2013 has been a great year for the CBUHP – our educational programs continue to grow, we’ve added a new faculty member, and new community outreach programs are off and running. In this Fall issue of our newsletter you’ll find details of these and other programs.

Please share with any interested colleagues, and as always, we invite anyone interested in becoming involved with the Center to email us at CBUHP@temple.edu.

Best!
Faculty Profile:

Norma Alicea-Alvarez
DNP, PNP-BC

Dr. Alicea-Alvarez is assistant professor at CBUHP and a board certified pediatric nurse practitioner. She is course director for the Community Engagement course in the MA Urban Bioethics Program. She earned a Bachelor of Science Degree in Nursing from Villanova University School of Nursing and Master of Science Degree/Pediatric Nurse Practitioner training from the University of Pennsylvania School of Nursing, and has practiced in academic and pediatric primary care settings. Dr. Alicea-Alvarez graduated from Waynesburg University with a Doctor of Nursing Practice degree with a focus on health policy and has held faculty positions at Waynesburg University and Carlow University School of Nursing in Pittsburgh, PA. Her doctoral research capstone work involved a community engagement study, a pilot study of chlamydia screening among high school girls, published in The Journal for Nurse Practitioners.

Dr. Alicea-Alvarez, who is originally from Puerto Rico and fluent in Spanish, is a liaison for the CBUHP and the Latino community. Her clinical research interests lie in addressing healthcare disparities among Latinos, and is actively involved with a partnership between Norris Square Civic Association/Head Start program and CBUHP. One successful program recently implemented was the collaborative effort of medical and nurse practitioner students performing vision, hearing, height and weight screenings with 3-5 year old children enrolled in the Head Start program. MA Urban Bioethics students are also conducting focus group interviews with parents and groups from Norris Square and other North Philadelphia neighborhoods to identify a healthcare issue that is of concern to that community.

Together with community members, students will create a project proposal to address the issue identified. The goal is to produce a sustainable plan to improve healthcare outcomes throughout North Philadelphia neighborhoods and in creating a culture of health.

Another partnership recently formed by Dr. Alicea-Alvarez is one between Asociacion Puertorriqueños en Marcha, Inc. (Association of Puerto Ricans on the March, APM) and the CBUHP. This initiative will partner Temple University with APM for screening services. Moreover, surveys to focus on specific disease states identified by the Latino community will contribute to comparative effectiveness research and other intervention modalities.

In addition, Dr. Alicea-Alvarez is working with Marla Davis-Bellamy, the Director of Philadelphia Cure Violence (formerly Ceasefire). Cure Violence is an evidence-based violence intervention program in which outreach workers canvas communities with high-risk activity, and together with schools, faith-based organizations, and community mobilization, impact on and prevent gun violence among young Latino and African American men and women. Together with the team, Dr. Alicea-Alvarez recently presented the Ceasefire Initiative at the Memphis Street Academy Charter School.

Dr. Alicea-Alvarez is dedicated to improving healthcare outcomes among at risk minority communities and forming partnerships with this aim. Her most recent publication focused on disparate care of Puerto Ricans with asthma. The manuscript, “A review of barriers to effective asthma management in Puerto Ricans: cultural, health care system, and pharmacogenomics issues”, was recently accepted for publication in the Journal of Asthma.
The MA Urban Bioethics program is now in its sophomore year, and our student body continues to grow. This year we welcomed 12 new MD/MA students, as well as 5 new Certificate and stand-alone MA students, bringing our total student population to 33 – a major achievement for our second year!

We are also poised to have our first two graduates – and the inaugural members of our alumni society! – this May. We’ve truly come full circle!

For more information on the MA program, please see temple.edu/centers/cbuhp/about/bioethics

Lecturers Needed!

If you are interested in trying out a new lecture topic or to add to your teaching experience, the CBUHP courses and the lunch and learn lecture series always need speakers.

For more information, please contact Dr. Nora Jones, Director of Education for the CBUHP, at nora.jones@temple.edu
Dr. Mary Segal, Research Scientist at CBUHP, presented findings on the NIH Academic Community Partnership between Temple’s School of Medicine and United Cerebral Palsy of Central Pennsylvania at a conference for about 50 NIH agency funding staff last spring at the agency headquarters in Bethesda. The purpose of the conference was to help NIH staff understand the opportunities and challenges involved in such community based participatory research (CBPR) ventures. Her session was co-presented with Jeffrey Cooper, UCP’s CEO. Segal and Cooper have held several NIH grants as “multiple PIs” since their partnership began in 2007, and they have recently completed a 3-year networking grant on “Preventing Obesity in Children with Disabilities.” (Segal has been affiliated with Temple’s Center for Obesity Research and Education.) The other two academic presenters, both also focusing on community partnerships in the area of obesity, were Dr. Shiriki Kumanyika from the University of Pennsylvania on the African American community and Dr. Kristine Qureshi from the University of Hawaii on the Pacific Islands community.

Segal and Cooper’s grant activities consisted of a series of community Advisory Board meetings and grassroots conferences in Harrisburg with the aim of raising the community’s awareness of the problem of childhood obesity and developing a research agenda for the community. Along with the grant, Segal and the Advisory Board developed and implemented surveys to assess the community’s needs in the areas of improved nutrition and physical activity for the children with disabilities. These surveys formed the basis for a research proposal for a jointly-designed project now under review at NICHD.

Segal explained that one of the challenges in implementing CBPR is to maintain grass-roots community members’ interest while they are learning about research principles they will need in developing projects and understanding reasons for the research design. So the PIs made sure to include general interest topics in any didactic CBPR sessions. For example, they included helpful information on ways to improve children’s diet as an agenda item for a session primarily focused on maintaining equivalence between treatment groups in a randomized design. They also used applied topics and scenarios to communicate research principles. “So we might work through the nuts and bolts of developing a research protocol by focusing the discussion on an intervention targeting increased physical activity in a particular population, e.g. children with autism,” Segal explained.

Continued next page...
Community-Academic Partnerships, continued...

“Although used as a hypothetical example, this helped to keep participants’ interest when the information, e.g. about controlling for confounding variables or systematically measuring the dependent or outcome variables, became technical.”

Another challenge was the need to build in extra time in developing research instruments and proposals. Sometimes a particular activity that the researchers thought could be accomplished in three meetings required five, but the final result was always worth it. Eventually, the researchers generally budgeted 30-50% additional time than their original estimates. “The positive side in this was that all members knew that their feedback and thoughts had been considered, a key concept in a successful partnership.”

Another topic that interested the conference attendees was how to gauge success of an academic-community partnership. “This is one of the most interesting questions being posed in the literature today about community-based research and engagement,” Segal says. For example, some groups that come together with broad goals where there is no agreement on how to reach them may find it helpful to use information from meeting evaluations to gauge members’ perceptions of success.

However, while Segal and Cooper systematically collected these kinds of data at every meeting and found that people overall were very enthusiastic about the level of trust and openness, they were looking for other ways to measure success, in part because they recognize that these kinds of evaluations may have a strong social desirability component. So another way they gauged success was monitoring the level of buy-in, eg attendance and participation, shown by the members of the working group who developed the research proposal. They asked themselves questions like: Did most people who signed on for the working group show up for every session? Did each member contribute an idea or opinion without prompting at least a couple of times during each session? Did members respond without reminders within the relatively short turnaround time when asked for their letters of support? At the end of the proposal-writing activity, the team knew based on these kinds of criteria that the effort was truly reflective of the community’s needs and desires.

Klimt’s Medicine (composition draft)
1897/98
Oil on canvas
72 x 55 cm
Private collection, Vienna
Cure Violence
An update from the CBUHP’s policy core
Marla Davis Bellamy, JD

Every day in Pennsylvania, there are children who wake up to living conditions that are less than desirable. Perhaps they live in a house where domestic turmoil is prevalent, or maybe their exposures to criminal and violent acts occur outside of the home; but the fact remains, if any of the aforementioned conditions are true, for any child, there is a very real possibility of the child, much like a soldier in combat is developing various symptoms as a result of the trauma — PTSD. The physical and mental well-being of Pennsylvania’s youth are important issues within themselves, but I believe that the physical and mental health of our youth, or lack thereof, should be of concern to the citizens of the Commonwealth for a secondary reason as well — childhood trauma can lead to youth violence, which is a gateway into a violent, criminal adulthood.

Many urban cities around the globe can be characterized as war zones — a fitting title for a city like Philadelphia that sees hundreds of homicides annually — and there is much continuity between urban war zones and actual, declared war zones. One striking similarity is the fact that children who are witnesses or victims of violent crimes, and who do not receive positive intervention, are more likely to commit minor and major crimes in their youth, as well as when they reach adulthood. While the exact correlation is unknown, many believe that trauma, when it is not dealt with properly, can lead to bottled up aggression that can cause a young person to behave in an uncontrolled manner when tension boils over.

For this reason, the Pennsylvania House of Representatives recently adopted a resolution that State Rep. Ron Waters introduced, House Resolution 191 (H.R. 191), which declares youth violence as a public health epidemic and calls for the establishment of statewide trauma-informed education to help treat our Pennsylvania children who suffer from PTSD or other, related disorders. H.R. 191 was adopted by the House by a 187-9 margin and is another victory in what has been a long battle to establish new ways of viewing the causes of youth violence. The PA House Democratic Policy Committee held hearings this summer regarding HR 191 and Marla Davis Bellamy Director of the Philadelphia CeaseFire program and Rasheed Smith, a CeaseFire participant offered testimony about the challenges they see confronting violence as a disease in North Philadelphia.

In 1985, former Surgeon General C. Everett Koop, declared violence to be a public health issue, and in the year 2000, former Surgeon General David Satcher released a report declaring youth violence as a threat to public health and called for federal, state, local and private entities to invest in research to inform intervention programs.

There is no denying that intervention is needed.

In a 2011 survey of high school students under 18, the National Center for Injury Prevention and Control (NCIPC) found that 16 percent of male students and 7.8 percent of female students reported being in a physical fight on school property in the 12 months preceding the survey; 5.9 percent did not go to school on one or more days in the 30 days preceding the survey because they felt unsafe at school or on their way to or from school; 5.4 percent reported carrying a weapon (gun, knife or club) on school property on one or more days in the 30 days preceding the survey and 20.1 percent reported being bullied on school property in the 12 months preceding the survey.

Another NCIPC report states that youth younger than 18 accounted for 13.7 percent of all violent crime arrests, 22.5 percent of all property crime arrests, and that 784 youth under 18 were arrested for murder, 2,198 for forcible rape, and 35,001 for aggravated assault in 2010.

Up until now, our society has dealt with the issue of youth violence primarily by taking punitive actions — whether the punishment is handed out at home, school or by the criminal justice system — but the CBUHP believes that it is time we abandon a solely reactionary response to this youth violence epidemic and start to deal with this problem proactively...and the CBUHP Phila. Ceasefire program, an evidence based violence intervention program does just that.

Furthermore, by viewing perpetrators of youth violence through a new lens, experts and authorities will be able to deal with them more compassionately, taking into account the many traumatic experiences that have undoubtedly conditioned them towards violence. This change in perspective calls for medical and scientific intervention to seek to answer the question, “what has happened to you,” rather than, “what is wrong with you,” and by doing so, the proper specialists can begin asking the question, “how can I help you?”
Center for Bioethics, Urban Health and Policy Linkedin Group

If you are on Linkedin, please consider joining the Center's Group.

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CBUHP Facebook page

If you are on Facebook, 'like' the CBUHP Facebook page to keep up with stories about health, health care, and health inequities in our city of brotherly love, as well as hear about public events of interest to our community.

www.facebook.com/CBUHP

Please like it and encourage your friends and TU colleagues to like it as well!

AND,

Even more importantly, post stories that you find that relate to the themes of bioethics, urban health and policy, broadly defined, and comment on stories that are posted. Our goal is to make this a vibrant active page with academic and community participation.
CBUHP in the News:

August 2013: **Andrew Coulter, MD/MA student**, published ‘Broken System,’ in Philadelphia’s street newspaper ‘One Step Away’. Andrew uses the story of Charles, a Philadelphia homeless man, to discuss the ethical, practical, and medical issues of health and illness among our most vulnerable residents.

Spring 2013: **Jared Cohen, MD/MA student**, published, along with Dr. Daniel Merenstein and fellow student Sabrina Weigand, a study in *Sports Health* about susceptibility for depression in current and retired student athletes. The study has been picked up in the news media, with the most recent story in the Huffington Post on November 11, 2013.

Ongoing: Philadelphia Daily News. Reporter Helen Ubinas as been chronicling the life and work of **Colwin Williams**, one of Cure Violence’s successful outreach workers. You can find Colwin’s stories by searching philly.com for either Williams or Ubinas.

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**Trauma Stories:**

**Sarab Sodhi, MD/MA student**, continues his work on **Trauma Stories**, a research program that looks at the experiences of patients who have been the victims of violent trauma, seeking to use their stories to teach medical students about the experiences of their future patients and to foster empathy in medical students. Sarab and his thesis advisor, Dr. Nora Jones, have trained 3 new researchers from Temple University’s post baccalaureate program to join the team as we enter our 4th month of data collection. While formal analysis will not begin until early 2014, one key trend is emerging - Powerlessness.

Patients who have been the victim of violent trauma consistently report an overwhelming feeling of powerlessness in the ER. They report feeling lost, disassociated from the treating doctors and nurses, not knowing what was going on, and with no control or power in the situation. This theme continues after discharge, as patients report having troubles adjusting – in the ways they walk down the street feeling different, more unstable, and more cautious.

It is hoped that as the data collection and analysis continues, our patients’ stories will be useful in helping medical teams ‘see’ the world from the other side of the table – looking up, with the bright lights, foreign terms, pain, fear, and confusion, and that this worldview can be used to inform practice.
Mark your Calendars!

Upcoming Events

12.5.13 Research Readiness Day, 9-12:30, 1509 Cecil B. Moore Ave

Are you a community-based group interested in submitting a proposal for Community-Driven Research Day? We encourage you to attend Research Readiness Day, which will:

* Describe community approaches to improving health outcomes;
* Describe the submission and review process for CDRD;
* Illustrate how to develop and refine research questions;
* Provide an overview of how to design a poster presentation for CDRD;
* Discuss how to develop and sustain Community/Academic Partnerships

http://injury.research.chop.edu/violence-prevention/community-driven-research-day

12.19.13 MAUB Fall semester ENDS!

1.21.14 MAUB Spring classes BEGIN!

1.30.14 Community-Driven Research Day, 9:30-12, 3535 Market Street, 16th Floor

COMMUNITY-DRIVEN RESEARCH DAY encourages collaboration between researchers and community based organizations (CBOs) and community groups who have questions that they are interested in answering about community approaches to improving health outcomes. Through an interactive poster session, CBOs and community groups will highlight their questions to program participants who will include area non-profits, community groups, public sector partners, and researchers from The Children’s Hospital of Philadelphia, The University of Pennsylvania, Temple University, Drexel University, and other local academic institutions. CBOs, community groups, academic researchers, and students will be able to meet and discuss potential, mutually-beneficial collaborations.

http://injury.research.chop.edu/violence-prevention/community-driven-research-day

To submit an event announcement or other contribution to upcoming CBUHP newsletters, please email:

CBUHP@temple.edu