% of adults agreed that vending machines should offer more healthy foods, 63% agreed that employers should ensure that foods served or sold at work are healthy, and 65% agreed that healthy foods should be more available in their community. Over 70% of adults supported nutrition standards in ECE programs and 68% in afterschool/recreation programs.

Support for nutrition standards differed by covariates ($p < 0.05$) in all 5 settings. Support for healthy foods in all 5 settings was highest among females. Hispanics had the highest proportion supporting healthy foods in vending machines, worksites, and community. Those with high school education or less had the lowest proportion supporting healthy foods in vending machines, and community, and nutrition standards in ECE, and afterschool programs.

In multivariable analyses, women were more supportive of healthy foods in vending machines (OR=1.7; 95% CI=1.3, 2.3), worksites (OR=1.7; 95% CI=1.2, 2.2), and nutrition standards in ECE programs (OR=1.7; 95% CI=1.2, 2.4), and afterschool programs (OR=1.6; 95% CI=1.1, 2.1) than men. Hispanics were more supportive of healthy foods to be available in worksites (OR=2.1, 95% CI=1.3, 3.5) and communities (OR=3.2; 95% CI=1.8, 5.8) than non-Hispanic whites.

About two-third of adults expressed support for the availability of healthy foods and nutrition standards for children and adults where they live, work, learn, and play. Agreement on support for healthy food and nutrition standards differed by settings and covariates; there is an opportunity for future communication efforts to increase support for nutrition standards.

Session Type: Poster

Session Title: An Analysis of the Relationship between Income, Gender, and Perception of Gun Violence in One's Local Community

Session Number: Poster – Friday – Fr30

Submitting Authors: Dr. Ashley V Parks

Co-Authors: Courtney Hinrichs

Authors Bio: Ashley Parks, DrPH, MPH, MBA, MTech, MCHES, CPH, CPHQ, HACP, CSSBB, CPHRM, CHTS-IM, PMP, CS-MC, CPPS is an experienced health educator and health administrator. Dr. Parks currently works as an Assistant Professor at California Baptist University and works as a healthcare quality and process improvement consultant. Prior to her current role, Dr. Parks worked previously as a Director of Managed Care and a Research Associate for the UCLA Center for Health Policy Research.

Courtney Hinrichs, MPH completed research with the PEW data set as part of her MPH thesis. Courtney has experience working in clinical and administrative settings developing evidence based quality improvement programs and policies. Courtney is passionate about public health, injury prevention, patient safety, and policies to build safer communities.

Chosen Sub-theme: Changing Systems: Policy, Advocacy, Communications

Objectives: 1. Understand the differences in self-reported perceptions of gun violence in one's community between high and low income individuals.

2. Discuss potential future strategies including national and local policies and programs for reducing the perception and reality of gun violence in low income communities.

Keywords: Injury Prevention/Safety, Policy, Systems & Environmental Change, Violent Behavior/Violent Prevention

Special Populations: Disadvantaged Populations

Full Abstract Detail: Gun violence has significant impacts on an individual's health and well-being. Health educators and local agencies have the opportunity to advocate for equitable policies to reduce gun violence and improve the safety of our communities. In 2017, Pew Research Center conducted a national probability-based online survey titled the American Trends Panel (ATP) Wave 25. The survey targeted a diverse population of adults living in households in the United States (Pew Research Center, 2017).

This cross-sectional research study utilized a sample of 432 responses from the Pew Research Center's American Trends Panel to examine differences in local communities' perceived problem of gun violence between genders and income levels. Perceived gun violence in one's local community was based on the question, "how big of a problem do you think gun violence is in your local community?". The response options for this question were: "A very big problem," "A moderately big problem," "A small problem," or "Not a problem at all." These responses were also collapsed into two categories: "Not a problem at all to a small problem" and "A moderately big problem to a very big problem." In this study, a Pearson Chi-

Square was calculated analyzing gender and income level as variables predicting an individual's perception on the degree of the problem of gun violence in one's local community. It was found that perception of local community gun violence did not differ between genders ($\chi^2 (1) = 1.88, p = 0.170$). However, perception of local gun violence did significantly differ among income levels ($\chi^2 (1) = 7.60, p = .006$).

This study shows individuals making less than \$30,000 annual consider gun violence to be a moderately to very big problem in their local communities. Utilizing this information, local governments can develop and implement policy changes to mandate new construction builders, real estate firms, and property management companies to employ a mixed-income housing model. The local government can also supply incentives through expedited construction permits, a slightly lower taxation on building materials, or slightly lower income tax on participating organizations. Additional policy implications could be firearm buyback programs. Multiple cities throughout the US have implemented firearm buyback programs where vouchers for food, transportation, or housing are provided. Implications for health education include the need for focused training and community mobilization around gun violence.

Session Type: Poster

Session Title: Facilitating Pregnant Women’s Access to Information on Congenital Cytomegalovirus (CMV) through Health Promotion Activities

Session Number: Poster – Friday – Fr31

Submitting Authors: Ms. Holly Rebecca Patrick

Authors Bio: Holly Patrick earned a master’s degree in public health (MPH) from Rollins School of Public Health at Emory University, and is a health communication specialist in the Division of Viral Diseases at the CDC. Ms. Patrick works with to develop communication products to increase awareness and prevention of viral diseases, such as congenital cytomegalovirus (CMV), chickenpox, measles, and mumps. She leads CDC’s communication efforts for congenital CMV, with a primary focus on educating healthcare providers and parents on early detection of congenital CMV disease in newborns. Prior to joining CDC, Holly earned a master’s degree in applied linguistics/teaching English as a second language (ESL) from Georgia State University, and spent more than 20 years as an ESL and Spanish language teacher and translator.

Chosen Sub-theme: Changing Outcomes: Health Education and the Continuum of Prevention and Care

Objectives: By the end of the session, the participant will be able to describe CDC’s health promotion strategy products for increasing awareness of congenital cytomegalovirus (CMV) among pregnant women, parents and healthcare providers.

Keywords: Maternal & Child Health, Reproductive Health, Social Marketing/Health

Special Populations: Maternal & Infant Health

Full Abstract Detail: Congenital cytomegalovirus (CMV) is the leading infectious cause of neurodevelopmental disabilities and the leading non-genetic cause of childhood hearing loss. Congenital CMV occurs when a mother passes CMV to her unborn baby. About 1 out of every 200 babies is born with CMV infection, and around 1 in 5 infected babies will have long-term health problems, which can include hearing loss, developmental and motor delay, vision loss, microcephaly (small head), and seizures.

Awareness of CMV among women is lower than for other congenital or perinatal conditions, including congenital rubella syndrome, congenital toxoplasmosis, and group B strep. For years, CMV advocates have called for healthcare providers (HCPs) and public health agencies, including CDC, to more actively raise awareness among pregnant women of the potential risks and outcomes of CMV infection. Likewise, the growing number of media profiles of parents of children born with congenital CMV feature mothers asking the question: “Why wasn’t I told about CMV?” In this context, the goal of the CDC’s CMV communication program is to raise awareness of CMV among pregnant women and parents, as well as HCPs—a primary source of health information for pregnant women.

While there is no vaccine or other clear evidence-based prevention interventions, our communication strategy focuses on messages and materials for pregnant women/parents about congenital CMV risk, transmission, and outcomes, and providing HCPs with information that emphasizes early diagnosis and treatment. We also take the opportunity during June, National CMV Awareness Month, to disseminate CMV messages on CDC's social media platforms, share new educational materials (e.g., fact sheets and graphics), update content on our CMV website, and engage with professional organizations, disease support groups, and partners to increase our outreach. We continue to build our capacity to communicate effectively about CMV by reviewing the literature on CMV awareness and efforts to raise the profile of the disease; conducting analyses of health-related websites to assess messaging, misinformation, and gaps in information about CMV; conducting research to better understand HCP's knowledge, attitudes, and beliefs around counseling pregnant women on CMV; and establishing partnerships to facilitate our efforts to reach target populations with our CMV messages.

This presentation will describe CDC's communication strategies, activities, and products, including our enhanced CMV website content and design and social media messaging aimed at increasing pregnant women's and parents' access to information on congenital CMV.

Session Type: Poster

Session Title: Using results to leverage community partnerships that impact change.

Session Number: Poster – Friday – Fr32

Submitting Authors: Heather Rice

Authors Bio: Heather Rice has worked in the education and community health arena. Her current work focuses on the partnerships with food retail outlets and farmer's markets to bring access of fruits and vegetables to low resourced families in Georgia. As HealthMPowers community sector leader, Heather guides data driven conversations and decisions that positively transforms environments and makes impactful changes.

Chosen Sub-theme: Changing Perspectives: Leveraging Sectors, Engagement and Partnerships

Objectives: Identify ways to use program data and evaluation results to drive policy, systems and environmental changes in food outlets in the community.

Describe different partnerships that will leverage support for impacting community health.

Keywords: Community Health, Evaluation and Measurement, Partnerships/Coalitions

Special Populations: Disadvantaged Populations, Minority Populations

Full Abstract Detail: HealthMPowers is a non- profit organization founded in 1999. The initial focus started in schools promoting healthy eating and physical activity using evidence-based guidelines established by the CDC. In 2016, the community sector expanded their work into communities where programming was already taking place in partnering schools. We began a pilot program in three communities and two years later expanded into additional five communities across Georgia. Communities were chosen based on their organizational readiness, current local partnerships, economic status and level of community involvement targeting obesity prevention efforts. The work focuses on increasing access, promotion and purchasing of healthy foods, specifically fruits and vegetables through (1) education, (2) strategic partnerships and (3) the Be a Health Hero- EAT, DRINK, MOVE social marketing campaign. The healthy eating and physical activity messages that align with what youth are learning in the schools are reinforced throughout the community where families shop, work, live and play. Increasing the visibility and the marketing is an effective approach to improving community health. In addition, building and maintaining strong local partnerships and engaging community residents was imperative to the success of the program. In partnership with Public Health Institute Center for Wellness and Nutrition (PHI CWN), they continue to provide trainings, consultation on assessing policy, system and environmental strategies, social marketing recall, sustainability and the analyzation of collected baseline and post data. Evaluation data includes: community key informant interviews, focus group feedback, pre and post shopper intercept surveys and pre and post Communities of Excellence in Nutrition, Physical Activity and Obesity Prevention CX3 assessments. We have taken the results to make program changes for continuous improvement. Sharing the results with community leaders and partnering sites showcases the need and improvement areas for making a healthier community. This session will share insight into how evaluation results were used to drive program changes and what sustainability pieces are needed to strengthen and improve impact.

Session Type: Poster

Session Title: Using the Theory of Planned Behavior to Predict Intention to Use Male-Directed Contraceptive Methods Among College Students

Session Number: Poster – Friday – Fr33

Submitting Authors: James M. Bishop

Co-Authors: Brittany Rosen

Authors Bio: James M. Bishop is a doctoral candidate at the University of Cincinnati in the Health Promotion and Education Program. Mr. Bishop's research agenda includes reducing unintended pregnancies and sexually transmitted infections by conducting interdisciplinary and social science research promoting sexuality education, innovative methods in pregnancy prevention, and challenging traditional ideals of masculinity in relation to sexuality and intercourse. He has authored publications and national presentations addressing STI prevention. In addition, he has evaluated multiple interventions addressing STI prevention. He is a current member of the Society for Public Health Education and Eta Sigma Gamma.

Chosen Sub-theme: Changing Approaches: Emerging Issues in Research Translation and Implementation

Objectives: 1. Identify factors associated with intention to use male-directed contraceptive methods.
2. Describe how this instrument can serve as a foundation for continued research in male-directed contraceptives.

Keywords: College Health, Men's Health, Reproductive Health

Special Populations: Men

Full Abstract Detail: About 200 million women and their partners are at risk of unintended pregnancy. In the United States specifically, up to 50% of pregnancies are unintended with the highest rates of unintended pregnancy occurring among women aged 18-24. To prevent pregnancy, men currently have two choices for contraception: the male condom and vasectomy. Male condoms however have limited user efficacy, and vasectomies are not easily reversible. To supplement vasectomy and condom use, the World Health Organization (WHO) has backed the urgent development of male-directed contraception (MDC). Multiple methods of MDC are under development including oral pills, gels, injections, and implants. Current research shows men would be willing to use or try a method of MDC; however, research on college students is lacking. Purpose: The purpose of this study was to test Theory of Planned Behavior (TPB) constructs in predicting intended use of innovative MDC methods in college students. Participants: Participants were college students enrolled in Health Fitness Leisure (HFL) classes at one Midwestern University. Methods: A nonexperimental, cross-sectional study design was employed. Descriptive statistics were calculated to describe the characteristics of the sample. Cronbach's alpha was

used to assess internal consistency. Linear regression models were used to determine the relative influence of TPB constructs on intention to adopt MDC methods. According to a priori sample size calculator estimated for linear regression models, a minimum sample size of 39 was required to achieve sufficient analytical power to detect large effects ($f^2 = .35$) with statistical power = .80. Results: Internal consistency for the constructs attitudes, subjective norms, and behavioral intention was high for all four methods of MDC. Attitude was a statistically significant predictor of intention to use a male birth control pill ($\beta = .089$, $p .001$), and male birth control gel ($\beta = .108$, $p .05$). Subjective norm was a statistically significant predictor of intention to use a male birth control pill ($\beta = .072$, $p .005$), male birth control injection ($\beta = .112$, $p .01$), male birth control gel ($\beta = .108$, $p .005$), and male birth control implant ($\beta = .092$, $p .001$). Conclusions: Considering the high rates of unintended pregnancy worldwide and in the United States, it is important to consider alternative and innovative pregnancy prevention methods. The current study resulted in a validated instrument measuring intention to use male-directed contraceptive methods. The tool consists of four indicators based on the TPB. These indicators are important because they can serve as a foundation for continued research in male-directed contraception. Future research should be conducted to further develop comprehensive tools to assess factors related to the adoption of male-directed contraceptive methods.

Session Type: Poster

Session Title: An Evaluation of Fitspiration Viewing and Exercise Behavior in College Students

Session Number: Poster – Friday – Fr34

Submitting Authors: Kristen Welker

Co-Authors: Artur Krysiuk, Sarah Philpot

Authors Bio: Kristen Welker is an Assistant Professor of Health Science at Truman State University. She is a CHES and has a PhD in Health Promotion and Education.

Chosen Sub-theme: Changing Approaches: Emerging Issues in Research Translation and Implementation

Objectives: By the end of the session the participant will be able to identify at least two ways in which college students who view fitspiration pages differ from those who do not view these pages. Additionally, by the end of the session the participant will be able to identify at least two types of fitness pages associated with increased exercise.

Keywords: Physical Activity/Exercise, Technology, University/College

Special Populations: Young Adults

Full Abstract Detail: “Fitspiration” (fitness and inspiration) pages are common on many popular social networking sites and are associated with short term motivation for exercise and decreased body satisfaction. The purpose of this study is to explore ways in which viewing fitspiration pages may influence exercise behaviors for college students.

There were four research questions for this study: How do fitspiration viewers differ from non-viewers on exercise frequency?; How do fitspiration viewers differ from non-viewers on reason for exercise?; Is viewing a particular type of fitspiration page associated with increased exercise frequency?; and How did fitspiration viewer’s motivation change after viewing fitspiration pages?

This study utilized a cross-sectional survey approach and participants were recruited using a convenience sample of college students from a large university. 416 college students completed surveys. This study was approved by an Institutional Review Board.

About half (n = 204) of the students surveyed viewed fitspiration pages, and students who viewed fitness pages reported exercising more. There was a statistically significant difference between fitspiration viewers (M=3.59, SD=1.96) and non-viewers (M=2.49, SD=1.97) for days of the week exercised ($t(409) = 5.68, p < .001$). Students who viewed fitspiration pages reported exercising for fitness, muscle-building, and enjoyment more than non-viewers. Individuals who viewed pages provided by professional fitness organizations (n = 50) exercised more frequently (M = 4.08 days, SD = 1.74) than those who did not (M = 3.43 days; SD = 2.03; $t(229) = 2.06, p = .041$). Individuals who viewed CrossFit athletes (n = 43) exercised more frequently (M = 4.16 days, SD = 2.12) than those who did not (M = 3.44 days; SD = 1.94; $t(228) = 2.15, p = .032$). Overall, participants who viewed fitspiration pages were somewhat motivated for exercise prior to viewing (M = 3.86, SD = 1.08), and it does not seem

participants were particularly motivated to increase their exercise after viewing fitspiration pages ($M = 2.94$, $SD = 1.16$).

Fitspiration pages were viewed by individuals who exercise more, and who had goals unrelated to weight loss. Additional research is needed to explore the relationships between fitspiration page viewing and fitness goals, and identify additional reasons for viewing these pages.

Session Type: Poster

Session Title: Missed Opportunities with Hepatitis A Vaccination: A cross-sectional study using the National Immunization Survey of 2017

Session Number: Poster – Friday – Fr35

Submitting Authors: Kaylan Nichole Fitch

Authors Bio: Kaylan Fitch received her Bachelor of Science in Biology and Chemistry from Alma College in

Alma, Michigan. As a current graduate student in Central Michigan University's Master of Public Health program, she is passionate about maternal and child health, as well as mental health studies. At CMU she works as a Graduate Assistant and plans to graduate in May, 2020. Additionally, she is a member of Eta Chapter of Eta Sigma Gamma, currently serving as President, and a new student member of SOPHE.

Chosen Sub-theme: Changing Outcomes: Health Education and the Continuum of Prevention and Care

Objectives: Participants will be able to:

1. summarize missed opportunities for vaccination through the 2017 National Immunization Survey for Children and identify public health strategies to improve immunization coverage rates.
2. discuss demographic characteristics, properties of the study participants' health care providers, and other services used that are associated with missed opportunities for vaccinations.

Keywords: Child/Adolescent Health

Special Populations: Children & Adolescents

Full Abstract Detail: Hepatitis A virus (HAV) causes an infection that results in the inflammation of the liver which can last from a few weeks, up to several months depending on its severity. Transmitted through the fecal-oral route, HAV is highly contagious, even in trace amounts. The virus can be transmitted from an infected person or their caregiver, improper handwashing before handling food or objects, or by having anal-oral intercourse with an infected individual. Factors that put people at a high risk for hepatitis A infection include: international travel to areas where hepatitis A is more prevalent, use of recreational drugs and injection drugs, men who have sex with men, close contact with an infected person, blood-clotting disorders, and children in communities with a high burden of disease (CDC, 2018; WHO, 2018). Every year, around 1.4 million cases of hepatitis A are seen around the world. In the United States alone, there were 4,000 new cases estimated (95% CI: 2,800-4,400) for the year of 2016. From 2015-2016, there was a 44.4% increase of reported cases, largely associated with imported foods and international travel (CDC, 2018). It is likely that these are underestimations of the true numbers since many cases of Hepatitis A infection present no symptoms, but still contribute to the spread of the virus.

The most effective way to avoid a hepatitis A viral infection in the US is by receiving a two-step hepatitis A vaccination, which has been shown to be effective for about 20 years (Casillas and Bednarczyk, 2017).

The recommended time for the first vaccination according to the CDC is when a child turns one, and then 6 months after that for the second dose (2018). Although infections from the hepatitis A virus can be easily avoided with vaccination, the country continues to experience low rates of hepatitis A vaccination and therefore the burden of HAV. A key factor that plays a role in low vaccination rates is the phenomena of missed opportunities (MOs). MOs occur when patients who are eligible for vaccinations visit their physicians for any reason, but do not receive vaccinations that they could have received during the same trip (Fu et al., 2015). With the 2017 National Immunization Survey for Children provided by the CDC, MOs for hepatitis A were identified and analyzed (CDC, 2018). Using the IBM SPSS statistical software, Chi-squared, univariate, and multivariate analyses ($\alpha = 0.05$ and 0.01) were performed to compare MOs against sociodemographic information and types of services used (IBM). Additionally, public health strategies will be discussed to help increase the vaccination rates for hepatitis A. For instance, organizational factors such as organizational leadership, federal and state financing, political advocacy, community engagement, agency credibility, and cultural competency of the staff are associated with vaccination outcomes (Ransom et al., 2012).

Session Type: Poster

Session Title: Increasing Nutrition Benefit Program Participation and Redemption at Oklahoma Farmers Markets

Session Number: Poster – Friday – Fr36

Submitting Authors: Jade Owen

Authors Bio: Jade Owen has been working with the ONIE Project, a SNAP-Education Program, to increase the number of SNAP-accepting farmers markets and SNAP benefit redemptions since 2013. During her time with ONIE the number of SNAP-accepting farmers markets and direct marketing farmers in Oklahoma has increased from 12 in 2013 to 50 in June 2019. Jade hold a MPH in Health Promotion Sciences from the University of Oklahoma Health Sciences Center in Oklahoma City and is Certified in Public Health and is a Certified Health Education Specialist.

Chosen Sub-theme: Changing Systems: Policy, Advocacy, Communications

Objectives: By the end of the session the participant will/be able to identify three key components to successfully implementing the acceptance of nutrition assistance benefit programs at farmers markets

By the end of the session the participant will/be able to identify apply basic social marketing principles to market fruit and vegetable purchases with nutrition assistance benefits at farmers markets

Keywords: Nutrition and Obesity Reduction, Policy, Systems & Environmental Change, Social Marketing/Health

Special Populations: Disadvantaged Populations, Older Adults

Full Abstract Detail: Many of Oklahoma's registered farmers markets are located in food desert areas and are prime sites for healthy food access interventions. However, since the national adoption of the food stamp assistance program to the Electronic Benefits Transfer System in 2004 redemption of Supplemental Nutrition Assistance Program Benefits (formerly known as the Food Stamp Program) at farmers markets has decreased dramatically. Since 2012 the Oklahoma Nutrition Information and Education Project (ONIE), a USDA-funded SNAP-Education program, has been actively working with Oklahoma farmers markets to identify barriers to accepting SNAP and other nutrition assistance benefit programs including the Senior Farmers Market Nutrition Program (SFMNP) and the Double Up Food Bucks Oklahoma (DUO) program. As a result of ONIE's farmers market intervention the number of SNAP-accepting farmers markets has increased from 13 in 2012 to 34 in 2019. In addition to identifying and reducing barriers to participating in these programs ONIE also works to strengthen these markets' capacity and enact policies to successfully implement and redeem these benefits.

A second key component to farmers markets successfully redeeming nutrition assistance program benefits is marketing the acceptance of these programs to the beneficiaries. Through extensive formative research and message testing with its priority population ONIE has developed key messaging that it utilizes to create promotional and marketing materials to promote SNAP, SFMNP and DUO benefit redemptions at farmers markets. The foundation of these messages are created and distributed using social marketing principles. These messages are communicated with the SNAP and food assistance

program eligible population through audience appropriate channels including video, social media, school fliers and post cards. The amount of SNAP benefits redeemed at Oklahoma farmers markets has significantly increased as a result of the combined effects of these two interventions.

Session Type: Poster

Session Title: Understanding the Impact of Parental Involvement in Cyberbullying Perpetration Among African American Adolescents

Session Number: Poster – Friday – Fr37

Submitting Authors: Dashauna Ballard

Co-Authors: Kristen Allen Watts, Georgiana Logan

Authors Bio: Dashauna M. Ballard is a 5th year PhD student in the Health Education and Health Promotion program at the University of Alabama. Her research interests include bullying prevention, minority health, adolescent health, mental health, and rural health. Ms. Ballard has presented at national conferences on research related to social support, religion, depression in African American youth, and community-based participatory research. She is currently a teacher at an accelerated program designed to equip at-risk youth with the skills needed to be successful in their academic and social environments. During her teaching tenure, she has won awards such as "Innovative Technology Usage" and "Alabama Teacher of the Year." The combination of her professional and academic experiences led to a desire to promote positive youth development in African American adolescents.

Chosen Sub-theme: Changing Approaches: Emerging Issues in Research Translation and Implementation

Objectives: Understand that parental involvement is mitigated by unique social factors that influence cyberbullying perpetration in African American adolescents

Discuss implications for both parenting practice and school-level policies that target cyberbullying in African American adolescents for the purpose of intervention planning

Keywords: Child/Adolescent Health, Minority Health, Violent Behavior/Violent Prevention

Special Populations: Children & Adolescents, Disadvantaged Populations, Minority Populations

Full Abstract Detail: Background: There has been an increase in the frequency of school-discipline that is related to cyberbullying. Parental involvement has been correlated to cyberbullying occurrence for adolescents whereas an increase in parental involvement leads to a decrease in bullying. Sociocultural factors impact the ways that African American parents and adolescents understand and address cyberbullying incidents. Exploration of these factors in the AA population will help to facilitate parents and school stakeholders in efforts related to decreasing cyberbullying perpetration. The objective of the review is to explore the relationship between parental involvement and sociocultural factors in influencing cyberbullying occurrence for AA adolescents.

Methods: A literature review was performed using resources from Google Scholar, EBSCO, and the University of Alabama's SCOUT Resource Center. A varying combination of keywords such as "cyberbullying", "parenting", "adolescents", and "African American" or "black" were used to identify literature.

Results: A total of 20 studies were selected for review based on inclusion of AA adolescents and an examination of parenting impact on cyberbullying. Majority of the studies identified a social ecological framework as a method for addressing factors that promote cyberbullying in African American adolescents. The main limitations for the studies included in the review were small sample sizes and low participation rates in African American adolescents.

Conclusion: AA parents have sociocultural influences that impact the way that they both interact with their children and address problematic behaviors. Family structure, exposure to neighborhood violence, and poverty contributes to cyberbullying occurrence because they impact parental involvement. Exposure to these factors leads to a desensitization of the effects of various forms of violence on others. Future research should both analyze barriers for AA parents in addressing cyberbullying in their children and assess parent's understanding of their influence on the occurrence of the behavior.

Session Type: Poster

Session Title: Developing An Effective Communication Model Based On Evidence Based Practices To Reduce Maternal Mortality Rate In the US

Session Number: Poster – Friday – Fr38

Submitting Authors: Prachi Joshi

Co-Authors: Janet Choongo, Dr. Joanne Chopak-Foss

Authors Bio: My education qualification includes:

Bachelors in Psychology

Masters in Business Administration

Masters in Public Administration

I have 8 years of experience in the field of public health. I have been responsible for developing health communication strategy pertaining to Adolescent reproductive health.

Chosen Sub-theme: Changing Systems: Policy, Advocacy, Communications

Objectives: By the end of the session the participants will be able to; 1) Explain what activities the model will conduct to prevent PPH, and 2) Describe the benefits of the model at all levels and explain its benefits as shown in other countries.

Keywords: Community Health, Health Disparities, Maternal & Child Health

Special Populations: Disadvantaged Populations, Maternal & Infant Health, Women

Full Abstract Detail: According to the American College of Obstetricians and Gynecologists, the maternal mortality rate between 2000 - 2014 is highest in the United States (US) among other industrialized nations. Despite many efforts at the city, state, or national level, preventing maternal mortality is still a challenge within the US. Postpartum hemorrhage (PPH) has been identified as one of the leading causes of maternal mortality. Some of the commonly known risk factors for postpartum hemorrhage include uterine atony, trauma, retained placenta or placental abnormalities, and coagulopathy. There is enough evidence to conclude that socioeconomic status is closely associated with PPH. According to a study by Wen et. al., it was found that between 2013-2014, 47% of the PPH cases were recorded from lower income groups, which was the highest among the four income categories (low, middle, high, highest). One of the primary reasons for this is the lack of care during pregnancy, limited access to healthcare, and lack of resources, among low-income group population. However, there is evidence that with effective interventions PPH is preventable and developing communication channels to raise awareness among pregnant women, particularly in low-resource settings, is one of the recommended interventions in a study by Prata et. al. Though there are surveillance systems like CDC's Pregnancy Mortality Surveillance System to identify the most effective solutions to prevent maternal mortality, due to existing health disparities, problems with data reporting, and social inequities, there is a need to create local communication channels for health promotion through community engagement and partnerships. The purpose of this study is to create an effective

communication model focusing on pregnant women in underserved areas, which is informed by evidence-based practices for developing communication channels at the community level. The model will focus on strengthening the health delivery systems. The model will operate by conducting activities to prevent PPH through information, education, and communication. The first step is to identify the local champions, who will engage and inform policymakers and clinicians about the magnitude of the problem. Secondly, the focus of the model will be on Imparting health education and training to community health workers, which is an important step in strengthening their engagement with the community. Finally, the model will focus on building community awareness and demand for services, which will help to ensure the success of any of the PPH prevention interventions. By the end of the session the participants will be able to; 1) Explain what activities the model will conduct to prevent PPH, and 2) Describe the benefits of the model at all levels and explain its benefits of as shown in other countries.

Session Type: Poster

Session Title: Leveraging Government Financial Resources to Support Community Improvements

Session Number: Poster – Friday – Fr39

Submitting Authors: Suzanne Sanders

Co-Authors: Mrs. Candra Riley

Authors Bio: Suzanne Sanders is the External Systems Manager for the SC Department of Health & Environmental Control (DHEC) Bureau of Community Health Services. She has a Bachelor of Science degree in Exercise Science from the University of South Carolina and a Master of Public Health degree in Health Education & Promotion from the University of South Carolina's Norman J. Arnold School of Public Health. She has been employed by SC DHEC since 2000 and has served in many different capacities during her public health career, including the Richland County Health Department Site Supervisor for 2 years. She is a Master Certified Health Education Specialist and completed the University of North Carolina's Management Academy for Public Health.

Chosen Sub-theme: Changing Perspectives: Leveraging Sectors, Engagement and Partnerships

Objectives: Discuss funding and contracting mechanisms that allowed a public health agency to provide sub awards to communities for active community environment projects.

Identify specific examples of how one community was able to leverage additional resources for further development of their active community environment projects.

Keywords: Environmental & System Change, Partnerships/Coalitions, Resource Development

Special Populations: Minority Populations, Older Adults, Young Adults

Full Abstract Detail: Since 2015, the South Carolina Department of Health & Environmental Control Midlands Public Health Region has contracted with local council of governments to make enhancements within their communities to promote active community environments. The Midlands Public Health Region covers a 12-county area in South Carolina and provides both clinical and community services to residents. The Community Systems Team is responsible for working with partner organizations to promote policy, systems, and environmental change strategies to improve health outcomes of all citizens within these 12 counties. One area of focus has been promotion of active community environments. In order to make progress on this health priority, the Midlands Region collaborated with and contracted with several local Council of Government organizations in their service area. Over \$110,000 has been invested in 8 communities to make improvements to walkability and bikeability since this project began in August of 2015.

This session will describe the process used to develop contracts with external partners and how partners have been successful in leveraging additional resources to implement environmental and system changes that promote & support physical activity within their local communities.