Oral Presentations

Session One
9:30 – 10:30 a.m.
Room 7220

Title: Litigation to Access Health Services: Ally or Enemy of Global and Public Health?
Authors: Alexandre Martines and Sydney B. Allen
Abstract: Patel argues that litigation is a strategy to advance public health care, especially in those countries that do not have specific legislation to guarantee that their people have access to basic health care services. Their argument relies on experiences in African countries which used “strategic litigation as an important tool to develop and enforce legal protections critical to health.” However, strategic litigation has another side that Ezer and Patel did not discuss in their article. This side is particularly present in Latin American region, where most countries incorporated the right to health into their constitutions, but still struggle with health disparities. Naming this judicialization of the right to health, João Biehl and Adriana Petryna stress that although it benefits some individuals in their immediate access to health services, the phenomenon “generates intensely complex sociomedical realities and significant administrative and fiscal challenges which have the potential to widen inequalities in health care delivery.” Considering these two perspectives, this paper will examine the phenomenon of litigation in health care and its impact on public health in Brazil, where there is an ambiguous process of litigation in health care. On the one hand, health is a right guaranteed by the Brazilian Constitution. This created a path for uncontrolled increase of lawsuits to have this right met by individuals. On the other hand, groups have used strategic litigation to re-shape the health system, functioning to diminish access to health services by socially vulnerable populations. Consequently, more individuals from these populations have appealed to lawsuits to access health care. This paper will analyze this reality in order to understand the benefits and damages that litigation can create to health care in a context of a complex and diverse reality of a country, such as Brazil.

Title: The American Red Cross and the International Federation of the Red Cross Red Crescent Movements
Authors: Michelle Matuszak and Debbie Urbanek
Abstract: The American Red Cross, and locally the Southeast Division of Wisconsin American Red Cross, work together to strive to relieve human suffering. Each year the ARC responds to more than 70,000 disasters including house fires, earthquakes, hurricanes, tornadoes, transportation accidents, floods, hazardous materials spills, explosions and other natural and man-made disasters. Although the ARC is not a government agency it was granted a congressional charter to “carry on a system of national and international relief in time of peace and devise methods for preventing the same.” This charter is not only a grant of power but also an imposition of duties and obligations to the nation, to disaster victims and to the people who support its work with their donations. Together, the American Red Cross and the International Federation of the Red Cross Red Crescent form the world’s largest humanitarian network and exits in every corner of the world. The people whom the ICRC assists include civilians, women, children, detainees, migrants, refugees, asylum seekers, missing persons and people with disabilities.
Seven fundamental principles that guide the philosophy of the Red Cross Red Crescent Movement include: neutrality, humanity, impartiality, independence, voluntary service, unity and universality.

Room 7330

Title: HIV Prevention Needs Among Young Women In Kenya
Authors: Florine Ndakuya
Abstract: While HIV trends in most groups have been declining, population groups including young women globally but especially those who reside in Sub-Saharan Africa (SSA) have been experiencing the opposite. UNAIDS estimates that in 2016, young women aged 15-24 accounted for 26 percent of all new HIV infections despite only being 10 percent of the population. In SSA, young women in the same group accounted for 25 percent of all new HIV infections. In Kenya, young people in the same age category accounted for 51 percent of all new HIV infections, with young women being twice as likely to be infected as their men counterparts. A review of literature showed that so far, studies on HIV risk factors and behaviors among young people who reside in Africa only utilize behavioral frameworks yielding individual based interventions. Therefore, guided by a conceptual framework developed from the theory of gender and power and Intersectionality theory, the purpose of this qualitative dissertation study is to explore the impact of structural factors namely poverty, gender inequality and social norms on HIV prevention needs of young women who reside in urban areas. A review of literature showed that so far, studies on HIV risk factors and behaviors among young people who reside in Africa only utilize behavioral frameworks yielding individual based interventions.

Title: Exploring Contextual Factors That May Impact The Risk Of Being A Victim Or Perpetrator Of Intimate Partner Violence Among Adolescents In The Dominican Republic
Authors: Heidi Luft, Julio Arturo Canario Guzmán, Rachel Schiffman
Abstract: Background: The Dominican Republic (DR) has the highest rate of intimate partner homicide in Latin America. However, country-specific prevention interventions with teens and research to support their development are scarce. The purpose of this study was to explore contextual factors associated with intimate partner violence (IPV) among teens in the DR. Methods: We conducted a secondary analysis of teen data from the 2013 DR Demographic and Health Survey. The Social Ecological Model guided selection of predictor variables. Outcome variables were IPV perpetration and victimization for girls and proxies for IPV perpetration for boys. Regression modeling was used to identify significant associations. Results: Among girls, perpetration was associated with age at first sex, partner’s age, alcohol use, fear of partner, and father abused mother. Victimization was associated with age at first sex, wealth, and fear of partner. Among boys, perpetration proxies were related to age, tobacco use, contraceptive use, relationship status, religion, level of education, and wealth. Discussion: This study provides information about which contextual factors to consider in IPV prevention interventions with teens in the DR. Additional research is needed to expand the depth and breadth of findings, facilitate comparison between sexes, and identify sequence of events.

Room 7350

Title: Preparing the Global Nursing Workforce of the Future: Journey to Japan
Authors: Kyoko Schatzke and Elizabeth A. Collins
Abstract: Developing a global nursing workforce for the future will help people be healthier world-wide as well as ease world suffering. The goal of this project is to discover strategies to build a resilient global nursing workforce for the future. Two nursing clinical faculty members with a passion for global nursing initiated the project with a visit to Japan in spring 2018 to explore learning opportunities for students in healthcare. Developing trusting relationships with outstanding nursing programs in Japanese universities provides a foundation for future collaborative work. During their visit, faculty met with key individuals at three universities, selected due to their emphasis on Global Health, Engineering, and advanced
Interprofessional Education. Another priority was learning more about the health status of Japanese elders and the care they receive in sustainable communities. This initial visit identified key educational topics that could provide a foundation for global nursing workforce development. The project is ongoing, with further exploration needed to address our goals. Initial outcomes include visits to our institution of nursing faculty and students from several Japanese universities. Our goal is to establish relationships that develop into stronger bonds essential for creating a resilient global nursing workforce.

Title: Creating a Healthy Environment in the Nursing Workforce by Understanding and Managing Generational Cohorts Successfully
Author: Janice Gries
Abstract: One goal of all nurses’ is to provide safe, high quality patient care in a supportive and collegial environment. One goal of all leaders is to create a healthy work environment to promote nurse satisfaction which facilitates better patient care. Today’s workforce spans four generations and presents a unique situation in that each generation has different strengths and challenges. To create a healthy work environment the multigenerational workforce must be addressed. This presentation will define each generation; Baby boomers, Generation X, Millennials and Generation Z or “Digital Natives” in detail. For each generation defining world events, unique characteristics and the best managerial style for each cohort will be covered. Strategies to optimize unit collaboration and teamwork will be provided. Preferred communication styles between the multigenerational workforces will be addressed including face to face, written workplace notices, email and text messaging. Meeting the learning needs of each cohort is a challenge and specific examples will be presented. These education examples include face to face, synchronous online and asynchronous online. These specific generational intervention recommendations for leaders will assist to meet every nurses’ goal of providing safe, high quality patient care in a healthy environment. A secondary management outcome from implementing these strategies will also affect creative recruitment strategies, increase retention rates and contain turnover to manageable levels as a result of nurse satisfaction. These outcomes of safe quality care and nurse satisfaction are important and necessary to both multigenerational nurses and patient care.

Room 7370

Author: Alexa Anderson
Abstract: Following selfless service to their country, veterans are confronted with a multitude of health issues that can affect integration back to civilian life. Veterans and their families are challenged with a “new normal”, where they are adjusting to post-active duty life coupled with combat-related injuries, including behavioral health issues such as posttraumatic stress disorder, depression, or sleep disturbances. The purpose of this literature review is to examine recent themes regarding behavioral health and well-being of post-9/11 veterans. This project address UN Sustainable Development Goals 3.4 and 3.5, which promote mental health and well-being as well as the prevention and treatment of substance abuse. A literature search was conducted using the database PsycInfo, with the following search terms: “Iraq”, “Afghanistan”, “veterans”, “mental health”, “well-being”, “behavioral health”, “social health”, and “health disparities”. Articles must be peer-reviewed, with a sample of U.S. veterans, and published between 2015-2019. A total of 90 articles were found using the above search terms. Each abstract will be reviewed to examine consistency with the purpose of this project, as well as its appropriateness to the UN SDGs 3.4 and 3.5. Findings from each article will analyzed and synthesized to produce emerging themes about military service, health, and wellbeing.

Title: Unlocking Mental Health Care: Community Mental Health Nursing Strategies to Eliminate Stigma
Authors: Denise Linda Oakley and Sadat Abiri
Abstract: The goal of our *Interdisciplinary Global Mental Health Collective* is to build the local-to-global stakeholder partnerships needed to unlock mental health care for all. As advanced practice nurses (APN), our aim is to use community-based nursing strategies to eliminate the dehumanizing cultural beliefs about mental illness and people in distress that promote the criminalization and punishment of these common health problems. Specifically, strategies of delivering interprofessional specialized services in the community that challenge stigmatizing beliefs that increase the risk of homelessness and decrease help-seeking despite the availability of effective, evidence-based treatments. As board certified psychiatric mental health APNs and members of interprofessional teams, we developed community specific services tailored to reduce the probability of police contact and the risk of homelessness associated with social isolation. A UW-Madison African Studies grant awarded to Dr. Oakley partially funded a 2-week learning exchange on global mental health with leaders responsible for the policies that determine what mental health services are delivered in hospitals and community settings. Our presentation describes our work with this learning exchange and our community nursing strategies. Our strategies are designed to unlock mental health care for low-income adults by decreasing homelessness, increasing help-seeking, and promoting humane treatment.

**Session Two**
**11:15 a.m. – 12:15 p.m.**

Room 7220

Title: Complementary Social Policy Strategies for Maternal & Infant Health: Lessons from Brazil
Author: Natasha Borges Sugiyama and Michael Touchton
Abstract: Despite its status as middle-income country, Brazil started out the 21st century with relatively high rates of poverty, inequality, and infant and maternal mortality. Remarkably, Brazil was able to turn the tide and improve on key SDGs in just over a decade. This paper argues that a combination of pro-poor social policies contributed to improved health outcomes. In addition to the local adoption of the Family Health Program (Programa Saúde da Família), a well-regard community preventive health strategy, Brazil also implemented a large-scale conditional cash transfer program (Bolsa Família) to alleviate poverty, and created a Unified Social Assistance (Sistema de Assistência Social or SUAS) to meet the needs of Brazil’s most vulnerable populations. We analyze the independent and combined effects of these social programs across Brazil’s 5,500 municipalities between 2000-2015, while controlling for key economic and political factors that can shape human development outcomes. Our findings reinforce how biosocial influence health outcomes and the need to identify complementary – non-biomedical – policy strategies to further well-being.

Title: Environmental Exposure to Toxins and Adverse Pregnancy or Fetal Outcomes
Author: Diane Schadewald
Abstract: This presentation is related to UN Sustainable Development Goal 3, Good Health and Wellbeing. There is a growing body of knowledge regarding impact of exposure to toxins in the environment on pregnancy outcome. There can be adverse impact on length of gestation as well as fetal development. Risks related to excessive intake of alcohol, tobacco use, exposures to heavy metals, and radiation are well known. Concerns are growing about exposures to endocrine disrupters, polycyclic aromatic hydrocarbons, particulate matter, and solvents. In 2015, the International Federation of Obstetricians and Gynecologists (FIGO) issued a recommendation for information about risks associated with exposure to these toxins be included as part of regular preconception counseling and prenatal care. In addition, FIGO recommended healthcare providers begin to advocate for the reduction or elimination of use of products that contain these toxins to reduce or eliminate risks associated with exposure. A coalition of scientists, healthcare providers, and those who promote health for children, called Project TENDR (Targeting Neuro-Developmental Risks), was developed to advocate for regulations to reduce exposures.
This presentation will provide information about environmental toxins and what can be done to decrease risks of exposure.

Room 7330

Title: Housing the Brain within Urban Planning for Sustainable Development, Using Tri-Conceptual Model
Author: Ayodeji Obayomi
Abstract: Urban design is a hybrid of disciplines towards sustainable development. Arguably, the most important target of sustainable development goals is to spark the development of healthy cities. Meanwhile, the study of sustainable healthy city is often conducted within the ambit of social science scheme neglecting the human mental health. It is imperative that the quest for sustainable development involves the study of mental health (brain) within many disciplines. The design or plan of the environment has direct and indirect effects on the neurological state of human, because the human mental health has been linked to an interaction between various elements of the natural and built environments. However, the studies of this interplay often lack collections of cogent theoretical models to anchor such investigations. This article engenders a tri-conceptual model, made up of urban design, the actor-network theory, and phenomenology, which examines the critical issues of methodological needs of neuro-urban design, and determines the requisite and the absolute essential compatibility of the physical and social (non-physical) actants (elements) of the neural development in the environments. The interdisciplinary theoretical approach creates a contemplative urban design methodology towards achieving the right design mechanism for sustainable communities.

Title: Gender Analysis for Safe and Healthy Streets: International Lessons for Inclusive Complete Streets Policy Implementation
Authors: Cassandra Leopold, Carolyn McAndrews, and Robert J. Schneider
Abstract: Streets are public spaces that impact personal and public health: depending on their design, streets can create barriers between neighborhoods or help communities become more active and connected. In the U.S. and throughout the world, engineers and planners are recognizing the need for streets to be inclusive of pedestrians, cyclists, and transit riders, as well as travelers with disabilities. However, most "complete streets" practices lack explicit consideration of gender. This is particularly important since women may travel for different purposes and have different traffic safety and personal security concerns than men. Our presentation will describe the preliminary phase of an international literature scan that explores how gender considerations are being incorporated into street design practices. We will highlight global experiences with gender analysis in the transportation and public health sectors and identify gaps for additional research. In addition, we suggest opportunities for cities like Milwaukee to engage women as a key stakeholder group for complete street policy implementation and provide examples of gender and age-friendly strategies from several other US cities. Our presentation topic is at the intersection of several UN Sustainable Development Goals, including Gender Equality (#5), Sustainable Cities and Communities (#11), and Good Health and Well-Being (#3).

Room 7350

Title: Nursing Clinical Education in Mexico
Author: Jill Krell
Abstract: The purpose of Nursing Clinical Education in Mexico is twofold. First, to provide much needed medical care to as many people as possible in the rural areas of Ensenada, Mexico. Second, to give undergraduate & graduate nursing students the experience of providing nursing care to patients in a clinic type setting in rural areas surrounding Ensenada, Mexico. Makeshift clinics are set up either in rural churches or lean-to shelters. Each day the clinics are scheduled in a new location. Local Mexican Christian MDs and Dentists accompany each site and facilitate patient follow up and ensure legal
coverage. The students have the opportunity to experience and learn about a different culture and engage with people of Mexican descent while providing care. The citizens of Ensenada, Mexico benefit from this project by receiving free healthcare at a clinic near their home, thereby minimizing their travel time & time away from work. Major accomplishments noted are students have an increased understanding of what it takes to provide culturally competent nursing care in a country other than the United States where resources are limited. In addition, every year, approximately 150-250 patients are provided much needed healthcare in the span of two and a half clinic days.

Title: A Short-Term Mission Group Making a Sustainable Impact in a Nicaragua Community
Author: Jennie Peters
Abstract: Short term mission (STM) trips can be challenging when the goal is to make a sustainable impact on the community in need. It is important for a STM group to develop a relationship and trust with key members of the community. This aligns with the United Nations sustainable goals of Developing Good Health and Well Being and Developing Partnerships. The goal is to show how a STM trip can be sustainable within a Nicaraguan barrio community. The STM group taught an evidence-based Oral Rehydration Solution (ORS) recipe to 7th to 9th-grade students at a school in a barrio of Nicaragua. After a teaching demonstration and teach-back method, the students are educating other communities in Nicaragua how to make ORS and the importance of infectious disease prevention. After the STM group left, the students have conducted ORS teaching at three other community clinics, illness prevention teaching at the school, implementation in their own homes. Anecdotal feedback has been less diarrhea, gastrointestinal illness, and a preference over the homemade recipe compared to a premade ORS packet. This is a sustainable project in which community members have continued to carry on after the STM group left.

Room 7370

Title: Engaging Wisconsin Dairy Farms to be Leaders in Health and Safety
Author: Jessica Coburn
Abstract: Background: Using a One Health approach, partners from the UW-Madison School of Nursing, School of Veterinary Medicine, and Madison-Dane County Public Health provided five pilot Farm Clinics in Dane County in Fall 2018. Design: Farm Clinics were conducted in the break rooms of dairy farms, where public health nurses set up immunization and TB testing stations. We engaged farms by raising awareness of health and wellness underserved dairy farm personnel while simultaneously protecting the health of Wisconsin’s dairy herds. Purpose: Supporting dairy employees’ health directly through education, immunizations, and screenings by Registered Nurses (RNs) and UW nursing students promotes fewer sick days and higher productivity. Protecting cattle, food safety, and the dairy economy by screening the people who are responsible for animal care is a value-added benefit for maintaining public health. Results: Sixty employees screened for TB and 126 immunizations provided. Implications: This project will expand in 2019 to provide a ‘local’ global/cultural immersion and rural health inter-professional learning experience for nursing and veterinary students and will increase to six dairy farms. The goal for BPHS is to develop an outreach program that engages nurses, veterinarians, public health, and the dairy/agricultural community to improve health outcomes.

Title: Palliative Care Integration in a Solid Abdominal Organ Transplant Intensive Care Unit
Author: Jaclyn Voltz
Abstract: Palliative Care integration into Intensive Care settings has the potential to improve patient satisfaction, facilitate communication between health care teams, promote holistic health care provision, decrease unnecessary health care costs, and improve overall quality of life. Additionally, a microsystem assessment of the Transplant Intensive Care Unit (TICU) at a Southeastern Wisconsin medical center revealed opportunities for improvement in staff retention and moral distress related to palliative care use on the unit. The TICU provides care to high acuity patients with end stage liver disease. A cross-sectional
survey was distributed and completed by 67 staff members (RN, PT/OT/RT, providers, techs, social work, leadership). The survey indicated that majority of respondents believe that palliative care is not well utilized (79.0%) and that it would be a beneficial addition to the care team (95.5%). Additionally, 47.8% of registered nurse respondents report they have considered quitting or leaving their position because of the way patient care is handled on the unit. Survey responses indicate a misunderstanding of palliative care and a need or desire for additional education and resources. Project interventions include: offering palliative care education, providing updated resource binders, and implementation of a unit-based bereavement program. Study limitations include provider misunderstanding and negativity towards palliative care. Despite the perceived incompatibility of Palliative and ICU care goals, palliative care integration into ICU settings has the potential to greatly improve the quality of the patient care experience as well as staff morale and retention.

Session Three
1:30 – 2:30 p.m.

Room 7220

Title: Enhancing Clinical Nursing Education in the Lake Region of Tanzania
Authors: Sarah Ehlinger Affotey, Carol Klingbeil, Jill Krell, Cathy Cero-Jaeger, Kathi Lengyel, Angela Lang
Abstract: The purpose of the Treat and Train Nursing Program developed by the Touch Foundation was to increase the quality of clinical nursing education at the Bugando Medical Center School of Nursing and Catholic University of Health & Allied Science in Mwanza, Tanzania. To improve identified deficiencies the Touch Foundation designed a program for creating a Nursing Center of Excellence and joined the Milwaukee Global Health Consortium (MGHC) as an international partner to carry out the program. MGHC team members included faculty from Concordia University of WI School of Nursing and University of Wisconsin-Milwaukee College of Nursing. The program was designed to consult, develop, and train current nursing tutors and preceptors in the use of Objective Structured Clinical Examinations, clinical learning objectives, and clinical evaluation guidelines and logbooks. Preceptor “Training of trainers” sessions, a structured mentoring and governance framework, and the training of additional preceptors at an external clinical rotation site were also objectives. Major accomplishments noted were improved communication between tutors and preceptors, and the development and dissemination of materials/tools for teaching and evaluation. In addition, the high engagement of selected preceptors assisted in developing a promising external clinical rotation site at Shinyanga Regional Referral Hospital.

Title: Educating Zambian Medical Students about Family Medicine
Authors: Bryan Johnston, Fastone Goma, James Sanders
Abstract: Introduction: Zambia faces an increasing burden of chronic disease, and has turned to Family Medicine to bolster its primary care delivery. Efforts have focused on developing a postgraduate training program. It was not clear to what extent Zambian medical students were exposed to or aware of Family Medicine and primary care concepts and skills. Problem statement or objective: To investigate University of Zambian medical students’ current exposures to and opinions towards Family Medicine and primary care. To understand the perspectives, resources, barriers and priorities of Zambian medical education leadership and other stakeholders. Methods: (1) Literature review. (2) University of Zambia medical school curriculum review. (3) Semi-structured interviews of key informants. (5) 10-question survey development and administration to 70 Zambian medical students in their final year of training. Main Results: Medical students were not significantly exposed to Family Medicine or primary care concepts, theoretical background, or related clinical experiences. Family Medicine education was supported by all stakeholders. Conclusions: The current lack of student exposure to Family Medicine is at odds with Zambia’s commitment to Family Medicine. Providing rich Family Medicine educational experiences
would be expected to improve comprehension of the primary care role and inspire students to become Family Physicians.

Room 7330

Title: 2015 Nepal Earthquake, Disaster and Recovery
Authors: Kay Fellows and Debbie Urbanek
Abstract: As nurse for almost 40 years, it was always my dream to serve on a medical mission in a developing country. I was drawn to Nepal’s rich culture and breathtaking landscapes, and in April of 2015, with 60+ lbs. of medical supplies, I went. Shortly after arrival, Nepal was hit with a major earthquake killing thousands. I witnessed first-hand an international relief effort. The people of Nepal were in desperate need of basic medical supplies before the earthquake, but afterwards the need greatly intensified. Many people asked for bottled water, however, what the country urgently needed were body bags. In response, the NGO of Remote Health Services was created. RHS focuses on going into remote areas of Nepal with groups of doctors, nurses and volunteers to provide health screenings. By 2018, through dedication, advocacy and with help from local non-profits and collaboration between many organizations, several containers containing medical supplies have shipped to Nepal. These supplies included hospital beds, P.E.T. carts, wheel chairs, and surgical equipment. I’ve learned much more during my initial trip to Nepal than I could have anticipated. I learned we are all one people, and that one person can make a difference.

Title: Rifts and Resilience: Partnerships for Trauma Healing and Peacebuilding linking Milwaukee and East Africa
Authors: Sebastian Ssempijja and Timothy Ehlinger
Abstract: Sebastian Family Psychology Practice (SFPP) provides local services focused on improving the accessibility and quality of mental health care in Milwaukee. Since 2012, SFPP has worked closely with the Ugandan Behavioral Health Alliance (UBHA) and partners in Uganda to provide training and professional development opportunities for mental health practitioners working across East Africa. In 2016 the UW-Milwaukee Master of Sustainability (MSP) began working with SSFP and UBHA to incorporate principles of peacebuilding, community resilience, and social justice into the programs and conferences, with the intent of cultivating a supportive network of institutions and organizations in East Africa addressing the complex challenges of global health, sustainable development and peace. This presentation will examine some of the challenges and opportunities leveraged in the actualization of aspects of global health while building international collaborations and partnerships. SFPP has a long history of teaching the next generation of behavioral health within the behavioral health workforce now counting 50 individuals plus over the last 28 years. In collaboration with UWM MSP, we are able to engage mental health and trauma healing within the broader context of sustainable peacebuilding practice to make meaningful connections with the Sustainable Development Goals (SDGs)

Room 7350

Title: Ecuador - Quichua and the Environment
Author: Maren Hawkins
Abstract: Ecuador is a country in South America, the size of Oregon, that straddles the equator; and over the past decade, the country of Ecuador has gone through transformations in many aspects of society, from health care and immigration to infrastructural development. The country's rapid change has affected relations with one of it's largest indigenous groups, the Quichua people. Quichua have a distinct language, cultural practices, and beliefs specifically regarding the environment that are often at odds with 'Western' ideas of health and development. The navigation of these changes aligns with the U.N.'s SDG of life on land; peace, justice, and strong institutions; and good health and wellbeing. Thus, this presentation will
address M. Hawkins's research and observations over the course of her studies in Ecuador from June-August 2019.

Title: Informing Policy Decisions around Safe Water Access: A Study of the Biosand Filter in Rural Colombia
Author: Cameron Perra
Abstract: Access to safe drinking water is an important issue in many parts of the world, and many different approaches are used to help communities gain and maintain safe water access. In rural areas of Colombia, bio-sand filter technology has become one of the preeminent techniques for point-of-use water purification. Installation and training around the biosand filter technology has been a strictly private sector endeavor, but has a new potential to be included in public funding. This study focused on developing an understanding of the social and cultural elements that are embedded within household decisions around filter use. Through in-person interviews with filter users about the acceptability of the filter, we gained insight into those decision-making factors and how they conceptualize the filter’s role in the household. Reasons for rejection of the filter include a lack of trust of the new technology and the disruption of traditional ways of purifying water. Our study represents a significant opportunity to inform current policy on a national level in a way that will have an important impact on Colombia’s efforts to work towards the sixth Sustainable Development Goal, to “Ensure availability and sustainable management of water and sanitation for all”. The Biosand Filter has been implemented in at least 55 countries around the world; studies like ours can contribute to the normalization of its use and the expanded embrace by governments and NGOs alike.

Room 7370

Title: How We Use Our Four Value Pillars at Caring Christians Four Kids to Complete Two of the UN Sustainable Goals of Good Health and Quality Education
Author: Kenneth Kernen
Abstract: Currently, it is estimated that over 300 million children are in extreme poverty worldwide, of which 21 million are living in the United States. Caring Christians Four Kids seeks to help those less fortunate through our four core value guides of faith, resources, health and education. We use these values as directives when we undertake projects designed to help children where ever needs arise. On the southern coast of Africa, we supported a local missionary by building a second grade classroom and later an entire school for kindergarteners. Domestically, we help support children who have heart conditions through the Herma Heart Institute of Children’s Hospital in Milwaukee, Wi. Our organization offers the Elmer and Grace Schroeder Scholarship which represents our commitment to faith and education in the lives of children who seek to gain a higher level of understanding in both their spiritual and social lives. We provide opportunities for children to grow, experience hope along with blazing a path toward success. If we look away, how many of these children will be doomed to the continuation of a cycle of life that resides in despair?

Title: ¡Salud!: Using Ignatian Pedagogy to Develop Global Health Leaders
Authors: Theresa Schnable and Christine Schindler
Abstract: Nurses represent the largest sector of healthcare providers worldwide and must be intimately involved in developing strategies to meet the United Nations (UN) Sustainable Development Goals. Marquette University College of Nursing faculty are committed to developing global minded nurses for the future. Faculty are intentionally creating courses and global learning opportunities to develop a nursing workforce that is competent in addressing the UN goals from local neighborhoods to nations around the globe. Through this community health clinical course, nursing students: 1. Analyze key obstacles to achieving health; 2. Work with local communities to identify community assets on which to build; 3. Begin to locate themselves as part of the solution through critical reflection on experiences. With a shared vision of solidarity with the community, we partnered with faculty at Antonio Ruiz de
Montoya, our fellow Jesuit university in Lima, Peru, to develop a community health clinical experience. Nursing students complete community clinical rotations, participate in ongoing community social projects, and through reflective practice and Ignatian pedagogy begin to connect their experiences with their role of becoming nurse leaders.

Session Four
3:45 – 4:45 p.m.

Room 7220

Title: Zero Hunger in Italy and Ethiopia
Author: Alexandra Knudtson
Abstract: For my research, I chose to look at the United Nation Sustainable Development Goal 2 Zero Hunger. In this research, I looked at two different countries, Italy and Ethiopia. The idea of a developed and developing country was important in the research as one can see the similar and different struggles each country endures. The research that focused on these countries can be seen in the targets and indicators of goal 2. In my research endeavors, I was able to find that governments have provided extensive resources to their people and to other nations around to achieve the goals of the United Nations and are keeping detailed accounts of what and how they are achieving these goals. Through my research, I have also come to my own conclusions and suggestions on the issue and feel they are important to know and understand for future endeavors to achieve the Sustainable Development Goals.

Title: Sustainable Development Goals (SDGs) And Self-Help Groups In Rural Kenya
Author: Jennifer Kibicho
Abstract: Many countries in Sub-Saharan Africa are signatories of the Sustainable Development Goals (SDGs) agenda of 17 broad goals target by 2030. In Kenya, Economic Self-Help groups are important community mobilization vehicles that meet financial, economic and socio-psychological needs. We recruited 80 people from existing rural-based Kenyan self-help groups engaged in micro-savings and micro-lending to participate in 12 focus groups. Using qualitative MAXQDA software, we examined the extent to which self-help groups address each SDG, and the challenges they faced. Most participants reported funds from self-help groups assisted them in alleviating food insecurity and meeting nutrition needs of their families, mitigating financial hardships (e.g., medical bills), upgrading sanitation facilities and building water tanks, paying schools fees, and starting income generation projects. However, participants faced elevated risk of loan defaul t associated with high interest rate loans, economic vulnerability when household assets were auctioned, and intimate partner violence when loans were secured without spouse approval. Group sustainability was challenged by poor leadership and financial mismanagement. Our findings suggest self-help groups can be useful mechanism for low-resourced communities to address many SDGs. Leadership development and financial management training can help optimize the effectiveness of self-help groups in low-resourced countries achieve SDGs goals.

Room 7330

Title: Effective Strategies for Teaching about the SDGs
Author: Anne Dressel
Abstract: This presentation will discuss several strategies that were successfully and effectively implemented in an upper-level college course to teach about the U.N. Sustainable Development Goals (SDGs). Methods included small group presentations about the SDGs, individual presentations about progress toward specific SDGs in specific countries, and weekly student-led small book group discussions. The book group discussions were based on “Behind the Beautiful Forevers: Life, Death, and Hope in a Mumbai Undercity,” by Katherine Boo. While the Boo book is non-fiction, it is not a standard
Title: Educating for Youth Action on the SDGs
Authors: Jennie Ekstein, Jennie, Tiffany Thornton, Dina Wolf
Abstract: Discover how Milwaukee youth are raising awareness and inspiring action on the UN Sustainable Development Goals! The SDGs offer K-12 educators a meaningful and empowering framework for engaging students in global learning. Young people around the world have also embraced the Goals to develop global-to-local actions on issues that affect their communities. This session will highlight numerous initiatives currently underway in Milwaukee to introduce young people to the Sustainable Development Goals and engage them as partners in achieving them locally and/or globally. Featured classroom initiatives include the UN Schools of International Learning (UNSIL), a unique Milwaukee Public Schools program that is integrating education and action on the SDGs into classrooms at over a dozen K-8 schools in the district. Session participants will also be introduced to co-curricular examples, including a partnership between the UWM Libraries and the UWM Institute of World Affairs to offer high school workshops that build students’ skills in media literacy and civic engagement through the lens of the SDGs.

Room 7350

Title: Do the Effects of Active Living Zoning Policies and Fitness Facility Access on Youth BMI depend on Area SES?
Authors: Slater, Sandy, Oksana Pugach, Coady Wing, Jamie Chiquis, Christina Laternser, Elizabeth Tarlov, Shannon N. Zenk
Abstract: Background: Low-income youth experience record levels of obesity and preventable diseases like hypertension and type 2 diabetes, but active-living zoning policies and availability of places to exercise may help youth be physically active and prevent these diseases and live longer. We examined whether the effects of these policies and fitness facility availability on body mass index (BMI) in youth depended on area socioeconomic status (SES). Methods: Using a retrospective cohort design, we used five years of electronic health record data (2012-2016) from a large U.S. healthcare organization. These data were linked to nationwide, county-level datasets of active living-oriented zoning policies (i.e., provisions that facilitate walking and biking) and fitness facility density. We classified counties based on the strength of the encompassed active-living zoning. Linear regressions with person and year fixed effects, policy-environment-SES interactions, and controls were estimated. Results: The sample comprised 1.375 million youths aged 5-19 nested within 286 counties. Preliminary results revealed greater fitness facility availability was associated with reduced BMI in counties with the weakest and strongest active living-oriented zoning. However, lower area SES reduced these relationships. Conclusions: These results suggest that socioeconomic disadvantage dampens salubrious effects of active living-oriented zoning and fitness facility access in youth.

Title: Promoting Clean Energy, Health, and Well-being: A Narrow-track Tilting Tricycle to Encourage more Cycling
Authors: Timothy Wegehaupt, Anthony Pierson, Phillip Van Asten
Abstract: Cycling promotes sustainable cities and communities through clean energy while fostering good health and well-being. Many people, however, are unable to ride traditional upright bicycles, because of balance or joint limitations caused by injury, disease, or age. Recumbent bicycles, with their reclined and supportive seating, address many of the ergonomic difficulties associated with cycling, but many riders find them difficult, if not impossible, to balance. Rigid recumbent tricycles are easier to
balance, but must either be slow, wide, or low to avoid rolling over in a turn. Existing tilting tricycles are either free tilting, and so have the same handling issues as bicycles, or are controlled by complicated and costly tilting actuation. A narrow-track, tilting tricycle with rider-controlled variable stability, combines the best attributes of these vehicles while eliminating the drawbacks. It is laterally stable like a rigid tricycle when the rider needs, when stopped or going slow, and balances like a bicycle when the rider wants, so it can lean into turns when going fast. We present a working prototype with ergonomic recumbent seating from which the rider can vary stability from that of a rigid tricycle to that of a free tilting of bicycle.
Poster Presentations

Session One
10:45 – 11:15 a.m.

Title: Teach a Man to Fish..... but Teach a Man to Teach
Authors: Christine Feierstein and Erin Thompson
Abstract: At the invitation of local healthcare providers (HCPs) in Belize, six healthcare professionals arrived in 2005 for the purpose of certifying local Belizean HCPs in Basic Life Support, Advanced Cardiac Life Support, and Pediatric Advanced Life Support. In the course of a week, more than 100 HCPs from across the country were certified. A question asked repeatedly was: “when are you coming back?” Little did we know this would become a long-term partnership and educational exchange. Achieving sustainability in good health requires the local HCPs to have the training and tools they need to provide quality care. Developing cooperative relationships with the Belizean HCPs and use of the “train the trainer” model has empowered the locals to continue the education independently. More than two dozen HCPs from Belize have come to Wisconsin for training as a part of this exchange. Teams of HCPs from across the United States return to Belize several times a year. Team members have assisted local organizations in becoming the 32nd International Training Organization for the American Heart Association. There has also been training in several other educational programs which continues regularly. Data related to numbers of Belizean HCPs that have been trained will be provided.

Title: Facilitating Cultural Humility and Attunement through an Interprofessional Kenya Study Abroad Program
Authors: Peninnah Kako and Carol G. Klingbeil
Abstract: Aim: This qualitative descriptive study aimed to evaluate the role of a short term interprofessional study abroad program in Kenya on beginning awareness of cultural humility.
Background: Students in the health care professions, including nursing, must learn to effectively work with diverse patient populations and provide culturally safe care. Method: Course assignments of 21 students were thematically analyzed to discover how students applied concepts of cultural attunement to learn cultural humility while interacting with people in rural and urban Kenya. Results: Students narrations acknowledged all aspects of cultural attunement: the pain of oppression, acted with reverence, reported coming from a place of “not knowing, engaged in acts of humility, engaged in mutuality, and reported attaining harmony, cooperation, and accord” during the experience. Conclusion: Findings suggest a short-term community focused study abroad experience can be a valuable tool for beginning stages of becoming culturally humble and providing culturally safe health care.

Title: Factors Related to Cervical Cancer Screening among Refugee Women in the United States
Authors: Heidi Luft, Mireille Perzan, Rita Mitchell, Austin Schmidt and Danielle Greer
Abstract: Background: In 2017, 25.4 million refugees were displaced worldwide. In the US, refugee women experience greater cervical cancer mortality compared to US-born women, primarily due to lower rates of screening and later diagnosis. In this study, we reviewed and synthesized factors related to cervical cancer screening (CCS) among refugee women in the US. Methods: A systematic literature search was conducted to identify studies published within the last 10 years that looked at CCS as the primary outcome among populations of adult refugee women. The Social Ecological Model (SEM) guided data extraction, synthesis, and interpretation. Deductive methods were used to analyze/synthesize barriers and facilitators of CCS. Results: Six studies were eligible. Among included studies the primary focus was on individual-level factors (i.e. related skills, knowledge, beliefs/attitudes). Salient interpersonal, community, organization, and policy factors included aspects related to interactions with health providers (i.e. provider gender, quality and frequency of contact, recommendation for CCS) and access to CCS (i.e. language, cost, location). Conclusion: According to our findings, greater cultural humility/competence within healthcare providers and organizations may reduce many barriers to CCS
disparity of cervical cancer mortality among refugee women. Particularly, matching women with female providers/interpreters may facilitate greater trust, comfort, CCS uptake.

Title: Peace, Justice and Strong Institutions: El Salvador
Author: Violeta Ramirez.
Abstract: The Republic of El Salvador will be analyzed under Sustainable Development Goal 16 regarding the nation’s violent history, prison statistics, and homicide statistics. Three targets under SDG 16 will be presented as well as what is being done to reduce the violence that is causing Salvadorans to flee. I wrote my final paper for my capstone course on this topic that I was very intrigued by. The more I dived into the topic it made me realize how all the Sustainable Development Goals are interconnected with the cause of the increased violence in El Salvador. I plan to create a poster on the research I did based off of my final paper.

Title: MARQUECare: Information Technology Tools and a System for Palliative Care for Everyone
Abstract: Care and support for terminally ill patients require distinctive perspective; the goal is not just trying to recover, but to focus on improving the overall quality of life. Palliative care focuses on achieving that. Despite acknowledging the importance of palliative care worldwide, we still cannot provide consistent care both in all patient population along geographical boundaries, because of reasons like absence of practical locally accessible information on effective interventions, the absence of efficient systems that facilitates physicians’ engagement, etc. To overcome these shortcomings, in this collaborative research work between Marquette University, USA and Nepalese Association of Palliative Care, Nepal, we aim to build an electronically mediated palliative care system, that facilitates close communication between physicians, nurses, family members, patients, and drug-stores. Our developed software system, MaPCESS is built to remove barriers and resolve these common problems. Focusing on the fundamental strength of palliative care, active listening, and supportive talking, we have built an ecosystem of mobile applications for ill patients and family members seeking constant support and web application for doctors to help them stay connected with the patients. Currently, our software system is in the final stages of testing and ready to be deployed within the next month. Our collaborative research work not only promotes good health and well being but also builds a global partnership in helping people in our society.

Title: Common Goals and Progress: Great Lakes Native American Research Center for Health (GLNARCH) and Global Health
Authors: Matt Dellinger, Gabrielle O’Keefe, Amy Poupart, Nicia Lemoine, Laura Cassidy
Abstract: The Great Lakes Native American Research Center for Health (GLNARCH) is a NIH-funded center supporting participation of Bemidji Region Native American Tribes in biomedical science, and whose goals align with several United Nations Sustainable Development Goals (SDGs). GLNARCH has four core components: 1) an administrative core overseeing the Center; 2) research projects conducted by various regional academic-tribal partnerships; 3) student career enhancement programming to expose tribal students to academic opportunities, and 4) capacity building to extend research opportunities aligning with priorities of Bemidji tribes. By establishing Tribal-academic partnerships (SDG #17) GLNARCH aims to improve health and well-being of Bemidji-region tribes (SDG #3), improve educational opportunities and engage Native American students in biomedical sciences (SDG #4), and reduce inequities in tribal populations (SDG #10). In the first four cycles of GLNARCH funding 137 students were placed in 156 research undergraduate and/or graduate internships. Evaluation from GLNARCH interns who participated since 2014 reveal broad satisfaction with programming and perceived self-efficacy. These satisfaction metrics reflect congruence with NARCH values of helping the community and cultural sensitivity. Cumulative productivity metrics including various types of written
publications (n=15) and presentations and posters (n=23) are recorded and continue evolving as part of the Center’s administrative responsibilities.

Title: Emergency Department Ultrasound-Guided Peripheral Intravenous Access Policy and Training Implementation
Author: Jessica Gill
Abstract: The urban emergency department (ED) has a sizeable population with difficult intravenous access (DIVA). A policy for Registered Nurses (RN) to place an ultrasound-guided peripheral intravenous (USGPIV) catheter did not exist. Consequently, staff used multiple ‘blind-stick’ attempts, sometimes extended over many hours, while patients sustained additional pain and attendant delays in treatment. Some patients endured a central venous catheter (CVC) placement carrying a heightened risk for complication and infection. The Clinical Nurse Leader (CNL) role allowed articulation of the benefits of an USGPIV program to medical and nursing leadership. Policy acceptance led to the development of an USGPIV training program. Eight ED nurses placed, on average, seven supervised USGPIV catheters during a single day of one-on-one didactic and hands-on training. Nurses were required to place 20 successfully before deemed competent, with subsequent attempts performed independently. The use of USGPIV catheters can have a positive influence on patient safety and satisfaction due to decreased wait time, adequate pain control, and perception of staff technical excellence. Expeditious diagnosis and treatment facilitate prompt disposition while improving benchmark scores related to time-critical quality measures. Finally, this program provided ED nursing staff an opportunity for enhanced professional satisfaction while expanding their professional skills and practice.

Title: A Public Health, Systems Approach to Addressing Homicide as a Health Inequity
Author: Laura Hermanns
Abstract: The disproportionate rate of homicide among black men in Wisconsin is a pressing health inequity that public health practitioners are in a prime position to address. In 2016, Wisconsin was ranked 2nd in the nation for black homicide rates. By applying the Political Economy of Health and Public Health Critical Praxis approaches, practitioners will be able to better understand and address the structural causes of the inequity resulting from the power differentials that exist in a neoliberal and systemically racist society. Understanding these macro-level structural causes of violence is key to addressing them holistically and in a multifaceted way. A public health approach to violence prevention has the potential to stop the immediate threats of violence while also building a community’s capacity for collective action, organizing for redistributive social policies, addressing historical and intergenerational trauma in communities of color, and centering traditionally marginalized voices. This poster will draw on a critical review of the literature focused on macro-level causal factors of the inequity and introduce the Blueprint for Peace, a prevention-based, community-engaged process from the Milwaukee Office of Violence Prevention which provides a comprehensive and hopeful response to addressing both macro and meso level determinants of violence. This approach is moving Milwaukee toward the targets outlined in Sustainable Development Goal number 11: Peace, Justice, and Strong Institutions.

Title: Collaborative Research to Improve Healthcare Interactions and Outcomes among Diverse Clients
Authors: Carolyn McCarthy, Sarah Ehlinger Affotey, Heidi Luft, Anne Dressel, Rachel Bloom-Pojar
Abstract: Sustainable Development Goal (SDG) 17 emphasizes that partnerships are vital to meeting the other SDGs. However, working across disciplines and sectors can present many challenges. These range from varied vocabulary to significant conceptual differences in how we describe, evaluate, and address a problem. These added complexities of interdisciplinary teamwork require skills such as critical reflection about individual and team process, effective communication, and consideration/appreciation of diversity. Throughout the 2018-2019 academic year, a group of Milwaukee-area academicians, community partners, and clinicians came together around the topic of cultural humility in health care and participated in a series of teambuilding activities, drawing on lessons from teambuilding experts at the National Institute of Health. The group’s main objective was to develop a collaboration agreement outlining their specific
team structure, processes, and research agenda. We provide a case study and insights for improving collaborative team building processes. Partnership across disciplines can enrich process and product. Conflict and misunderstanding are inevitable and can be productive but can also substantially slow or interrupt the teambuilding process if not managed with care. Our research focus on cultural humility provided us with a supportive framework to navigate the teambuilding process.

**Session Two**
**2:45 – 3:15 p.m.**

Title: Addressing Extreme Hunger and Adapting to Climate Change in Uganda: Permagardening, Bio-briquette Making, and Raintanks  
Author: Maren Hawkins  
Abstract: Peace Corps Volunteers, no matter their field, promote the U.N.’s Sustainable Development Goals through grassroots programs aimed at community wellbeing. For both Health Education and Agriculture Peace Corps Volunteers in Uganda, addressing extreme hunger and enhancing climate-change adaptation are central to their work. Uganda is roughly the size of Oregon State, is home to over 40 million people, has been severely impacted by climate change, has one of the youngest populations in the world, and has a high prevalence of HIV/AIDS (UNAIDS, 2019). However, Uganda is also an intricate mosaic of landscape, language, history, and ingenuity, and is ranked among the most entrepreneurial countries in the world. Thus, this presentation will cover the collaborative projects undertaken by M. Hawkins during their Peace Corps service as a Health Education Volunteer in Uganda to promote the U.N. Sustainable Development Goals.

Title: Substance Use and HIV Risk in Uganda  
Authors: Ethan Homedi, Ronald Anguzu, Nazarius Mbona Tumwesigy, Daniel Katende, Julia Dickson-Gomez  
Abstract: Substance use has been underreported in Sub-Saharan Africa, yet evidence indicates it is an emerging problem. Our study aimed to conduct formative research to assess drug use in individuals living in Kampala, Uganda and the associated contextual factors that may contribute to sexual and injection risk behavior and HIV infection. We recruited thirty active injecting or non-injecting drug users to participate in hour-long qualitative interviews. Interviews asked open-ended questions related to their current drug use habits, drug use histories, locations where drug are used and their characteristics, and their HIV knowledge and risk behaviors. The majority of participants injected heroin and cocaine and primarily used drugs in group settings in slum communities. Most injecting drug users noted reusing syringes and sharing injection equipment between users. Participants obtained syringes from pharmacies or drug sellers, with a few reporting receiving clean syringes from someone trained to distribute clean syringes to drug users in the community. Most participants have taken an HIV test, with 16% reporting a positive diagnosis, and most reporting knowing someone who has overdosed. All participants noted a lack of syringe access and treatment options. While general knowledge regarding how to avoid HIV transmission through syringe sharing is widely known, there is poor access to and uptake of resources to combat HIV infections in drug users. In addition, naloxone to reverse opioid overdoses and medication assisted therapy (MAT) are not readily available in Uganda. Interventions to increase access to syringes, MAT, and naloxone among drug users is urgently needed.

Title: Territorial Integration of Landlocked Countries in East Africa- Burundi and Uganda  
Author: Alexander Fairburn  
Abstract: In a rapidly urbanizing and developing world, landlocked countries find themselves struggling to keep pace. Without direct ocean access, these nations must rely on friendly neighbors in order to facilitate trade and transport. Therefore, strong and resilient infrastructure is required for landlocked
countries to develop successfully and sustainably. One of the United Nations Sustainable Development Goals is to build resilient infrastructure, promote inclusive and sustainable industrialization, and foster innovation. For landlocked countries especially, the achievement of this goal is necessary as strong infrastructure is vital to economic development. Burundi and Uganda are two landlocked nations in the Great Lakes region of East Africa. Recent developments in the region include the creation of regional transport and transit facilitation agencies connecting these and other landlocked nations to ports on the Indian Ocean. Along with facilitating multimodal trade networks among the East African states, ideas about green and sustainable freight strategies are also in the works. In an analysis of progress towards the sustainable development goals, it is necessary to recognize the key steps that have been made thus far in each of these countries as well as in the frame of the Northern and Central Corridor regional agreements.

Title: Studying Poor Nutrition in Rural and Urban Zambia
Authors: Kayla DuMez and Abigail Ruchti
Abstract: Background. Poor nutrition is a major concern in world health and the focus of Sustainable Development Goal 2 to end hunger, achieve food security, improve nutrition, and promote sustainable agriculture. A 2013-2014 study found that 40% of Zambian children under five were stunted, 60% were anemic, and 47% of women ages 15-49 were anemic (USAID, 2018). Methods. Through literature review and observation, the authors compiled data on the causes of poor nutrition in Zambia. They spent two weeks interacting with clinic patients, observing traditional meals, and examining food resources in urban and rural settings. They also observed the effects of over and undernutrition in all age groups. Results. Factors contributing to undernutrition include diets lacking micronutrients, prevalence of nutrition-altering diseases, and lack of basic nutritional knowledge. Factors contributing to overnutrition include high-sodium and high-carbohydrate diets, lack of nutritional knowledge, and rising popularity of nutrient-poor fast food in urban areas. Recommendations. The public health nurse in Zambia plays a key role in addressing the problem of poor nutrition. Education is a primary intervention that could improve nutrition in Zambians. Other interventions include increasing access to vitamin-rich foods and clean water, encouraging rapid treatment of nutrition-altering diseases, and focusing on at-risk populations.

Title: Postpartum Preeclampsia: Improving the Outcomes of Women
Authors: Aisha Kendrick, Monica Gonzalez, Julia Snethen
Abstract: Maternal morbidity and mortality rates are often used as a gauge to evaluate the health of a population (IDPH, 2018). According to the American Heart Association (2018), the risk of long-term cardiovascular disease is about two times higher among women diagnosed with preeclampsia in pregnancy than normotensive women. Improvement is needed for the early identification and treatment of hypertension disorders within the perinatal patient population. The American College of Obstetrics and Gynecologist (ACOG) recommends that patients diagnosed with perinatal hypertensive disorders follow up with their care provider within 7-10 days post discharge. The aims of the project focus on exploring strategies for increasing provider knowledge and public awareness of the importance of postpartum health and follow-up. Strategies for increasing patient and staff knowledge and awareness of postpartum health were created. An educational video was envisioned as an effective strategy to help inform patients and nursing staff about the importance of early identification and treatment of hypertension disorders. A script for the video was developed with a focus on postpartum preeclampsia and the potential effects on long-term cardiovascular health. Development of a video could also help the postpartum nurse’s practice, by enhancing their understanding of postpartum preeclampsia and standardizing patient educating.

Title: SDG #3: Enhanced LACE Screening Tool Assesses Vulnerable Patients at Risk for Readmission
Authors: Cheryl Lee, Christine Vandenhouten, Mary Baker, Margaret Pfitzinger, Katherine McEwen
Abstract: Background & Significance: Congestive Heart Failure (CHF) increasingly affects people of all ages. Hospital readmissions are increasing. Purpose of the project: This project assesses the impact of an enhanced LACE tool to identify high risk CHF patients. An enhanced LACE tool identifies social determinants of health, such as medication noncompliance, health literacy, financial limitations, lack of
social support, and lack of transportation to scheduled medical appointments. Research suggests the enhanced LACE tool better identifies risks of readmission by including social determinants.

Setting/Population Description: A retrospective chart review was conducted on randomly selected CHF patients who had home health and an inpatient stay at Waukesha Memorial Hospital or Oconomowoc Memorial Hospital for the fiscal year 10/1/17-9/30/18. Method/Design & Procedure: The project received IRB approval at ProHealth and UWGB. CHF patient data were obtained, deidentified, and analysis of the enhanced LACE score compared to traditional LACE was completed using correlation and regression models. Results/Outcomes: Data collection is complete, and analysis is underway. Outcomes will be available prior to the conference date as required. Conclusions/Implications: The enhanced LACE screening tool has the potential to identify patients at risk for readmission more effectively than the traditional LACE tool. Identifying vulnerable patients early in the disease process will promote overall well-being. The enhanced tool has the potential to be implemented for all patients who are impacted by chronic disease regardless of the diagnoses code or where they live.

Title: Urban American Indian Clinic Smoking Cessation Program
Author: Michael Potnek
Abstract: Background: Cigarette-smoking disparities continue to exist among minority groups of adults, particularly American Indians, who had the highest prevalence of cigarette smoking at 24% in 2017. Objective: Implement a nurse practitioner-led smoking cessation pilot program at an urban American Indian health center. Methods: The cessation program is based on the Treating Tobacco Use and Dependence clinical practice guideline with incorporation of motivational interviewing, and is guided by the Transtheoretical Model of Health Behavior Changes. The program consisted of ten sessions: one in-person visit and nine telephone sessions over the course of eight weeks. Evaluation of project objectives was achieved through the collection of qualitative and quantitative data via weekly phone counseling sessions and a final post-program survey. Results: Among program participants (n=5), three achieved complete cessation, one decreased their smoking behavior, and one experienced no change in smoking behavior. Conclusions: Although the program is effective among participants who completed the program, attrition was a significant issue requiring potential future changes to the program design. Nursing Implications: Nurses are well positioned to assess for tobacco abuse and provide education as well as cessation treatment and counseling.

Title: What Information do Nationwide Surveys Provide Us with About the Social Ecology of Sexual Risk Among Latinx Teens?
Author: Luz Areli Contreras
Abstract: Background: Poor sexual health outcomes disproportionately affect Latinx teens compared to their white peers. While this diverse group also experiences unique multi-level risk factors, it is unclear what nationally representative data is available to develop a multi-level sexual risk profile of generation Z Latinx teens. Objectives of this study were to: (1) identify national surveys with data on Latinx sexual health data, and (2) extract/synthesize sexual health and social-ecological variables. Methods: We conducted a web search for national surveys. Inclusion criteria were: data collected after 2010, 15-18-year-old Latinx sample, and sexual health variables. The Modified Social Ecological Model (MSEM) guided extraction and deductive synthesis of variables. Results: Nine surveys met inclusion criteria. The “National Survey on Teen Relationships and Intimate Violence” had the most compressive representation of all domain levels within the MSEM. Among all surveys, included variables primarily represented individual- and interpersonal-level risk factors. Discussion/conclusions: Future research should aim to create a preliminary multi-level risk profile of generation Z Latinx teens through analysis of existing national data. Future surveys that examine sexual health outcomes among Latinx teens should include additional community and public policy-level variables.